

# Early Learning

## Center - Child Care

### Centers Protocols



The following are the minimum recommended health protocols for all child care centers choosing to operate in Texas. Child care centers may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees and children.

The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.

Please note, public health guidance cannot anticipate every unique situation. Child care centers should stay informed and take additional actions based on common sense and wise judgment that will protect health and support economic revitalization. Child care centers should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers. Federal and state regulations regarding child care centers should be followed.

#### Masks (Cloth Face Covers)

Consistent with the actions taken by many businesses across the state, all employees will wear cloth face coverings (over the nose and mouth). Ages 2 years and older are recommended to wear masks but not required.

Cloth face coverings should:

- fit snugly but comfortably against the side of the face
- be secured with ties or ear loops
- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily

## Social Distancing Strategies

Work with your local health officials to determine a set of strategies appropriate for your community's situation. Continue using preparedness strategies and consider the following social distancing strategies:

- 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. If your child care program remains open, consider creating a separate classroom or group for the children of healthcare workers and other first responders. If your program is unable to create a separate classroom, consider serving only the children of healthcare workers and first responders.
- Special events such as festivals, holiday events, and special performances will be canceled.
- Consider whether to alter or halt daily group activities that may promote transmission.
  - Keep each group of children in a separate room.
  - Limit the mixing of children, such as staggering playground times and keeping groups separate for special activities such as art, music, and exercising.
  - If possible, at nap time, ensure that children's naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Consider placing children head to toe in order to further reduce the potential for viral spread.
- Consider staggering arrival and drop off times and/or have child care providers come outside the facility to pick up the children as they arrive. Your plan for curbside drop off and pick up should limit direct contact between parents and staff members and adhere to social distancing recommendations.

If possible, arrange for administrative staff to telework from their homes.
- Minimize time standing in lines, keeping children at safe distances apart from each other. *Six feet of separation between children is preferred.*
- Limit the use of water tables and sensory tables, and have children wash or sanitize their hands immediately after using these play stations.
- Increase the distance between children during table work.
- Incorporate more outside activities, where feasible.

## **Drop-off and pick-up procedures**

- Hand hygiene stations should be set up at the entrance of the facility, so that children can clean their hands before they enter. If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol next to parent sign-in sheets. Keep hand sanitizer out of children's reach and supervise use. If possible, place sign-in stations outside, and provide sanitary wipes for cleaning pens between each use.
- Consider staggering arrival and drop off times and plan to limit direct contact with parents as much as possible.
  - Have child care providers greet children outside as they arrive.
  - Designate a parent to be the drop off/pick up volunteer to walk all children to their classroom, and at the end of the day, walk all children back to their cars.

- - Infants could be transported in their car seats. Store car seats out of children's reach.
- Ideally, the same parent or designated person should drop off and pick up the child every day. If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children, because they are more at risk for severe illness from COVID-19.

### **Screening Procedures Upon Arrival**

Persons who have a fever of **100.40 (38.00C) or above or other signs of illness** should not be admitted to the facility.

There are several methods that facilities can use to protect their workers while conducting temperature screenings. The most protective methods incorporate social distancing (maintaining a distance of 6 feet from others) or physical barriers to eliminate or minimize exposures due to close contact to a child who has symptoms during screening.

### **Vulnerable/High Risk Groups**

Based on currently available information and clinical expertise, people 65 or older might be at higher risk for severe illness from COVID-19. To protect those at higher risk, it is important that everyone practices healthy hygiene behaviors.

If you have staff members or teachers aged 65 or older, encourage them to talk to their healthcare provider to assess their risk and to determine if they should stay home.

Information about COVID-19 in children is somewhat limited, but the information that is available suggests that many children have mild symptoms. However, a small percentage of children have been reported to have severe illness. Please consult with your health care provider on what is appropriate for your child.

### **Someone is or Becomes Sick**

- Employees are to be vigilant for symptoms and stay in touch with center management if or when a staff member or child starts to feel sick.
- Children and staff who come to the child care center sick or become sick while at ELC will be sent home as soon as possible.
- Sick children and staff will be separated from well children and staff until they can be sent home.
- Sick staff members should not return to work until they have met the criteria to discontinue home isolation.
- An isolation room will be used to isolate a sick child.
- If someone is sick we will disinfect the entire center.

### **If COVID-19 is Confirmed in a Child or Staff Member**

- Contact your local health authority to report the presence of COVID-19 in your facility. Your local health authority will advise you on re-opening procedures.

- Contact Child Care Licensing to report the presence of COVID-19 in your facility.
- Close off areas used by the person who is sick.
- Open outside doors and windows to increase air circulation in the areas.
- Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting.
- Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
- If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary. ● Continue routine cleaning and disinfection.

### **Food Preparation and Meal Service**

- An operation should not serve family style meals. Each child should be provided individual meals and snacks.
- If the child brings their own food from home, the provider should discourage the sharing of food between children.  
Providers should give careful consideration to the meal process and work on educating parents and families on the best way to provide their child's food and drinks for the day/week.
- Consider storing children's food and drinks for the day in their cubbies or another dedicated area if meals are brought from home
- Meals should be served in the classroom and teachers should directly serve children in their classrooms.
- Sinks used for food preparation should not be used for any other purposes.
- Caregivers should ensure children wash hands prior to and immediately after eating.
- Caregivers should wash their hands before preparing food and after helping children to eat.
- Facilities should follow all other applicable federal, state, and local regulations and guidance related to safe preparation of food.
- If an employer provides a meal for employees, employers are recommended to have the meal individually packed for each employee.

### **Healthy Hand Hygiene**

All children, staff, and volunteers should engage in hand hygiene at the following times:

- Arrival to the facility and after breaks
- Before and after preparing food or drinks
- Before and after eating or handling food, or feeding children
- Before and after administering medication or medical ointment
- Before and after diapering
- After using the toilet or helping a child use the bathroom
- After coming in contact with bodily fluid
- After handling animals or cleaning up animal waste
- After playing outdoors or in sand

- 
- After handling garbage
- Wash hands with soap and water for at least 20 seconds. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available.
- Supervise children when they use hand sanitizer to prevent ingestion.
- Assist children with handwashing, including infants who cannot wash hands alone.
- After assisting children with handwashing, staff should also wash their hands.
- Place posters describing handwashing steps near sinks. Developmentally appropriate posters in multiple languages are available from CDC.

### **Cleaning and Disinfection Efforts**

Caring for our Children (CFOC) provides national standards for cleaning, sanitizing and disinfection of educational facilities for children. Toys that can be put in the mouth will be cleaned and sanitized. Other hard surfaces, including diaper changing stations, door knobs, and floors can be disinfected.

Intensify cleaning and disinfection efforts:

- Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games. This may also include cleaning objects/surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, cubbies, and playground structures. Use the cleaners typically used at your facility. Guidance is available for the selection of appropriate sanitizers or disinfectants.
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- Provide EPA-registered disposable wipes to child care providers and other staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use. If wipes are not available, please refer to CDC's guidance on disinfection for community settings.
- All cleaning materials should be kept secure and out of reach of children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.

### **Clean and Sanitize Toys**

- Toys that cannot be cleaned and sanitized should not be used.
- Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry. You may also clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.
- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be laundered before being used by another child.

- Do not share toys with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for “soiled toys.” Keep the dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.

Children’s books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.

### **Clean and Disinfect Bedding**

- Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. Keep each child’s bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Cots and mats should be labeled for each child. Bedding that touches a child’s skin should be cleaned weekly or before use by another child. PLEASE READ AND SIGN BELOW

COVID-19 Acknowledgement Form

Date: \_\_\_\_\_ (dd/mm/yyyy)

I \_\_\_\_\_ have received a copy of the changes being made in response to COVID- 19. I have read and understand all procedures and policies being implemented to ensure the utmost safety of my children and staff who care for them.

Please sign that you have read, understand, and agree to these policies being implemented.

Name: \_\_\_\_\_ (print)

Signature: \_\_\_\_\_