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OFFICE OF EARLY CHILDHOOD  
DEPARTMENT OF PUBLIC HEALTH



DATE: December 22, 2020 **REVISED March 15, 2021**  
TO: Local Directors of Health  
FROM: Beth Bye, Commissioner Office of Early Childhood  
Deidre Gifford, Commissioner Department of Public Health  
RE: Coronavirus Memo #36 **REVISED**  
Child Care and Youth Camp Resource for Local Directors of Health

March 15, 2021	Revision of group size to no more than 20 children per group, page 2.
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Child care is a critical support to children’s health, safety and learning. In addition to these vital benefits, child care services are essential in maintaining or restoring the economic well-being of families and communities because the ability for parents to return to work depends on the availability of child care services. It is the mission of this document to provide Directors of Health with a uniform set of tools so that they feel confident in carrying out appropriate and consistent measures to keep the children, child care providers, and families safe and our child care and camp providers open during the COVID-19 pandemic.

**Connecticut Requirements for Child Care and Youth Camps during COVID-19**

The Office of Early Childhood (OEC) implements a system of strategies to support the safe and healthy provision of child care during the pandemic. Child care and youth camp settings are highly regulated with regard to health and safety and operate with pre-COVID-19 practices including hand washing, management of ill children, and cleaning and sanitation that support their ability to meet enhanced requirements in response to the pandemic. Since March 2020, licensed child care providers, including youth camps, have been required to continue to comply with all licensing requirements unless a specific waiver has been put into place as outlined in OEC’s Memos regarding COVID-19 response (See <https://www.ctoec.org/covid-19/memos/>).

- Licensed and license-exempt child care providers are also required to comply with enhanced COVID-19 requirements put into place by the OEC that may be increased or relaxed over time. These enhanced requirements are informed by recommendations of public health authorities such as the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP), and the Connecticut Department of Public Health (DPH). These recommendations are based on the best currently available scientific evidence on COVID-19 risk and spread.
- Detailed information on these practices is shared with providers in English and Spanish through OEC memos, webinars, licensing calls and visits, and comprehensive guides. Additionally, the

OEC provides signage and posters for child care and youth camp settings to support compliance (See <https://www.ctoec.org/covid-19/> for the full list of guidance documents).

- Licensing regulations require child care and youth camp programs to follow the policies and procedures they have established for the operation of their program.

OEC's licensing staff conduct inspections of licensed child care programs and youth camps to ensure compliance with the enhanced COVID-19 requirements put in place by executive orders and OEC memos, along with those licensing requirements that help limit the spread of the COVID-19 virus.

The enhanced requirements that are the focus of these visits are the following:

- Daily health screening of children and staff
- Group sizes no greater than 20 children (effective March 29, 2021).
- Face masks or cloth coverings worn over the mouth and nose by all staff, both inside and outside (unless they can maintain 6 feet distancing while outside)
- Face masks or cloth coverings worn over the mouth and nose by all children age 3 and above, with exceptions outlined in [Memo 29, Group Size Mask Requirements and Ventilation](#) as part of a system of protections against COVID-19
- Social distancing exercised (e.g. groups of children are not coming within six feet of other groups even on the playground)
- Regular hand washing by staff and children with soap and water for at least 20 seconds
- Staff covering coughs and sneezes with tissues or the corner of the elbow and children are encouraged when appropriate to cover coughs and sneezes in the same manner
- Disposal of soiled tissues immediately after use
- Enhanced cleaning and disinfecting practices (e.g. between groups of children using common areas or equipment)
- Entry into program is limited to those whose presence during operating hours is necessary

Compliance with the licensing requirements related to capacity, ratios and group size for centers/groups, reportable disease reports, and procedures in case of illness and diapering are also reviewed at these inspections. Any other serious concerns identified during the visit are addressed.

### **COVID-19 Reporting Requirement**

In February 2020, COVID-19 was added to the DPH List of Reportable Diseases, Emergency Illnesses and Health Conditions. Child care providers (child care centers, group child care homes and youth camps) have been informed that they are required to report cases of COVID-19 infection immediately to both the:

- DPH Epidemiology and Emerging Infection Program at 860-509-7994 (or 860-509-8000 after-hours and weekends)
- Local department of health in the town of residence of the case-patient

The childcare providers are informed that reporting must happen on the day of recognition or strong suspicion of the disease. Additionally, they are informed it is imperative that contact tracing efforts begin the same day that a confirmed or suspected case is identified to prevent further spread of disease.

## **Responding to COVID-19 Exposure in Child Care and Camp Programs**

The childcare providers are informed that a COVID-exposed person is anyone who has spent a total of at least 15 minutes (within one day) within 6 feet of a person with a confirmed diagnosis of COVID-19 during their infectious period or having direct contact with an infected person's droplets (e.g., cough, sneeze). This timing may be cumulative; not necessarily fifteen straight minutes. A person is considered exposed whether or not they are wearing a cloth mask.

Once exposure is identified, childcare providers have been advised to consult the Connecticut State Department of Education's (SDE) [Adapt, Advance, Achieve: Connecticut's Plan to Learn and Grow Together, Addendum 5: Interim Guidance for Responding to COVID-19 Scenarios in CT School Districts](#).

- **It is important that the child care or youth camp program directors be informed regarding test results of individuals associated with the program and that contact tracing (see Community Contact Tracing, below) involve the child care program or youth camp.**

Decisions on the isolation of COVID-19 positive cases or quarantine of exposed persons in individuals associated with child care and youth camp programs impact the health and safety of those in the child care setting and community, the ability of the child care facility to continue to operate, and the ability of families to continue to work.

Local health departments play a critical role in helping child care providers navigate the multitude of decisions that need to be made in a short period of time. When advising child care programs on actions to take once an individual associated with the program is diagnosed as a positive case of COVID-19 or exposed to a positive case, consideration should be given to factors including the following:

- The timing and extent of the diagnosed/exposed individual's contact within the child care program and the number of individuals who may have been exposed
- How strictly the cohorting of staff and children was practiced in the program prior to the exposure
  - Programs have been advised to practice cohorting (the scheduling of staff and children in consistent groups to limit the exposure of individuals throughout the program, have the fewest possible regroupings throughout the day, limit interactions across groups) as this may contribute to fewer program or classroom closures.
- The ages of the children and the potential for activities associated with their behavior and care that contribute to the spread of the virus
- For family child care providers, the extent of intra-family spread
- The program's compliance with enhanced COVID-19 requirements
- The level of occupancy/density of enrollment in the building and rooms used by children
- Whether there is spread of COVID-19 within cohorts and/or within a facility that is contact traced to the setting
- The program's ability to perform required cleaning
- The program's response and ability to work with health officials

## **Community Contact Tracing**

Contact tracing is described to childcare providers in OEC's [Memo 6, Message Regarding Child Care](#), which provides guidance for child care or youth camp settings to implement a process with a designated program staff (e.g. the director or family child care provider). A corresponding [COVID-19 Contact Tracing Checklist](#) outlines steps for providers to take. Program records related to staffing patterns and

child and staff attendance serve as source documents to identify who and when exposure may have taken place. The providers are informed it is critical for child care providers and youth camps to keep accurate daily attendance records, staffing patterns and daily group schedules, and to practice cohorting within the child care facility.

When program or community contact tracing leads to children or staff who are in attendance in a child care program or youth camp, the local health director should notify the program or provider that an enrolled child or staff is a close contact of a known COVID-19 case. HIPPA does not apply to public health investigations though reasonable confidentiality should be respected. The Connecticut State Department of Education (SDE) publication [\*Adapt, Advance, Achieve: Connecticut's Plan to Learn and Grow Together, Addendum 9, Contact Tracing in Schools\*](#) applies well and can be used to help guide contact tracing decisions within the child care and youth camp setting.

**Sources used to develop this guidance/memo:**

CT COVID-19 Response: <https://portal.ct.gov/Coronavirus>

CT State Department of Education, Addendum 5: Interim Guidance for Responding to COVID-19 Scenarios in CT School Districts, <https://portal.ct.gov/-/media/SDE/COVID-19/Addendum-5-Interim-Guidance-for-Responding-to-COVID-19-Scenarios-in-CT-School-Districts.pdf>

CT State Department, Addendum 9: Contact Tracing Scenarios in Schools, <https://portal.ct.gov/-/media/SDE/COVID-19/Addendum9-Contact-Tracing-Scenarios-in-Schools.pdf>

Rhode Island Outbreak Response Playbook: Child Care, [https://reopeningri.com/wp-content/uploads/2020/07/Child-Care-Playbook-07172020\\_final.pdf?189db0&189db0](https://reopeningri.com/wp-content/uploads/2020/07/Child-Care-Playbook-07172020_final.pdf?189db0&189db0)

OEC COVID-19 Memos: <https://www.ctoec.org/covid-19/>