The following are some recommended practices that may help to protect against the spread of the COVID-19 virus. These recommendations are only applicable during the COVID-19 emergency period. Once this emergency period has passed, child care programs should resume normal protocols.

**GROUP SIZES AND RATIOS**

**Group Sizes**
During the COVID-19 pandemic crisis, limiting group sizes is crucial to help slow the spread of the COVID-19 virus. Public health officials are recommending that group sizes not exceed 10 individuals (including both adults and children), except in the case of an emergency situation evacuation such as a fire or tornado.

**Staff-to-Child Ratios**
The following staff-to-child ratios are recommended during the COVID-19 crisis period. Following these ratios can ensure that your child care facility is following public health recommendations regarding group sizes.

<table>
<thead>
<tr>
<th>Group Size</th>
<th>Staff-to-Child Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants</td>
<td>One (1) adult for every four (4) children</td>
</tr>
<tr>
<td>Toddlers (approximately 12 – 24 months of age)</td>
<td>One (1) adult for every nine (9) children</td>
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<tr>
<td>Two-year-old (approximately 24 – 36 months of age)</td>
<td>One (1) adult for every nine (9) children</td>
</tr>
<tr>
<td>Three-year-old (approximately 36 – 48 months of age)</td>
<td>One (1) adult for every nine (9) children</td>
</tr>
<tr>
<td>Four-year-old (approximately 48 – 60 months of age)</td>
<td>One (1) adult for every nine (9) children</td>
</tr>
<tr>
<td>Five-year-old and up (over 60 months of age)</td>
<td>One (1) adult for every nine (9) children</td>
</tr>
</tbody>
</table>

These ratios are subject to change as the COVID-19 situation progresses. Should ratios change for any reason, MDHS will notify all providers immediately.

**HANDWASHING**

Proper handwashing is a must to protect against the spread of the COVID-19 virus and many other infectious diseases. The CDC breaks down handwashing into 5 simple steps: (1) Wet, (2) Lather, (3) Scrub, (4) Rinse and (5) Dry.

**Follow these five steps every time.**
1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. Scrub your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
4. Rinse your hands well under clean, running water.
5. Dry your hands using a clean towel or air dry them.

Child care staff should wash their hands frequently throughout the day. **Specifically, personnel should wash their hands:**

- As soon as they report for duty.
- Immediately before handling food, preparing bottles, or feeding children.
- After using the toilet, assisting a child in using the toilet, or changing diapers.
- After contacting a child’s body fluids, including wet or soiled diapers, runny noses, spit, vomit, etc.
- After handling animals, animal cages, or other animal objects.
- Whenever hands are visibly dirty or after cleaning up a child, the room, bathroom items, or toys.
- After removing gloves used for any purpose.
- Before giving or applying medication or ointment to a child or self.
When assisting a child with hand washing, either hold the child (if an infant) or have the child stand on a safety step at a height at which the child’s hands can hang freely under the running water. Assist the child in performing all of the above steps and then wash your own hands.

**CLEANING & SANITIZATION**

The Center for Disease Control (CDC) and the Mississippi State Department of Health both recommend routine cleaning and disinfecting of all surfaces that are frequently touched. This includes doorknobs, light switches, sink handles, and countertops. Any toys or learning materials that children will be using at your child care will also need to be cleaned and disinfected. These items include blocks, balls, puzzles, manipulative toys, and may also include craft type materials such as markers, colored pencils, child scissors, etc.

**CDC Guidance**

 Routinely clean and disinfect surfaces and objects that are frequently touched. This may include cleaning objects/surfaces not ordinarily cleaned daily (e.g., doorknobs, light switches, classroom sink handles, countertops). Clean with the cleaning agents typically used. Use all cleaning products according to the directions on the label. For disinfection most common EPA-registered household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available at: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).

Provide EPA-registered disposable wipes to teachers and personnel so that commonly used surfaces (e.g., keyboards, desks, remote controls) can be wiped down before use. Ensure adequate supplies to support cleaning and disinfection practices.

Additionally, diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer’s instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted. Prepare a bleach solution by mixing: 5 tablespoons (1/3rd cup) bleach per gallon of water or 4 teaspoons bleach per quart of water. **THIS SOLUTION MUST BE MIXED DAILY. DO NOT USE A BLEACH SOLUTION THAT IS OVER 24 HOURS OLD.**


**IF THERE IS A CONFIRMED CASE OF COVID-19 ON-SITE**

If a confirmed case of COVID-19 is found among either personnel or children at your center, notify the Mississippi State Department of Health and Mississippi Department of Human Services immediately.

The CDC recommends the following guidelines if a confirmed case of COVID-19 is found among either personnel or children enrolled in child care.

1. **Coordinate with local health officials.** Once learning of a COVID-19 case in someone who has been in the school, immediately notify local health officials. These officials will help administrators determine a course of action for their child care programs or schools.
2. **Dismiss students and most staff for 2-5 days.** This initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. This allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.

Local health officials’ recommendations for the scope (e.g., a single school, multiple schools, the full district) and duration of school dismissals will be made on a case-by-case basis using the most up-to-date information about COVID-19 and the specific cases in the community.

3. **Communicate with staff, parents, and students.** Coordinate with local health officials to communicate dismissal decisions and the possible COVID-19 exposure.

4. **Clean and disinfect thoroughly.** Close off areas used by the individuals with COVID-19 and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.

Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons, focusing especially on frequently touched surfaces.

If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. **For disinfection most common EPA-registered household disinfectants should be effective.**

5. **Make decisions about extending the school dismissal.** Temporarily dismissing child care programs and K-12 schools is a strategy to stop or slow the further spread of COVID-19 in communities.


**CHILD & STAFF MEMBER HEALTH SCREENING**

Child care centers may want to consider conducting a quick wellness screening for children and staff members before they enter the facility. Some guidelines include:

1. Child care centers may allow parents to stay at their vehicle at all times in an effort to decrease possible exposure. Parents may also go to a screening area. This area can be outside the child care center, or in a room that is separate from classrooms and all other common areas.
2. Parents or guardians will hand the child off to child care staff (staff should wear gloves, protective masks are optional).
3. A staff member will escort the child to a screening area unless parents drop off at screening area.
4. Staff should take the child's temperature (using protocol as outlined below) and observe the child for any visible symptoms.
5. Once cleared, the child is taken to wash their hands before being delivered to their classroom.
6. If the child exhibits symptoms of illness or has a fever, the child will be escorted back to the parent's car and parent will be notified that the child cannot be allowed in the facility until the child is fever or symptom free for a period of at least 24 hours.
7. All staff members should wash hands once check in is over and as frequently as needed.

**The screening process should include:**

1. Body temperature taken by thermometer:
   a. Forehead thermometer (100.4°F Fahrenheit)
   b. Armpit thermometer (99°F Fahrenheit or higher)
   c. Oral Thermometer (99.5°F Fahrenheit)
2. Visual screening of discharge from eyes or ears.
3. Visual check of child’s overall state.
4. Check to see if the child has one or more of the following signs and/or symptoms:

<table>
<thead>
<tr>
<th>-Diarrhea</th>
<th>-Abnormal breathing (e.g., fast breathing)</th>
<th>-Body rash</th>
<th>-Cough w/fever</th>
</tr>
</thead>
<tbody>
<tr>
<td>-Behavior changes (e.g., irritable, lethargic)</td>
<td>-Ear or eye discharge</td>
<td>-Body itching (scabies, lice infestation)</td>
<td>-Disease conditions such as measles, chickenpox, mumps, scabies, common cold</td>
</tr>
</tbody>
</table>

Child care staff should not allow parent to drop child off until the child has (1) been properly screened, and (2) the child has been properly signed in.

**Pick up procedures**

1. Parents or guardians stay at their vehicle or do not go beyond the screening area.
2. A staff member can accompany the child to the vehicle of the person authorized to pick up the child and sign the child out on the roster.
3. The child is properly secured in the vehicle before leaving the child in the parent or guardian’s care.

*Two staff members can be assigned to work together for pick-up for additional security.*