Coronavirus (COVID-19) FAQ

Section A: Status of Child Care Providers

1. Are child care centers mandated to be closed?
Child care has been deemed an essential function in the Governor’s Executive Order 7H. Therefore, the state is not mandating that child care facilities close.

We have seen many programs and providers close to contribute to social distancing, and due to a reduction in enrollments, staffing concerns, and local Health District guidance. The OEC has issued guidance about group size, health screening, and health and sanitation practices.

2. Child care facilities are considered essential businesses. Does that mean we need to remain open?
Our governor is not ordering any programs to stay open. We are aware that many have closed. We are grateful for programs that can remain open to serve essential workers right now. But, we understand this difficult decision will be made at the provider level. Individual programs and communities must determine what is best for them based on Centers for Disease Control and Prevention and local guidance.

Section B: Care 4 Kids

1. Will providers continue to receive payments for families enrolled in Care4Kids during the time they are closed or absent?
For the month of March, child care providers will receive payment as usual based on enrollment rather than actual attendance. We are working with the Office of Policy & Management on solutions for future payments. We are working with the federal Administration for Children and Families (ACF) to determine allowable waivers and expenses.

We recognize the importance of having enough providers stay open to serve essential workers. Click here for the list of essential workers. This list includes many more jobs than just health care workers and first responders.

2. As a parent, do I lose my Care 4 Kids status if I decide to keep my child home?
For the month of March, families enrolled in Care 4 Kids will retain their status and receive payment. We are working with the Office of Policy & Management on solutions for future payments. We are working with the federal Administration for Children and Families (ACF) to determine allowable waivers and expenses.
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Section C: Family Child Care Homes

1. What is happening with family child care home providers?
   The OEC is committed to all providers, and family child care homes are vitally important at this time. Family child care home providers are included in all of our discussions and plans and answers to questions Section A: 1 & 2 above apply to family child care. These facilities should follow OEC licensing requirements, particularly compliance with ratios. They should follow CDC guidance e.g., taking temperatures when children arrive, cleaning surfaces at least daily, and increasing washing your and the child’s hands for at least 20 seconds with soap.

2. Center-based and family child care homes need cleaning supplies. Can OEC help?
   Our top priority is keeping facilities, you, and the children in your care clean and safe. The OEC is working through the state’s Emergency Operations Center to secure some supplies to keep you and the children you care for safe and healthy.

Section D: Parent Concerns

1. If my child care provider is now closed, but I still have to work, what do I do with my child?
   We understand the concern around care for your child while you continue to work. If working from home and caring for your child is not feasible, please look to a trusted family member, friend, or neighbor who is not in a high-risk health category.

2. If I am an essential worker and do not have child care, how do I find a facility that is open?
   Essential workers who are not able to find care with trusted family members, friends or neighbors, may call 2-1-1 Child Care at 800-505-1000 to help find open and available spaces near your work or home. 2-1-1 Child Care is constantly surveying programs to know where there are openings for new children.

   If I am a first responder or health care worker, how do I find child care?
   Healthcare workers and first responders who are not able to find trusted family, friends or neighbors for child care may call the 2-1-1 dedicated number (860)756-0864 for support. We are working in close collaboration with hospitals to provide child care support to their employees.

3. In the event that my child care facility closes, are families still charged for enrollment?
   Child care programs are small businesses in our communities. Each business has policies about tuition payments. In most cases, they address issues of program closure. For example, most center-based programs require families to pay when a family goes on vacation or if there is a snow day. This is often part of their business model. Programs do not lay off teachers when a family takes a week off, so tuition is critical to sustain a business.

   Please consult the program’s policy manual. Each licensed program has the responsibility to provide families with a payment policy per regulations.
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Section E: Provider Concerns

1. If our child care facility closes, can staff apply for unemployment benefits? What if we are an in-home facility?
   What if we are an in-home facility? Child care providers can file for unemployment if your facility provides you with a lay-off notice. You can file for unemployment by clicking here.

2. Should programs charge families fees when they close or when families choose to keep children home?
   These decisions will be made at the provider level. See question 8.

Section F: Essential Workers/Non-Essential Workers

1. Why are 26 new child care facilities opening?
   These are NOT NEW child care facilities. OEC facilitated partnerships between currently licensed child care facilities and hospitals to ensure hospital staff have child care close to their work. It is critically important that our healthcare workers have the child care they need so they can take care of the rest of us.

2. How can current providers become part of the 26 child care providers being opened for essential workers?
   The OEC is working with current facilities and provider partners to ensure hospital staff have child care. Some hospitals have existing relationships with providers and we are honoring their relationships as a first step. Programs are then being identified and prioritized by their proximity to the hospital (within a 3 mile radius), their current licensed space available, and licensing status (have no pending enforcement actions), and their ability to serve three age groups. We are contacting child care programs that have closed and may be willing to reopen specifically to provide child care for healthcare workers, or currently open programs that can dedicate specific classrooms for this effort.

3. What funding is being used to pay for the emergency child care?
   CT received a generous donation from Dalio Philanthropies to support this effort.

4. How many children and families are going to be served with emergency child care?
   The model funds up to three classrooms: 1 classroom of no more than 6 infants and toddlers, 1 classroom of no more than 10 preschool-age children, and 1 classroom of no more than 10 school-age children. These classrooms are only for the children of hospital staff at this time.

5. How do we know that those families who really need the care are the ones receiving it?
   The OEC is working very closely with the HR departments at the hospitals. In order to determine the need for child care programming, hospital staff are being directed by their HR department to first make every effort to:
   - Utilize their current child care arrangement
   - Look to trusted family members, friends and neighbors for child care
   - Call 211 to ask for assistance in finding child care
   - 211 has set up a dedicated line for health care workers and first responders. (860) 756-0864
   - 211 is not directing employees to free child care. It is directing them to open spaces in programs near their home or the hospital.