



## General Checklist for Childcare Facilities, Summer Camps, Sports Camps and After School Programs

This checklist is intended to provide childcare facilities, summer camps, sport camps and after school programs guidance with reopening safely.

Workplace Protection	YES	NO
1. Require staff to stay home if they are sick and parents/guardians to keep sick children at home.		
2. Establish controlled means of entrance to limit interaction and maintain social distancing: Limit entry to facility to one adult per child. Adults must wear cloth facial coverings. Modify access to facility to prevent inadvertent interaction between arriving and departing adults and children. Suspend visits and tours of facilities for anyone other than children served and staff during operational hours.		
3. Implement enhanced facility sanitation (cleaning and disinfecting) and personal hygiene practices, including: schedule deep cleaning and disinfecting prior to program start and prior to each day's opening. Implement cleaning and disinfecting practices for most touch areas throughout the day (every 2-3 hours) including bathrooms, common areas, door handles, light switches, copy machines, physical barriers, etc.		
4. Provide handwashing station with adequate soap, water, paper towels, or hand sanitizer with at least 60% alcohol at each building or program entrance, exits, and throughout the program or facility.		
5. Installation of permanent or portable touchless faucets, liquid soap dispensers, and paper towel dispensers with easy accessibility within facility is recommended (this is in addition to existing bathroom facilities).		
6. Simple handwashing stations can be created throughout the facility through the use of commercially available wet towel bucket dispensers in conjunction with automatic soap dispensers. Wet cloth towels (with water) may also be used as an alternative to paper towels.		
7. Hand sanitizer may be used if handwashing is not possible. Ensure hand sanitizing stations are out of the reach of very young children.		
8. Modify interior spaces to maximize social distancing, including installation of barriers, modification of furniture and layouts, and segmentation of common areas to ensure the separation of groups of not more than 10 individuals.		
9. Establishments are required to check HVAC systems to ensure proper recirculation of outside air and replacement of air filters.		
10. Prior to re-opening the facility, flush plumbing and run water in sinks to eliminate stagnant water from the period of closure. Refer to the guidance for building water systems after a prolonged shutdown.		
Employee Protection	YES	NO
1. Provide staff with appropriate Personal Protective Equipment (PPE) and cleaning and disinfecting materials, maintaining not less than a 15-day supply.		
2. Teach and reinforce the use of PPE and hygiene practices among all staff. Cloth face coverings to be worn by all adults in the program. Those involved in strenuous activity can remove their mask while maintaining a 10-foot social distance. Disposable gloves		



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for diapering, foodservice, and feeding of infants and toddlers, must be removed after each individual use.		
<b>3. Ensure social distancing among staff and groups of not more than 10 individuals.</b>		
<b>4. Reinforce hygiene practices, including hand washing: upon arrival to the facility and after breaks; before and after preparing food or drinks; before and after eating or handling food or feeding children; before and after administering medication or medical ointment; before and after diapering; after using the toilet or helping a child use the bathroom; after coming in contact with bodily fluid; after handling animals or cleaning up animal waste; after playing outdoors in sand; after handling garbage; after sneezing and or coughing; before and after glove usage.</b>		
<b>5. Implement enhanced cleaning and disinfecting for staff areas at start and end of day.</b>		
<b>6. Reduce risk to staff who are defined as COVID-19 vulnerable (e.g., age, pregnancy, pre-existing conditions, etc.) where possible, by redeploying to functions with less social proximity.</b>		
<b>7. Enhance staff communication: Provide training and educational materials, including this guide, to staff. Include information on everyone’s responsibilities as they relate to COVID-19. Verify that staff have read and understood the educational material. Communicate to staff workplace controls, including the proper use of PPE.</b>		
<b>8. Post signage to educate and train staff and visitors or building occupants to control spread and transmission of COVID-19 by using CDC guidance on how to stop the spread of germs.</b>		
<b>Protection of Children</b>	<b>YES</b>	<b>NO</b>
<b>1. As part of the initial enrollment or re-enrollment process, program staff should speak about the risk of COVID-19 to the parents of children with underlying health conditions. Parents should be encouraged to speak to their child’s health care provider to assess their risk and to determine if they should stay home.</b>		
<b>2. Parents with children with underlying medical conditions, must provide clearance from the primary care physician indicating the child is able to participate in center-based or in person programs to enroll/reenroll the child in the program. Programs must follow children’s care plan for underlying health conditions.</b>		
<b>3. Conduct daily wellness check on children at drop off – temperature of children and CDC screening questions for adults regarding children’s health.</b> <ul style="list-style-type: none"> <li>○ Children with temperature &gt;100.4 or whose guardian says yes to screening questions will be prohibited from entering the building or program, unless cleared by a doctor.</li> <li>○ Children who exhibit symptoms of an upper respiratory illness will not be permitted to attend the program that day.</li> </ul>		
<b>4. Children and youth &gt;2 years will be expected to wear face coverings unless engaged in strenuous activities. Accommodations will be made for pre-school children and for children with disabilities or special needs.</b>		



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<p><b>5. Establish strict density measures to ensure that groups are no greater than 10 and can maintain separation and social distancing requirements.</b></p> <ul style="list-style-type: none"> <li>○ Revise facility capacity, accordingly, ensuring that there are separate spaces for groups of no greater than 10.</li> <li>○ As much as possible, maintain 6 feet distance between children unless accommodations are warranted for very young children or children with disabilities.</li> <li>○ Restrict mixing, have the same group of children stay with the same staff each day, including during mealtimes.</li> <li>○ Maximize use of outdoor spaces and increase time spent on outdoor activities.</li> </ul>		
<p><b>6. Children who exhibit symptoms of illness during the day must be placed in a supervised isolation space established for this purpose and parents must be contacted immediately. Continue ongoing monitoring.</b></p>		
<p><b>7. Establish training for children and schedule for frequent handwashing throughout the day. Supervise washing of hands with soap and water for at least 20 seconds.</b></p>		
<p><b>8. Alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available and if the hands are not visibly soiled and if the child has not just completed eating or going to the bathroom.</b></p>		
<p><b>9. Supervise very young children, or as needed for children with disabilities, when they use hand sanitizer to prevent ingestion.</b></p>		
<p><b>10. Provide disposable cups or refillable water bottles and prohibit the typical use of water fountains.</b></p>		
<p><b>11. Establish training and schedule for proper and frequent cleaning and disinfecting of surfaces, toys, sporting equipment and materials, as applicable.</b></p>		
<p><b>12. Require that each child has their own set of materials. Prohibit sharing of items between children as much as possible. Clean and disinfect each item before and between use. If it is a sport camp the child should bring their own ball or other needed sporting equipment.</b></p>		
<p><b>13. Inform parents that children should leave toys and blankets and their comfort items at home to reduce the introduction of new objects. Accommodations should be made for children with disabilities or special needs.</b></p>		
<p><b>14. If a cafeteria or group dining room is typically used, serve meals in classrooms instead. If meals are typically served family-style, plate each child's meal to serve it so that multiple children are not using the same serving utensils.</b></p>		
<p><b>Employer-led Public Health Interventions</b></p>	<b>YES</b>	<b>NO</b>
<p><b>1. Review HR policies to reflect requirements to safely serve children and protect staff in the COVID-19 environment.</b></p>		
<p><b>2. Post signs on how to: Stop the spread of COVID-19; properly wash hands; promote everyday protective measures; and properly wear a face covering. DOH and/or CDC</b></p>		



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<p>signage must be posted in multiple, publicly trafficked locations. See resources section for sample signs.</p>		
<p>3. Staff must acknowledge reviewing in advance and complying with health screening questions prescribed by the CDC/Florida Department of Health (being turned away, if they are not able to confirm answers as required for entry).</p>		
<p><b>Industrywide Safeguards</b></p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p>1. Develop a plan for potential COVID-19 cases in the program including coordinating with DOH, cleaning and disinfecting of areas, and potential temporary closure until area impacted is cleaned, disinfected and cleared by DOH.</p>		
<p>2. Maintain good records of visitors and staff movements each day to facilitate investigation of potential COVID-19 cases.</p>		
<p>3. Prepare and distribute policy guidelines allowing staff to familiarize themselves with the material. Train staff on guidelines prior to reopening if possible.</p>		
<p>4. Prepare communication platforms, such as websites, text messaging, and telephone hotlines, to communicate information to children, parents/legal guardians, staff, etc.</p>		
<p>5. At the start of each day, and when necessary during program, hold small group orientations and trainings and demonstrations on behaviors and precautions children should abide by, to prevent the spread of COVID-19.</p>		
<p>6. In the event of a potential exposure to COVID-19 please take the following actions:</p> <ul style="list-style-type: none"> <li>a. Inform parents/legal guardians and affected employees on same day about any potential contact their children (or the staff) may have had with suspected or confirmed cases.</li> <li>b. Coordinate and work closely with DOH to respond to the event in a timely and appropriate manner.</li> <li>c. Group should be monitored but not isolated unless the child tests positive.</li> <li>d. Coordinate appropriate follow up measures with DOH in Miami Dade County</li> <li>e. Consider providing distance-learning opportunities/options for ill students</li> </ul>		
<p>7. If a person who has been in the program or facility tests positive:</p> <ul style="list-style-type: none"> <li>○ The facility must immediately report the incident, timing of infection and proposed remediation plan to relevant authorities including the DOH and the FL-DOH.</li> <li>○ Inform parents/legal guardians and affected employees on same day about any potential contact their children (or the staff) may have had with confirmed cases.</li> <li>○ Close off areas used by person who is sick.</li> <li>○ Open outside doors and windows to increase air circulation in the areas.</li> <li>○ Wait up to 24 hours or as long as possible before cleaning and disinfecting to allow respiratory droplets to settle before cleaning.</li> <li>○ Clean and disinfect all areas used by the person including common areas, bathrooms and offices.</li> </ul>		



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8. Use products from the list of those that are EPA-approved for use against the SARS-CoV 2 (virus that causes COVID-19)		
9. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).		
10. Child must provide a doctor’s note approving the child’s return to the program.		
<b>Communication</b>	<b>YES</b>	<b>NO</b>
1. Create communications strategies for staff, families, and children: Advance guidance to parents regarding how to prepare themselves and their children for what to expect; Create orientation messages and disseminate (i.e.: email, Zoom sessions, etc.) – i.e.: Healthy kids start at home.		
2. Ensure reliable contact information for incident notification to families and for inquiries by families.		
3. Provide family information on preventing COVID-19 including CDC guidance for large or extended families living in the same household.		
4. Provide Florida Department of Health guidance for High Risk individuals.		
5. Speak in age appropriate language to early elementary school-aged children, upper elementary and early middle school-aged children, and upper middle and high school-aged children.		
<b>Additional Guidelines for Specific Programs</b>		
Summer Camp Programs – Please refer to page 112 of the New Normal Guide-General Guidelines		
Early Childhood Programs – Please refer to pages 112-113 of the New Normal Guide -General Guidelines		
Sports Programs – Please refer to pages 113-114 of the New Normal Guide – General Guidelines		
Special Populations - Please refer to pages 114-115 of the New Normal Guide – General Guidelines		