SANTA BARBARA COUNTY CHILD CARE GUIDE FOR 
COVID-19 
Health & Safety Procedures and Guidance During COVID-19 
Version 18: August 11, 2021 
Changes made are highlighted in yellow and include CA Department of Public Health’s COVID-19 Guidance for Child Care Providers and Programs (updated 6/29/21)

This Guide is current as of the above date and is based on standards set forth through the latest CA COVID-19 statewide industry guidance for child care programs and providers as published in the Early Learning & Care Playbook (referred herein as the CA Department of Public Health Guidance for Child Care Programs and Providers). Best practice recommendations from Community Care Licensing (CCL) Provider Information Notices and Center for Disease Control’s (CDC) Guidance for Childcare Programs that Remain Open are also presented. All efforts will be made to keep this Guide as current as possible however due to the quickly changing circumstances surrounding COVID-19 it is best to check COVID19CA.gov, CA Guidance for Child Care Programs, Santa Barbara County’s industry guidelines, CCL, and CDC’s websites for updates.
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Santa Barbara Protocols for Symptoms, Potential Exposure and/or Close Contact with an Individual Testing Positive for COVID-19 in a School or Classroom Setting
Overview

This Guide was created for you, the child care providers in Santa Barbara County who have stepped up to provide child care during the COVID-19 pandemic. Child care is critical to the re-opening and re-building of our community. Providing child care at this time is challenging, with many new guidelines so that children are well cared for and providers help stem, not spread, the virus.

Inside this Guide you will find health and safety guidelines for COVID-19 as well as helpful recommendations. The guidelines are taken directly from the CA Department of Public Health Guidance for Child Care Programs and Providers, Centers for Disease Control and Prevention (CDC), and Community Care Licensing (CCL).

This is a living document. Updates are released constantly and are incorporated into this Guide as quickly as possible. For this reason, it is always best to refer to the online version. If you must print it out, please frequently check online for updates.

Along with this Guide, we are continually posting the latest information, supportive documents and resources, as well as providing supplies and training to help you do your work on our website. Please let us know what you need. Contact us at essentialchildcaresb@gmail.com.

The State of California remains committed to taking actions that protect the health, safety, and welfare of the people in California. As businesses and activities reopen, guidance has been updated for Coronavirus Disease 2019 (COVID-19) infection control practices. Every child care program is expected to continue to minimize the spread of COVID-19 and to ensure the safety of children, providers, and families. All providers should apply new and updated policies and requirements that address the need for continued infection control and should update their emergency preparedness plan.

This guidance informs child care providers and the families they serve about infection control practices that prevent and mitigate the spread of COVID-19 infection in facilities. It is important for providers to maintain frequent communication with families and staff about implemented policies and practices to keep everyone safe.


Licensees and other child care providers should continue to follow COVID-19 requirements and guidance in all applicable California Department of Social Services (CDSS) and Community Care Licensing (CCL) Provider Information Notices (PIN), in addition to guidance or requirements from California Department of Public Health (CDPH), California Department of Industrial Relations Division of Occupational Safety & Health (Cal/OSHA), and local public health departments, as applicable to the particular facility.

If there are differing requirements between the most current CDPH, CCL, Cal/OSHA, and local health department guidance or health orders, licensees and providers should follow the strictest requirements. Implementation of this guidance should be adapted for the setting in which you provide care and may require training and support for staff and adequate consideration of children and family needs.

Workplace safety and health regulations in California require employers to take steps to protect workers exposed to infectious diseases. Licensees and providers who fall under the scope of the Cal/OSHA
COVID-19 Prevention Emergency Temporary Standards (ETS) must remain in compliance with these Standards.

Acknowledgements

The creators of this Guide are First 5 Santa Barbara County, Santa Barbara County Child Care Planning Council, Children’s Resource and Referral of Santa Barbara County, and the Emergency Child Care Initiative.

The Emergency Child Care Initiative for Santa Barbara County (ECCI) offers partial funding for affordable emergency child care services for critical health care providers, first responders as well as food distribution and other essential employees during the COVID-19 outbreak. The Santa Barbara County Emergency Child Care Initiative, which was formed in April 2020 with the support of United Way of Santa Barbara County and a consortium of local philanthropic partners including The Natalie Orfalea Foundation and Lou Buglioli, Jane and Paul Orfalea/the Audacious Foundation, Linked Foundation, James S. Bower Foundation, Ann Jackson Foundation, Zegar Family Foundation, Henry and Lola Monroe Foundation, and Santa Barbara Foundation, as well as local early childhood advocacy organizations including Children’s Resource & Referral, First 5 Santa Barbara County, and the Santa Barbara County Child Care Planning Council. The initiative’s aim was to offer funding for emergency child care programs in response to the urgent need to provide safe child care for health care providers and essential food distribution employees. Through the initiative’s efforts, a framework was created to begin developing and implementing a child care emergency response system. Santa Barbara Foundation has provided funding to support the leadership role, critical convening, and mobilization of the essential activities that ECCI has accomplished.

Special thanks to the writing team - Holly Goldberg, PhD, Sharol Viker, M.A, Jacqui Banta, and Eileen Monahan.

Emergency Child Care Initiative
For Santa Barbara County
~In response to the COVID-19 pandemic

The participating organizations and writing team members are not responsible or liable for any information presented or actions resulting from the Guide, Plan, and Checklist.

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COVID-19 Symptoms

According to CA Public Health Department the symptoms of COVID include:

- Fever
- Cough
- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell
- Congestion or runny nose

CDC includes additional symptoms:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. CDC will continue to update this list as we learn more about COVID-19 so it is recommended to double check the CDC website.

Recommendations and Tips:
Infographics about the difference between allergies, cold, flu, and COVID-19 shall be posted in each classroom as well as posters about stopping the spread of germs (also available in Spanish).

COVID-19 Vaccination

Vaccines are an important tool to help stop the COVID-19 pandemic. Early care and education providers hold jobs critical to the continued functioning of society and are at potential occupational risk of exposure to SARS-CoV-2. As frontline essential workers, child care providers have been prioritized nationally to receive vaccination.

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Go to Santa Barbara County Public Health Department’s [COVID-19 Vaccine Information](https://www.sbcemergencychildcare.org/) for FAQs and information about where to get vaccinated.

- The CDC has strongly encouraged vaccination as one of the most important tools to end the COVID-19 pandemic. Licensees and providers are eligible to receive vaccinations at no expense. There are several ways to obtain vaccination. Please see [PIN 21-06-CCP](https://www.sbcemergencychildcare.org/) for more information on vaccine safety, benefits, and how to get the vaccine.
- Please share information about vaccines with staff and families, and reference the California COVID-19 Vaccine Website [Homepage](https://www.sbcemergencychildcare.org/).
- If a licensee or provider requests confirmation that a staff or child has received the COVID-19 vaccine, it is recommended the confirmation should be documented in the same way immunizations are documented and maintained in the facility file. Those confirming may review and accept a hard copy or digital record of vaccine receipt.

**Children and COVID-19**

According to CDC, while fewer children have been sick with COVID-19 compared with adults during the pandemic, children can be infected with the SARS-CoV-2 virus that causes COVID-19, can get sick with COVID-19, and can spread the virus to others. Most children with COVID-19 have mild symptoms, and some have no symptoms at all. The symptoms of COVID-19 in children are similar to symptoms of other common illnesses, like colds, strep throat, influenza, or allergies. Like adults, children who have COVID-19 but have no symptoms can still spread the virus to others. For more information, visit [COVID-19 in Children](https://www.sbcemergencychildcare.org/).

Reports have shown that children in child care settings can become infected and spread COVID-19 to others in the child care program, at home, and in the community. Additional information has shown that a comprehensive, multipronged approach for COVID-19 prevention strategies might help slow transmission in the early care and education setting. CDC recommends that child care programs make decisions about reopening and continuing operations based on available data including [levels of community COVID-19 transmission](https://www.sbcemergencychildcare.org/) (spread) and the child care program’s ability to implement appropriate prevention strategies (risk reducing actions) to stay open safely and protect children, staff, and administrators.

**General Guidelines to Prevent the Spread of COVID-19**

According to [CDC](https://www.sbcemergencychildcare.org/), COVID-19 is mostly spread through close contact and inhalation of respiratory droplets released when people talk, sing, breathe, sneeze, or cough. Although less likely, it is possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own eyes, nose, or mouth. To slow the spread of COVID-19 in your community and facility, your child care program should fully implement and adhere to multiple prevention strategies.

- **Wash hands** frequently with soap and water for at least 20 seconds. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Supervise children when they use hand sanitizer. Hand sanitizer must be stored out of reach of children.
when not in use. Closely supervise young children when using hand sanitizer to prevent them from swallowing hand sanitizer because it can cause alcohol poisoning.
- **Wear a mask.**
- Avoid touching your face.
- **Cover cough and sneezes** with a tissue and throw the tissue away immediately and then wash hands.
- Implement **social distancing strategies.**
- Plan ahead to ensure adequate supplies to support hand hygiene behaviors and routine cleaning of objects and surfaces. Intensify **cleaning and disinfection efforts**, **Clean and disinfect** frequently touched surfaces by following CDC’s guidance on how to **disinfect your building or facility** if someone is sick.
- **sick.** Require sick children and staff to stay home. Communicate to parents the importance of keeping children home when they are sick.
- Establish procedures to ensure children and staff who come to the child care center sick or become sick while at your facility are sent home immediately.
- Keep sick children and staff separate (in an isolation room) from well children and staff until they can be sent home.
- Modify **drop off and pick up procedures** to observe social distancing.

Clarification of Requirements Based on June 29, 2021 Update

**Child Care Programs/Providers are Required to:**
- Continue to mitigate spread of COVID-19
- Have a written COVID Prevention Plan (CPP)
- Follow CDPH face coverings guidance
- Wear face coverings indoors (all staff, children over the age of 2 and any individuals who come into the facility)
- Report 3 or more COVID positive cases within a 14 day period of time to the local Health Department and licensing
- Train and have protective equipment for use of disinfectants
- Isolate or exclude any individual who has symptoms that are consistent with COVID
- Follow isolation and quarantine guidance
- Follow CalOSHA for any child care program that has employees
- Follow all previous licensing guidance not mentioned in the new guidelines, for example cleaning and disinfecting and reporting communicable diseases

**Child Care Programs/Providers are Recommended to:**
- Encourage vaccination of all eligible persons
- Maintain a written record of vaccinations in the facility file
- Do not wear face coverings while sleeping
- Report 1 – 2 COVID cases to the local Health Department
- Consider and follow physical distancing and stable groups as best practices
- Use disinfectant only if a COVID positive case has been in the facility in the past 24 hours. Otherwise, clean with soap, water, and detergent.
- Follow the CDPH ventilation guidance

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Other Key Points:
- Child / staff ratios are the same as they were pre-pandemic
- There is no firm limit on physical distancing or group size beyond pre-pandemic requirements
- Use of drinking fountains is permitted
- Before and after school childcare programs on school campuses should follow K-12 Guidance

Planning

The [CA Department of Public Health Guidance for Child Care Programs and Providers](https://www.sbcemergencychildcare.org/) states:

- Licensees and providers **must** continue to mitigate the spread of COVID-19. Review [Cal/OSHA COVID-19 Guidance and Resources](https://www.sbcemergencychildcare.org/) to implement steps to protect staff and minimize exposure to the COVID-19 virus.
- The [Cal/OSHA COVID-19 Prevention Program (CPP)](https://www.sbcemergencychildcare.org/) is a written plan **required** under the Cal/OSHA COVID-19 Emergency Temporary Standards. For more details and to access a template, refer to the California Department of Industrial Relation’s [COVID-19 Prevention Emergency Temporary Standards](https://www.sbcemergencychildcare.org/).
- Facilities should have a written plan for when a child or staff member has been exposed to someone with COVID-19, has **symptoms** of COVID-19 or tests positive for COVID-19.
- Developing a written communication plan with parents, guardians, and caregivers to share information and guidelines in their preferred language is recommended.
- Implement the recommended processes and protocols when a workplace has an outbreak, in accordance with CDPH [Case and Contact Management Within Child Care Facilities](https://www.sbcemergencychildcare.org/) guidance.

**Recommendations and Tips:**
See California Department of Public Health’s [COVID-19 Case and Contact Management Within Child Care Facilities](https://www.sbcemergencychildcare.org/) guidance.

According to [CDC](https://www.cdc.gov), an important step is to review, update, and implement emergency operations plans (EOPs) – also known as Emergency or Disaster Preparedness Plans. CDC emphasizes the importance of having a plan in place to protect staff, children, and their families from the spread of COVID-19. Your COVID-19 plan should include steps you will take when a child or staff member has been exposed to someone with COVID-19, has **symptoms** of COVID-19, or tests positive for COVID-19. The plan is based on state licensing regulations and in collaboration with regulatory agencies, state and local public health departments, and child care health consultants or other organizations that support your child care program.

See key resources on emergency preparedness (for example, [Caring for our Children](https://www.cdc.gov) National Health and Safety Performance Standards Guidelines for Early Care and Education Programs and the [Emergency Preparedness Manual](https://www.cdc.gov) for Early Childhood Programs) while reviewing, updating, and implementing your EOP. CDC recommends:

- Designate someone to be responsible for responding to COVID-19 concerns. Make sure staff and families know who their designated person is and how to contact them. In a family child care home, the provider is the designated contact person.

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• In collaboration with local officials, decide on clear criteria for when your child care program will suspend in-person operations to stop or slow the spread of COVID-19, as well as clear criteria for when to resume operations.
• Assess the services your child care program provides to meet the basic needs of children and families (such as meals and snacks through the USDA nutrition programs and other provided services) and develop measures to address these needs if operations are suspended or if a child needs to isolate or quarantine as a result of a diagnosis of or exposure to COVID-19.

Testing

Testing is one layer in a multi-layered approach to COVID-19 prevention. For more information about testing, please see: Updated COVID-19 Testing Guidance.
Facility Protocols

Ventilation

According to CA Department of Public Health Guidance for Child Care Programs and Providers, ventilation is one component of maintaining healthy environments, and is an important COVID-19 prevention strategy for child care programs. Good ventilation is another step that can reduce the number of virus particles in the air. Along with other preventive actions, ventilation can reduce the likelihood of spreading disease and assists in ensuring a safe and healthy environment for children in care. (See for example, ventilation Title 22 requirements, California Code of Regulations (CCR) sections 101216(e)(2), 101223(a)(2), 101238(a), 102416(c), 102417(b), and 102423.)

• All businesses permitted to operate indoors should follow the recommended CDPH interim guidance for ventilation, filtration, and air quality. This guidance includes practical steps to promote better ventilation, filtration, and air quality indoors to reduce the spread of COVID-19 and ensure the buildings and grounds are safe.
• Consider how to safely bring fresh air into the child care facility.
• Consider using child safe fans to increase the effectiveness of open windows. Point fans to blow air outwards. May also consider other approaches for reducing the amount of virus particles in the air, such as using an air filtration and exhaust fans.
• Ventilation considerations are also important to have inside your transport vehicles, such as buses or vans. It is recommended to open windows to increase airflow from outside when safe to do so.
• Additional information for child care facilities can be found on the CDC Ventilation in Schools and Child Care Programs page.

Recommendations and Tips According to CDC:

• Consider running your HVAC system at maximum outside airflow for 2 hours before and after the center or home is occupied.
• Ensure restroom exhaust fans are functional and operating at full capacity when the center or home is occupied. Clean and change filters as recommended by manufacturer.
• Inspect and maintain your local exhaust ventilation in areas such as restrooms, kitchens, cooking areas, etc.
• Use child safe fans to increase the effectiveness of open windows. Placing a fan by an open window to blow inside air out is a good way to encourage air flow throughout the room. Even without an open window, fans can improve air flow and keep virus particles from staying concentrated in one place.
• Ensure your ventilation systems operate properly and provide acceptable indoor air quality for the current occupancy level for each space. Additional information for child care centers and family child care homes can be found on Ventilation in Schools and Child Care Programs page. This page has a more in-depth list of ventilation interventions that can help reduce the concentration of virus particles, such as SARS-CoV-2, in the air. The American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) also has Guidance for Building

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**Operations During the COVID-19 Pandemic.** Review additional ASHRAE guidelines for schools and universities for further information on ventilation recommendations for different types of buildings and building readiness for occupancy.

- If your child care center or family child care home does not have an HVAC system or wants extra filtration, consider using a portable high-efficiency particulate air (HEPA) cleaner. HEPA cleaners trap particles that people exhale when breathing, talking, singing, coughing, and sneezing.
- When choosing a HEPA cleaner, select one that is the right size for the room(s). One way to do this is to select a HEPA fan system with a Clean Air Delivery Rate (CDR) that meets or exceeds the square footage of the room in which it will be used. The larger the CADR, the faster it will clean the air. See [EPA’s Guide to Air Cleaners in the Home](https://www.epa.gov/energy/equipment/guide-air-cleaners-home) for more information.

### Physical Distancing and Stable Groups

According to the [CA Department of Public Health Guidance for Child Care Programs and Providers](https://www.cdph.ca.gov/Programs/PreventativeHealth/CommunityPreventativeHealth/ChildCarePrograms/index.html):

- Physical distancing is an infection control best practice that may be implemented as an additional safety layer between groups of children and staff to reduce the spread of COVID-19.
- Child care settings typically have a stable group model with the same groups of staff and children each day, and licensees and providers should consider continuing to implement stable groups as a best practice.
- Staff should follow [Cal/OSHA ETS](https://www.dir.ca.gov/DLI/dliets01.htm) for physical distancing requirements.

### Sinks

**Recommendations and Tips:**
It is recommended that each classroom is equipped with its own designated sink accessible to children.

### Cleaning and Disinfecting

Cleaning and disinfecting surfaces can reduce the risk of infection. Train and monitor staff to follow infection control practices below related to requirements for cleaning and disinfection, housekeeping and sanitation principles, and universal health precautions. (See cleaning and disinfection requirements pursuant to CCR sections 01216(e)(2), 102416(c), 101238(a) and 102417(b).) These practices also help ensure buildings and grounds are clean, safe and sanitary, and the personal right to safe and healthful accommodations. (See for example, of cleaning and healthful accommodations requirements pursuant to Title 22 CCR sections 101216(e)(2), 101223(a)(2), 101238(a), 102417(b), and 102423.)

- It is important to know the difference between cleaning, sanitizing, and disinfecting and when to do each in order to maintain a healthy child care environment and the well-being of children in care. See CDC guidance on [Cleaning and Disinfecting Your Facility](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfecting.html) for detailed information on infection control practices related to cleaning and disinfection.
• Laundry, such as clothing and bedding, should be washed using the appropriate hot water setting and allow items to dry completely. If handling dirty laundry from a person who is sick, wear gloves and a mask. See PIN 20-11-CCLD for more information.
• When choosing cleaning products, consider using those approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list "N" and follow product instructions.
• Always follow the directions on the label to ensure safe and effective use of the product.
• The Healthy Schools Act requires that anyone using disinfectants at child care centers complete annual California Department of Pesticide Regulation-approved training. Online training can be found by going to the California School & Child Care Integrated Pest Management website. Note: This does not apply to family child care homes.

Recommendations and Tips:
• Sinks used for food preparation should not be used for any other purposes according CCL.
• Sanitize the sink and toilet handles before and after each child’s use.
• Conduct a deep clean every evening.
• Individual water bottles/cups shall be used (and washed daily) instead of communal drinking fountains.

Cleaning and Sanitizing Toys

Recommendations and Tips:
According to CCL and CDC:
• Toys that cannot be cleaned and sanitized should not be used. Toys are not shared with other classes, unless they are washed and sanitized before being moved from one group to the other.
• 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.
• Set aside toys after each use that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for “soiled toys.” Washing with soapy water is the ideal method for cleaning.
• Children’s books, like other paper-based materials such as mail or envelopes, are not considered as a high risk for transmission and do not need additional cleaning or disinfection procedures.
• All soft materials that are difficult to sanitize (dress up clothes, playdough, stuffed animals, rugs, etc.) are removed from the classroom. If playdough or a sensory material is used it is discarded after use.

Cleaning and Disinfecting Bedding and Laundry

Recommendations and Tips:
According to CCL and CDC:
• Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed weekly or before use by another child.
• Keep each child’s bedding separate, and store in individually labeled bins, cubbies, or bags.
• Do not shake dirty laundry; this minimizes the possibility of dispersing the virus through the air.
• Wash items as appropriate in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely.

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• Dirty laundry in contact with an ill person can be washed with other people’s items.
• Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

Diapering and Sanitization Practices

CCL Guidance:
• When diapering a child, wash your hands and wash the child’s hands before you begin, and wear gloves, if possible. Follow safe diaper changing procedures. Procedures should be posted in all diaper changing areas. Steps include:
  o Prepare (includes putting on gloves)
  o Clean child and remove gloves
  o Remove trash (including gloves)
  o Replace diaper
  o Wash child’s hands
  o Disinfect diapering station
  o Wash hands
• After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a 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 prior to 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.

Recommendations and Tips:
• Child care providers should change the child’s clothes if secretions are on the child’s clothes.
• Contaminated clothes should be placed in a plastic bag or washed in a washing machine. Infants, toddlers, and their providers should have multiple changes of clothes on hand in the child care center or home-based child care.
• Child care providers can protect themselves by wearing an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other updo.
• The CDC recommends that posters with diaper changing procedures shall be posted and are available here.
• Child care providers should wash their hands, neck, and anywhere touched by a child’s secretions.

Shoes

Consistent with existing practices (See Caring for Our Children 5.2.9.14), adults and children should remove or cover shoes before entering a play area used by infants.
Meals and Preparation

According to [CA Department of Public Health Guidance for Child Care Programs and Providers](https://www.sbcemergencychildcare.org):

Changes may be made during meal times to help mitigate the spread of COVID-19.

- Moving tables to spread children out or the use of name cards to provide adequate spacing of children is recommended.
- Licensees and providers should follow proper handwashing, cleaning, and disinfection practices before and after eating. Follow [CDC](https://www.cdc.gov) and [CACFP](https://www.cacfp.org) COVID-19 food handling guidelines.
- **Implement outdoor meal times if space and weather allow.**

Recommendations and Tips:

- [CDC](https://www.cdc.gov) states that food preparation should not be done by the same staff who diaper children.
- [CDC](https://www.cdc.gov) states that sinks used for food preparation should not be used for any other purposes.
- Stagger meal times so only one class eats a meal at a time.
- Maintain social distancing at meals by seating children 6 feet apart.
- Provide prepackaged and individualized pre-made meals and snacks when possible.

Tooth Brushing

Recommendations and Tips:

- Encourage parents and caregivers to regularly brush teeth at home.
Overview of Essential Personal Protective Equipment

The following chart is taken from [CA Department of Public Health Guidance for Child Care Programs and Providers](https://www.sbcemergencychildcare.org/). Use the chart below for a quick reference to protective equipment and supplies to use in child care environments. Further information about face coverings, hand hygiene and disinfecting and cleaning is provided within this document.

<table>
<thead>
<tr>
<th>Items</th>
<th>Child Care Workforce</th>
<th>Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face Coverings</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Child care providers must ensure compliance with the current CDPH Guidance for the Use of Masks.</td>
<td>Children aged 2 and older should be taught and reminded to wear face coverings.</td>
</tr>
<tr>
<td>Gloves</td>
<td>Yes, for tasks such as serving food, diapering, handling trash, or using cleaning and disinfectant products</td>
<td>No</td>
</tr>
<tr>
<td>Hand Sanitizer</td>
<td>Yes, Optional</td>
<td>May be used under adult supervision only and must be kept out of children's reach. Call Poison Control if consumed: <strong>800-222-1222</strong> Note that frequent handwashing is more effective than use of hand sanitizers. Sanitizer must be rubbed into children's hands until completely dry. Hand sanitizer is not recommended for children under 24 months.</td>
</tr>
<tr>
<td></td>
<td>Note that frequent handwashing is more effective than the use of hand sanitizers</td>
<td></td>
</tr>
<tr>
<td>Disinfectant Cleaning Products</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Provide training and <strong>required</strong> protective equipment per manufacturer's recommendations. Must be kept out of children's reach.</td>
<td></td>
</tr>
</tbody>
</table>

Note: Child care providers and licensees may contact their local Child Care Resource and Referral Agencies or local First 5 offices for information about obtaining Personal Protective Equipment (PPE) and supplies.
Face Coverings

- Child care providers must ensure compliance with the current CDPH Guidance for the Use of Masks. As of June 15, 2021, the use of mask/face coverings is required by the California Department of Public Health (CDPH) and the Division of Occupational Safety and Health (Cal/OSHA) in child care indoor settings regardless of vaccination status.
- Never place face coverings on babies or children under 2 years of age because it poses a danger and risk for suffocation.
- Children should not wear face coverings while sleeping.
- Child care providers and licensees must ensure the use of face coverings does not cause children to overheat in hot weather.
- Learn from the CDC about How to Select, Wear, and Clean Your Mask. Masks should be washed frequently.

Recommendations and Tips from CDC:

CDC recognizes there are specific instances when wearing a mask is not be feasible. In these instances, consider adaptations and alternatives. CDC does not recommend using face shields or goggles as a substitute for masks. Do NOT put a plastic face shield (or a mask) on newborns or infants.

Store cloth masks properly and wash them regularly to keep them clean. Have more than one mask on hand so that you can easily replace a dirty mask with a clean one. Make sure to remove your mask correctly and wash your hands after touching a used mask. When reusing your mask after a break, keep the same side facing out. For more information on washing masks, visit How to Wash Masks.
Parent/Child Communication and Education

Recommendations and Tips:

- Clear communication is essential to ensure that parents, caregivers, and staff understand the program’s policies. The parent handbook should be updated to reflect health and safety guidelines for COVID-19.
- Everyone at the facility is expected to be free of contagious illnesses to the best of their knowledge.
- Plans should be established for sharing information and guidelines with parents and caregivers in their preferred language.
- It is recommended that facilities provide parents with illness and exclusion policies prior to enrollment which also includes drop-off and pick-up procedures as well as protocols to ensure vigilance about keeping anyone who is ill and/or contagious out of the facility.

COVID-19 Related Education for Children

Recommendations and Tips:

- Implement strategies to model and reinforce social and physical distancing and movement.
- Use carpet squares, mats, or other visuals to help children maintain spacing.
- Model social distancing when interacting with children, families, and staff.
- Role-play what social distancing looks like by demonstrating the recommended distance.
- Give frequent verbal reminders to children.
- Create and develop a scripted story around social distancing, as well as handwashing, proper etiquette for sneezes, coughs, etc.
- Send home a tip sheet for parents and caregivers to also learn about social distancing.
- Practice frequent handwashing by teaching a popular child-friendly song or counting to 20 (handwashing should last 20 seconds).
Children with Disabilities or Special Needs

**CDC** recommends providing accommodations, modifications, and assistance for children with disabilities and special needs:

- Your child care program should remain accessible for children with disabilities.
- Physical distancing can be difficult for young children with disabilities.
- Wearing **masks** may be difficult for young children with certain disabilities (for example, visual or hearing impairments) or for those with sensory, cognitive, or behavioral issues. For children who are only able to wear masks some of the time for these reasons, prioritize having them wear masks during times when it is difficult to separate children and/or staff (for example, during carpool drop off or pick up, or when standing in line).
- If interacting with people who rely on reading lips, consider wearing a clear mask or a cloth mask with a clear panel.
- Many children require assistance or visual and verbal reminders to cover their mouth and nose with a tissue when they cough or sneeze, throw tissues in the trash, and wash their hands.
- Where service or therapy animals are used, use guidance to protect the animal from chemical disinfectants and from COVID-19 (even though the number of dogs and other pets who have contracted COVID-19 from humans remains low).
- **Cleaning and disinfecting** procedures might negatively affect children with sensory or respiratory issues. Avoid overuse cleaning products and use safe cleaning products when children are not around.
- Behavioral techniques (such as modeling and reinforcing desired behaviors and using picture schedules, timers, and visual cues for positive reinforcement) can help all children adjust to changes in routines and take preventive actions but may be especially beneficial for some children with disabilities.
- Organizations that support people with disabilities have information and resources to help child care programs with these behavioral techniques. In addition, behavioral therapists or local mental health or behavioral health agencies may be able to provide consultation for specific concerns.
- See CDC’s guidance for [Direct Service Providers](https://www.sbcemergencychildcare.org/).

Emergency Child Care Initiative
Website: [https://www.sbcemergencychildcare.org/](https://www.sbcemergencychildcare.org/)  Email: essentialchildcaresb@gmail.com
Illness Policy

According to CA Department of Public Health Guidance for Child Care Programs and Providers: Child care programs must exclude or isolate any child, parent, caregiver, or staff showing symptoms of a contagious disease or illness as required pursuant to Title 22 in CCR sections 101216(h), 101226.1(a)(1) and 102417(e).

- Take action to isolate children who begin to have COVID-19 symptoms while in care, from other children and staff.
- Ensure that isolated children continue to receive adequate care supervision and that the health of the child is continually observed throughout the day according to licensing requirements.
- If an individual who resides in a family child care home is exhibiting symptoms of COVID-19, the facility should follow public health guidelines for quarantine or isolation.
- Notify local health officials, staff, and families immediately of any confirmed case of COVID-19.

Recommendations and Tips:
The following illness terms shall be added to standard exclusion criteria outlined by Community Care Licensing.

- Families shall receive an updated Illness Policy that includes parental responsibilities to keep children home if sick and that there is no guarantee that COVID-19 will not be contracted via the facility.
- If a child or staff member develops any COVID-19 symptom, they are to be sent home immediately.
- Advise sick staff members and children not to return until they have met CDC criteria to discontinue home isolation, including at least 1 days with no fever, symptoms have improved and at least 10 days since symptoms first appeared. See Santa Barbara County’s Public Health School/Child Care webpage for more information including Santa Barbara Protocols for Symptoms, Potential Exposure and/or Close Contact with an Individual Testing Positive for COVID-19 in Childcare or Other Youth Setting Outside a Classroom and Quarantine Decision Tree for Unvaccinated Student School Indoor Exposure.
- Anyone who has had close contact (defined by the CDC as being within 6 feet of someone for 10 minutes or more) with someone diagnosed with COVID-19 should remain home for 14 days after the last known close contact with the case patient according to CA PHD.
- According to CA PHD, if a child or staff member has any COVID-19 symptoms or answers yes to any of the daily health screening questions, the child/staff should remain home at least 10 days since symptoms first appeared; AND at least 24 hours since last fever without the use of fever reducing medications; AND symptoms (e.g., cough, shortness of breath) have improved. When all these criteria are met a note from a healthcare provider is not needed.
- According to CA PHD, a child/staff can end isolation when they have been cleared for return by healthcare provider. If COVID-19 tested and negative result, return the child/staff can end isolation 72 hours after symptoms resolve.
- See Appendix A for steps for closure due to COVID-19 case/exposure at the facility.
- Print and post CDC’s poster regarding protocols to follow for interacting with someone who has or is suspected to have COVID-19.

Emergency Child Care Initiative
Website: https://www.sbcemergencychildcare.org/ Email: essentialchildcaresb@gmail.com
• It is recommended that the facility has flexible sick leave and absentee policies that discourage people to come in while sick.

Isolation Room

Recommendations and Tips According to the CDC:

• Your children or staff might begin to have COVID-19 symptoms while at your facility. You should take action to isolate people who begin to have these symptoms from other children and staff. Plan to have an isolation room or an area, preferably with access to a separate restroom, you can use to isolate a sick child or staff member. Ensure that isolated children are still under adult supervision. Arrange safe transportation home or to a healthcare facility (if severe symptoms) for the child or staff if showing symptoms of COVID-19.
• Close off areas used by a sick person and do not use these areas until after cleaning and disinfecting them; this includes surfaces or shared objects in the area, if applicable.
• Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible and increase ventilation in the area. You should ensure safe and proper use of cleaning and disinfection products, including storing products securely away from children.
• See CDC’s Toolkit for Child Care Programs for more resources on what to do if a child becomes sick while at the child care program.

Healthy Hygiene

It is recommended that no unnecessary contact is permitted. All individuals should be discouraged from touching their eyes, ears, mouth and face.

Handwashing

Using the personal hygiene practices below can reduce the risk of infection. Train and monitor staff to follow these strongly recommended universal health precautions and preventative health practices. (See handwashing and hygiene requirements in, Title 22 CCR sections 101216(e)(2) and 102416(c).)

Hands must be washed frequently. Hand washing with soap is preferred over an alcohol-based hand sanitizer. Ensure all staff and children are washing hands for at least 20 seconds. Always wash hands with soap and water even if hands are not visibly dirty and dry with a paper towel or single use towel. Towels should not be reused.

• Implement and enforce strict handwashing guidelines for all staff and children.
• According to CCL, everyone shall wash their hands at:
  o Arrival to the facility and after breaks
  o Before, during, and after preparing food
  o Before and after eating or handling food, or feeding children
  o Before and after administering medication or medical ointment
  o Before and after diapering
  o After using the toilet
  o After changing diapers or cleaning up a child who has used the toilet
○ After coming in contact with bodily fluid
○ After blowing your nose, coughing, or sneezing
○ After touching an animal, animal feed, or animal waste
○ After handling pet food or pet treats
○ After playing outdoors or in sand
○ After handling garbage
○ Before and after caring for someone who is sick with vomiting or diarrhea
○ Before and after treating a cut or wound

Recommendations and Tips:
• Assist children with handwashing, including infants who cannot wash hands alone. After assisting children with handwashing, staff should also wash their hands.
• Post signs in restrooms and near sinks that convey proper handwashing techniques. Developmentally appropriate posters in multiple languages are available from CDC.
• For occasions when soap and water are not immediately available, hand sanitizing products with at least 70% alcohol may be used. It is important to store hand sanitizer out of reach of children when not in use. Even after using sanitizer, hands should be thoroughly washed with soap and water as soon thereafter as possible.
• Install hand sanitizers, out of the reach of children, near all entry doors and other high traffic areas.
Possible COVID-19 Exposure

How to Clean if the Facility has been Exposed to COVID-19

If a facility has been impacted by an individual who has been exposed or tested positive for COVID-19, please adhere to CDPH’s guidelines and contact your local county public health department, report the incident to your local regional office, and communicate with your families about it. From CDC-Interim Guidance for Administrators of U.S. K-12 Schools and Childcare Programs:

- Close off areas used by the individual suspected to be infected with COVID-19 and wait as long as practical before beginning cleaning and disinfecting to minimize potential for exposure. If possible, wait up to 24 hours before beginning cleaning and disinfecting.
- Before cleaning and disinfecting, open outside doors and windows to increase air circulation in the area.
- Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill person(s), focusing especially on frequently touched surfaces.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfecting.
- If it has been 7 days or more since the sick employee used the facility, additional cleaning and disinfection is not necessary. Continue routinely cleaning and disinfecting all high-touch surfaces in the facility.

Additional information on cleaning and disinfecting of community facilities can be found: CDC: Cleaning and Disinfection for Community Facilities https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

Notifications Related to Possible COVID-19 Exposure

Licensees and providers should have a plan in place for responding to COVID-19 exposures or outbreaks.

- Consider implementing the recommendations in COVID-19 Case and Contact Management Within Child Care Facilities and Responding to COVID-19 in the Workplace for Employers when exposure occurs.
- Actively encourage staff and families to notify the facility if they test positive for COVID-19 or have been exposed to someone with COVID-19 symptoms or a confirmed or suspected case.
- Employers are required to report positive COVID-19 cases in a workplace to the local health department. Follow Cal/OSHA emergency temporary standards on COVID-19 for reporting.
- Child care centers are required to report epidemic outbreaks to the CDSS Community Care Licensing Division (CCLD) through their local Regional Office as required pursuant to Title 22, CCR section 101212(d). Family child care homes must report a communicable disease outbreak, when determined by the local health authority, to CCLD through their local Regional Office pursuant to Title 22, CCR section 102416.2(c)(3).
Support Coping and Resilience

The COVID-19 pandemic has had a major effect on our lives. Many are facing challenges that can be stressful, overwhelming, and cause strong emotions in adults and children. It is natural to feel stress, anxiety, grief, and worry during the COVID-19 pandemic. Below are a few recommendations to help yourself, staff, children, and families manage stress:

- California’s playbook on Stress Relief during COVID-19 provides guidance on how to notice stress in kids and outlines tools and strategies on how to reduce stress for children and adults.
- Promote healthy nutrition, sleep, and physical activity habits and self-care.
- Discuss and share stress reduction strategies.
- Encourage staff and children to talk with people they trust about their concerns and feelings.
- Communicate openly and often with staff, children, and families about mental health support services available in the community, including if mental health consultation is available to the program.
- Consider posting signage for CalHOPE and the national distress hotline: 1-800-985-5990, or text TalkWithUs to 66746.
- Encourage staff to call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255), 1-888-628-9454 for Spanish, or Lifeline Crisis Chat if they are feeling overwhelmed with emotions such as sadness, depression, or anxiety; or call 911 if they feel like they want to harm themselves or others.

In addition to the following recommendations from CDC, CALM offers trauma-informed training and support to child care providers. For more information contact Santa Barbara County Child Care Planning Council: (805) 964-4711 Ext. 4473 | tpitchford@SBCEO.org.
Resources

National Resources for Child Care Professionals

Center for Disease Control & Prevention Guidelines for Child Care Programs
Center for Disease Control & Prevention
Childcare Aware
National Association for the Education of Young Children (NAEYC) for COVID-19
American Academy of Pediatrics
Healthy Children
Head Start ECLKC
NCPMI

State Resources for Child Care Professionals

UCSF Child Care Health Program
California Department of Education
California Department of Public Health
California Department of Social Services (CDSS)
State of California COVID-19 Page
California Community Care Licensing
State of California Health and Human Services - CHILD CARE FACILITY LICENSEES AND PROVIDERS - April 7, 2020 Provider Information Notice
CAL/OSHA COVID-19 Guidelines
Child Care Licensing

County Resources for Child Care Professionals

Children’s Resource and Referral of Santa Barbara County
First 5 Santa Barbara County
Santa Barbara County Child Care Planning Council
Santa Barbara County Public Health
The Emergency Child Care Initiative

Resources for Working With Children and Families

American Academy of Pediatric Psychology
Bright Horizons
CDC -Talking to Children about COVID 19
Social Story
Appendix A

Preparedness for Closure Due to COVID-19

The following are steps and considerations in preparation for a possible need to close your child care program again, either temporarily or for a longer period due to a community resurgence of COVID-19. It is recommended that time is invested in planning and preparing in advance by developing protocols for a temporary closure so to optimize health and safety for children, staff and the community, while also safeguarding the sustainability of your child care business.

All of the following information is directly taken from CDC and CA Public Health guidelines via the following links:

- CA Public Health: Responding to COVID-19 in the Workplace
  https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Workplace-Outbreak-Employer-Guidance.aspx
- CDC: Prevent and Reduce Transmission Among Employees
- CDC: Cleaning and Disinfection for Community Facilities
- CDC: Interim Guidance for Administrators of US K-12 Schools and Child Care Programs

Prepare and Plan

- Stay informed about the local COVID-19 outbreak by following Santa Barbara’s Public Health Department.
- Create an action plan for if the facility needs to close including how the facility will communicate with staff and parents and how the facility will be sanitized after the infection.
- Designate a workplace infection prevention coordinator to implement COVID-19 infection prevention procedures and to manage COVID-related issues among employees and families.
- Identify who is responsible for informing licensing specialist (if applicable) and Child Care Resource and Referral (CCR&R) if the facility must close (so families will not be referred during closure).
- Follow CA Public Health guidelines regarding when ill person can return to the facility. See Appendix C.
- Develop plans to cover classes in the event of increased staff absences. Coordinate with other local child care programs and reach out to substitutes to determine their anticipated availability if regular staff members need to stay home if they or their family members are sick.

Isolate

- Instruct potentially exposed or symptomatic persons to quarantine.
- Santa Barbara County Protocols for Symptoms, Potential Exposure and/or Close Contact with an Individual Testing Positive for COVID-19 in a School, Classroom, or Child Care Setting (English)
and Spanish versions) updated 1/28/21. Santa Barbara County Public Health Department also released protocols regarding symptoms after someone receives a COVID-19 vaccine.

- Review Santa Barbara County Public Health Department’s visuals regarding quarantine guidelines:
  - Home isolation and quarantine guidelines for confirmed or suspected COVID-19 symptoms (English and Spanish)
  - Home isolation and quarantine guidelines for close contact with COVID-19 (English and Spanish)
  - Home isolation and quarantine guidelines for travel or returning to Santa Barbara County (English and Spanish)

**Report**

- Contact Public Health Department and Community Care Licensing to report known or suspected cases of COVID-19.
- If the infected person lives in a jurisdiction outside of SB, contact that local public health department as well.
- The Public Health Dept may request a roster of all employees, their contact info, work schedule, etc. and assistance with contact tracing.

**Dismiss Students and Staff**

- Follow Santa Barbara County Protocols for Symptoms, Potential Exposure and/or Close Contact with an Individual Testing Positive for COVID-19 in a School, Classroom, or Child Care Setting (English and Spanish versions) updated 1/28/21 to determine when and for how long a classroom or program needs to close.

**Test**

- Employers should NOT require a COVID-19 test result or a healthcare provider’s note for employees who are sick to validate their illness, qualify for sick leave, or to return to work.
- Testing is recommended when possible.
- Testing may be needed at repeated intervals to capture all positive cases, especially if an outbreak is ongoing.

**Clean and Disinfect**

- Wait 24 hours before cleaning and disinfecting.
- During this waiting period, ventilate.
- Perform deep cleaning and sanitization while wearing PPE.
- If it has been 7 days or more since the sick employee used the facility, additional cleaning and disinfection is not necessary. Continue routinely cleaning and disinfecting all high-touch surfaces in the facility.

**Communicate**

- Determine which employees/children/families may have been exposed to the virus and may need to take additional precautions.
• Inform staff/families of possible exposure to COVID-19 and maintain confidentiality.
• Conduct contact tracing and quarantining of close contacts of confirmed cases in the workplace.
• Instruct close contacts of all who have been or potentially were exposed to quarantine at home.

Make Decisions about Extending the Dismissal
• Seek guidance from local health officials to determine when students and staff should return to schools and what additional steps are needed for the school community.
• If there is a case of COVID-19 among children or staff, programs should consider what time frame will allow for sufficient cleaning and disinfection.
• If you must close your facility, contact your local regional office to inform them of the closure and submit an Unusual Incident Report documenting your planned closure and your anticipated re-opening date. The regional office will advise you on the steps to take and the appropriate procedures to follow.