Guidance for Childcare Providers

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Updates can be found on the [OCFS COVID Response Page](#)

The Department of Health and Human Services recognizes the vitally important role of childcare providers for Maine’s children, their parents, and employers. The Department has developed this guidance document to provide clear guidelines in order to ensure the health and safety of staff and children. This guidance is applicable both to providers that have continued to operate and those that closed temporarily and are re-opening. Providers should follow these guidelines, as well as continuing to monitor US and Maine CDC guidance. The recommendations regarding COVID-19, including the prevention of transmission, continue to evolve as experts learn more about the virus. As a result, this document and the guidance contained within it are subject to change.

Additional guidance is available from the [US CDC](#) and the [Maine Department of Health and Human Services](#).

General Guidance

Child Care Providers - Please review the CDC guidance [Prepare your Small Business and Employees for the Effects of COVID-19](#); and US CDC guidance especially for [Childcare Providers](#):

- Know where to find local information on COVID-19 and local trends of COVID-19 cases.

Physical Distancing and Good Hygiene to Prevent the Spread of Disease

Screening Staff and Children

- Minimize the risk of disease introduction or transmission, by requiring every person (including staff) entering the facility to be screened for any signs or symptoms of viral infection for as long as this pandemic is active. These [signs and symptoms](#) according to the US CDC include:
  - Cough
  - Shortness of breath or difficulty breathing
  - Fever (body temperature above 100.4 degrees Fahrenheit)
  - Chills
  - Repeated shaking with chills
Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

- Screen staff upon arrival at the facility prior to working with any children or beginning their normal work day. Staff who present with symptoms when entering the facility or during the day should be sent home immediately.

- Screen children prior to entering the facility. Children who present with symptoms when entering the facility should be sent home immediately. A quick scan type thermometer may be utilized to take body temperatures in a timely manner. If there is a question about the results or the results are inconclusive, a more accurate probe style thermometer should be utilized using an oral or under the arm method.

- Children who present with symptoms during the day should be isolated immediately, provided a face mask/cloth facial covering (if over the age of two) and sent home with their caregiver. Expectations should be established with caregivers regarding the speed with which they must respond to the facility if their child develops symptoms.

Physical 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.
- Cancel or postpone special events such as festivals, holiday events, and special performances.
- Consider whether to alter or halt daily group activities that may promote transmission.
  - If possible, keep each group of children in their separate rooms.
  - 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 curb side drop off and pick up should limit direct contact between parents and staff members and adhere to social distancing recommendations.
- Adults in the program should be limited to ones caring for the children and/or overseeing program operations.
- If possible, arrange for facility administrative staff to telework from their homes and limit or eliminate all visitors.
Personal Protective Equipment

- Utilize personal protective equipment, including gloves and surgical masks, while performing initial screenings and when in close contact with any staff or child suspected of presenting with symptoms.
- Allow staff to wear face masks or face coverings throughout the day.
- Provide staff with up-to-date COVID information and training on safe donning, doffing, and disposal of personal protective equipment such as gloves and masks.
- Use posters to remind staff and children about hand hygiene and physical distancing.

Drop Off Procedure

- Consider staggering arrival and drop off times and plan to limit direct contact with parents as much as possible.
- Require staff to greet all children at the entrance and ensure a staff member completes the screening protocol.
- If a staff member is not available at the entrance, post instructions on how to contact a staff person for the screening protocols.
- Make hand sanitizer available at the entryway and require everyone entering the building to use it.
- Limit who proceeds past the entry way, by having staff walk all children to their classroom after the screening is complete.
- Have staff complete the sign-in process in the classroom.
- Visitors should not be allowed in the building.

Pick Up Procedure

- Require staff to be present at the entryway when children are expected to be picked up. If a staff member is not available at the front door, post instructions on how to contact a staff person for pick up.
- Staff should walk children from their classroom to their caregiver.
- Pick up children at the playground gate, if children are on the playground, after notifying staff.

Food Preparation and Meal Service

- 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, if possible.
- Sinks used for food preparation should not be used for any other purposes.
- Children should wash hands prior to and immediately after eating.
- Staff should wash their hands before preparing food and after helping children to eat.
Cleaning and Disinfecting Protocols

- Ensure that employees have access to hand soap, face masks, gloves, tissues, paper towels, and a designated trash bin to dispose of used items at all times.
- Provide access to hand washing areas and require frequent hand washing for staff and children during the day (preferably every 45 minutes).
- Provide hand sanitizer (at least 60% alcohol) in multiple locations around the facility.
- Ventilate workspace with open windows and doors to the extent safely possible.
- Disinfect all high touch surfaces. These surfaces should be cleaned and disinfected a minimum of each hour during the hours of operation.
- Clean all cots/sleeping mats after each use.
- Clean playgrounds after every use (or change of children) using a bleach or sanitizing solution for all playground equipment.
- Clean and disinfect ALL restroom surfaces including floors, sinks and toilet bowls daily. Place trashcan by door. Remove anything that does not have to be in the restrooms and post handwashing signs in ALL restrooms.
- Disinfectant only works on a clean surface so clean all surfaces and tools with hot soapy water, or cleaning wipes (if using wipes, be sure to cover surface thoroughly) before disinfecting.
- Contact time refers to how long the disinfectant is visibly wet on the surface allowing it to destroy the pathogens.
- Typical contact time for immersion/sprays is 10 minutes, for disinfectant wipes is 2-4 minutes.
- Observe contact time on label to allow disinfectant to work properly.
- Disinfection is for hard non-porous surfaces, glass metal and plastic.
- Launder all linens, towels, blankets and smocks in hot soapy water and dry completely at the warmest temperature allowed and store in a closed cabinet. Store all used/dirty linens in an airtight container.
- Make sure you have a safe process to receive supplies and other deliveries.
- Providers should have multiple changes of clothes on hand for each child.
- Leave extra clothes, blankets or toys at the facility. These items should be laundered at the facility, if possible.
- Contaminated items not able to be laundered onsite should be placed in a plastic bag to be laundered at home in hot water.

In Case of Illness

- Know the signs and symptoms of COVID-19. Know what to do if staff become symptomatic at the workplace.
- Encourage employees to stay home and notify workplace administrators when sick or someone in their household is sick (workplaces should provide non-punitive sick leave options to allow staff to stay home when ill).
- Review, update, or develop workplace plans to include leave policies for people with COVID-19 symptoms.
• When employees feel ill:
  o Instruct employees to not come to work when symptoms of COVID-like illness (cough, fever);
  o Becomes ill on the job
    ▪ Should leave the facility immediately
    ▪ Call 911 for guidance/assistance, if an emergency
    ▪ If immediate departure from the facility is not possible or while waiting for emergency personnel, have a plan for a room or space where the employee can be isolated until transferred to home or health care facility and provide a facemask, if available and tolerated
  o Returns to work
    ▪ Know the current CDC guidance for employees infected by COVID.
• If COVID-19 is confirmed in a child or staff member:
  o Close off areas used by the person who is sick.
  o Open outside doors and windows to increase air circulation in the areas.
  o 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.
  o Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
  o 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.

General Cleaning, Disinfecting, and Sanitizing
• Four levels
  o Daily clean
    ▪ Typical housecleaning using CDC/EPA-approved disinfectants.
  o Enhanced clean
    ▪ Use of CDC/EPA-approved disinfectant cleaners on “high touch” surfaces in common areas/public spaces at regular frequency (elevator buttons; railings; door knobs and handles; light switches; bathrooms including toilets, faucets and sinks; breakrooms and breakroom equipment like refrigerator handles, microwaves, and tables.
  o Deep clean
    ▪ In addition to the “Enhanced Clean” scope above, “deep cleaning” applies to disinfecting items such as desks, chairs, computer keyboards/mice, interactive touch screens, phones, printers, fax machines, office door handles, communal items like salt and pepper shakers, etc.
  o Deep clean with disinfection and sanitization with COVID exposure
• In instances where an employee or child has COVID-19 symptoms or a positive test, please contact your state or local health department for appropriate disinfection/sanitation instructions. Please also see the CDC information on “Cleaning and Disinfection After Persons Suspected/Confirmed to Have COVID-19 Have Been in the Facility”
• For **disinfection** of hard, non-porous surfaces, appropriate disinfectants include:
  o [EPA’s Registered Antimicrobial Products for Use against Novel Coronavirus SARS-CoV-2](https://www.epa.gov/pesticide-registrations/registered-antimicrobial-products-use-against-novel-coronavirus-sars-cov-2), the virus that causes COVID-19. Follow the manufacturer’s instructions for concentration, application method, and contact time for all cleaning and disinfection products.
  o [Diluted household bleach solutions](https://www.epa.gov/cleaning-disinfection/diluted-household-bleach-solutions) prepared according to the manufacturer’s label for disinfection, if appropriate for the surface. Follow manufacturer’s instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
  o Alcohol solutions with at least 70% alcohol.

• For electronics, such as tablets, touch screens, keyboards, and remote controls:
  o Consider putting a wipeable cover on electronics.
  o Follow manufacturer’s instruction for cleaning and disinfecting.
  o If no guidance, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.

• Pay close attention to high traffic public use areas such as lobbies, entrances, seating areas, and restrooms.

• Make sure that staff are regularly washing hands before and after gloving and wiping down work surfaces.

**Sources:**


United States Environmental Protection Agency: [List N: Disinfectants for Use Against SARS-CoV-2](https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2)