November 9, 2020

Dear Child Care Providers,

To help protect the health and safety of our child care community, the Child Care Licensing program in the Department of Health announces the following Phase 4, Temporary Emergency Conditions for child care providers. These changes will apply until further notice from the Utah Department of Health.

Effective November 10, 2020, any child care provider must adhere to the following Phase 4, Temporary Emergency Conditions, in addition to the health and safety rules for each facility type, in order to stay open for business:

Emergency Conditions of Operation

1. Each individual three years old and older present during child care hours must wear a face mask while at the facility. This includes any household members in areas where children are in care.
   - Face masks must NOT be worn by children younger than two, anyone who has trouble breathing, sleeping children, and anyone who is unconscious, incapacitated, or unable to remove a mask without assistance.
   - Consider special precautions and adaptations for children and staff with severe cognitive or respiratory impairments and those who are immunocompromised.
   - Face shields are not a substitute for masks. Those who choose to wear a face shield must also wear a mask.
   - Face masks can be temporarily removed during feeding and eating times.

2. For center providers, with the exception of school-age children, providers must restrict indoor groups of people to 20 or less. These groups include children and caregivers. Providers must ensure that each group of children has the appropriate caregiver-to-child ratio. When every child in an indoor group is school-age, providers may have up to 20 children and one caregiver in the group.

3. If their approved capacity is for more than 20 children, center providers can allow more than one group of people in the facility only if each group is in a separate room with full, solid walls that are higher than six feet.

4. Center providers must not allow groups to gather together while indoors, even for
short times or special activities.

5. Outdoor play should be staggered in a way that allows for groups not to be combined.

6. For outdoor activities, providers may allow more than one group of children as long as their outdoor square footage is enough for the number of children to be outside and social distance is maintained between groups. The number of people including caregivers cannot exceed 50, and providers must ensure that each group of children has the appropriate caregiver-to-child ratio.

7. Each provider must ensure that staff, children, household members, and visitors are screened for fever, cough, trouble breathing, sore throat, sudden change in taste or smell, and muscle aches and pains at the beginning of the day and upon arrival, and not allow any individuals with COVID-19 related symptoms to enter the facility.

8. If there is a confirmed case of COVID-19 at the facility, providers must consult with their local health department and follow their instructions.

9. Providers must notify their licensor when there is a positive COVID-19 case at their facility.

10. Anyone who has tested positive for COVID-19 must complete the required quarantine and be COVID-19 symptom free before re-entering the facility.

11. Each provider must ensure that anyone coming into the facility wash their hands with soap and running water or alcohol-based hand sanitizer before touching any facility surface.

12. Each provider must restrict off-site activities to places or environments where social distance and proper cleaning practices can be controlled. Public playgrounds must be avoided. If using public restrooms, the provider must ensure that surfaces are clean before children use them and that handwashing with soap and water or hand sanitizer is available to children and staff.

13. Each provider must ensure that surfaces, items, and areas that are used and touched often are cleaned and sanitized at least daily and before a new group uses the room.

14. Each provider must be in compliance with any applicable local law and ordinance in order to remain open.

15. Providers must close temporarily or permanently if they cannot comply with any of the above-listed, temporary emergency conditions. Providers who decide to close temporarily do not lose their license, unless they decide to close permanently.

Please read any updates about the development of this temporary situation at jobs.utah.gov/covid19 and at coronavirus.utah.gov.

We appreciate your efforts and the heroic way you have responded to this challenging circumstances. Thank you for helping us protect the health and safety of our Utah children.

Simon Bolivar
Child Care Licensing Administrator
Utah Department of Health
sbolivar@utah.gov