



Child Care Licensing Program & Child Care and Development Fund's COVID -19 Prevention and Response Guidance for Reopening Child Care Programs and Child Care Services in the Commonwealth of the Northern Mariana Islands

June 6, 2020

OVERVIEW

As you recall, on March 15, 2020, we all caught wind that Guam recorded its first three confirmed cases of the Novel Coronavirus Disease now commonly referred to as Covid-19. Shortly thereafter, CNMI Governor Ralph DLG. Torres issued Executive Order No. 2020-04. The executive order was a Declaration of State of Public Health Emergency and continued Declaration of State of Significant Emergency establishing response, quarantine, and preventive containment measures relative to Covid-19. As a result, the Child Care Licensing Program issued a Memorandum dated March 17, 2020 directing all centers and family child care homes to shut down all operational activities until March 31, 2020.

However, Governor Ralph DLG. Torres issued multiple subsequent amended executive orders thereafter. As a result, the Child Care Licensing Program issued a Memorandum dated March 29, 2020 directing all centers and family child care homes to continue the shutdown of all child care services until further notice.

Now that the restrictions are beginning to be lifted for a multitude of industries in the CNMI and both public and private employees have begun reporting back to work, the need for child care services for working parents will once again increase. Every child care service provider must have a plan in place to minimize the spread of Covid-19 and to ensure the health, safety, and well-being of all children in care inclusive of staff members.

The Child Care Licensing Program along with the Child Care and Development Fund recognizes that this public health pandemic continues to affect our daily lives. Therefore, the program has coordinated a joint effort with both certified providers and private providers to come up with a protocol to address the prevention and response to Covid-19 in the child care setting.

Therefore, the following guidelines are based on the collaboration between the Child Care Licensing Program/Child Care and Development Fund and that of the Child Care Association as well as the Private Providers, but more importantly a bulk of the Centers for Disease Control and Prevention's guideline have been integrated to make the following guideline unique to the CNMI.

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CNMI COMMUNITY VULNERABILITY LEVEL ("CVL") COLOR CLASSIFICATION

Corresponding CVL	Action	Activity	Max Occupancy Permitted
Red	Complete Shutdown	Child Care Programs and Child Care Services will be closed	0
Orange	Complete Shutdown	Child Care Programs and Child Care Services will be closed	0
Yellow	Complete Shutdown	Child Care Programs and Child Care Services will be closed	0
Blue	Partial Opening	Child Care Programs and Child Care Services may open subject to strict COVID-19 guidelines	50%
Green	Regular Opening	Child Care Programs and Child Care Services may open subject to strict COVID-19 guidelines	75%
All clear	Regular Opening	Child Care Programs and Child Care Services are allowed to open with Pre- Covid-19 conditions	100%

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DCCA/CCLP/CCDF

COVID-19 GUIDANCE FOR REOPENING CHILD CARE PROGRAMS AND CHILD CARE SERVICES IN THE CNMI IN RESPONSE TO COMMUNITY VULNERABILITY LEVEL BLUE AND GREEN

Activity	Area of Concern	Guidelines
Prior to Opening Child Care Programs and Child Care Services	Facility	 Centers must be thoroughly cleaned, sanitized, and disinfected. Plumbing fixtures must be in good repair – all water lines or pipes in the facility must be thoroughly purged to remove any stagnated water for at least a few minutes. For more information, please see CDC's recommendation at https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html. Water dispensers must be thoroughly drained, cleaned and sanitized before use. Electrical fixtures, outlets, etc. must be in good repair. Centers must have an adequate disinfecting and hygiene supplies. An Isolation Room must be identified in case of a possible case of COVID-19 infection or a suspicion of COVID-19 infection.
	Personnel	 Director/Staff must have taken the Covid-19 test with a negative result. Such result must be provided by the CNMI Governor's Covid-19 Task Force Community Testing Initiative group.¹ A copy of the results must be emailed to the Child Care Licensing Program and a hard copy must be available at the center upon request. No staff is allowed to work unless given clearance from the Child Care Licensing Program. The Director must ensure that all Personnel receive training and information on the following areas: * Entering/existing the center; * The implementation of cleaning, sanitizing, and disinfecting practices; * The implementation of hand hygiene;

 $^{^{1}}$ We have yet to address the frequency of testing pending the recommendation from the Governor's COVID-19 Task Force.

		* The implementation of physical distancing guidelines; * The implementation of face covering for all adults; * The implementation of the center's screening practices; and * The implementation of all other relatable safety measures and protocols set in place as a result of the COVID-19 Virus.
	Families/Parents/Clients	 The Director must ensure that all Families/Parents/Clients receive and acknowledge receiving information on the following areas: * Entering/existing the center; * The implementation of cleaning and disinfecting practices; * The implementation of hand hygiene; * The implementation of physical distancing guidelines; * The implementation of face covering for all adults; and * The implementation of the center's screening practices. * Information on the COVID-19 Virus and the current status of the CNMI's Child Care Programs and Child Care Services.
Opening of Centers – Child Care Programs and Child Care Services	Roles of Directors/Staff	 A designated person must take each and every staff/child's temperature. This must be recorded and performed at the beginning (upon arrival) and at the end of each and every day. A non-contact (temporal) digital thermometer must be used for this purpose. Anyone registering a temperature of 100.4 degrees Fahrenheit or (38.0 degrees Celsius) must not be permitted to enter the center. Implement a monitoring log of children and staff that have been denied entry into the center. Any staff or child exhibiting Covid-19 symptoms must not be allowed to enter the center.² For more

² Coronavirus Symptoms

- Fever
- Cough
- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Muscle pain

	 information on Covid-19 symptom, please see https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html. The designated person must take precaution when conducting the screening. This means that the designated person must maintain a minimum distance of 6 feet from those being screened. If this is a challenge, the staff must be wearing personal protective equipment such as latex gloves, face mask, etc., when conducting the screening procedures. Staff must continue to monitor themselves throughout the day in the event they develop symptoms. Staff must also monitor the children throughout the day in the event they develop symptoms. Staff must wear face mask/face shields at all times. If for some reason a medical purpose prevents a staff from wearing a face mask, the staff must submit from his or her primary medical provider a note indicating so. If available, staff must wear protective gowns at all times within the center.
Occupancy Guidelines	In compliance with the Governor's Directive and in the interim, centers are only allowed 50% of their maximum occupancy permit for each corresponding rooms as issued by the Department of Public Works. This requirement is subject to change based on the Community Vulnerability Level Classification.
Cleaning, Sanitizing, and Disinfecting of Centers	Staff must clean, sanitize, and disinfect high touched items and surfaces throughout the day such as tables, chairs, toys, doorknobs, sink knobs, toilet handles, light switches, etc. It must be disinfected as frequently as it is being handled. For more information, please see CDC's guidance for safe and correct application of disinfectants at https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html .

- Headache
- Sore throat
- New loss of taste or smell

	 See also Caring for our Children (CFOC) Chapter 3: Health Promotion and Protection – Chapter 3: Cleaning, Sanitizing, and Disinfecting at https://nrckids.org/CFOC/Database/3.3 Hand sanitizers must be readily available throughout the center for staff use. Hand sanitizers and all other cleaning and sanitizing items must be stored out of the children's reach. Diaper change table must be cleaned and disinfected before and after every use. Prior to the use of disposable gloves, staff must thoroughly wash their hands. Centers must have adequate ventilation due to all the cleaning and disinfecting activities. Cleaning shall be in accordance with CDC's Guidance for Cleaning & Disinfecting Public Spaces, Workplace, Businesses, Schools, and Homes at https://www.cdc.gov/coronavirus/2019- ncov/community/cleaning-disinfecting-decision- tool.html. All disinfecting methods shall utilize Environmental Protection Agency's approved disinfectant for use against Covid-19. See https://www.epa.gov/pesticide-registration/list-n- disinfectants-use-against-sars-cov-2-covid-19.
Physical Distancing	 The maximum occupancy percentage must be followed based on the CNMI Community Vulnerability Level Color Classification (CVLCC). There shall be no group larger than what is allowed based on the percentage of the CVLCC. The group of children plus their teacher must be the same each day. As much as possible, limit cross-deployment of staff to different section of the center. When determining the approximate space for each group of children, ensure that all children in a group have at the very least 35 square feet each of personal space to allow physical distancing. It is advisable that children remain in groups as small as possible. Should these guidelines differ from the Child Care Licensing Program's Administrative Code, follow the stricter guidelines.

Entering and Exiting the Center Directors must provide a designated drop off and pick-up zone at their centers that supports physical distancing. If necessary, stagger the arrival and/or dismissal time. This must be visible (post visible signs for all to see) to all families. Directors/Staff must keep a daily log of anyone arriving or entering the center. This is done so that the records become readily accessible to the Governor's Covid-19 Task Force Contact Tracers should the seed arises. Daily staff/children attendance must be maintained and monitored. Daily health screening must be conducted upon arrival of both staff and children. (A checklist form documenting screening is required) Alcohol based hand sanitizers with at least 60% alcohol content must be placed in all entrances and exits of the center. When necessary, shoe covering must be worn before entering the center. Otherwise, all shoe and other footwears must be taken off. Caring for Infants and Toddlers Staff must use blankets/coverings over their person when carrying an infant or a toddler or when comforting a crying child. Blankets must be changed between children. Sharing of blankets among the children is not allowed. Staff must avoid getting close to the infant's/toddler's face if possible. Staff must wear disposable gloves when preparing bottle. Disposable gloves must be changed between bottle feedings. • Staff must wash their hands before handling infant bottles prepared at the center. Bottles, bottle caps, nipples, and any other equipment used for bottle-feeding must be thoroughly cleaned after each use by washing with bottlebrush, soap, and water. • Staff must wash their hands, neck, and anywhere touched by a child's bodily secretions. Infants, toddlers, and staff must have multiple changes of clothes readily available on a daily basis.

	Follow safe diaper changing procedures at https://www.cdc.gov/healthywater/hygiene/diapering/childcare.html A downloadable poster with diaper changing procedure is also available for print-out on this same site.
Hand Washing Guidelines	 Hand washing must be practiced frequently – staff must also assist the children with their hand hygiene. Use of hand sanitizers for the children is highly discouraged. However, use of hand sanitizer is acceptable if there is no access to running water. If that is the case, a staff member must monitor the use to ensure that the children do not swallow the contents. The use of hand sanitizer is not recommended for children under 2 years of age. Everyone must wash their hands with soap under running water for at least 20 seconds upon arrival and frequently thereafter when necessary. See CDC's hand washing guidelines at https://www.cdc.gov/handwashing/when-how-handwashing.html.
Serving of Meals	 Meals must be prepacked from a food vendor. Meals must be prepared for each child. There shall be no meal/snack sharing among the children. In the interim, food/meal prepared from home shall not be allowed into the center unless it is for medical purposes. Children must observe social distancing by spreading out or in the alternate, stagger lunchtime to accommodate the number of children present. If possible, allow the children to eat their meals in their classroom rather than mixing in the eating area. Staff that are distributing the meals must always wear disposable gloves and face mask. Staff members who handles diapering should not be allowed to prepare or serve food to the children.
Nap Time	Space the children apart more than 3 feet; preferably 6 feet. If space is an issue, have the children nap head-to-toe or toe-to-toe.

		Cribs must be cleaned, sanitized, and disinfected after each use.
Outdoo	r Activities	 Encourage outdoor playtime but only in small groups as allowed by the maximum capacity based on the Community Vulnerability Level Color Classification. Create a staggered schedule for outdoor time to reduce exposure from a different group of children. Outdoor play equipment must be cleaned and disinfected between use by different groups of children.
Field Tr	ips	Field trips and other off-site activities are strictly prohibited until further notice.
Visitors		 Visitors shall not be permitted to enter the center during regular operational hours. The only exceptions are emergency or law enforcement personnel acting under color of their office, DCCA's Child Care Licensing Program personnel, Child Care and Development Fund personnel, and Quality Rating Improvement System personnel. All others shall be required to visit the center after its regular operational hours. As much as possible, a teleconference/video conference or some other online platform is highly encouraged over actual meeting visits to the center.
Respond 19 Infect	se to a Possible COVID- ction	 If any of the children of staff members develops symptoms of Covid-19 while at the center, immediately separate the child or staff from the rest of the center's occupant until the child or staff leave the center. Place possible infected person in the designated isolation room. When confirmed or suspected exposure to Covid-19 occurs in the center, it must be immediately reported to the Covid-19 Task Force info line at 285-1672/1352 as well as to the Child Care Licensing Program at 783-8599. Dismiss all the students and staff for a period of 5 working days. This time will allow the CNMI Covid-19 Taskforce and health officials to determine appropriate next steps.

All rooms and equipment used by the suspected child or staff must be cleaned and disinfected after 24 hours have lapsed to minimize potential exposure to respiratory droplets. For additional guidance on cleaning and disinfecting rooms or areas that those with suspected or confirmed Covid-19 have visited please see Centers for Disease Control and Prevention's Coronavirus Disease 2019 **Environmental Cleaning and Disinfection** Recommendations at https://www.cdc.gov/coronavirus/2019ncov/community/organizations/cleaningdisinfection.html // // // // // // // // // // // // // // // // This guidance was last updated on October 27, 2020 by the Child Care Licensing Program.

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