

BE SAFE ★
CHICAGO ★



Be Safe.
Childcare



Cautiously reopening Chicago requires:

Healthy interactions

Social distancing



Limitations on physical distance to other individuals

Gathering size



Limitations on gatherings of individuals

Protective gear



Use of protective gear by individuals

Hygiene requirements



Ensuring hygienic interactions (e.g., hand washing)

Safe spaces and conditions

Entry access



Entry/exit condition for access to space

Cleaning standards



Actions taken to disinfect space

Visual guidance



Hygiene resources and guidance posted in space

Workplace conditions



Evaluation of foot traffic, ventilation, etc.

Operational resilience and monitoring

Flexible models



Flexibility with sick leave, remote work (when possible)

Operational resiliency



Support for operational flexibility (e.g., multiple shifts)

Travel guidelines



Restriction of movement of people between locations

Testing / tracking



Facilitation of testing and tracking



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 (*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 in accordance with state licensing requirements by age cohort

- [**CLICK HERE to view more specific Childcare Phase IV capacity restrictions**](#)
- 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/guardians at start and end of day
- Ensure availability of qualified substitutes teachers when staff is out
- Allow qualified substitutes to go between two classrooms if PPE is switched out when moving between rooms

- Recommended guidance -



Staff, parents or guardians, and visitors to wear face coverings at all times

- In any 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)
- Require all staff, parents or guardians, and visitors to wear face coverings at all times while on the premises; transparent face coverings encouraged to help children read facial expressions, and/or individuals communicate by, e.g., reading lips
- Face coverings not required for children under the age of two, or older children while playing outside, eating, drinking, sleeping, or napping (assuming children are able to maintain social distancing)
- While face covering compliance may not be feasible for younger children, school-aged children should be encouraged to wear them
- Consider not requiring face coverings if adherence increases the frequency to which a child touches their face



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



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 or guardians to wait in the designated area while wearing face coverings
- Persons who display signs of illness or with a fever of 100.4° or above must not be permitted on premises
- Reduce interactions with parents or guardians 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 visitors and only allow entry after logging in and completing health screening
- If possible, introduce staggered drop off and pick up times



Cleaning standards

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



Visual guidance

Establish rules with children and parents/guardians prior to entry

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



Work-place

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 elevator capacity to a level that allows for social distancing while in use



**Flexible
models**

Communicate to parents/guardians 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



**Operation
resiliency**

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



Reopening childcare in Illinois¹

Reopening requirements for Childcare Centers

- Gradual approach developed to reopen childcare programs in a safe way
- Before opening for care, 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 GOECD, IDPH, DHS and DCFS noted here for reference only. Please visit [this page](#) for the most up to date information, and [this page](#) for a webinar describing the guidelines in more detail.



Glossary

Gathering: A group of individuals outside a single household who are part of a spontaneous or planned event convening for more than ten minutes

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 sample questionnaire

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?



General workplace guidance

National resources for further guidance

CDC – *Activities and Initiatives Supporting the COVID-19 Response and the President's Plan for Opening America Up Again:*
<https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf>

CDC – *Guidance for Businesses and Workplaces*
<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html>

OSHA *Guidance on Preparing Workplaces for COVID-19:*
<https://www.osha.gov/Publications/OSHA3990.pdf>

CDPH: *Guidance if COVID-19 is confirmed in your facility:*
<https://www.chicago.gov/content/dam/city/depts/cdph/HealthProtectionandResponse/What%20to%20do%20if%20confirmed%20COVID-19%20case%20in%20facility.pdf>

Childcare guidance

Restore Illinois Childcare Guidelines– *Guidelines for all providers issued by GOECD, IDPH, DHS and DCFS:*
https://www2.illinois.gov/dcfs/brighterfutures/healthy/Documents/Day_Care_Guidance.pdf

Webinar describing Illinois' guidelines: <https://vimeo.com/433640279>

US Department of Education – *COVID-19 Information and Resources for Schools and School Personnel:* <https://www.ed.gov/coronavirus>

CDC – *Guidance for Childcare, Schools and Youth Programs:*
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

Supplemental Guidance from CDC – *Guidance for Childcare Programs that Remain Open:* <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>

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