Modified Operating Practices
Update EFFECTIVE November 15, 2020

North Dakota is encouraging all childcare providers to continue to serve children and their families during the pandemic using modified operating practices. These modified operating practices will be in effect as long as the public health situation calls for the additional precaution.

Group Sizes / Staffing / Masking (according to state mask mandate)
General Principle: Establish modified group sizes and/or masking expectations to align with CDC, DoH guidance and state mandates; adjusting staffing / practices accordingly.

Group Sizes / Staffing / Masking (Child Care selects Option 1 or Option 2)
General Principle: Establish modified group sizes and/or masking expectations to align with CDC and/or DoH guidance; adjusting staffing / practices accordingly.

• **Option 1**: Establish a limit of 15 total people per room (includes both adults and children); masking not required for staff or children, unless otherwise required by a state or local mandate

• **Option 2**: Return to group sizes as outlined in licensing regulations; require all staff and children over age 2 to wear masks while indoors and/or not able to maintain physical distancing.

• Regardless of whether a provider selects Option 1 or Option 2:
  
  • Square footage requirements will not change; minimum of 35 sq.ft. per child still applies
  
  • Adjust staffing patterns as needed to comply with established staffing ratios by age group.
  
  • Stagger/limit common area usage as much as possible
  
  • Keep staff with the same group of children as much as possible; floating should not take place unless it’s required to maintain ratio. If floating is necessary, staff should change soiled clothing and wash hands or use hand sanitizer upon entering the classroom.
  
  • Center Directors must be onsite at least sixty (60) percent of the time when the center is open, or a minimum 30 hours per week, whichever is the less.

NOTE: Each provider will need to be mindful of physical building capacity limitations. Total number of kids in any one facility should be governed by the provider’s ability to observe appropriate social distancing, especially in terms of utilization of common spaces that need
to be shared by all children. A provider would still be required to ensure they are not exceeding the current license capacity for their physical space.

Screening / Drop Off

General Principle: Limit access to the childcare facility as much as possible

- Childcares must screen employees and children (ask the parent/guardian) entering the childcare facility each day upon arrival using the following questions.
  
  1. Have you had any known contact with someone who has tested positive for COVID-19 or is a close contact with symptoms in the last 14 days?
  
  2. Have you had any new symptoms you feel are consistent with COVID-19 virus such as fever (100.4°F or higher) OR two or more of the following symptoms: fatigue, body aches, cough, sore throat, runny nose, nausea, vomiting, diarrhea, abdominal pain OR loss of taste and/or smell?

  *If a thermometer is not available, ask:

  Have you ever felt feverish within the last 24 hours?

  3. Have you been tested for or diagnosed with COVID-19 in the last 14 days? If the answer to all 3 screening questions is “no”, the adult and child can enter the facility. If the answer to any of the 3 screening questions is “yes”, the person should be directed to call their health care provider, if ill, or visit the ND Department of Health website for further guidance.

- For any child that enters the child care facility, utilize the modified “Daily Health Check” procedure for children
  
  - If a child exhibits one or more of the indicated symptoms or screened “yes” to the facility screening questions, the child should not be allowed to remain at the child care facility.

- The presence of individuals not essential to the operation of the child care should be minimized. All individuals entering the child care facility should complete the entrance screening questions.

- Ask parents to drop off child(ren) at the entrance with a staff member instead of coming inside the child care program. If parent/guardian has to enter the building, require parent/guardians to wear masks and use hand sanitizer when they enter the building.

- If you are a sole provider, you are required to wear a mask and you need to self-screen. If you answer yes to any of these questions, neither you nor anyone within your home should be providing care at this time.
Meal / Play
General Principle: Minimize interactions that could facilitate community spread of virus

- Suspend family-style dining; replace with provider plating each meal and distributing to the child
- If sink is used for diapering/toileting, disinfect the sink before it is used for handwashing before eating
- Handwashing before and after eating and food prep/service
- Sanitize tables, highchairs, counters, etc. (any surface used for eating or food service/prep)
- Have one person plate the food for children
- Do not place serving dishes at table or keep serving dishes covered if at table
- If children are wearing masks, space children 6 feet apart when eating if possible, maintaining supervision at all times. If not able to space all children 6 feet apart at one time, consider having fewer children eat at one time. Eat in shifts. Be sure to sanitize after each group.
- If children are wearing masks it is recommended to store masks properly while children eat.
  - Social distancing should be maintained while playing outdoors.
  - Limit travel that requires transporting groups of children in vehicles. When vehicle use is necessary, use appropriate precautions (social distancing, group sizes, disinfection).
  - Sanitize touchpoints and outdoor "toys" used by children using similar decision-making protocols that are used for indoor play.
  - In addition to the standard first aid kit, staff must have hygiene supplies available for outdoor play, including but not limited to hand sanitizer, baby wipes (to remove visible soil and to clean infants'/toddlers' hands), tissues, and a garbage container.

Rest time:
- Separate storage for nap items
- Launder nap items weekly, sooner if soiled
- Clean mat/cot with soap and water daily if not labeled, weekly if labeled. Sooner if soiled.
- Space children 6 feet apart if possible, maintaining supervision. If not able to space 6 feet apart, space as far apart as possible and alternate head to foot.
- If children are wearing masks, they should be removed for sleep and stored properly.
- Safety proof any room used for napping.

Hygiene / Safety
General Principle: Operate using enhanced hygiene and safety practices, as per operating procedures standard for child care facilities during times of public health emergency

- Have children and staff wash their hands upon arrival to child care and whenever they re-enter their classroom, enter another classroom, or work with/join a different group of children.
- If a child becomes ill during the day, it is important to keep the child in the classroom to
contain the germs and prevent contaminating other areas. Provide an area in the classroom where the child can be comfortable and is supervised. Try to keep the child at least 6 feet from the other children until the child’s parent/guardian arrives. A portable divider could be used to create a more confined area if the child is coughing.

NOTE: Refer to additional guidance related to hygiene, cleaning and practices to decrease illness in the era of COVID-19