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Reopening: Guidance for Childcare Centers

Guidance Document

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Overview

The ability of daycare and childcare centers to provide parents, guardians, and families with childcare services has been impacted by the COVID-19 pandemic. In some areas, childcare centers have been deemed “essential” by state and federal governments and have continued to provide childcare services (particularly for healthcare and other essential workers). Others were viewed as “non-essential” and their employees have been out of work during the shelter-in-place and stay-at-home orders. This document is intended to provide guidance for a range of child care programs including home-based childcare programs, private child care centers, pre-kindergarten (pre-K) programs, Head Start and Early Head Start programs, childcare centers operated by municipalities, or those partnering with healthcare facilities for the children of essential workers (i.e., first responders, healthcare workers, transit workers, or other essential industries where a parent cannot stay home). Reopening and maintaining safe childcare facilities after a closure requires several considerations.

SARS-CoV-2, the virus that causes COVID-19, is thought to be spread primarily through aerosolized respiratory droplets at close range. Airborne transmission from exposure to very small droplets long distances is unlikely. However, there is evidence that this method of transmission is possible, particularly in crowded, indoor spaces. People may also become infected by touching contaminated surfaces. The virus has been shown to survive in aerosols for hours and on surfaces for days. Infection can occur through eyes, nose, and mouth exposures. There is also strong evidence that people can spread the virus while pre-symptomatic or asymptomatic.

With restrictions being lifted and parents/guardians/families returning to work, childcare and parents are faced with difficult questions:

- How can we protect the health and safety of participating children/families and employees?

- How do we assure parents/guardians/families that we are doing all we can to prevent the spread of COVID-19?
- What do we do if a contact of the child or childcare worker has tested positive or has a suspected case of COVID-19?
- How do we deal with cleaning and sanitizing high-contact surfaces such as toys, books, and stuffed animals regularly during the day?
- What are the best practices for drop-off and pick-up?

The purpose of this guide is to provide clear and actionable guidance towards the safe operations of childcare facilities through prevention, early detection, and control of COVID-19.

What should an Employer do to protect themselves and children/families attending the childcare facility?

Employers should continually monitor global (World Health Organization [WHO]), federal (Centers for Disease Control [CDC] and Occupational Safety and Health Administration [OSHA]), state, and local guidelines for updates and changes in recommendations, cleaning and disinfecting strategies, and other best management practices. They should seek guidance from regional, national, and international leaders relative to health policy and best practices. Employers should consider forming a knowledgeable team to monitor, assess, and implement new strategies as they become available.

In addition, employers should consider the following strategies for reducing the risk of COVID-19 transmission in regards to physical distancing strategies, drop-off and pick-up, enhanced cleaning and disinfecting practices, restrooms, food preparation, employee and child wellness, training, waste and laundering, and risk communication.



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Due to the wide variety of childcare facilities (e.g., functions, sizes, physical layout), it may not be possible to implement all of the following recommendations; however, trying to tackle the problem from multiple angles and with multiple layers can help reduce health risks. Employee training will be important.

Physical Distancing Strategies and Childcare Provider Contact with Children

- If possible, childcare classes should include the same group each day. Limit the mixing of children (e.g., stagger outdoor/playground activities, maintain separate groups for group activities such as art, music, and exercising). Consider whether to alter or halt daily group activities that may promote disease transmission.
- Consider discontinuing or limiting to “essential” parent participation/volunteering or other daycare visitors/volunteers.
- To the extent possible, keep each group of children in a separate room.
- If feasible, the same childcare providers should remain with the same group each day.
- Cancel or postpone special events such as festivals, holiday events, and special performances.
- If possible, arrange for administrative employees to work from home.
- Encourage employees not to linger or socialize in common areas.
- It is important to comfort crying, sad, and/or anxious infants and toddlers, which may involve close contact with childcare providers. To the extent possible, when in close contact with children, childcare providers can protect themselves by wearing an over-large button down overlay that can be removed, a long-sleeved shirt, and by wearing long hair up off the collar.

Drop-Off and Pick-Up

- Consider relocating drop-off and pick-up location areas and staggering arrival and departure times or put in place other protocols to limit direct contact with parents/guardians/caretakers as much as possible.
 - If possible, childcare providers should greet children outside as they arrive and then walk or carry children to their classroom. At pick-up, employees should walk or carry children to their cars or caregiver outside of the building.
 - Infants should be transported in their car seats.
- Schedule employee and family drop-off and pick-up times in advance.
 - When feasible, the same parent or designated person is encouraged to drop off and pick up the child.
- If feasible, car seats and strollers should remain with the caregivers and not be stored at the daycare facility.
- Regulate the use of common areas with clear signage (including maximum occupancy) and physical distancing measures in accordance with public health rules and guidelines.
 - Consider marking 6-foot increments on the floor so employees and families can maintain appropriate distancing at the sign-in station.
 - Consider providing infographic sheets or posting signage as a visual reminder of the appropriate protocol.
 - Provide alcohol-based hand sanitizer with at least 60% alcohol or 70% isopropyl alcohol next to the sign-in station if a sink for handwashing is not readily accessible.
- During drop-off and pick-up, employees and parents/guardians/caretakers should wear a cloth or disposable face covering if possible, in accordance with local, state and federal requirements



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- Cloth face coverings should **NOT** be worn by babies and children under age two because of danger of suffocation.
- CDC recommends all people 2 years of age and older wear a cloth or disposable face covering in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
- If your employees do not have experience in using Personal Protective Equipment (PPE), [the CDC has recommended sequences for donning and doffing PPE](#).
- Employees and children should wash their hands once they are admitted to the facility and upon leaving the facility.
- Encourage employees and families not to linger or socialize in check-in areas.
- Discourage handshaking.
- Establish a disinfection routine.
 - Ensure disinfection protocols follow product instructions for application and contact time. All items should be allowed to dry thoroughly after cleaning.
 - Use disposable wipes or rags when available. If not available, ensure rags are maintained, handled, and cleaned per product instructions.
- Consider developing a standard operating procedure, a checklist, or audit system to consistently train employees on enhanced cleaning/disinfecting practices or to track when and how cleaning and disinfecting is conducted. Note that this may be a requirement in some states or local jurisdictions.
- All cleaning materials should be kept secure and out of reach of children.
- Disinfect all surfaces and commonly touched equipment and surfaces (e.g., toys, games, cubbies), and educate employees on common facility high-touch surfaces (e.g., doorknobs, faucet handles, light switches, etc.)
 - All items should be allowed to dry thoroughly.

Enhanced Cleaning and Disinfecting Practices and Ventilation

- Select appropriate disinfectants – consider effectiveness and safety.
 - The U.S. Environmental Protection Agency (EPA) has developed a [list of products](#) that meet EPA's criteria for use against SARS-CoV-2.
 - Do not mix different EPA registered chemicals together. The combination could be toxic by inhalation. Be particularly careful when using any products containing ammonia, sodium hypochlorite (bleach), or hydrogen peroxide.
 - Review product labels and Safety Data Sheets (SDS) and follow manufacturer specifications for cleaning/disinfecting.
 - Consider consulting an Occupational and Environmental Health and Safety (OEHS) Science Professional or Industrial Hygiene expert if additional advice is needed. AIHA has a [consultants list](#) of such qualified professionals.
- Perform normal routine cleaning of outdoor areas, like playgrounds in schools and parks.
 - Do not spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
 - High touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned and disinfected routinely.
 - Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
- Do not disinfect sidewalks and roads.
 - Spread of COVID-19 from these surfaces is very low and disinfection is not effective.



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- Develop strategies to minimize contact with commonly touched surfaces, and wash hands/utilize hand sanitizer before and after touching high-touch surfaces.
- Common areas (e.g., lobby, sign-in station) should be cleaned and disinfected before and after children arrive and before and after children leave.
 - Disinfect all surfaces and commonly touched equipment (e.g., check-in/check-out tablets).
 - Seating, doors, restrooms, common areas, etc. should be disinfected at the end of each day.
- Toys that can be put in the mouth should be cleaned and disinfected frequently and before being shared with another child. Set aside toys that need to be disinfected; washing with soapy water is the ideal method of cleaning. Toys that cannot be cleaned or disinfected should not be used. Rotate toys/games throughout the day for disinfecting.
- Do not share toys between groups of children, unless they have been washed and disinfected.
- Children's books and other paper-based materials are not considered a high risk for transmission and do not need additional cleaning or disinfection.
- Refer to [CFOC guidance](#) for national standards for cleaning, sanitizing, and disinfection of educational facilities for children.
- Provide natural ventilation by opening windows and doors whenever possible to increase air flow. If windows and doors cannot remain open, provide good indoor air quality by:
 - Keeping HVAC system operational to maintain thermal comfort and maximize outdoor air based on system design.
 - Maintaining the relative humidity at 40-60%.
 - Limiting the use of portable pedestal or overhead ceiling fans.
- If you need assistance on HVAC issues, ask an HVAC professional and see the American Society of Heating, Refrigerating, and Air-Conditioning Engineers' (ASHRAE) [COVID-19 \(Coronavirus\) Preparedness Resources](#) updates for more information.
 - AIHA Occupational and Environmental Health and Safety (OEHS) Science Professionals and industrial hygienists are also well versed in general dilution ventilation. AIHA has a [consultants list](#) of such qualified professionals.
- Consider using portable HEPA filtration units.
- If fans such as pedestal fans or hard mounted fans are used, take steps to minimize air from fans blowing from one person directly at another individual. If fans are disabled or removed, employers should remain aware of, and take steps to prevent [heat hazards](#).

Diapering

- Conduct training for employees on diapering procedures and disinfection routines.
 - Consider providing infographic sheets or posting signage as a visual reminder of the appropriate protocol.
- When diapering, employees should follow good hygiene practice, including hand washing (child-care provider and child), removing soiled trash, washing body parts that came in contact with child's secretions, and cleaning and disinfecting the diapering station with a sanitizing or disinfecting fragrance-free bleach solution.
- If possible, infants, toddlers, and employees should have multiple changes of clothes on hand in the childcare center.
 - Store each child's clothing separately.
 - Change the child's or employee's clothes if any secretions are on them.
 - Employees should change their clothes if any child's secretions are on their clothes.



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- Contaminated clothes should be placed in a plastic bag until they can be washed, or washed immediately in a washing machine.

Napping

- Cribs, cots, naptime mats and children's' bedding should be labeled for each child and stored separately.
- Use bedding that can be machine washed on high temperature settings. Wash bedding weekly, at a minimum and/or before use by another child, whichever comes first.
- Naptime mats or cribs should be spaced out as much as possible, at a minimum distance of 6 feet apart.
- If possible, arrange children head-to-toe to further reduce the potential for viral spread.
- Clean and disinfect nap pads or cribs daily.

Restrooms (**NOTE: See [Supplement guidance on use of air dryers](#)**)

- Post signage limiting restroom occupancy to allow for proper physical distancing and to remind employees and children to wash hands before and after using the restroom.
- Minimize touchpoints entering and existing restrooms, if possible.
- If the door cannot be opened without touching the handle, provide paper towels and a trash can by the door so a paper towel can be used when touching the handle and then discarded.
 - Consider controlling access to bathrooms with a key so disinfection measures can be better managed. If a key is used, consider disinfecting it after each use.
- Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible.

- Place signs indicating that toilet lids (if present) should be closed before and after flushing.
- Use no-touch faucets, towel dispensers, soap dispensers, and waste receptacles when possible.
- Hand soap should be readily available for use by occupants.
- Provide paper towels and air dryers in restrooms.¹
 - The WHO and CDC currently state that hands can be dried using a paper towel or hand dryer.
 - Due to current uncertainties surrounding the transmission of SARS-CoV-2, care should be taken when using a hand dryer or paper towel.
 - The use of touch or push hand dryers is discouraged due to possible surface contamination. If hand dryers are used, consider touchless devices.
- Businesses and employers should work with HVAC professionals to ensure that bathrooms are well ventilated, and if filtration is used, that proper filtration practices are being followed.
- Increase frequency and efforts to keep bathrooms clean and properly disinfected and maintain a record of sanitary work practices.

Food Preparation and Feeding

- Notably, according to the Food and Drug Administration (FDA) and the CDC, there is currently no evidence to support transmission of SARS-CoV-2 associated with food. Existing food safety requirements are already very stringent and reduce the likelihood of foodborne disease transmission. Additional measures can be taken to reduce the risk of transmitting SARS-CoV-2 from touching surfaces or from person-to-person spread through respiratory droplets.
- Kitchen areas and equipment should be cleaned and disinfected daily (at a minimum); after clean-

¹NOTE VERSION CHANGE: In version 1 of this guidance document, in the section titled "Restrooms" it stated to disconnect or tape off the hand dryer. NOTE: See [Supplement guidance on use of air dryers](#).



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ing, cutlery and dishware should be stored to prevent contamination.

- The outside of dishwashers should be cleaned at the beginning and end of each shift.
- All silverware and dinnerware should be cleaned in the dishwasher, when available.
- Silverware should be stored in a way so that adjacent silverware is not easily touched when a provider is retrieving a piece.
- If silverware and dishes cannot be kept clean and covered, disposable options are recommended.
- Water/beverage faucets that require workers to operate them with their hands should be disinfected throughout the day.
- Ice machines that require a handheld scoop should not be used, as it is difficult to control potential contamination in this case.
- When preparing food for children, childcare providers must first wash their hands and then wear food-safe disposable gloves. Food service and preparation should follow FDA guidance.
- All children, including infants, must wash hands before and after eating. Daycare providers who assist children in washing hands should wash their own hands after assisting a child.
- If a cafeteria or communal dining facility is usually used, serve meals in classrooms instead. Avoid the use of shared serving utensils for snacks and meals. To the extent possible, for snacks and meals provided by the center, pre-packaged boxes or bags should be prepared for each child, rather than “buffet” or other family-style food serving.
- Prior to meal or snack times, tables must be thoroughly cleaned and disinfected with an [EPA-registered household disinfectant](#) approved for use against the virus causing COVID-19. Diluted bleach (sodium hypochlorite) (5 tablespoons per gallon of water/4 teaspoons bleach per quart of water) can also be used for suitable surfaces according to the CDC, following the manufacturer’s guidance for usage and ensuring adequate ventilation.
- Children should not share utensils, food, snacks, or drinks.
- For younger children who require assistance with feeding, childcare providers must wash hands and put on disposable gloves. These gloves should be removed and discarded in the trash immediately after feeding, followed by another hand washing.
- It is recommended that each night, parents be required to take home and thoroughly wash all bibs, bottles, bottle caps, nipples, food containers, utensils, and any other feeding items brought from home in hot, soapy water or in the dishwasher. During the day, used/empty bottles and other feeding items brought from home should be placed in each child’s cubby or bin, out of children’s reach.
- Childcare providers should wash their hands after handling children’s bottles, cups, and food containers.

Employee and Child Wellness

- Health checks and reporting requirements of individuals infected with COVID-19 should be explained to employees prior to reopening and again once operations have resumed.
- Communicate to employees and families the importance of being vigilant for symptoms and staying in touch with facility management if or when they start to feel sick.
- Revisit your leave or sick program to allow for time off and follow all HR Policies and HIPAA/other regulatory requirements.
- Parents/caretakers/guardians should inform the childcare facility if they or the child has been diagnosed with or in contact with someone diagnosed with COVID-19.



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- Conduct employee temperature screening and wellness checks before each shift. **(NOTE: be sure to comply with OSHA's Access to Employee Exposure Medical Records standard for confidentiality.)**
 - Temperature screening methods can include manual (use non-contact infrared thermometers) or thermal camera meeting [FDA recommendations](#). Additional screening information/guidance can be found on the [CDC website](#).
 - Assign an employee to manage and conduct the temperature screenings while following CDC guidelines in the above link. If this is not possible, employees can self-check their own temperature.
 - Screening should be done in a manner such that the privacy of employees is respected.
 - Perform a visual inspection for other signs of illness (e.g., flushed cheeks, rapid or difficulty breathing without recent physical activity, fatigue, extreme fussiness, cough).
 - Employees who have a fever of 100.4° F (38° C) or above, or other signs of illness should not be admitted to the facility.
 - Have a plan if someone is sick.
 - Options for daily health check screenings for children are provided in [CDC's supplemental Guidance for Child Care Programs that Remain Open](#) and in [CDC's General Business FAQs](#) for screening staff.
- Employers can consider incorporating a wellness questionnaire with questions such as:
 - Have you, or a person you have been in close contact with, been diagnosed with COVID-19 within the last 14 days? (close contact is 6 feet or less for more than 10 minutes.)
 - Have you experienced any cold or flu-like symptoms in the last 72 hours (to include fever, shortness of breath, cough, sore throat, difficulty breathing, nausea, vomiting and diarrhea)?
 - Have you traveled to an international or domestic "hot spot" in the last 14 days?
 - There are a number of examples available for wellness questionnaires (see Resources below).
- Require employees who have symptoms or signs (i.e., fever, cough, or shortness of breath) or who have a sick family member at home with COVID-19 to notify their supervisor and stay home.
- Sick employees should follow the CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met in consultation with healthcare providers and state and local health departments. Consider waiving requirements for medical documentation during the pandemic, as CDC has advised people with mild illness NOT to go to the doctor's office or emergency room.
- If employee is sick or receives positive COVID-19 test results, results should be reported to employer. In the case of a positive COVID-19 test result, the employee must stay home until cleared for physical return to the workplace by their medical provider, following the CDC's [Discontinuation of Isolation for Persons with COVID -19 Not in Healthcare Settings](#).
- If an employee tests positive:
 - Follow federal, state, and local recommendations for reporting and communicating cases, while remaining compliant with regulations and guidelines pertaining to protecting private health information such as confidentiality required by the Americans with Disabilities Act (ADA). See OSHA for guidance on reporting workplace exposures to COVID-19.
 - Engage HR immediately and enforce all applicable HR rules and regulations.
 - The employee shall be isolated to the area they are in currently and removed from the work site for a minimum of 14 days.



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- Any individuals having “close contact” (within approximately 6 feet) with the sick employee should also be isolated from the work site for 14 days; and all other employees should continue to follow physical distancing rules. Communicate and reinforce with employees, while maintaining PII and HIPAA requirements, that they may have been exposed and to closely monitor their health, temperature, and current symptoms as identified by the CDC. Contact tracing and sharing of employee information should be done under the guidance of Human Resources due to privacy requirements of HIPAA, ADA, and EEOC. See the CDC’s [“Coronavirus Disease 2019 \(COVID-19\) General Business Frequently Asked Questions”](#).
- Enhanced cleaning and disinfecting should be done immediately by trained personnel, who should wear face coverings and gloves, dispose of gloves after use, and wash hands and face when complete. Visibly dirty surfaces shall be cleaned using a detergent or soap and water PRIOR to disinfection.
- For disinfection, use only EPA-registered disinfectants on [List-N](#).
- Keep sick employees/children separate from well employees/children until they can return home. Sick children should be picked up as soon as possible.
- Stagger provider shifts, start times, and break times (as feasible).
- Ask employees to consider the following if they commute to work using public transportation:
 - Use other forms of transportation if possible.
 - If taking public transportation, maintain physical distancing and wear a cloth or disposable face covering.
 - Change commute time to less busy times if possible.
- Wash hands before and as soon as possible after their trip.
- Provide employees adequate time and access to soap, clean water, and single use paper towels for handwashing.
- Remind employees to [wash their hands](#) often with soap and water for at least 20 seconds. If soap and water are not available, they should use alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol. However, any use of alcohol-based hand sanitizers should follow local and State guidelines for schools or childcare facilities.
- Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissues) to support healthy hygiene practices.
- [Post signs and reminders](#) at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette. This should include signs for non-English speakers, as needed.
- Use no-touch waste receptacles when possible.
- Remind employees to avoid touching their eyes, nose, and mouth with unwashed hands.
- Remind employees if someone coughs or sneezes, they should cover their mouth and nose with a tissue or use the inside of their elbow. Throw used tissues in the trash and immediately wash hands with soap and water for at least 20 seconds or use hand sanitizer. Learn more about [coughing and sneezing](#) etiquette.
- Remind employees that people may be able to spread COVID-19 even if they do not show symptoms. Consider all close interactions (within 6 feet) with employees, children, parents, and others as a potential source of exposure.
- Childcare providers should wear a cloth or disposable face covering to cover their nose and mouth in all areas of the childcare facility.



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- Teach and reinforce use of cloth or disposable face coverings among all employees. Face coverings are most essential in times when physical distancing is not possible. Employees should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to all employees on proper use, removal, and washing of cloth face coverings. Additional information on cloth face coverings can be found here on the [website of CDC](#).
- Cloth face coverings may prevent people who do not know they have the virus from transmitting it to others; these face coverings are not surgical masks, respirators, or personal protective equipment (PPE).
- Cloth face coverings should NOT be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance.

NOTE: If an employer chooses to provide or the employee supplies their own N95 respirator, please fully consider all the potential OSHA requirements.

Training

- Implement and inform employees of supportive workplace policies as applicable:
 - Flexible sick leave policies consistent with public health guidance. Providing paid sick leave is an important way to encourage employees to stay home when sick.
 - Consider not requiring a COVID-19 test result or a healthcare provider's note for employees who are sick to validate their illness in order to qualify for sick leave. If you do require a doctor's note from your employees to verify that they are healthy and able to return to work, be aware that healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner. Get more information related to the [Americans with Disabilities Act during the COVID-19 pandemic](#).
- Flexibility to stay home to care for a sick family member.
- Human resources policies consistent with public health guidance, and state and federal workplace laws. For more information on employer responsibilities, visit the [Department of Labor's](#) and the [Equal Employment Opportunity Commission's](#) websites.
- Employee assistance program and community resources to help employees manage stress and receive support.
- Encourage employees at increased risk for severe illness to request special accommodations to allow them to perform their job duties safely while also protecting sensitive employee health information.
- Post signs and reminders at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette. This should include signs with images for non-English readers, as needed.
- Train employees on new or modified working schedules, how they can stay up to date on new scheduling requirements, and how to make requests for schedule changes if a need arises.
- Provide Safety Data Sheets (SDS) for cleaning and disinfection products and ensure employees are aware of the hazards of use. Incorporate new hazards into existing OSHA Hazard Communications Program.
- Employees should receive, at minimum, awareness training on cleaning and disinfection products used in the workplace following OSHA Hazard Communication Standards. For employees who will use disinfectants and cleaners, training should also



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include proper use, PPE, disposal, and all precautionary measures

- Health checks and reporting requirements of individuals infected with COVID-19 should be explained to employees prior to reopening and again once operations have resumed.
 - Employees should evaluate their health constantly; if they are sick, have a fever, symptoms, or someone at home is sick then they should remain home. **(NOTE: Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.)**

Waste and Laundering

- Single-use items and used disinfection materials can be treated as regular waste, following regular safety guidelines.
- Any reusable cloth materials can be washed with detergent and dried on the highest temperature setting for the fabric.
- Ensure all commercial laundry services are aware of the potential for SARS CoV-2 viral exposure before laundering.
- Deeper cleaning and disinfecting protocols should be developed and implemented in cases where confirmed cases of COVID-19 are discovered. Refer to AIHA's [Workplace Cleaning for COVID-19](#).

Communication

- Communicate to the employees, children (when appropriate), and families about what is being done to mitigate the spread of COVID-19.
 - (e.g., disinfection routine, health policies for employees, physical distancing, and health and safety measures in place).
- Consider communicating the visible symptoms of COVID-19 exposure.
- Understand that childcare facilities have the right to refuse any childcare service if the child is exhib-

iting symptoms of illness.

- Platforms for verbal/written communication can include the use of social media, websites, and posting information on indoor/outdoor bulletins.
- Upon arrival and throughout the day, communicate the importance of good personal hygiene to children (i.e., hand washing, covering nose and mouth when sneezing or coughing, not sharing food, etc.).

Other Control Measures

- Encourage those who are sick or at greater risk to stay home. This includes:
 - People with underlying medical conditions.
 - People who live with elderly people or those who are at risk.
 - People with upper respiratory or flu-like symptoms or who live with someone with these clinical symptoms.
 - People with COVID-19, people who live with someone with COVID-19, or who have been exposed to someone with COVID-19.
- Employers should educate employees to recognize the [symptoms of COVID-19](#) and provide instructions on what to do if they develop symptoms. At a minimum, any worker should immediately notify their supervisor, their health care provider, and the local health department, who will provide guidance on what actions need to be taken.
- Although perhaps not necessary if hand-washing protocols are rigorously followed, consider providing disposable gloves to employees, especially when cleaning and disinfecting the building, removing waste materials, and cleaning the restrooms.
 - If gloves are worn, they must be changed regularly, and they are not a substitution for hand-washing.
 - Remove or replace any gloves that are torn or damaged. Users should check their gloves frequently to avoid exposure.



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- Plan for employee absences by developing flexible attendance and sick-leave policies, plan for alternative coverage, and monitor and track COVID-19 related employee absences.
- Stay informed about local COVID-19 information and updates in your geographic area.

What should a childcare **Employee** do to protect themselves and children attending the childcare facility?

- Employees should evaluate their health continuously; if they are sick, have a fever, symptoms, or someone at home is sick, then they should remain home. **NOTE: Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.**
- Maintain cloth or disposable (or better if you have it) face covering, clean or replace frequently, and use when unable to maintain physical distancing of 6-feet.
- Maintain good hygiene practices (washing hands with soap and water for 20 seconds or a hand sanitizer with at least 60% ethanol or 70% isopropyl alcohol). For more information, refer to [CDC's handwashing guidelines](#).
- If an employee tests positive for COVID-19:
 - Stay home and isolate until cleared for physical return to the workplace by your medical provider, following the CDC's [Discontinuation of Isolation for Persons with COVID -19 Not in Healthcare Settings](#).
 - Contact your supervisor and report your results as soon as possible.
 - Notify your supervisor about others in the workplace with whom you came into contact.
- Depending on local requirements, in alignment with CDC recommendations, wear a cloth or disposable face covering whenever physical distancing cannot be maintained (indoors or outdoors). Ensure the face covering is properly maintained and cleaned. Additional information on cloth face coverings can be found on [CDC's website](#). **(NOTE: Cloth or disposable face coverings primarily protect other people. A cloth or disposable face covering is not a substitute for physical distancing.)**
- With the exception of children less than two, and individuals who have difficulty breathing, are unconscious, or otherwise unable to remove a face covering without assistance, CDC recommends that all people wear a cloth or disposable face covering in public settings and when around people who don't live in their household, especially when other physical distancing measures are difficult to maintain.
- Non-medical cloth or disposable face coverings or cloth or disposable face coverings are NOT Personal Protective Equipment (PPE), but they do offer some protection to others and should be worn while near other people in common spaces or shared workspaces. They are not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.
- Remove cloth or disposable face coverings correctly and wash hands after handling or touching a used face covering.
- Wash cloth face coverings after each use. Cloth face coverings can be included with regular laundry. Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering. Use the highest heat setting and leave in the dryer until completely dry. If air drying, lay flat and allow to completely dry. If possible, place in direct sunlight.
- Let your employer know if you have concerns about personal protective equipment (PPE) that may be provided to you and that you are properly instructed on how to use it. [The CDC has recommended sequences for donning and doffing PPE.](#)



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- At minimum, employees should wash their hands after they have been in a public place, after touching their face covering, after blowing their nose, coughing, or sneezing, after using the restroom, after touching any common contact surfaces, and before eating. **Avoid touching eyes, nose, or mouth with unwashed hands.**
- Wash your hands when you arrive at work, throughout the day after various activities (e.g., before and after preparing food, before and after administering medication, after handling garbage, before and after diapering, after using the bathroom or helping a child to do so, etc.), after touching your face covering, when you leave work, and when you arrive home.
- Employees should wash hands with clean, running water, apply soap, lather and scrub for at least 20 seconds, then rinse. Dry hands using a clean paper towel or air dry. When soap and water can't be used, use an alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol. Any use of alcohol-based hand sanitizers should follow local and State guidelines.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you don't have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing or sneezing. Learn more about coughing and sneezing etiquette. Disposable towels and handkerchiefs should never be placed on a surface within the childcare facility and should be kept in a sealable bag. Clean and contaminated items should be kept separate.
- Employees should use different bathrooms than the ones children use.

Worker Rights

AIHA believes that basic protections are worker rights, as well as an essential ingredient of occupational health and safety systems, and that employers must provide a safe and healthful work environment.

What can Parents/Guardians/Caregivers do to minimize the transmission of COVID-19?

- Evaluate your and your child's health constantly. If either of you are sick, stay home. If either of you have a temperature, stay home. If someone at home is sick or you came into contact with someone who became sick, stay home and keep your child home too. If you have allergies or other medical illnesses, stay home.
- Parents/caretakers/guardians should inform the childcare facility if they or the child has been diagnosed with or in contact with someone diagnosed with COVID-19.
- Report your symptoms/diagnosis by telephone, text, or email to those persons in charge or part of the childcare facility. Don't go to childcare facility to verbally discuss this matter in person.
- Wear a cloth or disposable face covering when out in public and maintain physical distancing (maintain 6-feet of separation from others) during drop-off and pick-up.
- Wash your hands throughout the day, after drop-off, and before pickup (if feasible), and after touching your face or face covering.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you don't have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing or sneezing. Learn more about coughing and sneezing etiquette. If the symptoms persist, leave immediately.



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Resources

- [Association for Early Learning Leaders](#).
- [CDC General Business Frequently Asked Questions website](#).
- [CDC Interim Guidance for Administrators of US K-12 Schools and Child Care Programs website](#).
- [CDC Guidance for Schools and Child Care Programs website](#).
- [CDC Cleaning and Disinfection for Community Facilities website](#).
- [CDC Cleaning and Disinfecting Your Facility Everyday Steps, Steps When Someone is Sick, and Considerations for Employers website](#).
- [CDC K-12 Schools and Child Care Programs: FAQs for Administrators, Teachers, and Parents website](#).
- [CDC COVID-19 and Children FAQ website](#).
- [CDC Schools and Child Care Programs: Checklist for Teachers and Parents website](#).
- [CDC Cleaning and Disinfection for Non-emergency Transport Vehicles: Interim Recommendations for U.S. Non-emergency Transport Vehicles that May Have Transported Passengers with Suspected/Confirmed Coronavirus Disease 2019 \(COVID-19\) website](#).
- [CDC Talking with Children about Coronavirus Disease 2019 website](#).
- [CDC Considerations for School Closure website](#).
- [CDC Health Screening “Should we be screening employees for COVID-19 symptoms?” section of General Business Frequently Asked Questions](#).
- [WHO Key Messages and Actions for COVID-19 Prevention and Control in Schools website](#).
- AIHA’s Indoor Environmental Quality Committee developed these guidance documents about re-opening and cleaning buildings after closures due to COVID-19: [Recovering from COVID-19 Building Closures](#) and [Workplace Cleaning for COVID-19](#).
- AIHA’s [Considerations on the Safe Use of UVC Radiation](#)
- AIHA’s [Focus on Construction Health: COVID-19](#)
- AIHA’s [Effective and Safe Practices: Guidance for Custodians, Cleaning and Maintenance Staff](#)
- AIHA’s [Employers Guide to COVID-19 Cleaning & Disinfection in Non-Healthcare Workplaces](#)
- AIHA’s [Reducing Risk of COVID-19 Using Engineering Controls](#)
- AIHA’s [PPE for SARS-CoV-2](#)
- AIHA’s [Use of Real Time Detection Systems](#)
- AIHA’s [Proper Use of Respirators for Healthcare Workers & First Responders](#)
- AIHA’s [Workers Rights White Paper](#)



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AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA's nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit [AIHA.org](https://www.aiha.org).

About Occupational and Environmental Health and Safety Professionals

Occupational and environmental health and safety (OEHS) professionals (also known as industrial hygienists) practice the science of anticipating, recognizing, evaluating, controlling and confirming workplace conditions that may cause workers' injury or illness. Through a continuous improvement cycle of planning, doing, checking and acting, OHS professionals make sure workplaces are healthy and safe.

- Get additional resources at [AIHA's Coronavirus Outbreak Resource Center](https://www.aiha.org/coronavirus).
- Find a qualified industrial hygiene and OEHS professionals near you in our [Consultants Listing](https://www.aiha.org/consultants).

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These guidance documents were primarily developed for those smaller business that don't have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders.

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