Child Care Centers: COVID-19 Guidelines Reset

The following good practice guidelines apply to Navy and Marine Corps Child Care Development Centers (CDC) operating during the COVID-19 pandemic. CDC Directors must follow all state and local requirements and guidance from a higher authority.

The general guidance provided can serve as an outline for implementing a plan to protect staff, children, and their families from the spread of COVID-19. It is important to work with your local medical experts, school districts, child care licensing boards/bodies, child care accreditation bodies, and other community partners to determine the most appropriate plan and action. Reducing the risk of exposure to COVID-19 by cleaning and disinfection is an important part of operating safely. Cleaning and disinfecting guidelines are described below.

References
- Navy and Marine Corps Public Health Center
- Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs, 3rd Edition
- CDC: Guidance for Child Care Programs that Remain Open
- CDC Coronavirus Disease 2019 (COVID-19)
- USDA Coronavirus
- Tri-Service Food Code, TB MED 530/NAVMED P-5010-1/AFMAN 48-147_IP, 01March2019
- Army Public Health Center
- CDC Cleaning and Disinfection for Community Facilities
- Caring for Our Children, Chapter 3, Health Promotion and Protection, 3.3 Cleaning, Sanitizing and Disinfecting

Prevent the Spread of COVID-19 in a Child Care Setting
CDC Directors must ensure that all employees are fully aware of their roles and responsibilities during the COVID-19 pandemic.

Encourage staff to take everyday preventative actions to stop the spread of COVID-19.
- Wash hands often with soap and water. Use an alcohol-based hand sanitizer with at least 60% ethanol or 70% isopropanol as a supplement to handwashing but not as a substitute.
- Advise that children wash their hands vice using hand sanitizers. Young children must be supervised when they use an approved hand sanitizer to prevent accidental ingestion.
- Clean and disinfect frequently touched surfaces.
- Cover your mouth and nose with a tissue when you cough or sneeze. If tissue not available, cough or sneeze in your upper sleeve, not hands.
- Cover your mouth and nose with a cloth face covering when you have to go out in public.
- Cloth face coverings should NOT be put on babies and children under age two because of suffocation risks.
Require sick children and staff to stay home.
- Communicate to parents the importance of keeping children home when they are sick.
- Communicate to staff the importance of being vigilant for symptoms and staying in touch with facility management when they start to feel sick.
- Establish procedures to ensure children and staff that come to the child care center sick, or become sick while at your facility, are sent home as soon as possible.
- Keep sick children and staff separate 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.

Have a plan if someone is or becomes sick.
- Plan to have an isolation room or area (such as a cot in a corner of the classroom) that can be used to isolate a sick child. Additional information about isolation in related settings can be found here: isolation at home and isolation in healthcare settings.
- Be ready to follow higher authority and/or Centers of Disease Control and Prevention (CDC) guidance on how to disinfect your building or facility if someone is sick. If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.
- If COVID-19 is confirmed in a child or staff member:
  - 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 are not necessary.
- Continue routine cleaning and disinfection.
- Implement social distancing strategies.
- Execute enhanced cleaning, sanitizing, and disinfection efforts throughout the facility.
- Consider modify drop off and pick up procedures.
- During HPCON C and D, recommend implementing health screening procedures for employees and children each day upon arrival.
- Maintain an adequate ratio of staff to children to ensure safety.

Social Distancing Strategies
Work with your leadership and Installation Medical Treatment Facility, Preventive Medicine personnel to determine a set of strategies appropriate for your community’s situation. Continue using preparedness strategies and consider the following additional 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.
- Recommend eliminating or postponing special events such as festivals, holiday events, and performances.
• Consider altering or halting daily group activities that may promote transmission.
  o Keep each group of children in a separate room.
  o Limit the mixing of children, such as staggering playground times and keeping groups separate for special activities such as art, music, and exercising.
  o 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.

Outside Play
Offer outdoor play in staggered shifts. If two or more groups are outside at the same time, they should have at least 6 feet of open space between them. If applicable, have equipment such as balls and jump ropes for each group. Always wash hands right after outdoor playtime. Climbers and slides can be used. Playground equipment should be routinely cleaned and disinfected.

Cleaning, Sanitizing, and Disinfection
“Caring for Our Children” website provides national standards for cleaning, sanitizing, and disinfecting educational facilities for children. Toys that can be put in the mouth should be cleaned and sanitized. Other hard surfaces, including diaper changing stations, doorknobs, and floors can be disinfected.

Intensify cleaning and disinfection efforts
• Facilities should develop a schedule for cleaning and disinfecting.
• 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 selecting appropriate sanitizers and disinfectants for child care settings.
• Use all cleaning products according to the directions on the label. For disinfection, most common Environmental Protection Agency (EPA)-registered, fragrance-free household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available at the following website: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
• If surfaces are dirty, they should be cleaned using a detergent or soap and water before disinfection. Follow the manufacturer’s instructions for concentration, application method, and contact time for all cleaning and disinfection products.
• If possible, 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 Centers of Disease Control and Prevention’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.
Hand Hygiene Behavior

- 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 the sand.
  - After handling garbage.
- Wash hands with soap and water for at least 20 seconds.
- Assist children with handwashing, including infants who cannot wash hands alone. After assisting children with handwashing, staff should also wash their hands.
- Place posters, which are free through CDC, describing handwashing steps near sinks. Developmentally appropriate posters in multiple languages are available from the Center for Disease Control.

Clean, Sanitize, and Disinfect Toys

- Ensure employees understand the differences between cleaning, sanitizing, and disinfection. Employees should understand when each is applicable, how to safely use the chemicals, what proper protective gear to wear if required when using, how to ensure its efficacy, and what type of surfaces it can be applied to. Further explanation can be found in the cleaning, sanitizing, and disinfection area of this document.
- Toys that cannot be cleaned and disinfected 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 using an appropriate chlorine-based detergent. Items more likely to be placed in a child’s mouth, i.e., play food, dishes, and utensils must be properly cleaned and sanitized. Disinfectant chemical use is NOT recommended for these types of items.
- 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 dishpan with soapy water or put in a separate container marked for “soiled toys.” Keep dishpan and water out of reach from children to prevent the 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 high risk for transmission and do not need additional cleaning or disinfection procedures.
Clean and Disinfect Bedding
- Use bedding (sheets, pillows, blankets, and 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.

Parent Drop-Off and Pick-Up
- 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.

Screen Children Upon Arrival (if possible)
- Screen children upon arrival. Children who have a fever of 100.4°F (38.0°C) or above or other signs of illness should not be admitted to the facility. Encourage parents to be on alert for signs of illness in their children and to keep them home when they are sick.
- 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 with a child who has symptoms during screening.

Caring for Infants and Toddlers
Infants and toddlers need to be held. To protect themselves, child care providers who care for infants and toddlers should wear a long-sleeved, button-down, oversized shirt over their clothing and wear long hair up or tied back. Change outer clothing if body fluids from the child get on it. Change the child’s clothing if body fluids get on it. Place the soiled clothing in a plastic bag until it is washed. Wrap infants in a thin blanket when you hold them. Child care providers should wash their hands and anywhere else the child touched them (such as their neck or arm) after holding a child.

Diapering
When diapering a child, wash your hands, 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 hands

After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with 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 before 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.

Food Preparation, Meal Service, & Snack Time
Provide meals and snacks in the classroom to prevent a large group gathering. If you provide meals or snacks in a large lunchroom, stagger mealtimes and make sure tables are at least 6 feet apart. Space children as far apart as you can at the table. Clean and sanitize tables before and after each group eats. The child care provider (not children) should handle utensils and serve food to reduce the spread of germs. Stop tooth-brushing activities at this time.

• Foodservice areas must follow all requirements of the Tri-Service Food Code (TSFC).
• Foodservice facilities must follow all TSFC policies, including cleaning and sanitizing food contact surfaced.
• If a cafeteria or group dining room is typically used, recommend serving 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 that diapers children.
• Sinks used for food preparation should not be used for any other purposes.
• Staff should ensure children properly wash hands prior to and immediately after eating.
• Staff should wash their hands before preparing food and after helping children eat.


Cleaning, Sanitizing, and Disinfection
All cleaning and sanitizing requirements as required by the TSFC remain in effect. Please review the requirements with all employees and ensure they are properly executed. Prior to daily opening the facility must be thoroughly cleaned, sanitized, and disinfected in accordance with the TSFC and this guidance. Focus on high-contact touch areas and item

Understand the difference between cleaning, disinfecting, and sanitizing. The Centers for Disease Control and Prevention defines as follows:

Cleaning removes germs, dirt, and impurities from surfaces or objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.
**Sanitizing** lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements. This process works by either cleaning or disinfecting surfaces or objects to lower the risk of spreading infection.

**Disinfecting** kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

If a surface is not visibly dirty, you can clean it with a U.S. **EPA-registered product** that both cleans (removes germs) and disinfects (kills germs) instead. Be sure to read the label directions carefully, as there may be a separate procedure for using the product as a cleaner or as a disinfectant. Disinfection usually requires the product to remain on the surface for a certain period of time (e.g., letting it stand for 3-5 minutes). Using disinfecting wipes is acceptable however, pay close attention to the directions for using them. It may be necessary to use more than one wipe to keep the surface wet for the stated length of contact time. Ensure you always have sufficient cleaning and disinfection product on hand. Including hand sanitizer, hand soap, paper towels, toilet paper, and disinfectant wipes.

- Follow cleaning and sanitizing requirements, material, and strength as described in the TSFC to ensure its efficacy to protect surfaces.
- Avoid all possible food contamination when cleaning and sanitizing.
- All warewashing equipment can meet temperature and/or sanitizer final rinse requirements as per the **TSFC**. Always have sufficient warewashing detergent and approved chemical sanitizer if applicable as prescribed in the TSFC.
- Wash and sanitizing foodservice equipment in the kitchen area when contaminated or at the end of each meal period.
- Strongly recommended that the kitchen use approved sanitizer as prescribed in the TSFC.
- The following is an example of typical sanitizers that can be used and the normal strength to achieve sufficient efficacy in the removal of bacteria and viruses.
  - Chlorine bleach sanitizing solution with a minimum concentration of 100 parts per million free available chlorine with a maximum of 200 parts per million. To be effective the product must remain WET on the surface for a minimum of 1-minute to allow proper sanitization.
  - Quaternary ammonium compounds (or QUATS) are prepared according to the manufacturer’s label. Wet contact time to achieve proper sanitizing will vary by product; follow the manufacturer’s label.

**Disinfection**: Procedures detailed below are enhanced sanitation procedures in response to COVID-19.

- Disinfection procedures are recommended if a child care operation has been closed for an extended period for any reason. An extended period is considered 30 days or if closed for any period following an employee(s) having a confirmed case of COVID-19. Please collaborate with the local Preventive Medicine personnel for detailed guidance.
- Disinfect all nonporous high touch **non-food surface** equipment in **kitchens areas** include frequently touched areas such as door handles at the end of each meal period.
Disinfect high touch surfaces after each meal period.
  - Common condiment bottled. (Strongly recommend switching to single-serve packets)
  - Entrance, exit, and restroom door handles.
  - Tables and chairs.
  - Restroom light switches, handicap rails, hand wash sink fixtures, soap dispensing levers, paper towel dispensing levers, forced air hand drying control button, and door latches for toilet stalls.

Proper safety precautions must be observed when using disinfection products. Use EPA registered disinfecting products disinfectants to nonporous surfaces that are not classified as food equipment.
  - Prepare chlorine bleach disinfecting solution with a minimum concentration of 1,000 parts per million free available chlorine, with a minimum of 1-minute wet contact time required to achieve adequate disinfection.
  - For alternate disinfecting products, refer to the EPA-registered disinfectants. Always refer to label instruction for proper contact time to achieve an adequate level of disinfection will vary by product and for safe use.

If using a bleach solution to sanitize or disinfect follow formulation provided below. Use caution and ensure employees have and utilize proper protective equipment when mixing or using chemicals.

<table>
<thead>
<tr>
<th>Concentration</th>
<th>Bleach with 5 to 6% Sodium Hypochlorite</th>
<th>Bleach with 8.25% Sodium Hypochlorite</th>
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<tbody>
<tr>
<td>100-200 ppm</td>
<td>1/2 Tablespoon bleach per 1 gallon of water</td>
<td>1 teaspoon bleach per 1 gallon of water</td>
</tr>
<tr>
<td>1,000 ppm</td>
<td>1/3 cup bleach per 1 gallon of water</td>
<td>3 Tablespoons bleach per 1 gallon of water</td>
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</tbody>
</table>

When mixing bleach solutions always adhere to all safety procedures including, but not limited to, good ventilation and proper protective gear (e.g., gloves, masks, goggles).