

# Frequently Asked Questions (FAQs) for Child Care Facilities Licensed by the Kansas Department of Health and Environment (KDHE)

March 7, 2022

This frequently asked questions document is based on what is currently known about the spread and severity of coronavirus disease 2019 (COVID-19). Please check the KDHE Coronavirus (COVID-19) Resource Center (<https://www.coronavirus.kdheks.gov/>) periodically for updated information and guidance. [CDC Covid-19 Guidance](#) provides helpful recommendations related to increasing health and safety.

This document is intended for licensed child care facilities licensed by KDHE (day care homes, group day care homes, child care centers, preschools, school age programs, and drop in programs for school age children and youth). More information about KDHE Child Care Licensing is available online at <http://www.kdheks.gov/kidsnet>.

---

## **Q. Should staff wear masks when caring for children?** Updated 3/7/2022

A. As of February 25, 2022 the CDC launched: [“Your COVID-19 Community Level”](#) tool which provides basic guidance on understanding your community risk and your use of precautionary measures related to COVID-19. It is recommended that facilities use this guide as a measurement for implementing precautionary strategies such as use of a mask. People may choose to mask at any time.

- Low (green) - Wear a mask based on your personal preference, informed by your personal level of risk
- Medium (yellow)– If you are [at high risk for severe illness](#), talk to your healthcare provider about whether you need to wear a mask.
- High (red) Community Levels - Wear a [mask](#) indoors in public.
- Children ages 2 years and older can wear masks or respirators to protect themselves and others from COVID-19.
- Local health officials and employers can require the use of masks in child care settings.

## **Q. Why are some facilities closed and others open?**

A. While KDHE supports continued child care operations, the Department recognizes that some licensees may make the difficult decision to temporarily close. Factors to consider include continued access when facilities are in buildings that have closed; personal risk/risk to family members; low attendance or limited workforce; and concerns related to ability to maintain a safe and sanitary environment for children/staff. KDHE requests that licensees notify their local licensing surveyor when temporarily closing their facility and to let the surveyor know when the facility re-opens.

**Q. Am I required to close my facility?**

A. No. In the absence of more restrictive guidance from the state or local public health officer to prevent the spread of COVID-19, you are not required to close. However, you may choose to close based on your specific situation as stated above. Licensees are encouraged to remain in close communication with their local public health department as situations regarding COVID-19 are changing frequently. For additional information, refer to the **Interim Guidance for Child Care Facilities** (<https://www.coronavirus.kdheks.gov/227/Childcare-Foster-care>) found on the [KDHE COVID-19 Resource Center](#).

**Q. If I am temporarily closing my licensed facility due to COVID-19, do I need to notify anyone?**

A. Yes, please complete the short survey available on the [KDHE Child Care Licensing](#) homepage to notify KDHE of the temporary closure and provide this update to your local licensing surveyor. Be sure to complete the re-open survey, also available on the KDHE Child Care Licensing homepage, and notify your local licensing surveyor when you re-open.

**Q. My license is going to expire soon. Can I renew my license?**

A. Yes, timely renew your license to prevent licensing gaps or future delays. KDHE staff have continuously processed applications and issued renewal licenses.

**Q. Is there a grace period if I'm temporarily closed or for some other reason can't submit my renewal paperwork?**

A. KDHE license renewals must be submitted timely.

**Q. I am having trouble getting basic essential items needed to safely care for children (e.g. food, baby formula, toilet paper, cleaning products, wipes). Are there resources to help?**

A. We recognize that in some areas access to certain foods and supplies may be an ongoing issue. If required, KDHE will work with our statewide partners to identify needs and troubleshoot solutions. Many communities are already addressing the problem locally through partnerships with local public health and emergency managers as needed. Start by contacting your local licensing surveyor and resource and referral agency to see if they can assist you in connecting with local resources. Your local school district may also be able to connect you. The response to these needs may vary by community.

**Q. Our facility is located in a school that is closed. Can we continue to operate?**

A. If a licensed facility is located in a school building that is currently closed, you will need approval from the school district and the local public health officer in order to continue operating at that location. Programs are only authorized to operate at the location printed on the license.

**Q. Can a facility licensed to operate in a school building be granted an exception to operate at an alternate location?**

A. No. Care is only authorized to be provided at the location/address printed on the current license. There are no waivers or exceptions to processes or regulations in place related to the COVID-19 response. This includes issuing temporary licenses for an existing facility to operate in an alternate location.

**Q. May I limit the number of children enrolled to fewer than what is stated on my license?**

A. The total capacity, as stated on the license, is the maximum number of children that may be present at the facility at one time. Licensees may limit the number of children based on their own unique situation and ability to meet the health and safety needs of the children in care. This applies at all times.

**Q. May I continue to enroll new children as long as I don't exceed my licensed capacity?**

A. In the absence of more restrictive guidance from state or local health officials, new enrollment is permitted in accordance to the terms of the current license (ages of children, group sizes, total capacity, etc.).

**Q: Are facilities (centers and homes) limited to a capacity of 10?**

A. In the absence of more restrictive guidance from state or county public health officials, facilities may continue to operate within the terms of the current license. Local health officials may enforce more restrictive requirements to prevent the spread of COVID-19.

**Q. Can I get an exception to exceed my license capacity or for another reason?**

A. As a public health matter and in order to meet goals to reduce the spread of infection, following foundational health and safety requirements are protective measures for all--child care providers/staff, the children in care, and families (caregiver's and children's). KDHE will not be granting exceptions to exceed license capacity or eliminate other health and safety requirements related to the COVID-19 response.

**Q. I am hiring new employees. Is KDHE processing background check requests?**

A. Licensees must submit the necessary request for background checks for individuals working, regularly volunteering, or residing in the facility. Fingerprinting must be completed. All affiliates required to have a comprehensive background check are required to complete fingerprinting pursuant to K.S.A. 65-516. Find more information online here: <https://www.kdhe.ks.gov/281/Background-Check-Information>.

**Q. My program might be able to hire school district staff that aren't currently working. They have already been fingerprinted by the school district; will they need to be re-printed?**

A. New prints are required if staff previously working for school districts are transitioning to work in licensed child care facilities. The reason for this is that background check information cannot be shared between agencies or businesses (in this case, school and child care) and each may have specific prohibitions mandated by law. Keep in mind that individuals transferring from one licensed child care facility to another licensed facility would not need to be fingerprinted if they had previously completed/passed a fingerprint-based background check.

**Q. I am due to renew my First Aid and CPR training soon. Organizations may cancel in-person training right. What am I supposed to do?**

A: As of August 17, 2021, all requirements related to this training must be completed, remain current, and be available on file at the facility. If you have trouble accessing training to meet requirements, contact your local surveyor for recommendations.

**Q. I have applied for a license and face-to-face trainings needed to complete the initial training requirements are not available. What am I supposed to do?**

A. Many training partners, including [Child Care Aware of Kansas](#) and [Kansas Child Care Training Opportunities](#), are offering KDHE-approved initial health and safety training online.

**Q. I have not completed my annual training requirements due to lack of face-to-face training available right now. What am I supposed to do?**

A. Many training partners, including [Child Care Aware of Kansas](#) and [Kansas Child Care Training Opportunities](#), are offering KDHE-approved training online.

**Q. May facilities take precautions like asking parents to stay at the door when dropping off and picking up their child?**

A. Yes. In response to this outbreak, you may adopt social distancing practices intended to limit exposure to COVID-19. This may include asking parents to wait at the door or otherwise limit movement within the licensed premises. NOTE: Be sure that all parents are aware of your practice/procedure and that you apply the practice uniformly across all families. For additional information, please see the comprehensive guidance for licensed child care facilities available on the [KDHE COVID-19 Resource Center](#).

**Q. May a breastfeeding mom continue to come into the facility to nurse her infant?**

A. Yes. While limiting the number of individuals entering the facility is important for reducing the risk of spreading COVID-19, consideration should be given to policies and practices that continue to support breastfeeding mothers and their infants.

**Q. Is it OK to suspend the practice of children serving themselves at meals?**

A. Yes. Maximize physical distance as much as possible between people who are not fully vaccinated while eating (especially indoors). When possible, consider using

additional spaces for mealtime seating, including eating meals and snacks outdoors or in well-ventilated spaces whenever possible. Staff should continue to sit with children during meals and encourage socialization.

**Q.** Is it OK to suspend the practice of tooth brushing in child care centers?

A. Yes. To reduce the risk of infection it is permissible to temporarily discontinue the practice of children brushing their teeth after meals. Tooth brushing ability varies by age. Depending on the ages, the number of children in care, and the group setting the potential risk of infection may outweigh the benefits. *Caring for Our Children, National Health and Safety Performance Standards* (<https://nrckids.org/CFOC>) has nationally recognized Oral Health Standards that can provide guidance for those facilities that want to continue tooth brushing in a safe and sanitary manner and alternative practices for supporting children's oral health.

If a program chooses to toothbrush, because there is the possibility of children who are not vaccinated transmitting COVID-19 to others via salivary droplets during brushing, it is recommended for program staff helping children with brushing to be fully vaccinated against COVID-19 and wear a properly fitted mask covering their nose and mouth for additional protection. Toothbrushing can cause droplet spatter and potential contamination of surfaces and supplies, programs should follow these steps for [hygienic use and handling of toothbrushes in group settings](#).

**Q.** Is it OK to suspend fire and tornado drills because children/staff will be congregating in the hallways while exiting the building or might not be able to practice social distancing while in the basement during a tornado drill?

A. No. In the event of an emergency, children and staff must be prepared and know what to do. During an actual emergency protecting the children from the immediate risk of harm would outweigh the potential risk of infection. Review your current emergency preparedness plan and make necessary modifications to reduce potential risks during drills. For example, rather than a single drill for the entire facility, drills could be conducted one classroom/unit at a time. This is consistent with current recommendations that children be cared for in small stable, self-contained groups and that multiple classrooms/units don't co-mingle for meals or outdoor play. Drills don't need to be lengthy. The time spent in the confines of the designated shelter could be minimal. Additional information about emergency preparedness planning is available on the [KDHE Child Care Licensing](#) website.

**Q.** Should I be screening new children and new staff?

A. Yes. Strong practices for screening for signs and symptoms of illness, exclusion policies, and increased sanitation are essential. These provisions are in place in order to prevent the spread of COVID-19. When enrolling new children and hiring new staff, screen by asking appropriate questions. At a minimum, consider the following:

- Has there been any exposure to an individual diagnosed with COVID-19?

- Is anyone showing signs of illness and symptoms?
  - a fever greater than 100 degrees (F)
  - cough
  - shortness of breath
  - sudden loss of smell or taste
  - other signs of illness (headache, sore throat, general aches/pains, fatigue/weakness/extreme exhaustion)

NOTE: For more information, review the guidance for licensed child care facilities under the *Child Care and Foster Care* tab and under the *If You Think You Are Sick* tab.

**Q. What about children and staff already enrolled and in attendance? Should I be screening them?**

A. Screen children and staff for signs and symptoms as outlined above before daily admittance and monitor health throughout the day. In addition to asking the questions above, observe children and staff for signs of illness and check for fever. For more information, review the guidance for licensed child care facilities available on the [KDHE COVID-19 Resource Center](#) under the *Child Care and Foster Care* tab.

**Q: Is there anything specific I need to do depending on where a child lives (county) or where their parent works?**

A. In the absence of more restrictive guidance from state or county public health officials, there is nothing special a facility needs to do if children from other counties with confirmed cases are receiving care in a facility OR if children being served are those of health care/emergency workers. The same guidance for screening for signs and symptoms of illness and exclusion apply.

**Q. When should children and staff be excluded?**

A. First, review and update your current policies for the exclusion of sick children and staff as necessary. Determine how screenings will be conducted prior to entry and how health will be monitored throughout the day. Make sure that parents of children in care and staff are aware and follow the policies.

- Individuals who have a fever or other signs of illness should not be admitted.
  - Exclude individuals with a history of COVID-19 exposure (see above) and those showing signs of illness:
    - a fever greater than 100 degrees (F)
    - cough
    - shortness of breath
    - sudden loss of smell or taste
    - other signs of illness (headache, sore throat, general aches/pains, fatigue/weakness/extreme exhaustion)
- Children who are sick, with typical childhood illnesses (vomiting, rash, diarrhea, pink eye etc.), should be excluded in accordance with your existing policies.

- Current information about when individuals with symptoms consistent with COVID-19 should stay home is available on the [KDHE COVID-19 Resource Center](#) and on the [CDC COVID-19](#) websites.

**Q. What’s the difference between quarantine and isolation?**

A. [Quarantine](#) keeps someone who may have been exposed to COVID-19 away from others. It helps prevent the spread of disease before someone shows symptoms of illness. [Isolation](#) keeps someone who is infected with the virus away from others, even in their own home.

Individuals in quarantine should stay home, separate themselves from others, monitor their health and follow the directions from their local health department.

Individuals in isolation should stay home until it is safe to be around others. Individuals who are infected should separate themselves from others in the home, including staying in a separate room or area. To the extent possible, avoid sharing bathrooms and other common spaces.

Current recommendations for quarantine and isolation are available on the [KDHE COVID-19 Resource Center](#) and on the [CDC COVID-19](#) websites.

**Q. What should I do if someone in the facility (child, staff or resident of a family child care) is told to quarantine due to an exposure to COVID-19?**

A. [CDC](#) and [KDHE](#) guidelines recommend that individuals exposed to COVID-19 quarantine to reduce the risk of infection to others – [KDHE Guidance for Isolation & Quarantine](#).

- CDC Guidance Update: “COVID-19 Guidance for Operating Early Care and Education/Child Care Programs” [CDC ECE Guidance](#)
  - If staff and children ages 2 years and older are presumed or confirmed to have COVID-19, they should isolate for at least 5 full days. After isolating for 5 days, if they are asymptomatic or their symptoms are resolving (without fever for 24 hours), they can return to the ECE program and wear a well-fitting mask consistently to minimize the risk of infecting others. Similarly, staff and children who were close contacts but not up to date with COVID-19 vaccinations or did not have confirmed COVID-19 in the past 90 days should quarantine for 5 days and then return to ECE and wear a well-fitting mask consistently for an additional 5 days. For staff and children who cannot wear a mask (including all children under 2 years of age), the safest option is to isolate or quarantine for 10 full days. ECE programs can consider multiple factors to determine isolation and quarantine policies.

Individuals told to quarantine should remain at home and not attend work, school or other settings during the quarantine period.

- To the extent possible, distance yourself from others in the home.
- Monitor yourself for symptoms.
- Notify your health care provider or local health department if you develop symptoms, have questions regarding testing or when you

may resume normal activities.

**Q. What should I do if an individual with COVID-19 has been in the facility?**

A. As of February 1, 2022 Covid-19 contact outreach and monitoring, otherwise known as contact tracing, operations will be discontinued at KDHE. KDHE contact tracing staff will be reassigned to contact investigations. Individuals who are positive for COVID-19 will now be responsible for letting their close contacts know about their potential exposure. Additionally, if the individual with COVID-19 exposed others at high-risk settings such as schools, correctional facilities, long-term care facilities, homeless shelters, daycares and churches, KDHE or the local health department will notify the setting. **The setting will be responsible for identifying close contacts and notifying them about the potential exposure.**

**Q. How soon will it be before COVID-19 vaccinations are available to child care providers?**

A. Anyone 5 and older is eligible to receive the vaccine. The Kansas COVID-19 Vaccination Plan and weekly updates are available at [COVID-19 Vaccine | KDHE COVID-19](#). The website includes information about safety, availability/access, and FAQs. Information from the CDC is available at [COVID-19 Vaccination | CDC](#). Child care programs can [promote vaccinations](#) by encouraging staff and families, including extended family members that have frequent contact with children in the program, to get vaccinated.

**Q. Where can I find information about cleaning and disinfection procedures to reduce the spread of COVID-19, including a list of approved cleaning products?**

A. To reduce the spread of illnesses, including COVID-19, it is important to intensify cleaning and disinfecting of surfaces and frequently touched items, including but not limited to doorknobs, light switches, handrails, toys, furnishings, playground structures, and other frequently touched or shared items. In addition to the guidance for licensed child care facilities and the *COVID-19 Cleaning & Disinfection Guidance: Non-Healthcare Settings* available on the [KDHE COVID-19 Resource Center](#), *Caring for Our Children, National Health and Safety Performance standards*(<https://nrckids.org/CFOC>) has nationally recognized standards for cleaning, sanitizing, and disinfection of child care facilities. The CDC has detailed information at [Cleaning and Disinfecting](#) and a list of EPA products is available at <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>. When choosing products be sure to read the label and carefully follow directions.

**Q. Is it OK to use bleach to sanitize or disinfect?**

A. Yes, diluted bleach may be used. However, before purchasing bleach or a bleach product read the label. Some bleaches, for example Splash-less®, are only intended for laundry use, not for sanitizing or disinfecting.

**Q. What if a parent is looking for child care and I do not have any openings?**

A. Refer parents to the Child Care Aware of Kansas website (<https://www.ks.childcareaware.org/>) or toll free number 877.678.2548 for assistance with searching for child care in their area. KDHE has an online information system that serves as a tool to support families in making informed child care choices and can be used to review compliance history of a current or potential child care provider. The online tool [Inspection Results](#) is an important step to verifying that a facility is licensed and provides compliance history for parents and guardians.

**Q. May I continue to charge fees if I am closed or if a child no longer attends due to COVID-19 concerns or stay at home orders (isolation or quarantine)?**

A. Providers are individual operators/licensees and set their own rates and policies regarding fee payments. KDHE and local public health officials have no authority to set rates or limits on fees.

**Q. Are there financial supports for child care facilities to assist with loss of income due to COVID-19?**

A. Recent federal legislation provides several forms of economic relief for workers and small businesses, including child care.

- Kansas Department of Labor <https://www.dol.ks.gov/covid19response> has information for workers and employers.
- Child Care Aware of Kansas <https://ks.childcareaware.org/grants/> offers sustainability and impact grants for child care facilities, in partnership with KDHE and DCF.
- DCF's Hero Relief Program <http://ksherorelief.com/> offers child care assistance.

**Q. I have questions regarding the Department for Children and Families child care subsidy program policies. Who should I contact?**

A. Please contact your local DCF Provider Enrollment staff or call 1.822.765.2003.

**Q. Have there been changes to the Child and Adult Care Food Program (CACFP) due to COVID-19?**

A. The CACFP program utilized by many licensed child care facilities is administered through the Kansas State Department of Education (KSDE). Current information about the program, including guidance during the COVID-19 pandemic, is available at [https://www.kn-eat.org/CACFP/CACFP\\_Menu/CACFP\\_What's\\_New.html](https://www.kn-eat.org/CACFP/CACFP_Menu/CACFP_What's_New.html).

**Q. How do I contact my local child care licensing surveyor?**

A. For more information about local licensing contacts, visit the [Local County Contacts](#) link.

**Q. I am not currently licensed. Can I get an emergency or temporary license?**

A. There are no waivers or exceptions to processes or regulations in place related to COVID-19 response. This includes issuing a temporary license. For more information about applying to become licensed, contact your local licensing surveyor.

to start the process. For more information about local licensing contacts, visit the [Local County Contacts](#) link. NOTE: a license is not required for 1) children receiving care in their own home; or 2) children cared for by relatives. Additionally, anyone (friend, neighbor, teacher not working) can care for up to 2 children for up to 20 hours a week (combined) without a license.