



Coronavirus COVID-19

BC Centre for Disease Control

Public Health Guidance for Child Care Settings During the COVID-19 Pandemic

This guidance is intended for child care service providers and is based on known evidence as of September 25, 2020.

Introduction

This document provides updated guidance for child care providers to prevent the transmission of COVID-19 and maintain safe and healthy environments for children and staff during the pandemic. It identifies key infection prevention and exposure control practices to implement in child care settings and provides actions to take if a child or staff member develops symptoms that could be related to COVID-19.

The risk in child care settings is considered low in BC as evidence shows:

- COVID-19 is less commonly transmitted between children, and between children and adults;
- COVID-19 is more commonly transmitted between adults, and from adults to children; and
- Young children are less at risk for severe illness from COVID-19.

Along with implementing the measures outlined in this guidance, child care providers can support this low risk setting.

As incidence will change over time in the province, the risk of cases or clusters in daycares may be higher or lower in the future than it is currently. This guidance will be updated as the pandemic evolves.

For up-to-date information on COVID-19, visit the [BCCDC website](#).

COVID-19 and Young Children

COVID-19 has a very low infection rate among young children. Based on published literature to date, the majority of cases of COVID-19 in young children are the result of droplet spread from a symptomatic adult family member in the household setting. Children are not the primary drivers of COVID-19 spread in child care facilities, schools, or other community settings.

Children tend to have very mild symptoms of COVID-19, if any. They often present with mild respiratory symptoms, such as a cough. Most young children are not at high risk for COVID-19 infection; however, children under one year of age and those who are immunocompromised or who have pre-existing pulmonary conditions are at higher risk of more severe illness (see [Children with Immune Suppression](#) on the BCCDC website for further details).

Infection Prevention and Exposure Control Measures

Infection prevention and exposure control measures help create safe environments by reducing the spread of communicable diseases, including COVID-19. These are more effective in controlled environments where multiple measures of various effectiveness



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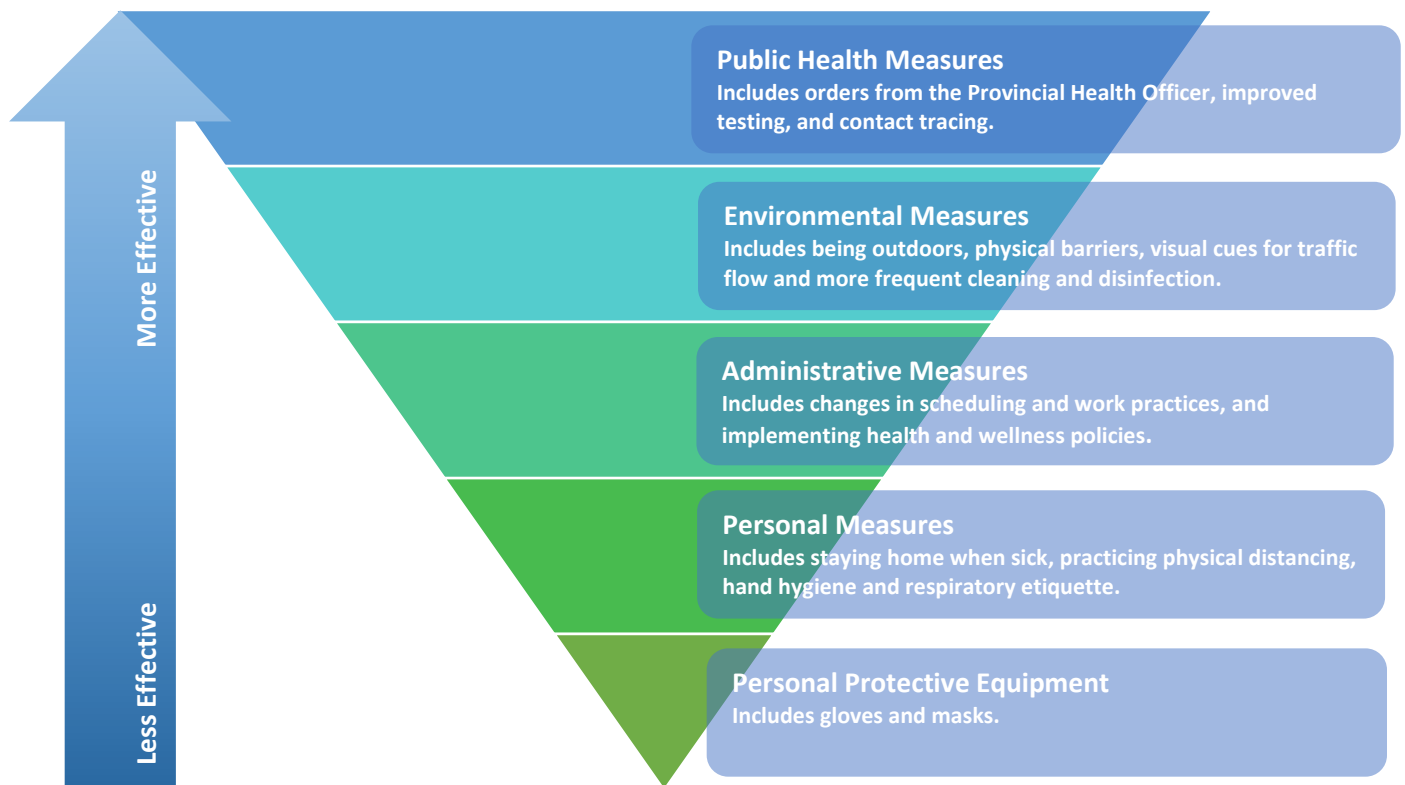
If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.



can be routinely and consistently implemented, and where the same individuals attend consistently. See [Appendix A](#) for a summary of these measures.

The Hierarchy for Infection Prevention and Exposure Control Measures for Communicable Disease describes measures that should be taken to reduce the transmission of COVID-19 in child care settings. Control measures at the top are more effective and protective than those at the bottom. By implementing a combination of measures at each level, the risk of COVID-19 is substantially reduced. See Appendix A for additional information.

The Hierarchy for Infection Prevention and Exposure Control Measures for Communicable Disease



How to Create a Safe Environment During the Pandemic

Outdoor Spaces and Indoor Ventilation

Outdoor spaces are ideal when weather permits; when possible, choose to have play time, snacks or meal breaks, and learning activities outdoors. Indoors, apply basic principles of good indoor air quality, including supplying outdoor air to replenish indoor air (e.g., open windows when weather permits), and ensure all mechanical heating, ventilation and air conditioning (HVAC) systems are working properly.

In homes, increase ventilation by keeping bathroom fans or ceiling fans running continuously. If an air cleaner or purifier is available, place it in the area where people spend the most time and direct the airflow so it does not blow directly from one person to another. Forced air system should be run as much as possible with the “FAN ON” setting.



For more information, see WorkSafeBC guidance on [general ventilation and air circulation](#).

Cleaning and Disinfection

Regular cleaning and disinfection are important to prevent the transmission of COVID-19 from contaminated objects and surfaces. Child care settings should be cleaned and disinfected in accordance with BCCDC's guidance on [Cleaning and Disinfectants for Public Settings](#), using a product from Health Canada's [hard-surface disinfectants](#) for use against the virus that causes COVID-19, to:

- Clean and disinfect the premises at **least once every 24 hours**.
- Clean and disinfect frequently-touched surfaces at **least twice every 24 hours**, including door knobs, light switches, toilet handles, and toys used by multiple children.
- Clean and disinfect any surface that is visibly dirty.
- Clean and disinfect cots, cribs, and changing stations after each use.

Measures to support effective cleaning and disinfection:

- Consider limiting the use of frequently-touched items that cannot be easily cleaned.
- Wash bed linens after each use.
- Empty garbage containers daily and when full.
- Wear disposable gloves when cleaning blood or body fluids; wash hands before wearing and after removing gloves.

How to Manage Staff and Children During the Pandemic

Cohorting Children and Staff

Licensed child care facilities must adhere to relevant legislation that outlines the types of services and restrictions on age groups, staff ratios, and group sizes. Child care providers should consider how to apply cohorting principles to their setting to minimize the mixing of different children and staff members.

Recommendations include (whenever possible) to:

- Reduce the time or mixing of age groups for the first and last half hour of the day as permitted by the legislation.
- For larger facilities that have more than one care program, consider each group a cohort (e.g., a large facility may have 3 infant / toddler groups; 2 group daycare – 30 months to school age children – and 3 school-aged groups).
 - Many small groups is better than fewer large groups where possible.
 - Staff scheduling should be arranged for staff to remain in the same group.

Physical Distancing and Minimizing Physical Contact

Physical distancing refers to a range of measures aimed at reducing close contact with others. Physical distancing is used as a prevention measure because COVID-19 tends to spread through prolonged, close, face-to-face contact.

Within child care settings, physical distancing should include avoiding physical contact between staff, avoiding unnecessary physical contact between staff and children, minimizing close, prolonged, face-to-face interactions where possible, and encouraging everyone to spread out as much as possible within the space available. It is not necessary to attempt to eliminate close contact between children, recognizing the importance of children's emotional, physical and developmental needs.

The physical space requirements for licensed child care settings set out in the [Child Care Licensing Regulation](#) mean that child care centres have sufficient space to practice physical distancing between staff without reducing the number of children in care at any one time.



Staff should try to:

- Reduce prolonged face-to-face contact between other staff members and practice physical distancing where possible.
- Reduce the number of different staff that interact with the same children throughout the day.
- Minimize unnecessary physical contact with children.
- Minimize the number of visiting adults that enter the centre, unless that person is providing care or supporting the inclusion of a child in care.
- Organize more activities that encourage individual play and more space between children and staff.
- Encourage children to minimize physical contact with each other.

Sick Leave Policies for Child Care Providers

Anyone who is experiencing symptoms that could be due to COVID-19 should be supported to stay home through the implementation of sick leave policies that do not negatively impact employment. Post signage at entrances reminding people not to enter the facility if they are sick; a poster is [available here](#) to print.

Transportation

Buses and vans used for transporting children should be cleaned and disinfected according to the guidance provided in the BCCDC's [Cleaning and Disinfectants for Public Settings](#) document. Additional guidance is available from [Transport Canada](#).

Drivers should:

- Clean their hands often, including before and after completing trips.
- Use alcohol-based hand sanitizer with at least 60% alcohol during trips.
- Wear a non-medical mask or face covering when they cannot practice physical distancing

Children should:

- Clean their hands before and after being in a bus or van.

To reduce the number of close, in-person interactions, the following strategies are recommended:

- Use consistent and assigned seating arrangements; seating can be altered whenever necessary to support child health and safety.
- Prioritize children sharing a seat with a member of their household.
- On a bus, if space is available, each child should have their own seat, and sit beside the window.
- Use of masks for those aged 5 and older if required by transit provider.

Food and Beverages

[FOODSAFE](#) Level 1 covers important food safety and worker safety information including foodborne illness, receiving and storing food, preparing food, serving food, and cleaning and sanitizing. It is a helpful resource for those seeking education and training on food safety practices.

For food contact surfaces, ensure any sanitizers or disinfectants used are approved for use in a food service application and are appropriate for use against COVID-19. These may be different than the products noted in this document for general cleaning and disinfection. Additional information is available [here](#). Child care centres can continue to accept food donations to support learning and the delivery of meal programs, breakfast clubs and other food access initiatives.



Food and beverages should not be shared. Child care facilities should not allow homemade food items to be made available to other children at this time (e.g. birthday treats). Children and staff can bring their own reusable food and drink containers to the facility for their own personal use.

Reusable dishware, glasses and utensils should be cleaned and sanitized after each use.

How to Manage People Who Become Sick

Personal measures are actions individuals can take to protect themselves and others. Examples include physical distancing, minimizing physical contact, frequent hand washing, practicing respiratory etiquette and staying home if sick (see [Appendix A](#)). When COVID-19 is present in the community, the risk of introducing COVID-19 into child care settings is reduced if staff, children and parents/caregivers:

- Self-isolate if required by law or public health.
- Perform a daily health check (see [Appendix B](#)).
- Stay at home when sick.
- Call 8-1-1 or use the BC COVID-19 Self-Assessment Tool to determine if a COVID-19 test is needed.

Self-Isolation

The following people must stay home and self-isolate:

- A person experiencing key symptoms described in [Appendix B](#);
- A person waiting for results of a COVID-19 test;
- A person confirmed by public health as a case of COVID-19;
- A person confirmed by public health as a close contact of a confirmed case or outbreak of COVID-19; or,
- A person who has travelled outside of Canada in the last 14 days.

Anyone required to self-isolate will be supported by public health. Additional information is available from [BCCDC](#).

Daily Health Check

Daily health check is a tool to use to reduce the risk of a person attending a child care setting when potentially infectious. Child care directors should communicate to people who regularly attend a child care setting (i.e., children, staff, parents or caregivers of children, and other adults) their responsibility to conduct a daily health check before attending or dropping their child off at the facility. A checklist to conduct a daily health check is available as [Appendix B](#).

There is no need for a child care facility to verify that a health check has occurred every day; similarly, parents do not need to submit a daily health check form to the facility. Child care providers are not expected to screen other staff or children for specific symptoms or to take temperatures – these health assessments should be reserved for health care professionals.

Staying Home When Sick and When New Symptoms Develop

Staying home when sick is one of the most important ways to reduce the spread of communicable diseases, including COVID-19. This is why it is important for anyone who is sick to stay home. Staff or children who are experiencing symptoms of a previously diagnosed health condition do not need to stay home and should not be required to provide a doctor's note to attend a child care facility. Asymptomatic staff and children may still attend child care settings if a member of their household develops new symptoms



of illness. If the household member tests positive for COVID-19, public health will advise on self-isolation and when they may return to the child care setting.

Children and child care providers should stay at home when **new symptoms** of illness develop, such as:

- Fever
- Chills
- Cough
- Difficulty breathing (in small children, this can look like breathing fast or working hard to breathe)
- Loss of sense of smell or taste
- Nausea or vomiting
- Diarrhea

For mild symptoms without fever, children and staff members should stay home and monitor symptoms for 24 hours. If symptoms improve and the child/staff member feels well enough, they can return to the child care facility without further assessment or doctor's note.

If symptoms include fever or difficulty breathing, or if symptoms last for more than 24 hours or get worse, seek a health assessment by calling 8-1-1 or a primary care provider. If a COVID-19 test is recommended as a result of the health assessment, self-isolate while waiting for results (see information on how results are provided [here](#)).

- **If the COVID-19 test is positive**, self-isolate and follow the direction of public health.
- **If the COVID-19 test is negative**, return to the child care facility once well enough to participate.
- **If a COVID-19 test is recommended but not done**, self-isolate for 10 days after the onset of symptoms and return when feeling well enough to participate.

If you are unsure, call 8-1-1 for advice.

See the [BCCDC website](#) for more information on when to seek emergency care.

If a COVID-19 test is not recommended, staff and children may return when well enough to participate.

Managing Illness in Child Care Settings

Children or staff who become sick while in the child care setting should go home as soon as possible. Consider creating a space that is separated from others where a sick child or staff member can wait for transportation home; ensure children are supervised while in this space. More information is provided in Appendix D.

Children and staff should be permitted to return to the child care facility with mild symptoms of illness remaining, in line with the guidance in this document. This is to ensure staff and children are not kept out of the child care setting for longer than necessary. A doctor's note to confirm the health status of any individual should not be required unless needed to support medical accommodation as per usual practices.

Case Finding and Contact Tracing

Case finding and contact tracing are measures conducted by public health. If a staff member or child is a confirmed case of COVID-19 through testing or investigation (i.e., case finding), public health will identify who that person has been in recent close contact with



(i.e., contact tracing) to determine how they became infected and who else might be at risk of infection. Additional information is available [here](#).

If it is determined that a person with COVID-19 was in a child care setting when they may have potentially been infectious, public health will work with staff in the child care setting to understand who may have been exposed and will notify everyone considered a close contact. A process map showing how contact tracing would occur in a child care setting is available in [Appendix C](#).

To support the right to personal privacy, public health will only provide the information required to support effective contact tracing. Staff should not notify others about potential or confirmed cases of COVID-19 in the child care setting unless specifically directed to by public health. If necessary, public health will provide notification to the broader community if it is determined that not all potential close contacts can be reached directly.

Clusters and Outbreak Management

Cases and clusters (i.e., multiple, confirmed linked cases of COVID-19 among children or staff within a 14-day period) are expected in child care settings, as these settings reflect transmission rates in the broader community. These cases and clusters are usually not considered outbreaks. Public health declares an outbreak of a communicable disease (e.g., COVID-19, whooping cough, measles) only in rare circumstances when exceptional measures (e.g., facility closure) are required to control transmission. The determination of an outbreak of COVID-19 or any other communicable disease in a child care setting is at the discretion of Medical Health Officers.

Hand Hygiene

Rigorous hand washing with plain soap and water reduces the spread of illness. Provide regular opportunities for staff and children to wash hands with plain soap and water for at least 20 seconds or use alcohol-based hand rub containing at least 60% alcohol. Soap and water are preferred when hands are visibly dirty; otherwise, use a hand wipe followed by alcohol-based hand rub. To learn more about how to perform hand hygiene, please refer to the BCCDC's [hand washing poster](#). Children should be supervised or assisted in using hand sanitizer. Hand sanitizer should not be used on infants.

Respiratory Etiquette

Children and staff should:

- Cough or sneeze into their elbow sleeve or a tissue.
- Throw away used tissues and immediately perform hand hygiene (“Cover your coughs”).
- Not touch their eyes, nose or mouth with unwashed hands (“Hands below your shoulders”).

Personal Items and Books

Personal items (e.g., blankets, reusable food and drink containers) can be brought into the child care setting from home for individual use. Parents and caregivers should label these items and wash these items at the end of the day.

There is no evidence that COVID-19 is transmitted by books or paper; therefore, there is no need to limit the use of books and paper-based materials.

When to Use Personal Protective Equipment

Personal protective equipment, such as masks and gloves, are not needed in the child care setting beyond those used by staff as part of regular precautions for the hazards normally encountered in their regular course of work. They should only be used when all other controls have been implemented.



Appendix A: Summary of Child Care Setting Control Measures



1. STAY HOME WHEN SICK

Staff or children with new symptoms of illness should stay home.

Staff or children who develop symptoms in a child care setting should go home.



2. HAND HYGIENE

Clean hands more often.

Thorough hand washing with plain soap and water for at least 20 seconds helps prevent the spread of illness.



3. RESPIRATORY AND PERSONAL HYGIENE

Cover coughs.

Sneeze into elbows.

Don't share food, drinks, or personal items.



4. PHYSICAL DISTANCING

Minimize close, face-to-face interactions between staff.

Minimize physical contact between staff and children.

Spread children and staff out to different areas when possible.

Take children outside more often.

Incorporate individual activities.



5. CLEANING AND DISINFECTION

General cleaning of the premises should occur at least once a day.

Cleaning and disinfecting of frequently touched surfaces should occur at least twice a day.



Appendix B: Daily Health Check Example

The following is an example of a daily health check to determine if you or your child should attend a child care setting that day. **Remember, if you think your child is ill, please keep them at home.**

Daily Health Check			
1. Key Symptoms of Illness	Do you have any of the following new key symptoms?	CIRCLE ONE	
	Fever	YES	NO
	Chills	YES	NO
	Cough or worsening of chronic cough	YES	NO
	Breathing difficulties (breathing fast or working hard to breathe)	YES	NO
	Loss of sense of smell or taste	YES	NO
	Diarrhea	YES	NO
	Nausea and vomiting	YES	NO
2. International Travel	Have you returned from travel outside Canada in the last 14 days?	YES	NO
3. Confirmed Contact	Are you a confirmed contact of a person confirmed to have COVID-19?	YES	NO

If you answered “YES” to two or more of the questions included under ‘Key Symptoms of Illness’, or you have a fever or difficulty breathing, seek a health assessment. A health assessment includes calling 8-1-1, or a primary care provider like a physician or nurse practitioner. If a health assessment is required, you should not return to the child care setting until COVID-19 has been excluded and your symptoms have improved.

If you answered “YES” to only one of the questions included under ‘Key Symptoms of Illness’ (excluding fever and difficulty breathing), you should stay home for 24 hours from when the symptom started. If the symptom improves, you may return to a child care facility when you feel well enough. If the symptom persists or worsens, seek a health assessment. A health assessment includes calling 8-1-1, or a primary care provider like a physician or nurse practitioner.

If you answered “YES” to questions 2 or 3, use the [COVID-19 Self-Assessment Tool](#) to determine if you should seek testing for COVID-19.

If a COVID-19 test is recommended as a result of the health assessment, self-isolate while waiting for results (see information on how results are provided [here](#)).

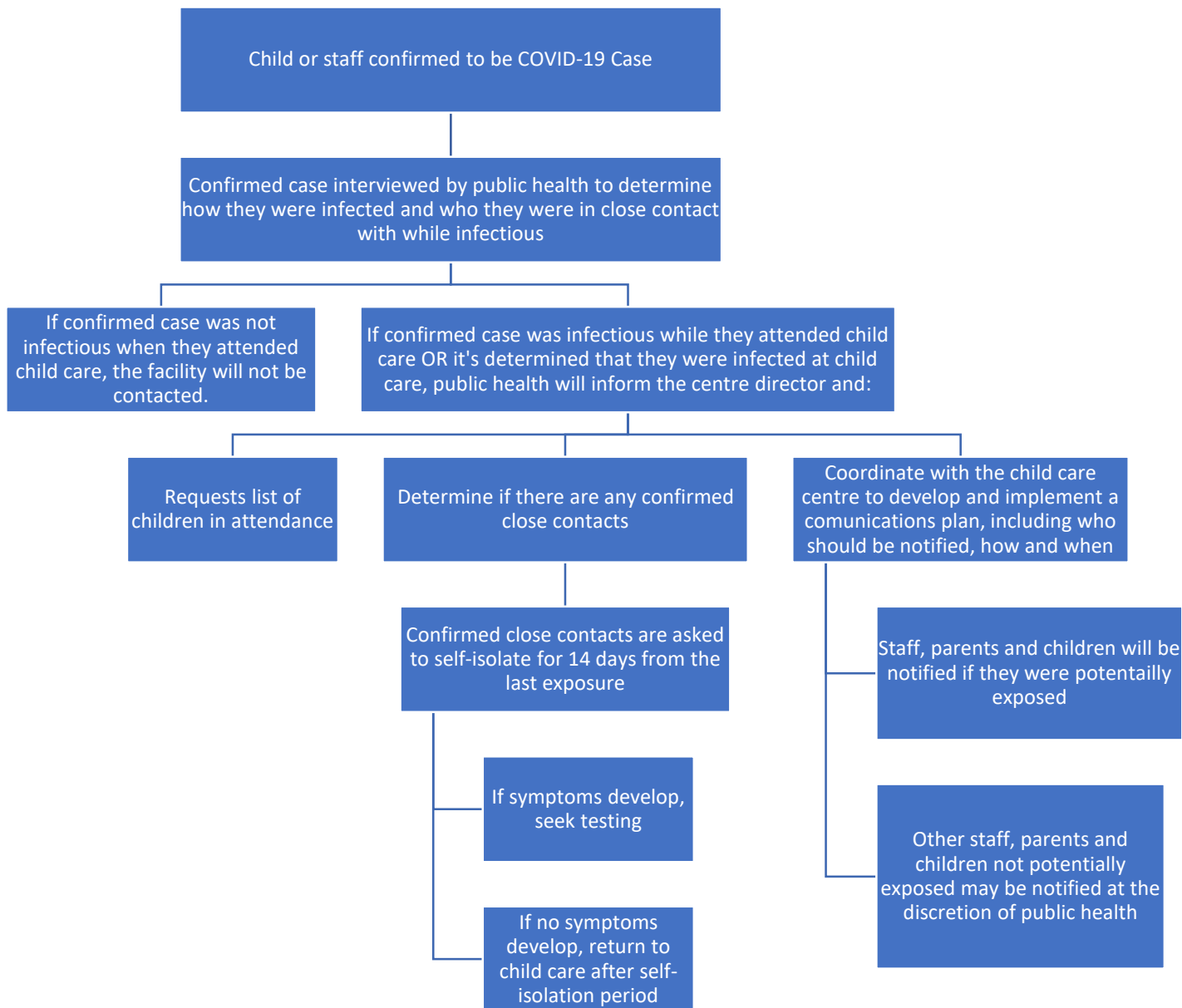
- **If the COVID-19 test is positive,** self-isolate and follow the direction of public health.
- **If the COVID-19 test is negative,** return to the child care facility once well enough to participate.
- **If a COVID-19 test is recommended but not done,** self-isolate for 10 days after the onset of symptoms and return when you or the child are well enough to participate.

If a COVID-19 test is not recommended, staff or children may return when well enough to participate.

A health-care provider note (i.e., a doctor’s note) should not be required to confirm the health status of any individual.



Appendix C: Public Health Actions if a Staff, Child or Other Person Who Has Been in the Child Care Setting is a Confirmed COVID-19 Case



Appendix D: What to Do if a Child or Staff Member Develops Symptoms

<p><i>If a Child Develops Any New Symptoms of Illness While in a Child Care Setting</i></p>	<p><i>If a Staff Member Develops Any New Symptoms of Illness While in a Child Care Setting</i></p>
<p>Staff must take the following steps:</p> <ol style="list-style-type: none"> 1. Immediately separate the symptomatic child from others in a supervised area. 2. Contact the child’s parent or caregiver to pick them up as soon as possible. 3. Where possible, maintain a 2-metre distance from the ill child. If not possible, staff should wear a non-medical mask or face covering if available and tolerated or use a tissue to cover their nose and mouth. 4. Provide the child tissues to cover their coughs or sneezes. Throw away used tissues as soon as possible and perform hand hygiene. 5. Avoid touching the child’s body fluids (e.g., mucous, saliva). If you do, practice diligent hand hygiene. 6. Once the child is picked up, practice diligent hand hygiene. 7. Staff responsible for facility cleaning must clean and disinfect the space where the child was separated and any areas recently used by them (e.g., classroom, bathroom, common areas). <p>Parents or caregivers should pick up their child as soon as possible if they are notified their child is ill.</p>	<p>Staff should go home as soon as possible.</p> <p>If unable to leave immediately:</p> <ol style="list-style-type: none"> 1. Symptomatic staff should separate themselves into an area away from others. 2. Maintain a distance of 2 metres from others. 3. Use a tissue or non-medical mask to cover their nose and mouth while they wait to be picked up. 4. Staff responsible for facility cleaning must clean and disinfect the space where the staff member was separated and any areas used by them (e.g., classroom, bathroom, common areas).
<p>Children and staff should return to the child care facility according to the guidance in this document.</p> <p>A health-care provider note should not be required for children or staff to return.</p>	

