

## **Guidance for Center Families Related to the Novel Coronavirus (COVID-19)**

This guidance document outlines the processes and procedures that BCDC will follow to help prevent the spread of COVID-19 in the Center and in our community, and to help keep all children, staff, and their families as safe as possible.

These processes and procedures are based on [guidance](#) issued by the Office of the State Superintendent of Education (OSSE), updated as of December 21, 2020. OSSE's guidance offers recommendations from the Centers for Disease Control and Prevention (CDC) and DC Health for child care providers that are currently operating.

We will update this guidance as additional recommendations from OSSE, CDC, or DC Health become available.

For more information on the District of Columbia Government's response to COVID-19, please visit [www.coronavirus.dc.gov](http://www.coronavirus.dc.gov). CDC guidance for child care providers may be accessed [here](#).

**UPDATED: December 28, 2020 (Version 3)**

### **Table of Changes**

<b>Version Number</b>	<b>Date</b>	<b>Description</b>
1	June 16, 2020	Original Document
2	September 8, 2020	<u>Revised</u> <ul style="list-style-type: none"> <li>● General Overview and Operating Hours (Section I)</li> <li>● Daily Routine (Section II):               <ul style="list-style-type: none"> <li>○ Daily Health Screening</li> <li>○ Outdoor Activities</li> </ul> </li> <li>● Personal Safety &amp; Hygiene Practices (Section III)               <ul style="list-style-type: none"> <li>○ Face Coverings and Personal Protective Equipment (PPE)</li> </ul> </li> <li>● Criteria for Exclusion, Dismissal &amp; Return to Care (Section V)               <ul style="list-style-type: none"> <li>○ Exclusion Criteria - Travel to High Risk</li> </ul> </li> </ul>

		<ul style="list-style-type: none"> <li>States/Countries <ul style="list-style-type: none"> <li>○ Returning to BCDC</li> </ul> </li> <li>● Potential Disclosure, Exposure, Closure, and Reporting Requirements (Section VI) <ul style="list-style-type: none"> <li>○ Exposure</li> </ul> </li> <li>● Classroom Contact Information (Section VII)</li> </ul> <p><u>Clarified:</u></p> <ul style="list-style-type: none"> <li>● Face coverings for children (Sections II.B and III.C)</li> </ul>
3	December 28, 2020	<p><u>Revised</u> (Shown in Red Text)</p> <ul style="list-style-type: none"> <li>● Daily Routine (II) <ul style="list-style-type: none"> <li>○ Drop Off Procedures - use of Tadpoles health screening</li> <li>○ Classroom Activities - increase from 10 to 12 individuals allowed in a room, no floating teachers</li> <li>○ End of Day Pick up Procedures</li> </ul> </li> <li>● Personal Safety &amp; Hygiene Practices (Section III) <ul style="list-style-type: none"> <li>○ Addition of ‘Out of School Activities’</li> </ul> </li> <li>● Criteria for Exclusion, Dismissal &amp; Return to Care (Section V) <ul style="list-style-type: none"> <li>○ Exclusion Criteria - Essential and Non-essential Travel to High Risk States/Countries</li> </ul> </li> <li>● Potential Disclosure, Exposure, Closure, and Reporting Requirements (Section VI) <ul style="list-style-type: none"> <li>○ Exposure</li> <li>○ Addition of “Other Closures”</li> </ul> </li> <li>● Classroom Contact Information (Section VII)</li> </ul>

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## **I. General Overview and Operating Hours**

BCDC remains committed to providing high-quality child care while navigating this unprecedented situation. We are doing everything we can to keep children, staff, and families as safe as possible. We cannot, however, guarantee anyone's safety with regards to COVID-19. BCDC is prepared to open and operate during the pandemic, but the safest child care right now remains home care away from social interaction and the risk, however small, of exposure. When you enroll in the Center, you must be comfortable with the possibility of your child being in close proximity to the staff and children in their classroom.

**By sending your child to the Center during the COVID-19 pandemic, you agree to take seriously the health and safety of every member of the BCDC community (every BCDC child, staff member, and family/household member) and the impact your actions have on the community.** When not at the Center, please practice social distancing whenever possible and wear a mask or face covering when social distancing is not possible. Carefully review [Personal Safety and Hygiene Practices](#).

Operating hours have been reduced to accommodate our safety procedures and protocols. **Core hours for the Center are 8:00 am to 5:00 pm, Monday through Friday, with drop-off from 8:00 am to 9:00 am and pick-up from 4:00 pm to 5:00 pm. All children must be picked up by 5:00 pm, so that teachers and staff can complete additional cleaning, disinfecting, and sanitizing at the end of every day.** Carefully review [Drop-Off Procedures](#) and [Pick-Up Procedures](#).

We will strive for consistent staffing so children and staff are in contact with the same group every day to the greatest extent possible. Though strict social distancing within a child's designated class, particularly the younger age groups, will be difficult, BCDC will follow OSSE's guidance for social distancing. Teachers will continue to attend to childrens' care and comfort in their regular fashion, while wearing appropriate personal protective equipment (PPE) and face coverings.

Please note that certain people are at higher risk for severe illness due to COVID-19.<sup>1</sup> **Per OSSE guidance, children and staff at high-risk for contracting or experiencing severe illness due to COVID-19 should consult with their health care provider before participating in child care activities. This includes people with chronic kidney disease, cancer, chronic obstructive pulmonary disease (COPD), serious heart conditions, immunocompromised conditions, obesity (>30 BMI), Type 2 diabetes mellitus, and sickle cell disease.** Any parent or staff member who has a medical condition not on this list who is concerned about their or their child's safety is encouraged to connect with their health care provider.

**We implore families and staff to exercise extreme caution with travel and socializing during holidays, school breaks, or other celebratory moments, as a communal responsibility we must undertake on behalf of one another. The safest way to celebrate is at home with people who live with you. Please see the guidance for Out of School Activities in Section III for more details.** We ask for patience and flexibility as we adapt this guidance **and implement the necessary policies and procedures to keep the BCDC community as safe as possible.** We will continue to communicate throughout this pandemic. We thank every member of the BCDC community for your extraordinary sacrifices, discipline, and persistence through this crisis so far. Your continued commitment and determination to do your part in reducing the risk of COVID-19 will help us to provide quality childcare during this challenging time.

## **II. Daily Routine**

### **A. Recommendations Before Morning Arrival**

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<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>

**To avoid exclusion during your child’s daily health screening, which may result in several days away from the Center, we recommend that you check for fever and other symptoms of COVID-19 before coming to the Center:**

- Within two hours of arriving at the Center, check your child’s temperature and for other potential symptoms of COVID-19, including cough, **runny nose** or nasal congestion, sore throat, shortness of breath, diarrhea, nausea or vomiting, fatigue, headache, muscle pain, **new** loss of taste or smell, or any other symptom of not feeling well.<sup>2</sup>
- If your child has a fever of 100.4°F or higher, or exhibits any of the other potential symptoms of COVID-19, he or she should not come to BCDC that day, and you should contact your health care provider to determine next steps.
- In addition, for the safety of all children and staff, your child **must** stay home if anyone in your household has a fever of 100.4°F or higher or exhibits potential symptoms of COVID-19.
- **Notify the Center of all symptoms your child or any household member experiences, whether or not you think they are related to COVID-19 or another condition. Please notify the Center through Tadpoles or by calling or emailing Kim Mohler, Executive Director.**

See [Criteria for Exclusion, Dismissal, and Return to the Center](#) to determine when a child exhibiting symptoms may return to the Center.

Note: It is also recommended that staff complete their own morning check for fever and other symptoms prior to coming to work.

## **B. Drop-Off Procedures**

- Drop-off will occur between 8:00 am and 9:00 am.
- No parents, guardians, or caregivers are allowed in the Center.
- **BCDC will now require parents to complete the health screening questions in the Tadpoles parent app each morning before you drop off your child. This section is at the bottom of where you enter notes for the child’s teacher. (See [step-by-step instructions here](#)). BCDC will continue to have parents check their child’s temperature in-person at the entrance and display to the staff member conducting check-in Additional health screening questions will be asked at drop-off.**
- Stroller storage closets will be unavailable until further notice. You may leave your stroller outside of the Center’s front entrance during the day if necessary.
- Families must provide the following supplies for each child:
  - Diapers and wipes (if applicable);
  - Five cloth face coverings, labelled and in a ziplock bag (for children age 2 and older);
  - Five clean sheets per week;
  - Three changes of seasonal clothes, including socks;
  - Infants must have food and bottles for the entire day;
  - Infants must have three pacifiers a day (if applicable);
  - Toddlers must have two sippy cups daily - **one for milk and one for water**;
  - All items must be placed in one backpack or bag that is able to close;

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<sup>2</sup> This list is not exhaustive of all possible symptoms. For more information, see <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.

- Be sure to label everything with your child's name (including masks)
- Parents and children will assemble outside **of their classroom's designated entrance** (either the front door entrance or the Van Ness Street entrance), lining up six feet apart on designated markers. The Van Ness Street entrance will use safety barriers to separate the designated waiting **area** from the street.
- Before a child enters the Center, he or she will undergo a daily health screening, detailed below.
- Parents **must** wear a face covering and children over the age of two **must** wear a face covering, if **able to do so safely**, at drop-off and pick-up. See [Face Coverings and Personal Protective Equipment \(PPE\)](#) for further detail.

### Designated Drop-Off Entrances

- If you have more than one child, please follow your younger child's **designated entrance**.
- **When you arrive** please line up behind those waiting at your **designated** entrance.
- If you will arrive after the drop-off window ends at 9:00 am, please come to the Front Door entrance, call Kim Mohler or your child's classroom. One of your child's designated teachers, or a member of the Administrative team will come to the door to conduct the daily health screening and then escort the child to their room.

### Daily Health Screening

- Each day, a staff member will:
  - Greet each family outside its designated entrance while wearing a face covering and appropriate PPE.
  - Conduct a **Daily Health Screening** of your child, from a distance of six feet:
    - i. Upon arrival, the parent should put on a glove and use the provided thermometer to check their child's temperature and the staff member will record it in our daily log. If the parent needs assistance or arrives after the drop off window, the staff member may take the child's temperature while wearing PPE.
    - ii. **ASK: Symptoms Check**. The staff member will ask specifically whether your child or anyone in your household has experienced one or more of the following symptoms that has not previously been evaluated and cleared:
 

Fever of 100.4°F	Nausea or vomiting
Chills	Fatigue
Cough	Headache
Congestion <b>or runny nose*</b>	Muscle or body aches
Sore throat	Difficulty Breathing
Shortness of breath	New loss of taste or smell
Diarrhea	Or any other symptom of not feeling well

**\*NEW: If a child has a runny nose from walking to school or after playing outside, we will monitor to make sure it resolves within 30 minutes.**

- iii. **ASK: Contact Check.** The staff member will ask whether the child or any member of the household has been in close contact with a person who has COVID-19 or a person who is awaiting COVID-19 test results.
  - iv. **LOOK: Visual Inspection.** The staff member will visually inspect your child for signs of illness which could include flushed cheeks, rapid breathing, or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
- **A child will not be admitted to the Center if he or she meets any of these exclusion criteria:**
    - Temperature of 100.4°F or higher; or
    - Answers yes to any of the questions on the **Tadpoles Health Screening**, Symptoms Check or the Contact Check during the Daily Health Screening; or
    - Has signs of illness upon visual inspection during the Daily Health Screening.
  - **In addition, a child will not be admitted to the Center if:**
    - The child or any member of the household has been in close contact with a person who is positive for COVID-19 and the child has yet to be cleared by their health care provider to return to the Center, or has not yet completed their quarantine period without becoming symptomatic or diagnosed with COVID-19; or
    - The child or any member of the household is awaiting COVID-19 test results.
  - **If a child meets any of the exclusion criteria above, families **must leave the Center immediately and** should contact their health care provider to determine next steps.** See [Criteria for Exclusion, Dismissal, and Return to the Center](#) for further detail.
  - Following successful screening:
    - **A teacher assigned to your child’s classroom will escort your child to their classroom.**
    - A classroom teacher will **receive the child at the classroom door and** direct/assist the child in washing their hands.
    - For children who are unable to walk, **a teacher assigned to your child’s classroom** will carry the child to the room, wearing appropriate PPE (face covering, smock).
  - Only teachers will use the classroom iPads for check-in and check-out.

Note: Staff will undergo the same Daily Health Screening, with the same conditions for exclusion.

## C. Classroom Activities

- Classes will have no more than **12 individuals (three staff and nine children)** at any time with the aim of limiting the exposure of children and staff. An assigned staff member will cover standard breaks, absences, lunches, etc., and there may briefly be more than 12 individuals in a classroom if absolutely necessary. **The youngest classrooms (Lambs, Ducklings, Bunnies, Penguins) are limited to eight children by licensing requirements; these classrooms will have no more than 11 individuals (three staff and eighth children).**

- In the event that a classroom requires support from an additional team member, BCDC Admin staff are assigned to support only specific age groups. To reduce contact, Admin staff will avoid going into classrooms unless absolutely necessary.
- BCDC will ensure that the two primary teachers and the additional assigned staff member for that age group providing coverage are consistent. \* Emergency situations exempted.
- BCDC will not use substitute teachers.
- Private therapists working on-site with a child are required to provide a negative COVID test prior to beginning services and follow BCDC staff protocols for PPE and Personal Hygiene.
- BCDC will not combine classes, including at the beginning or end of the day.
- The indoor play structure area has been closed and modified as an extra classroom and may be used to accommodate group size restrictions in the future.
- Whenever possible, staff will make use of small group activities that enable physical distancing between children. However, BCDC acknowledges that strict social distancing within a child's designated class, particularly the younger age groups, will be difficult. You must be comfortable with the possibility of your child being in close proximity to the staff and children in their classroom.
- Enrichment classes will be cancelled until they are conducive to recommended social distancing.
- Staff will continue to promote good hygiene practices with children, such as reminding children not to touch their faces, cover their sneezes and coughs in elbows, and wash their hands. See [Personal Safety and Hygiene](#) for further detail.
- Staff will limit the number and types of toys available at a time and increase daily sanitation practices. See [Cleaning, Disinfecting, and Sanitizing](#) for further detail.

## D. Outdoor Activities

- Twice a day, each class will have a scheduled time for the playground. Community walks or access to the green space in the park can happen at any time that fits into the class schedule. In case of a CODE RED weather alert day, classes and staff will remain indoors.
- The playground is divided with temporary fencing so that two groups can be on the playground at the same time, yet remain separate.
- Small toys and balls have been removed from the playground. Each class has outdoor toys in their classroom that can be brought outside and are cleaned daily.
- BCDC will follow [CDC guidance](#) for cleaning and disinfecting outdoor areas. CDC advises that outdoor areas, like playgrounds in schools and parks, generally require normal routine cleaning, but do not require disinfection. CDC advises against spraying disinfectant on outdoor playgrounds, as it is not an efficient use of supplies and is not proven to reduce risk of COVID-19. CDC also does not recommend cleaning or disinfecting wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand).
- BCDC will clean all playground high-touch surfaces made of plastic or metal, such as grab bars and railings, in between each classroom's use.
- Infant classes will go on community walks, using the buggies with seats facing outward, at least once a day weather permitting. When possible, teachers will bring blankets to facilitate outdoor playtime in the park across the street. Buggies will be cleaned in between uses.

## E. Lunch and Snacks

- BCDC will observe all local and federal food safety guidelines and lunch will be prepared by a food safety-certified staff member.
- Staff will wash hands before and after preparing food and after helping children to eat; staff will wear gloves when serving food to children.
- Meals and snacks will be served individually. There will be no family style dining. Staff will space children as far apart as possible during meals and snacks.
- BCDC will continue to order food from the Good Food Company, but the delivery driver will not come into the Center when delivering or picking up food. Good Food has advised us that it is taking additional precautions to keep drivers and customers as safe as possible.
- Parents of infants must provide all serving containers and utensils for their child and clearly label them with the child's name and assigned color.
- Tables and chairs will be cleaned and sanitized before and after each meal.
- Children will wash their hands before and after eating and will not share utensils, cups, or plates.
- If a family sends supplemental food or snacks for their child, the food must be kept in a lunch bag or container (with a freezer pack as needed) in the child's cubby and must not require heating (i.e., must be served cold or at room temperature).

## F. Naptime

- Cots and cribs will be placed head-to-foot with at least six feet from head to head.
- All bedding and comfort items (sleep blankets, lovies, pacifiers) will be stored in individual bags after each nap and sent home at the end of every day.
- Families will provide five sets of clean bedding every Monday morning.

## G. Pick-Up Procedures

### Midday Pick-Up

- If your child will be picked up for a doctor's or other appointment during the day, please provide advance notice to your child's teacher through Tadpoles, including what time you will be picking up your child and if/when you expect to return. Your child's teacher will prepare them to leave at the time you indicated.
- Upon arrival at the center, go to the Front Entrance and call Kim Mohler or your child's classroom. Then wait outside the front entrance **at a 6 foot distance**.
- Parents must wear a face covering and children over the age of two, if possible, wear a face covering at pick-up. See [Face Coverings and Personal Protective Equipment \(PPE\)](#) for further detail.
- Your child will be accompanied to the front door by an administrator or one of their designated teachers
- When returning your child to BCDC after an appointment, please call Kim Mohler or your child's classroom when you are at the front entrance. An administrator or one of your child's designated teachers/floater will come to the door to escort the child back to their room.

### End-of-Day Pick-Up

- Pick-up will take place from 4:00 pm to 5:00 pm each day.
- Following afternoon nap and snack, all children will be ready to leave by 4:00 pm.
- **Parents should call their child's classroom prior to their arrival so that the teacher can get the child ready.**
- Parents will **wait** outside the front entrance six feet apart on designated markers **or at a safe distance until a marked spot opens up, to allow for social distancing. Please do not congregate in small groups while waiting.**
- An Administrator will identify each parent upon arrival and will communicate with that child's classroom. An **assigned** staff member will escort the child from the classroom to their parent.
- Parents **must** wear a face covering and children over the age of two must, if possible, wear a face covering at pick-up. See [Face Coverings and Personal Protective Equipment \(PPE\)](#) for further detail.
- Please allow for up to a 5-10 minute wait between arriving at the Center for pickup and leaving with your child. **Please leave the front entrance after receiving your child to allow others to move closer to receive their child.**

## III. Personal Safety and Hygiene Practices

Staff and children will follow the personal safety and hygiene practices outlined below while at the Center. BCDC asks all children, staff, and their families to follow these same practices when away from the Center. Reducing risk, both for our BCDC community and beyond, depends on our commitment to continuing these behaviors and safeguards.

**We ask all members of the BCDC community to practice stringent personal sanitation and hygiene practices (e.g., frequent handwashing, covering coughs and sneezes), maintain physical distancing of at least six feet when not at home, wear a cloth face cover when around others, regularly clean and disinfect, stay home when sick, and take enhanced precautions if near those who are particularly vulnerable to COVID-19 risks. In addition, we implore families and staff to exercise extreme caution with travel and socializing during holidays, school breaks, or other celebratory moments, as a communal responsibility we must undertake on behalf of one another. The safest way to celebrate is at home with people who live with you.**

Signage will be placed in every classroom and near every sink reminding staff of hand-washing protocols. CDC has made available for download signs on how to stop the spread of COVID-19, properly wash hands, promote everyday protective measures, and properly wear a face covering.

### A. Handwashing

Staff will wash their hands frequently throughout the day, including:

- Immediately after entering the Center;
- Between uses of common objects: doorknobs, pens, spray bottles, iPads, etc.;
- Before and after putting on, touching or removing cloth face coverings or touching their face;
- Before and after going to the bathroom or changing a diaper;

- Before eating, handling food, or feeding a child;
- After blowing or helping a child blow their nose, coughing, or sneezing;
- Before and after giving medication to a child;
- After handling waste baskets or garbage; and
- After handling a pet or other animal.

Staff will also support children in washing their hands frequently throughout the day, including:

- Immediately after entering their classroom;
- Before and after going to the bathroom or having a diaper changed;
- Before and after eating;
- After blowing their nose, coughing, or sneezing;
- **After returning from outdoors;**
- After handling a pet or other animal; and
- Anytime their hands are visibly dirty.

If soap and water are not available, and if a child or staff member's hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60 percent alcohol should be used until the hands can be washed. Children will only use hand sanitizer under close observation of a staff member or parent.

## **B. Bathroom Use and Diapering**

- Teachers will follow OSSE regulations and procedures for diapering children.
- Whenever possible, only one child will use the bathroom at a time. Teachers will assist with water, soap and paper towels to avoid cross-contamination between children.
- Bathroom and diaper stations will be cleaned and disinfected between each child's use.

## **C. Face Coverings and Personal Protective Equipment (PPE)**

CDC recommends wearing non-medical, cloth face coverings in public settings and in circumstances in which social distancing is difficult, including in child care facilities, when feasible. Further guidance from CDC on using face coverings is available, including instructions on how to make and safely remove a cloth covering.<sup>3</sup>

### **Requirements for Staff**

- All staff and essential visitors must wear a non-medical (cloth) face covering at all times while in the Center **and during the commute to and from the Center if using public transportation or ride-sharing with a member outside of your own household.** Face coverings must cover the nose and mouth, fit snugly, allow for breathing without restriction, and be laundered daily.
- Staff will have multiple face coverings and replace them if they become contaminated. The Center will provide additional masks for staff if necessary.
- Staff may elect to wear a clear barrier shield during certain tasks, which will be cleaned after contamination. The shield does not replace a face covering.
- All staff and essential visitors will wear shoe covers inside the Center.

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<sup>3</sup> <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>

- While washing, feeding or holding infants or very young children, staff must also:
  - Pull long hair off of neck, as in a pony-tail;
  - Wear a large, button-down, long-sleeved shirt as an additional layer of clothing;
  - Remove their clothing and/or the child's clothing if touched by any secretions, place the child's soiled clothing in a plastic bag and their own soiled clothing in their personal locker; and
  - Wash their hands or body if touched by secretions or soiled.

### **Recommendations and Requirements for Children**

- Children age two and older **must** wear a **non-medical** face covering **or face mask while participating in child care activities, with the exception of meals and nap/rest times.**
- **Exceptions are allowable for children younger than 5 years of age considering developmental factors.**
- **Children should be able to:**
  - **Use a mask correctly**
  - **Avoid frequent touching of the mask and their face**
  - **Limit sucking, drooling, or having excess saliva on the mask**
  - **Remove the mask without assistance. Staff may assist children in putting on their masks as long as proper hand hygiene is followed and staff are careful not to touch the child's eyes, nose or mouth.**
- Children age 2 and over wearing face coverings should bring 5 clean coverings each week in a ziplock bag, with each covering and the bag labeled with their name. Face coverings worn on a given day will be stored in a paper bag labeled with the child's name when not in use. All face coverings worn each day will be sent home to be cleaned.
- Children younger than two and anyone who has trouble breathing will not wear a face covering. Face coverings will not be worn during naptime or if they are dirty.
- **Parents and child care staff should discuss individual considerations for children of any age, including medical or developmental conditions that may prevent them from wearing a mask, and consult with the child's health care provider if necessary (e.g., for children with certain conditions such as asthma), to determine if an individual child is able to wear a mask and attend childcare safely.** Children will not be excluded from the Center or any activities because they do not have a face covering.
- While at BCDC, children will participate in developmentally appropriate lessons on why and how we wear face coverings. For these lessons, if a child age two or older does not have a face covering, BCDC will provide a clean one for the day.
- To reinforce these messages at home, BCDC requests that parents model wearing face coverings, talk about why we wear them, and provide one for their child while at BCDC (even if children do not wear them).

### **Requirements for Parents**

- Parents are required to wear a face mask or face covering during drop-off and pick-up.

## D. Social Distancing

Social or physical distancing means keeping space between yourself and other people outside of your home. To practice social and physical distancing, in general<sup>4</sup>:

- Stay at least six feet (about two arm's lengths) from other people;
- Do not gather in groups; and
- Stay out of crowded places and avoid mass gatherings.

**Though this level of social distancing is difficult in a child care center, BCDC will follow social distancing guidelines at the Center, including by:**

- Staggering drop-off and requiring families to wait six feet apart during these times.
- Allowing only children and staff inside the Center (no parents, enrichment teachers, or visitors, except during after hours tours, which are led by Admin staff and limited to 6 visitors at a time). Children are not allowed on the tours. All visitors must wear masks and shoe covers.
- Avoiding all large group activities that require children to sit or stand in close proximity (e.g., circle time).
- Keeping children and teachers with the same group each day.
- Separating classrooms at all times, including on the playground, and not combining classrooms at any point during the day unless absolutely necessary and with parent permission.
- Spacing apart cots/cribs at nap time as much as possible, at least six feet apart from head to head.
- Spacing apart children during lunch and snack times as much as possible.

## E. Out-of-School Activities

In planning out-of-school activities for BCDC students and their siblings, parents/guardians must be mindful of BCDC's reliance on small, stable cohort groups, which are designed to limit the number of individuals with whom any one child comes into contact with, in order to minimize exposure to and slow any potential spread of COVID-19. While BCDC will not be in the position of reviewing and approving parents'/guardians' plans for their children, we offer the following guidelines, adapted from CDC's *Ways to Protect Children from Getting and Spreading COVID-19*:

- Outdoor activities are preferable to indoor activities, but proper protocols (masking, distancing, etc.) should also be maintained outdoors at all times.
- The protocols observed for children and staff for any out-of-cohort activity, organized or more casual, should match BCDC's protocols: consistent symptom-screening, masks required, physical distancing, handwashing/sanitizer.
- BCDC strongly discourages indoor playdates of any kind, especially indoor playdates with students outside of a child's cohort.

## IV. Cleaning, Disinfecting, and Sanitizing

Staff members will regularly clean, disinfect and sanitize surfaces, toys and materials per DC's [guidance](#) for child care providers on cleaning and disinfecting and the [CDC's supplemental guidance](#) for childcare providers. For all cleaning, disinfecting, and sanitizing products, staff will follow the manufacturer's

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<sup>4</sup> <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>

instructions for concentration, application method, contact time, and drying time prior to use by a child. BCDC will place signage in every classroom reminding staff of required cleaning protocols.

- **High-touch surfaces.** BCDC will place additional emphasis on regular cleaning and disinfection of high-touch surfaces, including, but not limited to, door handles, chairs, light switches, toilets, and faucets, both during the day and after hours.
- **Toys.** Staff will clean and sanitize all toys, including those used indoors and outdoors, frequently throughout the day. Toys that have been in children’s mouths or soiled by bodily secretions will be immediately set aside. **These toys must be cleaned and sanitized by a staff member wearing gloves, before being used by another child.** Some toys have been divided for individual use by one child only.
- **Soft toys.** Soft toys (e.g., stuffed animals) will be unavailable. **Soft toy comfort items sent from home (sleep blankets, lovies) may be used for naptime only and will be stored with bedding in individual bags after each nap and sent home at the end of every day.**
- **Cots and cribs.** Staff will clean and sanitize cots and cribs and replace bedding daily.
- **Bedding.** All bedding (sheets, blankets) will be stored in individual bags after each nap and sent home at the end of every day.
- **Playground equipment.** Auxiliary staff will clean all high-touch surfaces made of plastic or metal, such as grab bars and railings, building toys and ride-ons in between each classroom’s use. See [Outdoor Activities](#) for more detail.
- **Meals and snacks.** Staff will clean and sanitize meal and snack areas immediately before and after children eat. See [Lunch and Snacks](#) for more detail.

## **V. Criteria for Exclusion, Dismissal, and Return to the Center**

Exclusion, dismissal and return criteria come from OSSE, the CDC, and DC Health. The Center will monitor these recommendations and update our guidance accordingly.

### **Exclusion Criteria**

1. A child or staff member must stay home, or will not be admitted to the Center if he or she, or any member of their household, meets any of these exclusion criteria:
  - Temperature of 100.4°F or higher; or
  - Answers yes to any of the questions on the Symptoms Check or the Contacts Check during the Daily Health Screening; or
  - Has signs of illness upon visual inspection during the Daily Health Screening.
  - Has not completed the required quarantine period
  - In the event a child is excluded, families should contact their health care provider for next steps.
2. A child or staff member must stay home, and will not be admitted to the Center if:
  - The child or any member of the household or any close contact with a person who is confirmed to have COVID-19.
  - The child, any member of the household or staff member is awaiting COVID-19 test results.

## Travel

1. BCDC requires a 14-day quarantine after any household member undertakes non-essential travel<sup>5</sup> to any of the high-risk states in the Mayor's Order or after traveling internationally.
  - a. Travel to and from Maryland and Virginia is exempt from the Order.
  - b. BCDC will include questions about recent travel to high-risk states into its daily health screenings from time to time.
  - c. BCDC also requires compliance with the Return to Care Criteria created by OSSE for any BCDC staff member or child to return to the Center if that person exhibits symptoms of, or tests positive for, COVID-19, following travel, but such compliance will not in itself negate the need to complete the full 14 day quarantine period following the travel episode. The DC Department of Health (DC Health) recommends testing 3-5 days after traveling as that is when symptoms are likely to appear.
2. BCDC requires a 14-day quarantine after a child or staff member undertakes essential travel to any of the high-risk states in the Mayor's Order or internationally.
3. If a household member undertakes essential travel without the child/staff member to any of the high-risk states in the Mayor's Order or internationally, they must
  - a. Disclose this travel to BCDC; and
  - b. Per the Mayor's order 2020-081, self-monitor for symptoms of COVID-19 for 14 days and, if they show signs or experience symptoms of COVID-19, they are to self-quarantine, seek medical advice or testing, disclose this information to BCDC, and follow exclusion criteria above (withholding child from the Center, if appropriate).
4. BCDC also requires a 14-day quarantine after any household member is in close contact<sup>6</sup> with visitors from any of the high-risk states on the Mayor's list or countries outside of the US.

## Dismissal Criteria

If a child or staff member develops a fever or other signs of illness while at BCDC, the program director will follow OSSE Licensing Guidelines regarding the exclusion and dismissal of children and staff.

- **For children**, an administrative team member will immediately isolate the child from other children in the **isolation** room.<sup>7</sup> The child's parents will be notified of the symptoms and asked to pick up the child as soon as possible or within one hour at the latest. Parents will be instructed to seek health care provider guidance. Teachers will remove any toys the child touched and move his or her classmates to another area of the room, if possible. The parent should call when they arrive and a staff member will bring the child to the front door for dismissal. A staff member will clean and disinfect the isolation room.

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<sup>5</sup> See definitions of essential travel [here](#). Examples of non-essential travel include vacations, school trips, youth sports tournaments, or work conferences.

<sup>6</sup> Close contact means being within six feet of an infected person for at least 15 minutes over a 24-hour period, starting from two days before illness onset (or for asymptomatic infected people, two days prior to positive test collection) until the time the infected person is isolated.

<sup>7</sup> The nursing room is located off the hallway across from Erin's office, where the buggies are stored. The room has room for a cot and chair, changing table and a sink.

- **For staff**, the staff member will go home immediately and seek health care provider guidance. Another staff member will follow cleaning and disinfecting procedures for any area, toys, and equipment with which the staff member was in contact.
- **BCDC will immediately report to DC Health and OSSE and disclose to the entire Center the symptoms experienced by the affected individual and specify which classroom.**

**Returning to BCDC**

The table below identifies the OSSE Return to Care criteria that child care providers must use to allow the return of a child or staff member with: (1) COVID-19 symptoms; (2) positive COVID-19 test results; (3) negative COVID-19 test results or documentation from healthcare provider of alternate diagnosis; (4) close contact with an individual with confirmed COVID-19; or (5) travel to a high-risk state or country as defined by DC Health.

<b>Child or Staff Member With:</b>	<p align="center"><b>Criteria to Return</b></p> <p><i>Note: Criteria below represent standard criteria to return to care. In all cases, individual guidance from DC Health or a healthcare provider would supersede.</i></p>
<p><b>1. COVID-19 Symptoms</b> (e.g., fever, cough, difficulty breathing, loss of taste or smell)</p>	<p>Recommend the individual to seek healthcare guidance to determine if COVID-19 testing is indicated.</p> <p>If individual is tested:</p> <ul style="list-style-type: none"> <li>● If positive, see #2.</li> <li>● If negative, see #3.</li> <li>● Individuals must quarantine while awaiting test results.</li> </ul> <p>If individual does not complete test, must:</p> <ul style="list-style-type: none"> <li>● Submit documentation from a healthcare provider of an alternate diagnosis, and meet standard criteria to return after illness; OR</li> <li>● Meet symptom-based criteria to return: <ul style="list-style-type: none"> <li>● At least 24 hours <b>after</b> the fever has resolved without the use of fever-reducing medication (e.g., Motrin, Tylenol) and respiratory symptoms have improved; AND</li> <li>● At least 10 days from symptoms first appeared, whichever is later</li> </ul> </li> </ul> <p>Note: Children or staff with pre-existing health conditions that present with specific COVID-19 – like symptoms may not be excluded from entering the facility on the basis of those specific symptoms if a healthcare provider has provided written or verbal</p>

	<p>documentation that those specific symptoms are not due to COVID-19.</p> <p>Note: Standard criteria to return after illness refers to the individual facility’s existing policies and protocols for a child or employee to return to care after illness.</p> <p>DC Health recommends that adults should get tested for COVID-19 if anyone in their household has symptoms of COVID-19, even if the individual themselves does not have symptoms. All members of the household should be tested at the same time.</p>
<p><b>2. Positive COVID-19 Test Result</b></p> <p><i>See DC Health’s <u>Guidance for Persons Who Tested Positive for COVID-19</u> for more information.</i></p>	<p>If symptomatic, may return after:</p> <ul style="list-style-type: none"> <li>● At least 24 hours <b>after</b> the fever has resolved without the use of fever-reducing medication (e.g., Motrin, Tylenol) and respiratory symptoms have improved; AND</li> <li>● At least 10 days* after symptoms first appeared, whichever is later</li> </ul> <p><i>*Note: Some individuals, including those with severe illness, may have longer quarantine periods per DC Health or their healthcare provider.</i></p> <p>If asymptomatic, may return after:</p> <ul style="list-style-type: none"> <li>● 10 days from positive test</li> </ul> <p>In either case, close contacts (including all members of the household) must quarantine for 14 days from the last date of close contact with the positive individual.</p>
<p><b>3. Negative COVID-19 Test Result After Symptoms of COVID- 19</b></p>	<p>May return <b>when</b>:</p> <ul style="list-style-type: none"> <li>● meet standard criteria to return after illness</li> <li>● <b>If the individual received a negative antigen test, that result must be confirmed with a negative PCR test. The individual must quarantine until the PCR test result returns</b></li> </ul> <p>Note: Standard criteria to return after illness refers to the individual facility’s existing policies and protocols for a child or employee to return to care after illness.</p> <p><i>*Per Scenario #5, a negative test result after close contact with an individual with confirmed COVID-19 does not shorten the duration of quarantine of at least 10 days.</i></p>

<p><b>4. Documentation from Healthcare Provider of Alternate Diagnosis After Symptoms of COVID- 19 (e.g., chronic health condition, or alternate acute diagnosis such as strep throat)</b></p>	<p>May return when:</p> <ul style="list-style-type: none"> <li>• Meet standard criteria to return after illness.</li> </ul> <p>Note: Standard criteria to return after illness refers to the individual school’s existing policies and protocols for a student or employee to return to school after illness.</p>
<p><b>5. Close Contact of Individual with Confirmed COVID-19</b></p> <p><i>See DC Health’s <u>Guidance for Contacts of a Person Confirmed to have COVID-19</u> for more information</i></p>	<p>May return after:</p> <ul style="list-style-type: none"> <li>• A minimum of 10 days from last exposure to COVID-19 positive individual, provided that no symptoms develop, or as instructed by DC Health</li> </ul> <p>Note: Ending quarantine after 10 days (on day 11) is only acceptable if:</p> <ul style="list-style-type: none"> <li>• The close contact did not develop symptoms of COVID-19 at any point during the quarantine.</li> </ul> <p>AND</p> <ul style="list-style-type: none"> <li>• The close contact continues to self-monitor for symptoms until 14 days after the last exposure to the COVID-19 positive individual.</li> </ul> <p>If the close contact is a household member:</p> <ul style="list-style-type: none"> <li>• Isolate from the COVID-19 positive individual, then may return to care after quarantine of at least 10 days from last exposure to the COVID-19 positive individual, or as instructed by DC Health.</li> <li>• If unable to isolate from the COVID-19 individual, may return to care after quarantine of at least 10 days from the end of the COVID-19 positive individual’s infectious period (see Scenario #2), or as instructed by DC Health.</li> </ul> <p>The 10-day quarantine recommendation is intended to minimize the risk of transmission of the virus while also minimizing the burden of quarantine. Recent DC Health guidance allows for child care providers to continue to implement the more stringent 14-day quarantine requirement if they choose to. Fourteen days of quarantine remains the most effective strategy for decreasing the transmission of COVID-19.</p> <p>DC Health strongly recommends that individuals who live or work with someone at higher-risk for COVID-19 (see Section I)</p>

	<p>quarantine for 14 days.</p> <p>DC Health recommends that children should get tested for COVID-19 if anyone in their household has symptoms of COVID-19, even if the child themselves does not have symptoms. All members of the household should be tested at the same time.</p>
<p>6. Close Contact of an Individual Awaiting a COVID-19 Test Result</p>	<p>If the close contact tests negative:</p> <ul style="list-style-type: none"> <li>• May return immediately if the child or staff member has no symptoms of COVID-19 nor other exclusionary criteria met.</li> </ul> <p>If the close contact tests positive:</p> <ul style="list-style-type: none"> <li>• See Scenario #5.</li> </ul>
<p><b>7. Travel to Any Place Other than Maryland, Virginia or a Low-Risk State, Country or Territory</b></p> <p><i>See DC Health's <a href="#">Guidance for Travel</a> and the <a href="#">CDC's COVID-19 Travel Recommendations by Destination</a> for more information</i></p>	<p>May return after:</p> <ul style="list-style-type: none"> <li>• 14 days from return or arrival to the District of Columbia</li> </ul> <p>A negative test result after travel to a high-risk state or country does not shorten the duration of quarantine of at least 14 days.</p>

## **VI. Potential Disclosure, Exposure, Closure, and Reporting Requirements**

### **Disclosure**

Operating BCDC during the COVID-19 pandemic means expanding the social network of every member of the BCDC community (parents, children, staff, teachers, and all household members). **We can only best promote the safety of our children, staff, and families through candid communication about potential exposure to COVID-19, both inside and outside of the Center, as well as any experienced symptoms.**

### **Exposure**

BCDC will seek guidance from DC Health and OSSE and follow their recommendations if there is reason to believe a member of the BCDC community has or has been exposed to COVID-19, including with regards to communications with staff and parents. Kim Mohler is the designated Point of Contact. **In the event of a diagnosis of or exposure to COVID-19 in a child or staff member, BCDC will take the following steps:**

1. **Staff or children diagnosed with COVID-19 must not enter the Center until they have been cleared from isolation. If any child or staff member has been in close contact with a person who is positive for COVID-19, then the child or staff member must not enter the Center until they have completed their quarantine period without becoming symptomatic or diagnosed with COVID-19.**
2. **If BCDC identifies a child or staff member with COVID-19 who was in the building during their infectious period, we must dismiss the exposed cohort until DC Health is able to complete the case investigation.**
  - The infectious period starts two days before symptom onset, or date of test if asymptomatic and typically ends 10 days after symptom onset/test date.
3. **Report to OSSE and DC Health.** BCDC must file an Unusual Incident Report with OSSE and notify DC Health ASAP after learning of an exposure. DC Health will follow up within 24 hours of notification. **DC Health will make all decisions on the timeline of exclusion and any other responses to a COVID-19 exposure.**
4. **Communicate with parents and staff.**

BCDC will communicate with parents and staff per DC Health directive and protect the privacy of individuals while also alerting parents and staff of a confirmed COVID-19 case. Communication is to be completed, per DC Health directive and will include:

  - Notification to those staff and families of children in close contact with the individual including the requirement to quarantine for 14 days;
  - Note: DC Health will identify close contacts based on its case investigation. It is not the responsibility of the provider to define those that must quarantine.
  - Notification to the entire program that there was a COVID-19 positive case, those impacted have been told to quarantine, steps that will be taken (e.g., cleaning and disinfection), and the facility's operating status;
  - Education about COVID-19, including the signs and symptoms of COVID-19;
  - Referral to the Guidance for Contacts of a Person Confirmed to have COVID-19, available at [coronavirus.dc.gov](https://coronavirus.dc.gov); and
  - Information on options for COVID-19 testing in the District of Columbia, available at [coronavirus.dc.gov/testing](https://coronavirus.dc.gov/testing).
5. **Clean, sanitize, and disinfect all affected spaces.** BCDC will immediately follow any steps outlined by DC Health and [CDC guidance](#) on cleaning, disinfection and sanitization after the staff and children have left at the end of the day.

### **Other Closures**

1. **In the event that there are not enough dedicated staff members to compliantly staff a classroom on a given day, BCDC will close the room until the room can be staffed safely and compliantly.**

BCDC will make every effort to give as much notice as possible to the families of classroom(s) affected. In the event that there is an emergency that affects staffing midday, the designated Administrative team member will enter the classroom until children are picked up.

- Individual classrooms may be closed, out of an abundance of caution, when a child or staff members experiences symptoms potentially related to COVID-19. It is critical that all BCDC community members candidly inform BCDC about potential symptoms as soon as they are experienced.

## **VII. Contact Information**

### **A. Administrative Team Contact Information**

<b>Staff Member</b>	<b>Position</b>	<b>Phone Number</b>	<b>Email</b>
Kim Mohler*	Executive Director	202-846-7672 (O) 301-943-6784 (M)	kim@bcdconline.org
Renetta Davis-Armstrong	Operations Manager	202-846-7674 (O)	renetta@bcdconline.org
Erin Silvan	Assistant Director	202-846-7721 (O)	erin@bcdconline.org
Ravion Wynn	Education Coordinator	202-846-7672 (O)	ravion@bcdconline.org

\*If you have questions related to this guidance, please contact Kim Mohler.

### **B. Classroom Contact Information**

<b>Classroom</b>	<b>Phone Number</b>	<b>Teachers (effective Jan 2021)<sup>8</sup></b>	<b>Assigned 3rd Teacher</b>	<b>Assigned Admin Team Member</b>
Lambs 2	202-846-7718	Miriam, Renae	Javeair	Kim
Ducklings 1	202-846-7670	Dorie, Stephanie	Juliet	
Bunnies 1	202-846-7673	Sharnice, Ashley	Sherika	Renetta
Bunnies 2		Malvina, Tiana		
Penguins 1	202-846-7667	Avalon, Dewuan	Jaylyn	Ravion
Penguins 2	202-846-7720	Tameka, Kim		
Pandas 2	202-846-7716	Kadie, Cehon	Cathy	Erin
Butterflies 1	202-846-7665	Lamont, Shelby		

Rainbow Fish 1	202-846-7724	Danielle, LaJuan	Gloria	Ravion
Rainbow Fish 2	202-846-7668	Swarna, Danae	Veronica	