

[UPDATED 08/18/20]: School-Age Care & Child Care Programs in Schools

Equitable and affordable school-age child care programs are essential to support working families and provide enrichment and care for students. Over one hundred thousand students across the state rely on school-based child care programs as their trusted child care provider.

Care for school-aged children, especially those children of workers in critical sectors, will continue to be crucial for frontline workers to continue to confront the pandemic. The state will continue to work with child care providers, school-age programs, schools, and all other child care settings to prioritize this need.

Executive Order 20-82 indicates that a school district or charter school that operates a hybrid or distance learning model "must provide school-aged care for Eligible Children at no cost during the time those children are not receiving instruction in the school building during regular school hours."

This school-age care must be provided for district or school-enrolled school-age children age 12 and under who are children of Tier I critical workers. Children of Tier I workers only will be cared for at no cost during the typical school hours.

The school-age care for children of critical workers is intended for extreme circumstances in which no parent or guardian is at home, due to employment as a critical worker.

Tier I industries (see Appendix A for definitions of each industry):

- Healthcare and public health
- Law enforcement, public safety and first responders
- Food and agriculture
- Judicial Branch (essential services)
- National Guard (activated under a Governor Executive Order)
- Educators in pre-K through grade 12 settings
- School staff providing instruction or caring for children of critical workers
- Child care and school-age care providers

During a hybrid or distance learning model when students are not receiving in-person instruction, districts and charter schools should carefully consider their local community needs related to care for children of critical workers beyond Tier I areas. Based on community workforce needs and local staffing and space considerations, school districts and charter schools may provide care for children of other critical workers and if capacity is limited prioritize enrollment for these families in such programs.

Fees can be charged for care for children beyond Tier I workers or for any care provided beyond the typical school hours based on your district's current fee-based model and as capacity, staff and facilities allow given that you must follow MDH health and safety regulations. If the district has capacity to serve more than the children of Tier I workers during the school day during hybrid or distance learning models, this should be done on a sliding fee basis, and utilizing available funding to help make it affordable for families. Priority should be given to those most underserved families in your communities.

Executive Order 20-82 indicates that school districts and charter schools may continue to run early childhood programs including community education programs, and may charge fees on its normal sliding fee scale. School districts and charter schools are also encouraged to provide before and after school care and may charge fees on its normal sliding fee scale.

Schools are not required to provide this care during previously scheduled breaks reflected on a school-board approved calendar.

In providing this care, schools must follow Public Health Guidelines. Programming through community education or other programs may be available to any child as would typically be offered by a district as long as it meets public health guidance. Nothing prevents school districts and charter schools from providing care to children outside of those far working in critical sectors.

Consistent with child care in previous years, this care may be provided to children of any age as long as districts and charter school meet licensing and other regulatory requirements. In addition, districts and charter schools may continue to provide child care for families participating in the Child Care Assistance Program (CCAP) at a program licensed or certified by the Department of Human Services. For programs that are exempt from licensure and are not currently certified to accept CCAP payments, we encourage them to get certified. Certification is required to accept CCAP and helps protect the health and safety of children by requiring that providers meet minimum standards for care and physical environment. In June the legislature passed and the Governor signed into law an increase to CCAP reimbursement rates for providers that will go into effect on September 21, 2020, and will likely increase the amount certified centers will be eligible to receive for children accessing CCAP. For more information on the certification process and the application for certification, visit [this DHS website](https://www.dhs.gov/childcare).

For additional information about child care during the COVID-19 pandemic, visit mn.gov/childcare.

Additionally, districts may have specific questions on how they operationalize greater need for school-age care in Scenario 2, hybrid learning with strict social distancing and capacity limits or Scenario 3, distance learning only. In Scenario 2 and 3, the need for school-age care for both essential workers, and for families that are unable to keep their children home during distance learning periods may be provided in a variety of settings, including school buildings and by current school-based care staff. Districts should consider how, for whom and for what services they provide and staff, what space they use, and how costs will be covered in Scenarios 2 and 3.

Important Considerations

Staffing School-based Child Care

In addition to general supervision and ensuring the health and safety of students, school districts and charter schools should include school-based care as a key component of their plans. Districts and charters should be prepared to increase school-age staff in training and provide access to technology including help desk services that will be made available to students. Paraprofessional staff should be considered as a support to learning in the school-age care setting, though it is understood they may not be available due to their caseloads and funding sources.

Coordination with Child Care in Community

We strongly encourage district and charter school leaders to reach out to their community child care providers and partner with them to ensure child care needs are met in each community. Coordination for services between child care and district/charter support staff should be considered when possible as means to support lower ratios and academic distance learning support. When implementing a Hybrid Model coordination around cohorting and consistent groups of children help to protect the safety of children, staff, and communities so as to minimize intermixing across settings. Accomplishing these goals necessitates community coordination.

Facilities

Depending on needs of local communities, districts/charters should consider other available space that could be off-site to child and student programs, including school-age care, child care programs, and Head Start, among others, within a district that meets MDH health and safety guidelines. This could also be true of unused community spaces that would support social distancing. Certified child care programs must follow guidance provided through mn.gov/childcare to ensure space will meet requirements and be eligible for child care assistance. Any changes to the certified child care space needs to be approved by DHS.

Appendix A: Critical Worker Definitions

Employees in the sectors below are eligible to enroll their school-age child(ren) under age of 12 in school-age care if their school is implementing a distance or hybrid learning model.

This school-age care must be provided for district or school-enrolled school-age children age 12 and under who are children of critical workers in Tier I of the state critical worker list. Children of Tier I workers only will be cared for no cost during the typical school hours.

HEALTHCARE / PUBLIC HEALTH

- Workers, including laboratory personnel, that perform critical clinical, biomedical and other research, development, and testing needed for COVID-19 or other diseases.
- Healthcare providers including, but not limited to, physicians; dentists; psychologists; mid-level practitioner: nurses; assistants and aids; infection control and quality assurance personnel; phlebotomists; pharmacists; physical, respiratory, speech and occupational therapists and assistants; social workers; optometrists; speech pathologists; chiropractors; diagnostic and therapeutic technicians; and radiology technologists.
- Workers required for effective clinical, command, infrastructure, support service, administrative, security, a intelligence operations across the direct patient care and full healthcare and public health spectrum. Person examples may include, but are not limited, to accounting, administrative, admitting and discharge, engineer accrediting, certification, licensing, credentialing, epidemiological, source plasma and blood donation, food service, environmental services, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, etc.
 - Emergency medical services workers.
 - Prehospital workers included but not limited to urgent care workers. ○ Inpatient & hospital workers (e.g hospitals, critical access hospitals, long-term acute care hospitals, long-term care facilities including skill nursing facilities, inpatient hospice, ambulatory surgical centers, etc.).
 - Outpatient care workers (e.g. end-stage-renal disease practitioners and staff, Federally Qualified Health Centers, Rural Health Clinics, community mental health clinics, organ transplant/procurement centers, and other ambulatory care settings/providers, comprehensive outpatient rehabilitation facilities, etc.).
 - Home care workers (e.g. home health care, at-home hospice, home dialysis, home infusion, etc.).
 - Workers at Long-term care facilities, residential and community-based providers (e.g. Programs of All-Inclusive Care for the Elderly (PACE), Intermediate Care Facilities for Individuals with Intellectual Disabilities, Psychiatric Residential Treatment Facilities, Religious Nonmedical Health Care Institutions, etc.).
 - Workplace safety workers (i.e., workers who anticipate, recognize, evaluate, and control workplace conditions that may cause workers' illness or injury).
- Workers needed to support transportation to and from healthcare facility and provider appointments.
- Workers needed to provide laundry services, food services, reprocessing of medical equipment, and waste management.
- Workers that manage health plans, billing, and health information and who cannot work remotely.
- Workers performing cybersecurity functions at healthcare and public health facilities and who cannot work remotely.
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely.
- Vendors and suppliers (e.g. imaging, pharmacy, oxygen services, durable medical equipment, etc.).
- Workers at manufacturers (including biotechnology companies and those companies that have shifted production to medical supplies), materials and parts suppliers, technicians, logistics and warehouse operators, printers, packagers, distributors of medical products and equipment (including third party logistics providers and those who test and repair), personal protective equipment (PPE), isolation barriers, medical gases, pharmaceuticals (including materials used in radioactive drugs), dietary supplements, commercial health

products, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies (including dispensers), sanitary goods, personal care products, pest control products, and tissue and paper towel products.

- Donors of blood, bone marrow, blood stem cell, or plasma, and the workers of the organizations that operate and manage related activities.
- Pharmacy staff, including workers necessary to maintain uninterrupted prescription, and other workers for pharmacy operations.
- Workers in retail facilities specializing in medical good and supplies.
- Public health and environmental health workers, such as:
 - Workers specializing in environmental health that focus on implementing environmental controls, sanitation and infection control interventions, healthcare facility safety and emergency preparedness planning, engineered work practices, and developing guidance and protocols for appropriate PPE to prevent COVID-19 disease transmission.
 - Public health/ community health workers (including call center workers) who conduct community-based public health functions, conducting epidemiologic surveillance and compiling, analyzing, and communicating public health information, who cannot work remotely.
- Human services providers, especially for at risk populations such as:
 - Home delivered meal providers for older adults, people with disabilities, and others with chronic health conditions.
 - Home-maker services for frail, homebound, older adults.
 - Personal assistance services providers to support activities of daily living for older adults, people with disabilities, and others with chronic health conditions who live independently in the community with supports and services.
 - Home health providers who deliver health care services for older adults, people with disabilities, and others with chronic health conditions who live independently in the community with supports and services.
 - Workers who provide human services, including but not limited to social workers, nutritionists, case managers or case workers, crisis counselors, foster care case managers, adult protective services personnel, child protective personnel, domestic violence counselors, human trafficking prevention and recovery personnel, behavior specialists, substance abuse-related counselors, and peer support counselors.
- Government entities, and contractors that work in support of local, state, federal, tribal, and territorial public health and medical mission sets, including but not limited to supporting access to healthcare and associated payment functions, conducting public health functions, providing medical care, supporting emergency management, or other services necessary for supporting the COVID-19 response.
- Workers for providers and services supporting effective telehealth.
- Mortuary service providers, such as:
 - Workers performing mortuary funeral, cremation, burial, cemetery, and related services, including funeral homes, crematoriums, cemetery workers, and coffin makers.
 - Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental and behavioral health services to the family members, responders and survivors of an incident.

LAW ENFORCEMENT, PUBLIC SAFETY, AND OTHER FIRST RESPONDERS

- Public, private, and voluntary personnel (front-line and management, civilian and sworn) in emergency management, law enforcement, fire and rescue services, emergency medical services (EMS), and security, public and private hazardous material responders, air medical service providers (pilots and supporting technicians), corrections, and search and rescue personnel.
- Personnel involved in provisioning of access to emergency services, including the provisioning of real-time text-to-911, and dialing 911 via relay.

- Personnel that are involved in the emergency alert system (EAS) ((broadcasters, satellite radio and television cable, and wireline video) and wireless emergency alerts (WEA).
- Workers at Independent System Operators and Regional Transmission Organizations, and Network Operations staff, engineers and technicians to manage the network or operate facilities.
- Workers at emergency communication center, public safety answering points, public safety communication centers, emergency operation centers, and 911 call centers.
- Fusion Center workers
- Workers, including contracted vendors, who maintain, manufacture, or supply equipment and services supporting law enforcement, fire, EMS, and response operations (to include electronic security and life safety security personnel).
- Workers and contracted vendors who maintain and provide services and supplies to public safety facilities, including emergency communication center, public safety answering points, public safety communications centers, emergency operation centers, fire and emergency medical services stations, police and law enforcement stations and facilities.
- Workers supporting the manufacturing, distribution, and maintenance of necessary safety equipment and uniforms for law enforcement and all public safety personnel.
- Workers supporting the operation of firearm, or ammunition product manufacturers, retailers, importers, distributors, and shooting ranges.
- Public agency workers responding to abuse and neglect of children, spouses, elders, and dependent adults.
- Workers who support weather disaster and natural hazard mitigation and prevention activities.
- Security staff to maintain building access control and physical security measures.

FOOD AND AGRICULTURE

- Workers enabling the sale of human food, animal food (includes pet food, animal feed, and raw materials and ingredients), pet supply, and beverage products at groceries, pharmacies, convenience stores, and other retailers (including unattended and vending), including staff in retail customer support and information technology support necessary for on-line orders, pickup, and delivery.
- Restaurant and quick serve food operations, including dark kitchen and food prep centers, carryout, and deli food workers.
- Food manufacturer workers and their supplier workers including those employed at food ingredient production and processing facilities; aquaculture and seafood harvesting facilities; slaughter and processing facilities for livestock, poultry, and seafood; animal food manufacturing and processing facilities; human food facilities producing by-products for animal food; industrial facilities producing coproducts for animal food; beverage production facilities; and the production of food packaging.
- Farmers, farm and ranch workers, and agribusiness support services, including workers involved in auction and sales; in food operations, including animal food, grain and oilseed storage, handling, processing, and distribution; in ingredient production, packaging, and distribution; in manufacturing, packaging, and distribution of veterinary drugs and biologics (e.g., vaccines); and in distribution and transport.
- Farmers, farm and ranch workers, and support service and supplier workers producing food supplies and other agricultural inputs for domestic consumption and export, to include those engaged in raising, cultivating, phytosanitation, harvesting, packing, storing, or distributing to storage or to market or to a transportation node to market any agricultural or horticultural commodity for human or animal consumption.
- Workers at fuel ethanol facilities, biodiesel and renewable diesel facilities, and storage facilities.
- Workers and firms supporting the distribution of all human and animal food and beverage and ingredients used in these products, including warehouse workers, vendor-managed inventory controllers, and block chain managers.
- Workers supporting the sanitation and pest control of all human and animal food manufacturing processes from operations from wholesale to retail.
- Workers supporting greenhouses as well as the growth and distribution of plants and associated products for home gardens.

- Workers in cafeterias used to feed workers, particularly worker populations sheltered against COVID-19 and those designated as essential critical infrastructure workers.
- Workers in animal diagnostic and food testing laboratories.
- Government, private, and non-governmental organizations' workers essential for food assistance programs (including school lunch programs) and government payments.
- Workers of companies engaged in the production, storage, transport, and distribution of chemicals, drugs, biologics (e.g. vaccines), and other substances used by the human and agricultural food and agriculture industry including seeds, pesticides, herbicides, fertilizers, minerals, enrichments, equipment, and other agricultural production aids.
- Animal agriculture workers to include those employed in veterinary health (including those involved in supporting emergency veterinary or livestock services); raising, caring for and management of animals for food as well as pets; animal production operations; livestock markets; slaughter and packing plants, manufacture renderers, and associated regulatory and government workforce.
- Transportation workers supporting animal agricultural industries, including movement of animal medical and reproductive supplies and materials, animal biologics (e.g., vaccines), animal drugs, animal food ingredients, animal food and bedding, live animals, and deceased animals for disposal.
- Workers who support sawmills and the manufacture and distribution of fiber and forestry products, including but not limited to timber, paper, and other wood and fiber products, as well as manufacture and distribution of products using agricultural commodities.
- Workers engaged in the manufacture and maintenance of equipment and other infrastructure necessary for agricultural production and distribution.

JUDICIAL BRANCH (ESSENTIAL SERVICES)

- Workers supporting the operations of the judicial system, including judges, lawyers, and others providing legal assistance.

MINNESOTA NATIONAL GUARD

- Members of the Minnesota National Guard who have been activated under an Executive Order.

EDUCATORS AND SCHOOL STAFF

- Educators supporting public preK-12 schools.
- Paraprofessionals and other school staff.
- Any school staff supporting school-age care programs for children of essential workers, or supporting food service programs in schools.

CHILD CARE AND SCHOOL-AGE CARE PROVIDERS

- Child care providers and other workers in child care centers, family child care, schools, and other facilities operating and providing child care