

Considerations for Child Care Guidance¹

LET'S GET OUTSIDE!

Reduce risk
of disease
and improve
health during
COVID-19—
and beyond

This document offers considerations to agencies, including state, county, and municipal regulators, and quality improvement assessors, offering guidance for the operation of child care centers during COVID-19, with a focus on keeping children healthy by encouraging and supporting increased time outside.

Risk of spreading COVID-19 may be reduced if children and adults spend more time outside. The American Academy of Pediatrics (AAP) has issued guidance encouraging time outdoors to mitigate transmission of the virus in child care settings. Studies suggest that exposure to sunlight rapidly deactivates the virus in the air and on surfaces. Open-air spaces are less likely to concentrate the virus than confined indoor spaces and outdoor moving air disperses the virus, lowering the risk of transmission.

Decades of research also show that spending time outside in nature supports healthy child development by increasing physical activity, supporting healthy eating through hands-on gardening, reducing stress, and enhancing social-emotional development. For evidence supporting enhanced outdoor spaces at child care centers, see [Benefits of Engaging Children with Nature](#) and this [Research Brief](#).

The COVID-19 pandemic has highlighted the potential health benefits of regular time outside, particularly as child care centers seek to reduce disease transmission and keep businesses viable. Considerations are based on a review of COVID-related guidance for child care from the Centers for Disease Control and Prevention (CDC), AAP guidance for child care and preschools, a review of state COVID-19 guidance from 18 states, and interviews with selected child care regulators, advocates, and public health experts. These suggestions may support the development of more explicit guidance for using outdoor spaces at child care centers as an immediate means of mitigating COVID-19 transmission and in recognition of the long-term benefits of spending time outdoors.

Encourage Child Care Providers to Spend Time Outdoors

To date, state child care guidance related to COVID-19 has mainly focused on health and safety issues related to indoor spaces of child care facilities. While this is critical, current evidence suggests that increasing child care time outside is a viable strategy to reduce the risk of virus transmission. AAP's COVID-19-related guidance notes "indoor spaces are more risky than outdoor spaces," and outdoors "can and should be used to increase the space ... for each child." AAP's advice for preschools goes even farther, describing outdoors as a high priority strategy because it is hard to perfectly execute mask wearing and social distancing with younger age groups. Further, CDC's COVID-19 guidance for children states that "indoor spaces are more risky than outdoor spaces, where it might be harder to keep children apart and there is less ventilation."

Based on prevailing public health guidance, some states are currently encouraging more time outdoors during COVID-19, including [Oregon](#), [Washington](#), [New Mexico](#), [Kansas](#), [California](#), and [Colorado](#). Supportive guidance from state regulatory agencies is a crucial tool to help child care providers feel confident in moving activities substantially outdoors during the pandemic. Therefore, regulators may consider incorporating language in official guidance documents to codify the importance of the outdoors as a COVID-19 mitigation strategy. Guidance may be as direct as "Increase time spent outdoors," as in Colorado, or include stronger encouragement such as that provided by Kansas to "consider moving the majority of indoor learning activities outdoors." Creating online, state-sanctioned resources

¹ This document is produced by the National Wildlife Federation's Early Childhood Health Outdoors (ECHO) program and North Carolina State University's Natural Learning Initiative (NLI). It is one of a series, targeting child care providers and regulators respectively, addressing COVID-19 transmission reduction in child care facilities by increasing time outside. A third document presents the case for outside time as a broad strategy for reducing risk of COVID-19 spread for children and accompanying adults.

specifically focused on outdoor use can further justify children being outside for a substantial portion of the day. This may be as simple as a declaration of the positive health impacts of increasing time outside or as complete as Washington’s [6-page guidance document](#) for temporary outside programs authorized during the pandemic.

As regulators develop guidance to support time outdoors as a transmission reduction strategy in child care, the CDC, AAP, state health agencies, and other prominent public health institutions can play a pivotal role in explicitly supporting more time outdoors as a COVID-19 transmission reduction strategy.

Facilitate the Healthy Use of Child Care Outdoor Settings

The following suggestions may aid child care regulatory agencies in providing guidance that supports outdoor play and learning while reducing health risks. By considering the suggestions below, regulators may facilitate more practical, frequent, and comfortable outdoor activities at child care centers, while continuing to follow prevailing COVID-19 public health recommendations.

Mask use. The use of masks/face coverings should follow local and state guidance and regulations. For child care providers, there is general consensus about the importance of using masks, which may be reflected in [state policy guidance](#). Currently, there is no consensus from public health officials on guidance for mask use in young children (birth to 8), with the exception of clear consensus to *NOT use face coverings on babies and children under age two because of the danger of suffocation*. While the CDC encourages the use of masks on younger children “[when feasible](#),” they also [recognize](#) that “younger children (e.g.,

preschool or early elementary aged) may be unable to wear a mask properly, particularly for an extended period.” State child care regulators and providers would benefit from more clarity from public health experts on mask-wearing for children age two and up, in this case in relation to the use of outdoor settings where open air and UV rays from [sunlight](#) may reduce risk of COVID-19 transmission. In the meantime, regulators may refer to the best state and national public health guidance on mask use, while encouraging compatible strategies to reduce COVID-19 transmission described in this resource.

Create groupings or “cohorts.” Both AAP and CDC suggest establishing stable groups of children and adult(s), called cohorts, as a strategy to reduce the risk of community spread originating from child care facilities. As [AAP](#) comments, “The best strategy is keeping smaller class ratios and cohort grouping throughout the day.” The [CDC](#) recommends: “If possible, child care classes should include the same group each day, and the same child care providers should remain with the same group each day.” While there is not consensus on the need for physical distancing of individual children within cohorts, child care regulators can at least encourage the use of a cohort approach to prevent mixing between established groups while adhering to local or state guidelines for physical distancing, masks, and sanitation.

Regulators may recommend a variety of strategies that encourage providers to utilize the outdoors and maintain separation *between cohorts*. One strategy is to encourage providers to maintain physical separation of 6 feet between cohorts when outside, as is recommended in [Washington State](#). If there is adequate space in outdoor settings, encourage providers to subdivide space to include several ‘learning settings’ where multiple cohorts may spend time



Linear pollinator garden of perennial flowering plants offers endless fascination and motivation to learn for young children.—NLI

outside simultaneously while maintaining physical distance. These learning settings, which could each serve a distinct cohort at a particular time, can include lawns, outdoor classrooms, sand play, water play, vegetable gardens, or many other [activity setting ideas](#). To facilitate cohort separation and create distinct settings, outdoor space may be subdivided through physical or visual partitions (e.g., transparent shower curtains, fabric, snow fencing). Colored T-shirts or existing classroom names could further help children distinguish groups and help providers prevent cohort mixing.

Managing children’s movement outdoors. To facilitate cohort separation, regulators can encourage providers to establish easy-to-follow routes using physical or visual partitions (e.g., cones, flagging) to define movement between learning settings along designated pathways that are wide enough for groups to move quickly, in one direction. Adjustments to physical outdoor space may be complemented by establishing processes and timing for entering and exiting buildings and traveling between settings, thereby allowing providers to spend more time outside safely while minimizing risk of cohort mixing. By further subdividing the outdoor space with staggered timing, the CDC recommendation for “[staggering playground times](#)” can be followed while still encouraging more frequent use of the outdoors.

Handwashing stations. The CDC stresses the importance of handwashing with soap and potable running water, and recommends soap and water over the use of hand sanitizer. Regulators can encourage providers to set up outdoor handwashing stations including a large water dispenser (5- or 10-gallon) with soap and paper towels located nearby, with regular handwashing routines (e.g., when moving between learning settings). Hand hygiene advice is available from the [CDC](#).

Outdoor sanitation and disinfection. The CDC’s child care guidance for materials that may be used in outdoor settings states: “Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games” and “Toys that cannot be cleaned and sanitized should not be used.” However, there is still an open question about the use of natural materials such as logs, sticks, sand, and rocks that may be of lower risk. For example, to avoid confusion about sand play, the CDC accepts the presence of sand and requires washing hands after use but not disinfection of sand. Neither does the [CDC](#) recommend disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand). Natural materials may be of lesser concern for virus transmission overall, but additional guidance from public health experts regarding expectations on the cleaning of natural play materials is needed.



For outdoor play equipment, the CDC indicates that [outdoor play areas](#) generally require routine cleaning, but do *not* require disinfection. Cleaning efforts should be focused on plastic or metal high-touch surfaces where hands frequently make direct contact, like grab bars and railings. The CDC recognizes that it is not practical to encourage or require disinfection of entire playground structures or sidewalks.

Encourage Outdoor Enhancements

If existing child care outdoor spaces are to be used for a longer portion of the day, they need to be healthy, comfortable, and engaging. To achieve this, regulatory agencies can encourage creative use of outdoor space that reduces health risks and encourages more time spent outside.

Low-cost enhancements for healthy play and learning.

Outdoor spaces need to provide a variety of opportunities for play and learning to keep children (and providers) creatively engaged outside day after day. State child care agencies may collaborate to develop or share resources that encourage short-term, low-cost, seasonally-meaningful outdoor enhancements that increase the diversity of play and learning opportunities, while also clarifying risks that need to be managed. [ECHO](#) and [NLI](#) have a variety of resources available to stimulate creative use of outdoor spaces and foster spontaneous, imaginative play and learning activities, making time outside more rich and inviting.

When state child care agencies consider whether to deter or prohibit the use of certain types of outdoor settings in areas with high community COVID-19 transmission, they may first consider whether there are strategies to manage or repurpose these features and minimize risks while still providing opportunities for play and learning. For example, if playground equipment use is prohibited, repurposing surrounding use zones for other purposes may be considered rather than entirely closing off areas. If prohibitions are made, they should be specific to avoid generalizations that may limit safe outdoor activity. For

example, while additional research is needed regarding the transmission of the virus through water, the CDC has recommended that all activities involving standing water be eliminated at child care centers. Unfortunately, that has led some centers to eliminate all water play, including sprinklers and ‘mud kitchens.’ More specific guidance on water play would be beneficial, especially during hot summer months.

Shade/rain cover. Sunlight can play an important role in rapidly deactivating the virus that causes COVID-19—both in the air and on surfaces. Managing spaces to encourage sunlight and reduce disease viability, especially in high-touch surfaces, may be an effective strategy. However, regulators and providers are aware that over-exposure to UV light is a health risk, so shade is a critical consideration. State regulators not already requiring a percentage of outdoor areas to be covered by tree canopy or shade structures may consider these requirements to facilitate more time outdoors. Cost-effective, temporary shade structures may include tents, sails, umbrellas, and pergolas, with trees serving as a preferred long-term solution. The use of covered outdoor areas with open sides for ventilation might be specifically encouraged when existing child care facilities do not have the ability to open windows, providing an additional option for children to be brought outdoors in inclement weather.

Programming for healthy play and learning. Providers may need programming support as the amount of time spent outdoors with children increases and some may be unfamiliar with ways to manage outdoor spaces and program activities to encourage children’s play and learning. State child care agencies could work in collaboration with community colleges and nonprofit organizations to incentivize providers to take online training [courses](#) and [webinars](#) in early childhood outdoor play and learning. State regulators and early childhood organizations may support and advertise opportunities through existing channels.

Explore Expansion Beyond Licensed Outdoor Areas

If child care facilities seek additional outdoor space to safely and comfortably accommodate multiple cohorts of children, regulators can work with providers and across sectors to enable child care activities outdoors beyond the traditional licensed space during the pandemic using the following strategies.

Repurposed contiguous space. If supported by state regulatory agencies, providers may think creatively about areas adjacent to licensed outdoor spaces, which may be enclosed and repurposed temporarily. Examples include areas in front of centers, adjacent wooded spaces or fields, and, possibly as a last resort, a fenced-off section of the

parking area. Any such plan, even just beyond the licensed boundary, may be considered a “field trip” requiring parental permission. State regulators may also encourage development of experimental, COVID-responsive play areas emphasizing nature play. For example, Washington State is issuing emergency waivers to child care licensing requirements for “[outdoor nature-based emergency programming](#)” created as a response to COVID-19.

Innovative ideas for urban locations. Where outdoor space is really tight, child care agencies and providers may consider working with municipal agencies to repurpose and manage street infrastructure adjacent to or in the vicinity of child care facilities as a strategy to create additional outdoor space. Solutions include play streets ([more than a 100-year history in U.S. cities](#)), [parklets](#), and many innovations described in [Designing Streets for Kids](#), 2020 ([free download](#)).

Walking field trips. Building on longstanding field trip traditions, regulators may work across sectors to further enable outdoor activities beyond the licensed space, as feasible and with child safety as the priority. While regulators may consider canceling or prohibiting field trips that mix cohorts or involve assisted transportation (e.g., vehicles or ‘buggies’), guidance may explicitly encourage pedestrian excursions in the vicinity of child care facilities limited to a single cohort. Trips may include regular visits to an open space near the child care facility, or visits to uncrowded parks, greenways, community gardens, or cemeteries. Children may be taken on exploratory neighborhood ‘safaris’ within residential and commercial areas with proper regulatory guidance.

Promote Outdoor Strategies for Kids and Providers

Child care agencies that issue COVID-19 guidance for providers may play a critical role in promoting more time outside as a strategy to reduce the risk of COVID-19, while supporting healthy child development. Use this document to inform guidance for providers. We invite you to share your progress with us (echo@nwf.org and [@naturalearning](#)).

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