NH Child Care Program and Provider
COVID-19

Frequently Asked Questions

State of New Hampshire Department of Health and Human Services:
Bureau of Child Development and Head Start Collaboration,
Child Care Licensing Unit
and
The Division for Public Health Services

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The Department of Health and Human Services’ Mission is to join communities and families in providing opportunities for citizens to achieve health and independence.
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- Published the NH DHHS Emergency Mapping on Child Care Aware – April 9, 2020.
- Updated guidance on background checks pursuant to Emergency Order # 18 – April 10, 2020.
General COVID-19 and State of Emergency Information

1. Why are child care programs still operating when schools have closed?
   - Child care is a critical service in the lives of working families and at this time for essential businesses and their employees.

2. What are the main resources I should be using for up to date information?
   - Updated information from DPHS on Covid-19 in NH can be found here: https://www.nh.gov/covid19 and http://nh.childcareaware.org/.

3. Should programs follow public school system closures?
   - Child care programs are allowed to make the decision to remain open or close.

4. What does the Federal State of Emergency mean for child care providers?
   - The Federal State of Emergency allows for broader federal aid and services for the state. Any changes for the state is under the jurisdiction of each State’s Governor.

5. Did or will the CDC order all child care across the nation to close?
   - The CDC did not order for child care to close across the nation. The CDC does not have the authority to order closures. This is an individual state decision.
1. **What is ECCP?**
   - The Emergency Child Care Program has been established to provide child care services for children and youth whose parents have been deemed as essential workers under Governor Sununu's Exhibit A to Emergency Order # 17 pursuant to Executive Order 2020-04. Programs approved under the ECCP, may be eligible for incentive payments to support staff salaries, operations and supplies through federal, state and philanthropic funding. The figure below shows the process for becoming an ECCP and potentially receiving funding incentives.

2. **Do I need to apply for the ECCP Designation to remain open or to reopen if I have closed?**
   - Yes, in order to remain open or to reopen you must apply for the ECCP Designation.

3. **How do I apply for the ECCP Designation?**
   - Complete the application online. Click on the link below or cut and paste the address into your browser and complete the short application. It will go directly to DHHS for review and approval.
   - [https://www.surveymonkey.com/r/HC2VQZW](https://www.surveymonkey.com/r/HC2VQZW)
   - Applications will be reviewed on a rolling basis beginning on Monday March 30, 2020. Providers will be selected based on regional employer/employee’s needs, age of children, hours of availability, and access for vulnerable children and families. All applicants will be notified within 3 business days of application.

4. **If I still have questions about ECCP who do I contact?**
• You can e-mail us at ECCP@dhhs.nh.gov.
• You can call Claudette Mallory at 603-271-8167.
• Due to the volume of calls we are currently receiving, we ask you to consider emailing first and if you call, please include your email address.

5. **When does ECCP start and when will it end?**
   • ECCP has begun and you are apply to apply to become an ECCP at this time.
   • The ECCP will be in effect for the duration of the State of Emergency.

6. **If I am approved as an ECCP provider, what happens next?**
   • You will receive an email confirming your designation as an ECCP provider and information regarding incentive payments and other funding opportunities that may be available to you.

7. **I would like to apply for the ECCP Designation to receive incentive funding, is that still possible?**
   • You may still apply for the ECCP Designation using this link: https://www.surveymonkey.com/r/HC2VQZW
   • You may receive the ECCP Designation after DHHS reviews your application.
   • You will not be considered for the ECCP Incentive until Phase 2 has launched
   • Phase 2 of incentive funding is currently under development, more information will be released once available.
Health and Safety

Face Masks

1. **What are recommendations about cloth face coverings?**
   - The NH Department of Health and Human Services recommends all Granite Staters wear cloth face coverings when outside of the home to help slow the spread of COVID19.

2. **Should child care providers wear face masks?**
   - Yes, especially if 6 feet of social distancing cannot be maintained.

3. **What type of mask do I need?**
   - Child care providers should wear reusable/washable cloth masks.

4. **What should I do if I work with potentially vulnerable children, such as children with underlying health conditions or children with disabilities?**
   - Do not work with any symptoms that might be COVID-19.
   - Perform frequent hand hygiene.
   - Wear a cloth face covering at all times.

5. **What is the purpose of wearing face masks?**
   - The advice for everyone to wear a cloth face covering is based on new data showing that COVID-19 can spread before a person has any symptoms.
   - A mask helps protect others around you if you are infected and don’t know it.

6. **How do I know I am wearing the face mask properly?**

7. **Should the children in childcare wear cloth face masks as well?**
   - No. Because of safety concerns, NH DHHS with the consultation of NH Division of Public Health Services does **not** recommend children wear masks at child care programs.
   - Additionally, CDC guidance states, “Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance”.

8. **Why is it unsafe for children to wear cloth face coverings?**
   - There are safety issues with young children having cloth, ties, elastics etc., around their mouths and necks.
• The effectiveness of masks is impacted by proper handling and use, and children are more likely to play with the masks, adjust them or remove them without washing their hands before or after touching the masks, touch their face, etc.
• Staff would also need to increasingly be in close contact with children to provide assistance with masks, which can be counter-productive to maintaining distance as much as possible.

I think I have COVID-19
1. **What are the symptoms?**
   • Fever: Subjective (feel like you have a fever) or documented (use of a thermometer).
   • Respiratory illness: Cough, sore throat, runny nose, shortness of breath.
   • Flu-like illness: fatigue, chills, muscle aches.
   • Loss of taste and/or smell.

2. **If I have the above symptoms what should I do?**
   • Call your healthcare professional to determine if you need to be tested.

3. **Whether or not I have been tested, what should I do?**
   • Stay at home and self-isolate until:
     o At least 7 days have passed since symptoms first appeared AND
     o At least 72 hours (3 days) have passed since recovery.
     ▪ **Recovery**: A complete resolution of fever without the use of fever-reducing medications and improvement in other symptoms.

What to do if There is a Positive Case at your Center
1. **Who do I contact if a child or staff test positive for COVID-19?**
   • Contact the Bureau of Infectious Disease Control at 603-271-4496
     o They will advise on next steps such as communication, cleaning, suspending/pausing services, etc.
   • Contact the Bureau of Child Development and Head Start Collaboration at 603-271-4242.
   • Contact Child Care Licensing Unit at 603-271-9025 or ccluoffice@dhhsnh.gov.

2. **Can a child or staff return to the facility after they had suspected or confirmed COVID-19?**
   • Individuals who have had COVID-19 symptoms can return to the child care facility only if they following conditions are met:
     o At least 7 days have passed since symptoms first appeared **and**
     o At least 72 hours (3 days) have passed since recovery.
     ▪ **Recovery**: A complete resolution of fever without the use of fever-reducing medications and improvement in other symptoms.

Supporting Child and Family Wellbeing
1. **How can I support families during this stressful time?**
• The Division of Children, Youth and Families has created a resource to identify ways to support families during this time.
• The resource can be found at: https://www.dhhs.nh.gov/dcyf/documents/family-wellbeing-during-covid-19.pdf.

2. **Have any requirements changed regarding how to report Abuse and Neglect?**
   • No. Any licensee, permittee, child care program personnel, or other person involved with a program who suspects that a child is being abused or neglected is a mandated reporter in accordance with RSA 169-C:29 and shall report the suspected abuse to the DHHS Division for Children, Youth and Families at 1-800-894-5533.
   • NOTE: in New Hampshire, everyone is a mandated reporter.

3. **What should I do if I have concerns that a child or parent/guardian is in immediate danger?**
   • If you have any concerns that a child or caregiver is in immediate danger, call 911.

4. **Where can I direct families if they are not in an emergency but need confidential family support?**
   • Waypoint in partnership with DHHS have created a Family Support warm line.
   • The warm line phone number is 1-800-640-6486 and is available Monday through Friday 8:30am – 4:30pm.

5. **What supports do families get through the Family Support Warm Line?**
   • The opportunity to speak confidentially with a family support professional.
   • Topics areas may include but are not limited to: coping strategies, child behaviors, family dynamics, household management, emotional distress, as well as access to resources and tools.
   • NOTE: the Family Support Warm Line is NOT a hot-line. Emergency calls should still be made to 911.

**COVID-19 and Daily Operations**

1. **Where can I find additional information and resources about how to adjust my daily operations due to COVID-19?**

2. **How should I adapt outside play?**
   • The CDC recommends that outdoor play occurs in staggered shifts. If multiple groups are outside at the same time, they should have a minimum of six feet of open space between outdoor play areas or visit these areas in shifts so that they are not congregating. Always wash hands immediately after outdoor play time.
   • Increase time outside, if possible while keeping groups small.
3. **How should I adapt meals and snack time?**
   CDC Guidance:
   - Keep group size small.
   - Meals and snacks should be provided in the classroom if possible to avoid congregating in large groups.
   - If meals must be provided in a lunchroom, please stagger meal times; arrange tables to ensure that there is at least six feet of space between groups in the lunchroom, and clean tables between lunch shifts.
   - Eliminate family style meals or have employees (not children) handle utensils and serve food to reduce the spread of germs.

4. **How should I adapt drop-off and pick-up?**
   CDC Guidance:
   - Do not combine groups in the morning or afternoon.
   - Alternate drop off and pick up times for each small group to avoid a large number of people congregating outside the facility or in front of the facility.
   - Wash hands or use hand sanitizer before and after signing in and out. No pen should be shared. Parents should use their own pen when signing in. If check-in is electronic, provide alcohol wipes and frequently clean the screens or keyboards.
   - Please see “Daily Screening Before Entry into Facility” section for additional guidance (Can be found on page 12 of this document).

5. **How should I adapt hygiene practices?**
   - Require hand hygiene when arriving at the center, entering the classroom, before meals or snacks, after outside time, after going to the bathroom, and prior to leaving for home. Help young children to ensure they are doing it effectively.
   - Hand hygiene can be accomplished by washing with soap and water for at least 20 seconds, or using an alcohol-based hand sanitizer with at least 60% alcohol.
   - Advise children, families, and staff to avoid touching their eyes, nose and mouth with unwashed hands.
   - Cover coughs or sneezes with a tissue, then throw the tissue in the trash and perform hand hygiene. Alternatively, cough or sneeze into your elbow.

6. **If I provide transportation, how should I adapt?**
   CDC Guidance:
   - Close seating on buses makes person-to-person transmission of respiratory viruses more likely.
   - Those providing transportation to child care facilities should maximize space between riders (e.g. one rider per seat in every other row).
   - Keeping windows open might reduce virus transmission.

7. **How should I adapt my cleaning and disinfecting procedures?**
CDC Guidance:
- Increase the frequency with which you clean toys, equipment, and surfaces, especially doorknobs, check-in counters, and restrooms.
- Use alcohol wipes to clean keyboards and electronics and wash hands after use.
- Minimize the potential for the spread of germs in the program space by temporarily removing toys that are not easily cleanable (such as stuffed animals and pillows) and rotate the toys that are out at any one time so that they can be adequately cleaned and sanitized.
- If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering this area.
- Cleaning should follow the disinfectant manufacturer’s instructions:
  - Use the proper concentration of disinfectant.
  - Maintain the disinfectant for the required wet contact time.
  - Follow the product label hazard warnings and instructions for personal protective equipment (PPE) such as gloves, eye protection, and adequate ventilation.
  - Use disinfectants in a well ventilated space. Extensive use of disinfectant products should be done when children are not present and the facility thoroughly aired out before children return.
  - Child care facilities must have a Safety Data Sheet (SDS) for each chemical used in the facility.
  - Parents and staff should not supply disinfectants and sanitizers.

8. **We use shared hands-on teaching materials at my child care center, what should we do?**

CDC Guidance:
- These items need to be cleaned at the end of the day.
- Soap and water is the first step.
- Some items can then be sanitized.
- Playdough cannot be cleaned or sanitized, so consider individual containers labeled with names, or discontinue use.
- Facilities should consider removing water tables, sensory tables, etc. from use for the time being and limit shared teaching materials to those that can be easily cleaned and disinfected at the end of the day or more often as needed.

**Daily Screening before Entry into Facility**

1. **What symptoms should I screen for?**
   - Fever (subjective or documented).
     - Ask if the child or staff member has taken any fever reducing medications in the last 24 hours? – if yes, they should not enter the building.
Subjective fever includes but not limited to: if an individual feels feverish but temperature cannot be verified or if individual has other symptoms but no fever.

- Respiratory illness (cough, sore throat, runny nose, shortness of breath).
- Flu-like symptoms (fatigue, chills, muscle ache).
- Loss of taste and/or smell.

2. **What risk factors should I screen for?**

- Ask about any close contact with someone who is confirmed *or* suspected to have COVID-19 in the last 14 days (for child, staff and family).
- Ask about any domestic (within the US) or international (beyond the US) travel in the past 14 days (for child, staff and family).

3. **What should I do if the answer is “yes” to any of the above screening questions?**

- Person(s) with any of the listed symptoms or risk factors should **not** be allowed into the facility.
- Person(s) with any of the list symptoms should contact their health care provider to determine if a test is needed.
- Anyone with symptoms who is **not** tested can be managed by staying at home and self-isolating until
  - At least 7 days since symptoms first appeared AND
  - At least 72 hours (3 days) have passed since recovery (resolution of fever without the use of fever-reducing medications and improvement in other symptoms).

**Public Health and Child Care Training**

1. **Where do I find the recording for the March 25, 2020 Public Health Support for the Child Care Community webinar?**

   - You can find the recording on Child Care Aware NH at https://zoom.us/rec/play/6JYodb-g-Gk3Sd2R5gSDBvAqW9S_eKKs1yB1r_RcxUe2ViQLZIGuNOBDZOS9BSxzx9N0St5ynozBTdv?continueMode=true&_x_zm_rtaid=u21rzY3TRSRQrkBLdp4wNg.1586521920448.2ef92409312c562225ad11e5a28b8507&_x_zm_rhtaid=720.

2. **Where do I find the PowerPoint for the March 25, 2020 Public Health Support for the Child Care Community webinar?**


3. **Where do I find the chat for the March 25, 2020 Public Health Support for the Child Care Community webinar?**

Child Care Scholarship

1. **Does this guidance come from the Child Development Fund (CCDF) rules or the Protective or Preventive Services (P&P) Rules?**
   - At this time all the questions in this section are written use the CCDF rules.
   - If you are serving children receiving P&P and have questions about those policy changes during COVID-19 contact Paula Burr at 603-271-4954.

2. **What is “disaster billing” and how does it work?**
   - “Disaster billing” authorizes your child care program to bill for all NH Child Care Scholarship eligible children during the state of emergency. You may bill regardless of whether the child is absent or present, or your program is open or closed. If your program is closed, however, this applies only if the child is not linked to and receiving services from another program at the same time. Please see #4.
   - You must bill using **ONLY the Disaster indicator “D.” PLEASE DO NOT USE ANY OTHER INDICATORS (“P”, “A”, “C” OR “T”).** Please follow these directions until we notify you that the disaster designation is no longer activated.

3. **What is zero cost share and how will it affect my program?**
   - **Cost share** is the DHHS calculated amount that a family contributes toward the cost of child care. “Zero cost share” means that the family contribution is zero. To ensure that providers continue to receive reimbursement payments and decrease out-of-pocket costs for families, the Department of Health and Human Services (DHHS) is suspending the family cost share contribution for 8 weeks, from April 6, 2020 through May 31, 2020.
   - Following is a zero cost share example using $150.00 as the DHHS weekly standard rate (A child’s weekly standard rate is determined by a child’s age and whether a provider is licensed or license-exempt).
     - **Zero Cost Share Example:**
       - DHHS weekly standard rate = $150.00 (Example only!)
       - Cost Share = $0.00
       - DHHS Payment: $150.00 - $0.00 = $150.00
   - During this time, **you cannot charge the parent the cost share.**

4. **What is co-payment? Has it changed due to the COVID-19 emergency?**
   - **Co-payment** is the difference between the DHHS weekly standard rate paid to a child care provider and the actual child care provider’s tuition charged to the family each week for child care services. Co-payment only changed during the emergency if a child care provider decided to change it. For example, some providers decided not to charge families a co-payment during the emergency.
   - Below is an example of a co-payment with zero cost share for the family.
     - **Co-Payment/Zero Cost Share Example:**
       - DHHS weekly standard rate = $150.00 (Example only!)
       - Provider’s Tuition Charge = $200.00
       - **Family Co-Payment:** $200.00 - $150.00 = $50.00
       - Total child care provider’s charge, at their discretion: $0.00 (Cost Share) + $50.00 (Co-Payment) = $50.00
The parent owes the child care provider, if the provider chooses to charge.

5. **What do I do if a parent or guardian who is considered an essential employee has changed child care providers?**
   - DHHS only allows one child care provider to be linked to an eligible child at one time.
   - You must contact the Bureau of Child Development and Head Start Collaboration Provider Relations (Sarah.Nelson@dhhs.nh.gov) with the following information:
     - Request for your child care link to be end dated
     - The child’s first and last name, RID#, link end date, your name and business name, and your Bridges Resource ID#.
   - **IMPORTANT**: you will not be able to bill beyond the child care link end date.

6. **What if a parent or guardian of a school age child is engaged in a full time activity but the child’s authorized service level is only part time?**
   - As of March 16, 2020, if a child is school age and the parent is in a full time activity, the child’s service level increased to full time.

7. **Are there any changes to the Child Care Eligibility?**
   - A child will remain open for child care when the child is currently eligible for the NH Child Care Scholarship Program and continues to meet program requirements, and the parent(s) is unable to participate in his or her current approved activity due to the COVID-19 emergency.

8. **What if a parent or Guardian is in Job Search?**
   - As of March 24, 2020, job search is not limited to 92-calendar days. If a parent(s) is currently approved for this activity, he or she will be allowed to remain in job search until further notice.

9. **Still have questions?**
   - Contact the Bureau of Child Development and Head Start Collaboration Provider relations via:
     - Email at: Sarah.nelson@dhhs.nh.gov.
     - Phone at: 1-800-852-3345 extension 4242.
Staffing

1. **What happens if staff do not want to work because they are concerned about catching COVID-19?**
   - If staff calling out leads to ratio concerns, please assess whether you feel you can safely care for children and call the CCLU (271-9025) for consultation or to request a waiver if needed.

2. **I want to stay open, but I am short-staffed. How do I get more qualified staff?**
   - CCAoNH has developed a job board for staff to post their availability to work in child care, and for providers to post job opportunities: [http://nh.childcareaware.org/job-dashboard-2/](http://nh.childcareaware.org/job-dashboard-2/).

3. **I can’t get my staff in for a fingerprint appointment, what can I do?**
   - Criminal History Record Check requirements for child care personnel and household members in child care programs have **TEMPORARILY changed due to State of Emergency**, consistent with Executive Order # 18 Pursuant to Executive Order 2020-04. During this time, the Department of Safety-Criminal Records Unit will only process in-state criminal history record checks requests, as the requirement for FBI fingerprinting has been deferred until after the State of Emergency has ended.
   - CCLU and BCDHSC will accept criminal background checks for new staff completed:
     - By school districts for current employees of schools; and
     - As a requirement for licensure through the individual’s professional licensure process.
   - Keep verification of the above on file and submit as described below.

4. **What do I need to submit for background checks?**
   - Everyone submits the [Household and Personnel Form – CCLU 1-B](#) (this form **MUST** be notarized*); with EITHER:
     - Verification of completed criminal background check through school district or as a requirement for professional licensure as described above; OR
     - [Criminal History Record Information Authorization – CCLU 1-A](#) (this form does not need to be notarized) with a check or money order for **$7.50** made payable to State of NH – Criminal Records;
   - Include [out-of-state release forms](#) (if applicable).

   *If you are unable to meet with a notary in person, [Emergency Order #11](#) authorizes a notary to perform secure remote online notarization.

5. **Where do I submit the background check forms?**
   - Complete and submit the above in one packet to: 

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NH DHHS Child Care Provider and Program COVID-19 FAQs
6. **Will the background check process change again?**
   - Please check the Child Care Licensing Unit website often, as updates will be provided if requirements change during the State of Emergency. Further instruction will be provided once the State of Emergency has been lifted and the requirement for fingerprinting is reinstated.

7. **Where do I go to apply for unemployment?**
   - You can apply at [https://www.nhes.nh.gov/](https://www.nhes.nh.gov/).

8. **Am I eligible for unemployment?**
   - The state has expanded eligibility to those who may not have previously had access to unemployment. Please go to [www.nhes.nh.gov](https://www.nhes.nh.gov) for additional information.

9. **How much of a benefit will I receive on unemployment?**
   - This varies based on your wages. The following link should provide a rough indication of how much you will receive. [https://www.nhes.nh.gov/forms/documents/des-1049.pdf](https://www.nhes.nh.gov/forms/documents/des-1049.pdf)

10. **Is there a waiting period for unemployment benefits?**
    - This has been waived in accordance with the Governor’s Emergency Order. Please go to [www.nhes.nh.gov](https://www.nhes.nh.gov) for additional information.
**Supplies**

1. **I have immediate supply needs, how do I let DHHS and other early childhood partners know what they are?**
   - Please complete the survey on the Child Care Aware of New Hampshire’s homepage at [nh.childcareaware.org](http://nh.childcareaware.org).
   - Or through direct link at [http://survey.constantcontact.com/survey/a07egz2vuark7up6l5v/a008k84fbjip/questions](http://survey.constantcontact.com/survey/a07egz2vuark7up6l5v/a008k84fbjip/questions).

2. **If I have the ECCP designation how will DHHS and other early childhood partners know what I need?**
   - During the ECCP Designation application you will have the opportunity to list out what supplies you need.
   - If you have already submitted your application, your needs have been captured.
Emergency Child Care Collaborative

1. **Who is involved in the Emergency Child Care Collaborative?**
   - This group is led by NH DHHS and NH Charitable Foundation and includes a number of stakeholders, funders and providers.

2. **What is the Emergency Child Care Collaborative?**
   - The purpose is to bring together public and private resources together in a coordinated team during the COVID-19 Crisis.
   - Partnering and integrating the expertise across the state, non-profits, philanthropy, advocacy, local/regional child care providers, and business.
   - Maintaining a focus on providing safe, quality child care to NH’s children and families.
   - Coordinating the aligning efforts to fill gaps and reduce duplication of effort.
   - Tracking needs.
Points of Contact

NH Child Care Licensing Unit
8:00 A.M. – 4:30 P.M., Monday through Friday

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E-Mail
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ECCP
- You can e-mail us at ECCP@dhhs.nh.gov
- You can call Claudette Mallory at 603-271-8167

Child Care Aware of New Hampshire
- **Main Toll Free Phone Line:** 1-855-393-1731
- **Child Care Referral & Consultation Line:** Ext. 31 or (603) 578-1386, ext. 31
- **Training & Technical Assistance/Help Line:** Ext. 32 or (603) 578-1386, ext. 32

Emergency Child Care Phone Number
- (603) 578-1386 ext. 28 or 33

Division of Public Health Services
- (603) 271-4496.
Summary of Resources
Child Care Aware of New Hampshire (CCAoNH) Resources
- During the COVID-19 pandemic, CCAoNH is collecting names of individuals who want to provide child care, whether in their home, a family’s home, a child care or school-age program or a 24-hour residential child care program to temporarily assist families during this crisis.
- By completing and submitting this online form, the child care provider will be added to the referral list for programs and families in need of temporary child care or staff during the pandemic. They, of course, will have the option to delete their information at any time.
- To sign up for this option please go to: http://nh.childcareaware.org/early-childhood-and-afterschool-providers-seeking-temporary-employment-in-child-care/.

Provide Care in your Own Home or the Child’s Home
- NH law allows providers to care for 3 children, in addition to their own, in their home as a licensed-exempt provider.
  - NOTE: the order of applying to be a licensed-exempt provider and applying for the ECCP Designation does not matter. You may apply for either first.
- For more information on how to enroll to be an Emergency Child Care Provider please go to: http://nh.childcareaware.org/emergency-child-care-program-application/.
- Enroll to be a License Exempt DHHS Child Care Provider:
  - A child care provider who provides care for a child eligible to receive NH Child Care Scholarship can enroll with DHHS to receive payment for child care services. DHHS can expedite the enrollment process during the pandemic, only if the child care provider has completed their background check within the past five years. DHHS is paying the full-authorized service level for all eligible children during the crisis.
- For more information on how to enroll to be a license exempt DHHS child care provider contact the DHHS Enrollment Specialist at (603) 271-4228.

Apply for Unemployment
- If you are unemployed due to the COVID-19 crisis, you can apply for unemployment at https://www.nhes.nh.gov/. The state has expanded eligibility to those who may not have previously had access to unemployment. The amount of unemployment you receive varies based on your wage.
- To calculate how much you will receive, please go to: https://www.nhes.nh.gov/forms/documents/des-1049.pdf.

Volunteer Options
- Governor Chris Sununu has issued a call for volunteers during the coronavirus emergency.
- If you are interested in joining the many volunteers that have signed up to help during the crisis, please call 603-271-7200 or visit the following link: https://volunteernh.org/.
Emergency Child Care Provider Map

- A map of all early childhood and school-age programs designated as DHHS Emergency Child Care Programs is available by visiting the following link: http://nh.childcareaware.org/nh-dhhs-emergency-child-care-programs-mapping/.
- This map is a valuable resource for those interested in reaching out for possible employment opportunities during the crisis.