REOPENING CHILDCARE
The CDC Guidelines and helpful hints on how to meet them
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The goal of this presentation is to outline the CDC guidelines for child care centers and to give center directors and staff some helpful ideas for ways to accomplish these directives in a cost efficient manner.

Each state will have their own guidelines, so please check your state requirements and local child care licensing office to make sure that the items within will work for your jurisdiction. These CDC guidelines are based upon the information provided on 

Please check the CDC website for additional information before opening.
CDC Guideline: Implementing Social Distancing Strategies

**CDC Guidelines...**
Child Care classes should include the same group each day and the same child care providers should remain with the same group each day. Limiting the mixing of children for not only playground time, but special activities like art, music and other extracurricular activities. No special festivals, performances or graduations at this time. This may mean that grouping all of the toddlers or preschoolers in the same class at the beginning and end of each day will not be possible during pick up and drop off. It will be important for children to be brought straight to their classroom for the day and not interact with children from other classes. As the fewer children each child is exposed to during the day the less chance for transmitting disease to the entire child care community.

Some states and licensing jurisdictions are limiting group sizes to less than 10 children to maintain social distancing. If this is required for you, consider dividing up your classroom into quadrants. See Helpful Hint #1

**Helpful Hint #1:** Community Playthings has 40” tall clear panels in their Roomscapes options that could be used with furniture to divide classrooms into play zones or learning quadrants that will help with implementing physical separation between children within the room and limiting the quantity of children each individual child interacts with daily. These separated zones could be sanitized each evening and new group utilizes it the next day on a rotational basis. So that during a week each child gets to use each zone.
CDC Guideline: Implementing Social Distancing Strategies

**CDC Guidelines…**
Consider staggering arrival and drop off times and/or have child care providers outside the facility or in the lobby to pick up the children as they arrive and deliver them to the classroom.

Naptimes: If possible at nap time, ensure that children’s naptime mats, cots 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.

**Helpful Hint #2:** If 6 foot distancing isn’t possible at naptimes, (and frankly who has a classroom this large?!?) consider adding some additional barriers in your classroom and arranging furniture so that mats and cots for napping go in-between furniture and physical barriers to help. This is another place where Community Playthings clear plexiglass panels could be added to the ends of furniture to make the separation longer than a book shelf. Think about creating more zones in the room to make those separations happen.
Helpful Hint #3: Most centers don’t have sinks and plumbing already set up in the vestibule, lobby or front exterior of the building to provide for handwashing. However Jonti-craft and Monsam have portable sinks that can be filled with water and rolled outside or to the vestibule for allowing the children to wash hands before entering the facility. This is especially important for children under two with whom it is not recommended to use the alcohol hand sanitizer due to the fact that they put their hands in their mouth more often than older children. If you can’t make handwashing happen before arrival to the classroom, at least set up protocol that they have to wash their hands first when the arrive to the classroom before touching anything else.
CDC Guidelines…
Consider staggering arrival and drop off times and plan to limit direct contact with parents as much as possible.

If possible greet parents and children outside before they enter the facility. And parents don’t come in.

Designate one or more staff persons depending upon the size of the center to be the drop/off pick up person 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 and the handle should be wiped down and car seat stored out of children’s reach each day.

Ideally the same parent should drop off and pick up the child every day.

Helpful Hint #4: Before your center reopens contact all parents and get an Updated Emergency Contact list from parents. Remind parents that during this time, they need to consider NOT having older grandparents as the back up due to the possibility that they may be more susceptible and at risk to enter a child care center. Have parents consider aunts, uncles, best friends, in lieu of grandparents and add back ups to the back up, because multiple family members could be affected. This emergency list should also contain information on any risk factors that the child may have (asthma etc.) that may make the child high risk for the virus. However making sure that those contacts are updated right now is crucial, because if a parent should get sick during the work day, they shouldn’t come to the center to pick up their child and having multiple pre-vetted back ups is mission critical to the overall center health.
Helpful Hint #5: Consider setting up a temperature screening station in the vestibule or right outside of the center. It would include a log-in sheet for the day (pre-prepped form with all of the enrolled children’s names listed and box to record their temperature each day of the week) with sanitizing wipes, for wiping down both the non-contact (temporal) thermometers and the pens and masks.
CDC Guideline: Screening Children Upon Arrival

CDC Guidelines...Examples of Screening Methods
Social Distancing (Example 1)

Ask parents to take their child’s temperature upon arrival and stand at least 6 feet away from the parent/guardian and child, but a staff member should see and confirm the temperature of the child if possible.
 RELIANCE ON BARRIER/PARTITION CONTROLS (EXAMPLE 2)

Stand behind a physical barrier/partition such as a glass or plastic window that can serve to protect the staff members face and mucous membranes from respiratory droplets...if the child sneezes or coughs or talks.

Make a visual inspection of the child for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing, fatigue or extreme fussiness.

Perform Hand Hygiene with either washing hands for 20 seconds with soap and water or using a hand sanitizer with at least 60% alcohol.

Put on disposable gloves and mask.

Check child’s temperature reaching around the partition or through the window.

Make sure your face stays behind the barrier at all times during the screening.

If performing a temp check on multiple individuals, ensure that you use a clean pair of gloves for each child and that the thermometer has been thoroughly sanitized between each child.

If you use non-contact thermometer and you did not have physical contact with the child you do not need to change gloves before the next check however you should clean the thermometer with an alcohol wipe between each child.

HELPFUL HINT #6: Portable Protection Screens on wheels may be a solution to roll out so that staff can stand on one side until the temperature taking is complete.
CDC Guideline: Personal Protection Equipment

**Helpful Hint #6:** Remember that this is going to be scary at first for the children. Think of ways to make it less scary. Put a button on outside your PPE that shows a smiling picture of who you are so that they recognize you, or decorate and personalize your face mask and face shield to show a smile or a super hero anything that they would recognize. Just make sure that you are wearing both a face shield and a mask and gloves!

**CDC Guidelines...Examples of Screening Methods**

**Reliance on Personal Protective Equipment (Example 3)**

If social distancing or barrier/protection controls cannot be implemented during screening, personal protective equipment (PPE) can be used within 6 feet of a child. PPE alone is a less effective control and more difficult to implement.

Upon arrival, wash your hands and put on a facemask, eye protection (goggles or disposable face shield that fully covers the front and sides of the face) and a single pair of disposable gloves. A gown could be considered if extensive contact with a child is anticipated.

Make the visual inspection of the child for any signs of illness, flushed cheeks, coughing, shortness of breath etc..

Take the child’s temperature.

Ensure that you use a clean pair of gloves for each child and that the thermometer has been thoroughly cleaned between each child.

After each screening, remove and discard PPE and wash hands with either soap & water for 20 seconds or sanitizer that contains at least 60% alcohol.
CDC Guidelines...
If your staff does not have experience in using PPE. The CDC has recommended sequences for donning and doffing PPE. You can download, print and laminate for use.
https://www.cdc.gov/niosh/npptl/pdfs/PPE-Sequence-508.pdf
CDC Guidelines...
Intensify cleaning and disinfecting efforts:

Develop a schedule for cleaning and disinfecting. An example can be downloaded from the CDC. [https://nrckids.org/files/appendix/AppendixK.pdf](https://nrckids.org/files/appendix/AppendixK.pdf)
CDC Guideline: Clean and Disinfect

CDC Guidelines...
Intensify cleaning and disinfecting efforts:
Routinely clean, sanitize, and disinfect surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet seats and handles, desks, chairs, cubbies, playground equipment.

Use all cleaning products according to the label and the CDC has a list of products to use against COVID-19. Make sure you don’t mix the cleaning products such as those with bleach and those with ammonia.

Regularly wipe down commonly used surfaces such as keyboards, desks and remote controls between each use.

Keep the cleaning materials out of reach from the children.

Cleaning products should not be used near the children and staff should insure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.

Use gloves when cleaning surfaces and wash hands thoroughly after cleaning and removing gloves.
## CDC Guidelines...

- 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. If used, these toys must 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 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.
- 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 possibly daily) or before use by another child.
- Keep each child’s belongings separated and in individually labeled storage containers, cubbies or taken home each day and cleaned.
- Ensure adequate supplies to minimize sharing of high touch materials to the extent possible (art supplies, equipment, etc.) or limit use of supplies and equipment by one group of children at a time and clean and disinfect between use.

## Helpful Hint #7: This would be a good time to remove items out of the play cycle that are typically worn by children. Wigs, hats, dress up clothes, play uniforms you may want to consider cycling them out of the classroom until it is safer to play with these items. These soft items are harder to keep clean and separate during the day and because they are often close to the mouth, nose and skin...so much easier to share the virus from child to child.
CDC Guideline: Caring for Infants and Toddlers

When diapering a child, wash your hands and wash the child’s hands before you begin, and wear gloves. Follow safe diaper changing procedures. Procedures should be posted in all diaper changing areas. Steps include:

• Prepare (includes putting on gloves)
• Clean the child
• Remove trash (soiled diaper and wipes)
• Replace diaper
• Wash child’s hands
• Clean up diapering station
• Wash your hands

After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a fragrance-free bleach that is EPA-registered as a sanitizing or disinfecting solution. If other products are used for sanitizing or disinfecting, they should also be fragrance-free and EPA-registered. If the surface is dirty, it should be cleaned with detergent or soap and water prior to disinfection.

If reusable cloth diapers are used, they should not be rinsed or cleaned in the facility. The soiled cloth diaper and its contents (without emptying or rinsing) should be placed in a plastic bag or into a plastic-lined, hands-free covered diaper pail to give to parents/guardians or laundry service.
CDC Guidelines…
Washing, Feeding, or Holding a Child

- It is important to comfort crying, sad, and/or anxious infants and toddlers, and they often need to be held. To the extent possible, when washing, feeding, or holding very young children: Child care providers can protect themselves by wearing an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other up-do.
- Child care providers should wash their hands, neck, and anywhere touched by a child’s secretions.
- Child care providers should change the child’s clothes if secretions are on the child’s clothes. They should change the button-down shirt, if there are secretions on it, and wash their hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
- Infants, toddlers, and their providers should have multiple changes of clothes on hand in the child care center or home-based child care.
- Child care providers should wash their hands before and after handling infant bottles prepared at home or prepared in the facility. Bottles, bottle caps, nipples, and other equipment used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water (or preferably sent home for daily for cleaning).

Helpful Hint #8: Smocks! You may want to consider getting your staff smocks to wear over their personal clothing. More than 1 per staff. This allows them to protect their own clothing from sneezes and coughs and from the cleaning sprays, during the day and these smocks can be taken off and washed at the end of the day without those germs going home in their car and to their own families. Extras are important to have the ability to change during the day if needed. It would probably be good to pick a white so that they can easily be washed with bleach to remove stains and sanitize. Also provide some extra pony tail holders or bobby pins or hairnets to keep loose hair up and out of the infectious spray zone.
CDC Guidelines… Wash, wash wash….  

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
CDC Guidelines... Wash, wash wash....

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.

Helpful Hint #9: Find, print and use the CDC posters as reminders for washing skills
CDC Guideline: Food Preparation & Meal Service

CDC Guidelines...

• If a cafeteria or group dining room is typically used, serve meals in classrooms instead. If meals are typically served family-style, plate each child’s meal to serve it so that multiple children are not using the same serving utensils.
• Food preparation should not be done by the same staff who diaper children.
• 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 related to safe preparation of food.

Helpful Hint #10: If social distancing is an issue at meal times, individual chairs with trays that can be spaced apart within the classroom might be the right answer to prevent sharing. These could also be used for art and other classroom activities to keep children distanced. You may only need enough for half of the classroom and disinfect between each group using the chairs.
Educators are some of the most creative individuals on the planet. Every single a day they produce a play with multiple acts with a cast that doesn’t usually know their lines, or where to stand or even how to act. Yet they come back and they do it again the next day. This whole experience has been a strain on teachers and staff throughout the U.S. and the world. Thank goodness we have this amazing creative energy of our Educators in charge of our classrooms and children!

It is okay to ask for help from experts in different fields. At StudioMLA, we design safe and engaging environments for children. That’s our job, every day. We are thinking and planning just like you on how to make the new rules for child care work. If there is anything we can do...Send us an email and we will puzzle it over with you.

You are not alone.
Questions? Please contact Karen Shirley
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