Preface

The San Mateo County Office of Education’s Early Learning Support Services Department offers this companion document to provide guidance to licensed child care centers, preschools, and family child care homes operating in San Mateo County. This document is created to align with the San Mateo County Pandemic Recovery Framework for Schools and is not meant to be an exhaustive document.

This document is not intended to revoke or substitute any federal, state, or county regulations. Programs are responsible for staying current on these regulations as COVID-19 remains a concern in the county. Please visit the following websites for more information:

- Centers for Disease Control and Prevention (CDC) - Childcare, Schools, and Youth Programs

- California Department of Social Services - Community Care Licensing Division

- California Department of Education’s COVID-19 Guidance for Early Learning and Care Programs

Please note: As conditions and public health guidance change, the content and recommendations in this framework may change accordingly.

For any questions, please email Early Learning Support Services at elss@smcoe.org.
Health and Safety Guidance

This document takes into consideration the Four Pillars as outlined in the San Mateo County Office of Education’s Pandemic Recovery Framework. The four pillars include: health and hygiene, face coverings, physical distancing, and limiting gatherings.

The age of the children served and the specific type of child care facility should be considered in order to create the safest environment for children, families and teaching staff. In order to best support young children and their families, the guidance in this document reflects the understanding that children, families, and teachers have experienced extended disruption in their lives and, as a result, may have reservations and challenges transitioning back into a child care setting.

Successful transition of children back into care settings will rely on established and appropriate protocols at the site and strong partnerships with parents and caregivers. New protocols at child care settings must be shared with families since they play a critical role in supporting the implementation of these new best practices. Parents and caregivers can reinforce similar behavior and best practices at home and can help children understand the change in their routines. Additionally, it is imperative that child care operators, teachers, and parents establish strong communication and partnerships to support children’s social, emotional, and physical health.
The following sections provide general guidance on key areas of the reopening of child care sites. Child care operators and families should refer to regulatory authorities for enforceable rules and regulations. Follow the stricter of the guidelines if local, state, or federal authorities offer varying guidance on specific regulations.

I. **Pillar One: Health and Hygiene**

The staff members are largely responsible for promoting good health and hygiene at a child care site. While there are best practices outlined by the Centers on Disease Control and Prevention (CDC), Community Care Licensing Division (CCLD), and California Department of Education (CDE), child care providers need to consider the age of the children being served in order to decide what measures are most appropriate.

**Daily Hygiene Routine**

- Implement and enforce strict handwashing practices for all staff and children.
- Post signs in the restrooms and near sinks that illustrate proper handwashing techniques.
- Frequent handwashing is more effective than hand sanitizers. Please visit the CDC’s website on handwashing best practices: [https://www.cdc.gov/handwashing/when-how-handwashing.html](https://www.cdc.gov/handwashing/when-how-handwashing.html)
- The use of hand sanitizers should be limited to older children as appropriate as young children may accidentally ingest hand sanitizers. Children under the age of 2 should not use hand sanitizers.
- Do not use hand sanitizers as a substitute for handwashing when:
  - Entering the classroom in the morning
  - Returning to the classroom after outdoor play
  - Beginning meal time
- Hand sanitizers should be kept out of reach of children and should be used only under adult supervision.
- Wear gloves when serving food, taking out garbage, changing diapers, or using cleaning and disinfecting products.
- Disinfectant cleaning products must be used with care and as directed by the manufacturer. Be sure to read the labels of cleaning products as not
all cleaning products are safe for children.¹

• Cleaning, sanitizing, and disinfecting products should not be used in close proximity to children, and adequate ventilation should be maintained. Develop a plan to do thorough cleaning when children are not present.²

• Tooth brushing on site is no longer recommended due to the possible contamination from bodily fluids such as saliva. Remind parents to enforce teeth brushing at home.

• Teachers should remind families to practice the same health and hygiene procedures at home so that children form healthy habits.

**Health Screening**

• At the beginning of each day, conduct a health screening for children and staff before allowing individuals to enter the facility.
  
  ○ Ask all individuals about any symptoms – primarily fever, cough, difficulty breathing, or other signs of illness within the last 24 hours – that they, or someone in their homes, might have experienced.

• Family child care homes should conduct health screenings of all individuals who live at the facility.

• Ask families and caregivers if they were exposed to another individual with a suspected or confirmed case of COVID-19.

• Staff should be trained on screening procedures for all staff and children daily. All individuals need to follow the CDPH guidelines for COVID-19 exposure.

• Take the temperature of staff and children daily. Consider taking the temperature of children more than once a day. Anyone who has a temperature of 100.4°F/38°C or higher must be excluded from the facility. Children and adults must be free of fever for three days without the use of medication per CDC guidelines in order to return to care.³

• Thermometers should be cleaned with an alcohol wipe after each use. Consider no-touch thermometers.

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² [https://cchp.ucsf.edu/content/step-step-sanitizing-child-care-programs](https://cchp.ucsf.edu/content/step-step-sanitizing-child-care-programs)

• Monitor staff and children throughout the day for any signs of possible illness.

• If a child exhibits signs of illness at the facility, follow the facility procedures for isolation to a separate room and notify the caregiver immediately to pick up the child.

• Document and track incidents of possible exposure and immediately follow your program’s exposure notice procedures for COVID-19 while maintaining confidentiality.

Preparing Your Environment

• Design and implement procedures to frequently clean all touched surfaces both indoors and outdoors. Designate a staff member to do this work, if possible.

• Have multiple toys and manipulatives accessible that are easy to clean and sanitize throughout the day.

• Limit the amount of sharing in all aspects of care and play.

• Offer more opportunities for individual play and activities, (i.e., drawing, coloring, cutting, puzzles, and other manipulatives). Consider having a set of supplies for each child in order to avoid sharing.

• Plan activities that do not require close physical contact between multiple children.

• Toys that cannot be cleaned, sanitized, and disinfected properly, such as stuffed animals, should not be used. 4

• Designate a tub for toys that need to be cleaned and disinfected after use.

• Stagger indoor and outdoor play and adjust schedules to reduce the number of children in the same area.

• Bedding and cots used for nap time need extra care to be stored separately on site and used for the same child until proper cleaning and disinfecting has taken place.

• Clean, sanitize, and disinfect frequently touched surfaces and objects, including toilets and training potties.

Centers may consider designating toilets/bathrooms for specific groupings of children.

Family child care homes should consider designating specific bathrooms for the use of the child care program and a separate one for other individuals of the residence, if possible.

II. **Pillar Two: Face Coverings**

Face coverings are required for adults, unless there is a health concern. Not all children are required to wear face coverings. Children might find it challenging to keep their face covering on for an extended period of time but teachers and parents need to establish habits with children to help them understand the importance of face coverings. Stories, songs and activities can be useful tools to help children understand this new concept.

- Children are still getting used to seeing adults and peers with face coverings. Families and teachers should talk to children about face coverings to lessen any possible anxiety and fear regarding face coverings.
- Sites should consider ways to visually show children how teachers and other children look like with and without face coverings to help children familiarize themselves with those who are on site.
- Adults should teach and demonstrate for children when and how to safely remove face coverings.
- Children under the age of 2 should not use face coverings as it is a suffocation hazard.
- For children above the age of 2, it is recommended that they wear face coverings if appropriate.
  - Children who have trouble breathing or cannot remove a face covering on their own, should not wear face coverings.
  - Children with sensory processing disorders may not be able to wear face coverings, depending on the child.
- Face coverings should not be worn during nap times.
- Families and caregivers picking up and dropping off children must wear face coverings.
• Face coverings need to be worn and cleaned properly. When not in use, children’s face coverings should be stored in their own individual bags.5
• In family child care homes, all individuals in close proximity to children should wear face coverings.

III. Pillar Three: Physical Distancing

Recommended physical distancing practices for child care sites depend on the child care setting, the age of the children, and the ratio of children to adults. Children may have a hard time understanding the reason behind physical distancing from their peers, but gentle reminders from adults can help to reinforce this new expectation.

• Consider ways to explain and demonstrate physical distancing to children. Use the environmental set-up as a tool to guide children and explain the new set-up during virtual orientation or the first day of returning to the classroom.
• Keep the same group of children with the same teacher or staff members and include children from the same family in the same group, to the greatest extent possible.
• Rearrange furniture and play spaces to maintain 6-feet separation, when possible.
• Consider the use of markings or designated seating on site to help children with distancing.
• Place sleeping cots at least 6 feet apart, head to feet to avoid exposure to droplets from coughing and sneezing.6 If 6 feet of distance is not feasible due to space limitations, please contact your licensing analyst for guidance.
• Serve food in individual portions instead of family style and utilize more tables to ensure adequate spacing of children.
• Utilize outdoor spaces as much as possible.
• Open windows to ventilate facilities before and after children arrive.
• Arrange developmentally appropriate activities for smaller group activities.

• Offer children other ways to show affection so that they can adhere to physical distancing.

• Children should remain in groups as small as possible that do not exceed ratio and adhere to physical distancing requirements. Always follow the stricter guidance if presented with different guidelines from local, state and federal agencies.7

IV. Limiting Gatherings

In addition to adherence to physical distancing guidelines provided by CCLD, child care sites should consider the limitation of group gatherings on site.

• Consider staggered drop-offs and pick-ups to avoid large groups arriving at the same time.

• Consider assigning families specific timeslots to drop off and pick up.

• Consider staggering indoor and outdoor play times for different groups of children.

• Limit visitors to the facility whenever possible.

• When appropriate, consider the use of technology to support activities usually done in groups.

• Teachers should also avoid congregating during break times.

In all areas of operation, child care operators should follow the stricter guidance if presented with different guidelines from local, state, and federal agencies.

Social and Emotional Wellbeing

In addition to the Four Pillars outlined in the Framework and this companion document, child care providers and families should be mindful of the possible social and emotional effects of COVID-19 and the new operational best practices on children.

I. For Children and Families

As caregivers implement new routines in child care settings, children are also learning to adapt to these new practices. The exposure to news about COVID-19 can also cause children to feel uneasy about their environment. Child care providers and families should build partnerships and regular communication protocols in order to support children as they transition back into child care settings. Regular communication between teachers and parents will support children in learning new rules and routines and will also ease the concerns around the reopening of child care and school settings.

As scientists continue to learn more about COVID-19, the community inevitably will feel a sense of concern and anxiety as San Mateo County reopens different sectors in phases. The sense of unknown is not felt only by adults but also by children. Young children, in particular, might lack the ability to share their feelings verbally with adults around them. As child care sites reopen, parents and teachers can play a role in supporting the wellbeing of children as they learn to adjust to the constantly evolving realities of COVID-19. Several resources have been made available to support the social and emotional wellbeing of children, families, and child care providers as they return to work and their child care settings:

- From California Health and Human Services Agency – *Early Learning & Care Playbook: Caring for Children and Getting Back to Work*: https://californiaall.org/home
II. For Teachers and Caregivers

In addition to children’s wellbeing, we should also remember that it is challenging for families and teachers to return to their daily routines under these new conditions. COVID-19 has created many stressors for our communities, and it is important, now more than ever, to take time to care for ourselves. Teachers are faced with the challenging decision on whether to return to the workplace as many individual families are feeling the compounded economic pressures of losing income. These concerns should not be taken lightly as children can also sense the emotions of those around them. The following resources are offered for adults seeking additional support:

- California Peer Warmlines: https://camhpro.org/category/california-warmlines/
- Star Vista: https://star-vista.org/
- Self-Care for teachers and operators: https://californiaall.org/resources/18
- California’s OSHA guidance for providers to support child care workers: https://www.dir.ca.gov/dosh/Coronavirus/COVID-19-Infection-Prevention-in-Childcare-Programs-Guidance.pdf
References

From the San Mateo County Office of Education:

- Guidance for Child Care Programs in Response to COVID–19:
  https://www.smcoe.org/assets/files/Alert_FIL/Pandemic_Recovery_Framework.pdf

From the State of California:

  https://covid19.ca.gov/pdf/caregivers_and_kids_california_surgeon_general_stress_busting_playbook_draft_v2_clean_ada_04072020v2.pdf
- California Health and Human Services Agency – Early Learning & Care Playbook: Caring for Children and Getting Back to Work:
  https://californiaall.org/home
- Community Care Licensing: https://www.cdss.ca.gov/inforesources/child-care-licensing
- California Department of Education – COVID–19 Guidance and Resources:
  https://www.cde.ca.gov/sp/cd/re/elcdcovid19.asp
- California Department of Industrial Relations – Safety & Health Guidance: COVID–19 Infection and Prevention in Child Care Programs:
- Every Child California – Opening and Reopening: A Practitioner Support Guide:
  https://assn.memberclicks.net/assets/docs/EveryChild%20CA%20opening%20and%20re-opening%20publication.pdf

From the Centers for Disease Control and Prevention:

• **Handwashing: Clean Hands Save Lives:** [https://www.cdc.gov/handwashing/index.html](https://www.cdc.gov/handwashing/index.html)


**From Community Partners:**

• Child Care Coordinating Council of San Mateo County: [https://sanmateo4cs.org/covid-19-resources/](https://sanmateo4cs.org/covid-19-resources/)

• First 5 California: [www.first5california.com](http://www.first5california.com)

• University of California San Francisco’s California Child Care Health Program: [https://cchp.ucsf.edu/](https://cchp.ucsf.edu/)