

## Ten Principles for Reopening ECE Programs

Richard Fiene, Ph.D.

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- 1) It appears that "distancing" is a key element in the spread of the virus. Square footage, staff-child-ratio and group size are the three standards/regulations that probably have the most impact on "distancing". Chances are the fewer staff and children in place together in the largest space will help to mitigate the spread of the virus. We need to move our "Do No Harm" to "Mitigated Unavoidable Risks" as our safety philosophy during this pandemic. Square footage, staff-child-ratio, and group size form a "Prevention Triangle" in attempting to keep kids safe during a pandemic in practicing "distancing". It is not perfect but it may help to prevent some cases. We know that kids don't social distance well, so we need to prepare the environment to help this to happen or at least increase the chances that it will occur. It will be more about "reducing risks" rather than "preventing risks".
- 2) Keep group sizes to 10 or fewer children.
- 3) Increase square footage to the greatest possible level. This could be done by limiting the number of children at a particular site - think in terms of a family child care home model but having it at a child care center. Use the group size as a cohort and do the introduction of only one cohort at a time within a center based program. Only use self-contained classrooms. The largest classroom that is available at the site, it will be easier for supervision.
- 4) Start with the older children, so that the ratio of staff to children can be maintained at 10-1 or 8-1 safely as per *Caring for Our Children* standards. Younger children who will require additional staff will be introduced after we see how well the older children with one adult do.
- 5) Limit the number of hours in keeping the facility open. It is all about contact hours and exposure times.
- 6) In the classroom, spread the group out by placing activity areas/learning centers as far apart as possible. Expand the group. Design developmentally appropriate activities that can incorporate masks and distancing. Engage in more solitary or parallel play rather than group activities, just like toddlers do naturally in their developmental play patterns. Mix up indoor and outdoor activities. If there is only one group/cohort at each center there will be no need to worry about mixing of different groups.
- 7) Have teachers practice non-developmentally appropriate interactions by practicing safe distancing and not getting eye to eye with the child when interacting. This will help with mitigating the spread of the virus so that if the child sneezes it will not be close to the teacher's face. Along with masks, issue smocks for each teacher to wear, they will be easier to wash if they do become infected.
- 8) Have the state licensing agency keep track of how programs are doing by using Fiene's "Contact Hour Methodology" to determine any overpopulation situations. Also, it could be an excellent tracking tool for future planning during a pandemic in answering questions about potential thresholds when it comes to the amount of contact hours between staff and children. Go to <http://rikoinstitute.com> for details.
- 9) By keeping group sizes to 10 or less it would be easier to transport the children because of the smaller numbers and practicing distancing in a van.
- 10) After a month or so and there are no outbreaks of the virus and staff are getting more comfortable & less stressed, add another cohort to the center in a separate self-contained classroom and follow the same steps as listed above.