Guidelines for Child Care Centers
Follow general health and safety guidelines in accordance with the CDC including:

• 1:12 staff to student ratio with the stable groups (same teachers and same student group)
• Temperature and wellness checks upon arrival
• Frequent handwashing (for at least 20 sec) access to hand sanitizer, tissues and no touch trash cans
• No sharing of meals, toys, games and equipment
• Maintain social/physical distancing of 6 feet apart; when possible
Actions for all Staff Members:

- If you are not feeling well, stay home.
- Child-care facilities are responsible for taking the following steps:
  - Teachers and staff with any fever and/or respiratory symptoms should not come to work
  - Teachers and staff should self-screen (i.e., check themselves for subjective fever and/or respiratory symptoms such as cough) for symptoms each morning before interacting with children.

Take health precautions – Reference [CDC Guidelines](https://www.cdc.gov), including:

- Effective and consistent hand washing
- Practice social distancing (6 feet)
- Avoid touching face
- Do not come to work if you are sick
- Cough in sleeves, not hands (chicken wing)
Classroom Standards

• Engage in activities that do not require close physical contact
• Increase the distance between children during activities and lunch, children sitting at a table will sit every other chair
• Children are not required to stand in line when going outside or coming indoors

End of list.
Increased Cleaning Protocols:

- All tables, counters, doorknobs, light switches, sinks/faucets and cleaned and disinfected in the morning, evening and throughout the day.
- Tables and chairs are wiped and sanitized after every activity and thoroughly cleaned at the end of the day.
- Children's materials are sanitized after each use before being returned to the shelves.

Daily Health Check for every Child

- Wash hands before and after signing in and out.
- Child washes hands upon arrival.
- Upon arrival a health check is performed on every child and the results recorded.
COVID-19 Response Plan

Department: Child Care

Virus/COVID-19 is an ongoing and developing situation. Below is summary of responsive actions, procedures, interim policy measures, and key information as of March 13 2020. Please note we are monitoring the CDC, Marin, San Francisco, and Santa Clara County Public Health Departments recommendations on a daily basis.

While we have been monitoring all Counties in addition to state and federal sources, we are using the most ‘comprehensive and aggressive’ guidance from authorities in designing response measures. We will pass along additional information, and/or communicate changes as this situation evolves.

The Agency will consider additional measures as necessary, and as the situation evolves.

**Essential Staff Functions:**

The YWCA will designate ‘Essential Staff’ functions related to core critical life services and business functions. This will be used to guide staffing and resource decisions. YWCA will aim to keep its child care centers open, not withstanding directives from State Agencies and Public Health direction.

**Actions for all Staff Members:**

- If you are not feeling well, **stay home.**
- Child-care facilities are responsible for taking the following steps:
  - Teachers and staff with any fever and/or respiratory symptoms should not come to work
  - Teachers and staff should self-screen (i.e., check themselves for subjective fever and/or respiratory symptoms such as cough) for symptoms each morning before interacting with children

**Take health precautions** – Reference [CDC Guidelines](https://www.cdc.gov), including:

- Effective and consistent hand washing
- Practice social distancing (6 feet)
- Avoid touching face
- Do not come to work if you are sick
- Cough in sleeves, not hands (chicken wing)

**Per Public Health Department Regulations and DSS**
Childcare must be carried out in stable groups of 12 or fewer (“stable” means that the same 12 or fewer children are in the same group each day)

✓ Groups will use outside play areas separately
✓ Groups will stay in separate spaces groups will not co-mingle
✓ Teachers will shall remain solely with one group of children
✓ Limit non-essential visitors and volunteers

Classroom Standards:

✓ Engage in activities that do not require close physical contact
✓ Increase the distance between children during activities and lunch, children sitting at a table will sit every other chair
✓ Children are not required to stand in line when going outside or coming indoors
✓ Each child’s meals and snack are pre plated

Increased Cleaning Protocols:

✓ All tables, counters, doorknobs, light switches, sinks/faucets and cleaned and disinfected in the morning, evening and throughout the day
✓ Tables and chairs are wiped and sanitized after every activity and thoroughly cleaned at the end of the day
✓ Children's materials are sanitized after each use before being returned to the shelves
✓ The playground is wiped and cleaned three times a day, before the children arrive before lunch and after nap

Daily Health Check for every Child

✓ Wash hands before and after signing in and out.
✓ Child washes hands upon arrival
✓ Upon arrival a health check is performed on every child and the results recorded

In case of illness fever or respiratory issues

✓ Child will be removed from the group and isolated with a staff member until the a parent or authorized representative arrives
Standard of Practice
Enhanced Classroom Health and Safety
Emergency Care for Essential Workers

Program Configuration (per Public Health Department Regulations and DSS, CCL Waiver for employer-sponsored childcare for essential workers):
● Childcare must be carried out in stable groups of 12 or fewer (“stable” means that the same 12 or fewer children are in the same group each day)
● Groups will use outside play areas separately
● Groups will stay in separate rooms or spaces separated by six feet and a physical barrier
● Groups will not mix or co-mingle
● Group sizes will be maintained at a maximum of 12 children, and fewer students when possible
● Teachers will remain solely with one group of children
● Limit non-essential visitors and volunteers

Classroom Practices:
● No “sensory” activities: no play dough, water or sand play
● Plan activities that do not require close physical contact between multiple children
● Increase the distance between children during table work and circle time
● Minimize time standing in lines.
● Have children drink water from disposable cups instead of fountains
● Minimize the number of loose toys and remove any toys that are difficult to clean and disinfect daily

Daily Classroom Preparation before opening:
● Clean and disinfect all tables, counters, doorknobs, light switches, sinks/faucets and sign-in table
● Ensure all soap, paper towel and toilet paper dispensers are full and multiple tissue boxes are available throughout each classroom
● Ensure hand sanitizer is available at the sign in/out table (keep out of reach of children)
● Ensure a separate storage/tub designated to hold any toys that are mouthed or otherwise need to be cleaned and sanitized before returned to the classroom shelf

As Families Arrive:
    Sign In and Out
● Wash hands before and after signing in and out.
- Ensure child’s personal items (jackets, sheet and blanket) are stored in his/her designated cubby for the day
- Child washes hands upon arrival

**Daily Health Check for Every Staff/Visitor/Child Upon Arrival:**
- Using the thermal scan thermometer, and using gloves, take temperature upon arrival
- Using an alcohol wipe, disinfect the thermometer after each use
- If any staff person, visitor or child is found to have a temperature of 100 degrees or higher, s/he will not be allowed to stay

**Before preparing and serving food:**
- Wash hands
- Put on clean gloves
- Clean (using spray bottle of soap and water) and disinfect food prep area and tables
- Wash hands and change gloves
- Pre-prepare plates for each child and serve food (no-family style)

**Continue to encourage all children, families, and staff to follow preventative actions at home and on site:**
- Staff and/or children should **stay home when sick**; remain at home until fever has been gone for at least 24 hours without the use of fever-reducing medicines.
- Seek immediate medical care if symptoms become more severe, e.g., high fever or difficulty breathing.
- Use “**respiratory etiquette**”:
  - Cover cough with a tissue or sleeve.
- Encourage children, families, and staff to **avoid touching their eyes, nose and mouth** with unwashed hands.
- Provide adequate supplies within easy reach, including tissues and no-touch trash cans
- **Wash hands frequently:**
  - At arrival
  - Before and after meals
  - After using the restroom
  - When coming into the classroom from outside
  - Throughout the day as needed
  - Prior to leaving from home
  - Prior to leaving from the Center

- Keep all children’s faces and noses clean and dry.
- Clean and disinfect classroom surfaces, toys and equipment as needed
• Use gloves when doing laundry and wash hands when done
• Maintain social distancing of at least 6 feet whenever possible

Nap Time
• Make sure that each child has a mat/cot that is labeled with their name and that each mat/cot is spaced apart a minimum of 6 feet
• Children should use their own sheet and blanket from home, or provided from the Center and designated for their personal use only
• Children should nap in the same, designated space each day
• Sheets and blankets are washed daily

At the end of the day:
• Clean and disinfect any toys that may have been mouthed or become dirty
• Restock gloves, meal supplies, paper goods, etc...
• Clean and disinfect all tables, chairs and counters
• Wash hands before leaving for the day, children and adults
• Wash and disinfect all classroom toys
• Janitorial Staff will clean and disinfect all flat surfaces (counters, tables) each evening after closing

If a child should show symptoms of illness (fever of 100 degrees or more with cough, congestion, runny nose for example):
• Remove the child from the group, isolate, with adult supervision, in the designated “quarantine space.”
• Immediately contact the parent(s); if parents cannot be reached, contact friends or family the family has designated on the emergency card as authorized for pick up of the child
• Report any clusters of respiratory illness or absenteeism to the County Public Health Department

In the event of a confirmed case of COVID-19
• Immediately notify local health officials
• Create an immediate plan of action, including suspension of services for a period of time to be determined in consultation with public health authorities
• Notify families and staff
• Contact Facilities department to arrange for deep cleaning and disinfection of the classroom

Santa Clara Co Public Health Department/Communicable Disease Prevention and Control: (408) 885-4214
Alameda Co Public Health Department/School Liaison: Lisa.Erickson@acgov.org Phone: (510) 267-3250
QUESTIONNAIRE RELATING TO THE ECONOMIC RECOVERY PHASES OF COVID-19 AND PLANS, GUIDELINES, AND NEEDS RELATIVE TO THE SAFE OPENING OF BUSINESSES AND OTHER INSTITUTIONS

Company/Organization Name: YWCA -SV
Industry/Sector: Child Care
Date: 06.02.2020

1. Are you open or partially open? **YES**
   
   a. Are you an essential business? **YES**
   
   b. Are you open under an exception such as: **NO**
      
      i. Outdoor Business?
      ii. Pickup/Delivery?
      iii. Curbside Retail?
      iv. Food Distribution?
   
   c. Have employees and customers cooperated with the health safety protocols? **YES**
   
   d. To your knowledge, have employees or customers become infected with COVID-19? **NO**

2. How many of your activities can be moved outdoors? **YES**

3. For indoor activities:
   
   a. How can social distancing be maintained at points of ingress and egress, where people normally cluster? **Children walk out in smaller groups because the new ratio allows.**
   
   b. How can employees and visitors be protected from transmission of the virus (e.g., no-touch temperature checks, hand sanitizer, masks, and face shields)?

      **We utilize no touch temperature checks. Parent and children need to wash their hands when entering the building. Visitor are at a minimum.**
c. How will Personal Protective Equipment (such as face covering and gloves) and hand sanitizer be provided before entry?

   d. Can the times of activities be staggered to reduce the amount of people gathered at any one time? **NO**

   e. Can customers make appointments to gain entry while inside capacity is restricted? **YES**

   f. How can social distancing be maintained inside your premises?

      **Adults are encouraged to social distance however children are encouraged to do so when we can. Sitting every other chair etc.**

4. What is your plan to acquire and distribute Personal Protective Equipment (like masks and gloves) and testing to your employees?

   **Cloth masks have already been distributed. If employee are out ill a Covid 19 test is required before coming back to work.**

5. How can you adapt to accommodate different size gatherings that may be allowed by the Public Health officer? (Smaller gatherings are likely to be allowed before very large ones.)

   **We are implementing the 1:12 group size ratio. Groups are stable same children same staff. The outdoor play area is used in shifts.**

6. To meet the need for possible contact tracing, how would you maintain lists of employees and visitors with their contact information for contact tracing? (It is understood that lists of attendees would only be provided in the event of an infection that needed to be traced, and then only to public health personnel trained in medical confidentiality.)

   **We use sign in sign out sheets for parents as well as a visitors log.**

7. In order to assist safe and productive re-opening, what are your needs relative to:
   
   a. Regulation?

   b. Licensure?
c. Childcare?

d. Housing?

e. Digital Inclusion?

f. Commute-Free Working?

8. If you have been opened or partially opened, what challenges have you experienced?

**Staffing.** Stable groups are difficult to implement. If staff are ill even a substitute renders the group not stable. To keep an additional person in ratio to remain stable we are practicing 1:4 ratio. Infant programming with no additional funds.

9. If you have been opened or partially opened, how has the community’s adherence and response to the COVID health safety protocols been?

**Everyone has been accommodating we all want to keep everyone safe. The protocols are posted and additional signs are up as well.**