Be Safe.
Childcare
**Be Safe. Childcare**

What's in this guide?

**CAUTIOUSLY REOPEN (Phase III)**

Cautiously reopening Chicago requires:

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- Recommended guidance -
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Illustrative example

CAUTIOUSLY REOPEN (Phase III)

What may be different?

1. **Visual signage** posted throughout facility regarding hygiene, social distancing, PPE, and more

2. **Health screenings** required for children before entering the classroom

3. Parents and employees required to wear **facial coverings** at all times; children required when outside the classroom

4. Staff frequently **disinfect** the facility, including toys and other objects

5. Group children into **stable cohorts** with **assigned teachers**

6. Doors and windows remain open to **increase ventilation**, where appropriate

- Recommended guidance -
To minimize social interactions between all children in a center, implement stable cohorts

- Separate children into groups assigned to distinct rooms, with 2 permanent staff members assigned to each group \( \text{(number dictated by state licensing ratio)} \)
- Restrict all combined activities where children would normally interact with other groups. This includes, but is not limited to, gross motor areas
- Consume meals in assigned room; all meals served (breakfast, lunch, snack) must be individually packed
- Add 4 sq. ft. of minimum sleeping space per child to ensure cots can be placed 6 ft. apart
- Avoid access to public playgrounds; Centers with a playground on premises can use facility if groups are not mixed and equipment is cleaned after use by every group

Limit group size to 10 or fewer children in accordance with state licensing requirements by age cohort

- Do not allow children to change groups or programs within a given facility once cohorts are established
- Design group schedules to limit interactions with other children/parents at start/end of day
- Allow qualified substitutes to go between two classrooms if PPE is switched out when moving from one room to another
- Ensure availability of qualified substitutes teachers when staff is out

- Recommended guidance -
Staff to wear face coverings or face shields

- In any outdoor and indoor common spaces, face coverings must be worn over nose and mouth (exceptions can be made for people with medical conditions or disabilities that prevent them from safely wearing a face covering)
- All external vendors to wear face coverings at all times while on the premises
- While face covering compliance may not be feasible for younger children, school-aged children should be encouraged to wear them

Staff to ensure regular handwashing pattern for all children (every hour, if possible)

- Wash hands any time staff changes locations
- Access to sanitizers in every room, at the front desk
- If possible, staff to change into different clothing and shoes on site; Ensure clothing kept on site be laundered regularly

Hygiene req's

Protective gear

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Healthy interactions

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(Phase III)
Perform daily health checks for all children, caregivers, staff, and visitors

- Prior to leaving home, all individuals encouraged to self-identify symptoms and stay at home if symptomatic
- Prior to entering establishment, employees self-screen (e.g., questionnaire - see appendix) to ensure no symptoms of COVID-19
- Health checks for children to include symptoms and temperature checks at entrance; parents to wait in the designated area while wearing face coverings
- Persons who display signs of illness or with a fever of 100.4°F or above must not be permitted on premises
- Reduce interactions with parents and other children by setting up a designated drop-off space inside
- Log entry of each child with relevant information (e.g.: name, phone number, address) before permitting access to rest of center; encourage contactless login and limit exposure throughout entry process as much as possible
- Where possible, encourage the same parent or guardian to come to the center for pickup/drop-off to limit exposure; Discourage older adults from being the designated drop-off / pick-up person
- Only essential staff on-site; encourage non-essential staff to work from home to limit capacity and reduce exposure
- Follow a fixed schedule for all external vendors and only allow entry after logging in and completing health screening
- If possible, introduce staggered drop off and pick up times

- Recommended guidance -
**Enhance cleaning procedures between shifts and of high-touch surfaces**

- Follow cleaning guidelines outlined by CDC
- Clean high touch surfaces every 2 hours; if possible, avoid usage altogether
- Where appropriate, doors and windows to rooms to remain open for ventilation
- Complete cleaning of premises after each shift
- Wash toys after use by each group, remove those that cannot be cleaned often (stuffed animals); if possible, toys to be separate across groups

**Establish rules with children and parents prior to entry**

- Use visual cues wherever possible (entrances, corridors, drop-off area, bathrooms)
- Consider posting of signage indicating 6 feet distance in pick-up / drop-off zone

**Identify all choke points (corridors, entrance), and ensure distancing norms are maintained**

- Establish an isolation area for symptomatic children (with supervision): clean area and leave empty for at least 3 hours after use. Symptomatic staff to leave premises as soon as possible
- Only allow one group to access gross motor room at a time, and clean room after each use
- Limit use of elevators, and restrict capacity to less than 25%

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- Recommended guidance -
Communicate to parents and community about new operating models

- Communicate new procedures to parents / guardians and get their written consent
- Communicate with parents or guardians through contactless methods (e.g., mobile applications); if contactless methods are not possible, send care sheets home to inform parents or guardians about their child's progress
- Practice two-way communication with appropriate city and state authorities, and update staff on new measures / best practices

Provide adequate training to ensure compliance

- Review relevant DCFS templates, checklists, and guidelines regarding changes in regulations
- Provide additional training for all staff on how to best care for children with new guidelines
Follow CDPH and CDC guidance for testing and tracing protocols

- If employee does contract COVID-19, they must follow all CDC guidelines before returning to work
- If an employee is identified as being COVID-19 positive by testing, cleaning and disinfecting must be performed according to CDC guidelines
- Any employee who has had close contact with co-worker or any other person who is diagnosed with COVID-19 should self quarantine according to CDC guidelines
- If a facility becomes aware of 2 or more cases possibly associated with an establishment over a 14 day period, employers are required to report cases to CDPH
- Follow all other CDPH guidance set forth and comply with CDPH recommendations in response to a workplace outbreak
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Reopening Approach

CAUTIOUSLY REOPEN
(Phase III)

Reopening childcare in Illinois¹

Reopening requirements for Childcare Centers

- Gradual approach developed to reopen childcare programs in a safe way
- Before opening for care in Phases 3 and 4, all programs must submit to DCFS a reopening plan with operational and preparedness plan
- For the first four weeks of operation, centers must operate with reduced group sizes
  - Limited to serving 8 infants, or 10 children in all other age groups (per room)
  - Centers operating under emergency day care licenses for at least 4 weeks have already met this requirement
- Before expanding enrollment, all centers must:
  - Review their reopening plan with their DCFS Licensing Representative
  - Have at least 50 sq. ft. per child 2 years and older
  - Add 4 sq. ft. of minimum sleeping space per child for infants and toddlers to ensure cribs and cots can be placed 6 feet apart
- Ratios will remain the same as per licensing regulations for all age groups

Reopening requirements for Childcare Homes

- Licensed exempt homes must return to their pre-COVID-19 group limits
- Programs must submit a reopening plan with operational and preparedness components

¹ Guidelines for all providers issued by GOECID, IDPH, DHS and DCFS noted here for reference only. Please visit this page to get most updated information
Glossary

**Gathering:** A planned or spontaneous event where individuals are interacting with non-household members within close proximity (<6 ft) for an extended period of time.

**Handwashing:** The act of thoroughly cleaning one’s hands with soap and water for at least 20 seconds or using a disinfectant capable of eliminating the virus that causes COVID-19.

**Social distancing:** The physical spacing of at least six feet between individuals, or groups of individuals.

**PPE:** Personal protective equipment (e.g., face coverings, goggles, face shields); requirements vary based on industry and specific circumstances.

**Self-screening:** A protocol by which an employee answers questions at the start of a shift. Subject to the guidance of the Commissioner of Health, the questions may include:

- Have you had a body temperature over 100 degrees Fahrenheit or have you used a fever reducer in the previous 24 hours to treat a body temperature over 100 degrees Fahrenheit?
- Do you have a new cough that you cannot attribute to another health condition?
- Do you have a new or worsening sore throat that you cannot attribute to another health condition?
- Do you have new shortness of breath that you cannot attribute to another health condition?
- Have you recently developed a complete loss of smell or taste?
National resources for further guidance

**General workplace guidance**


**Childcare guidance**

- **Restore Illinois Childcare Guidelines** – Guidelines for all providers issued by GOECD, IDPH, DHS and DCFS: [https://www2.illinois.gov/sites/OECD/Documents/05.22.20%20Restore%20Illinois%20Child%20Care%20Guidelines.pdf](https://www2.illinois.gov/sites/OECD/Documents/05.22.20%20Restore%20Illinois%20Child%20Care%20Guidelines.pdf)


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