

Checklist for Child Care Administrators: Steps to Prevent COVID-19

Task	N/A	Completed	Date	Initials
Communication				
Post signs at entrance and exit regarding physical distancing, covering cough, minimizing non-essential activities in the community, and frequent handwashing.				
Stay in regular communication with all parents, children, staff, and volunteers about steps everyone can take to protect themselves and prevent further spread .				
Provide staff and family a way to communicate with facility, receive information and updates, and voice concerns.				
Education and Preparation				
Educate staff and families about: <ul style="list-style-type: none"> • Signs and symptoms of COVID-19 • Hand hygiene and covering coughs and sneezes • Cloth face covers • Reducing stigma Find resources at www.kingcounty.gov/covid				
Review and update your emergency plan so that you can be best prepared for cases of COVID-19.				
Make plans to maintain same group of children and staff from day to day, including a separate classroom or group for the children of health care workers, first responders, other essential workers.				
Establish daily process for identifying and sending home children and staff who become sick (for example, determine where child will wait for parent, who will take child to meet parent).				
Have Illness Logs printed to help monitor absences or children who develop symptoms while in care.				
Review Emergency Care Plans for children with chronic illnesses (asthma, allergies, etc.) so all staff is aware.				
Educate staff about cleaning schedule , and identify items and areas that will need more frequent sanitization/disinfecting in your facility. See “Changes to Cleaning and Disinfecting during COVID-19” for bleach solutions and labels.				
Choose activities that encourage more physical space between children.				
Staff and all children ages 5 years and older must wear a face covering unless medically directed not to. Children ages 2 through 4 are strongly encouraged to wear a face covering within the facility. Face coverings should NOT be put on babies and children under age two.				
Review CDC guidelines for “Screen children upon arrival” and decide which example of recommended arrival health screening your child care program will implement.				
Have enough thermometers available for parents and screeners at each entry point				

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Prevention				
Pre-arrival				
<ul style="list-style-type: none"> All staff and children should follow the Keep Me Home If exclusion guidelines. A child or staff with a cough, shortness of breath, temperature of 100.4°F or higher, chills, congestion or runny nose, headache, muscle or body aches, sore throat, fatigue, nausea or vomiting, diarrhea, new loss of taste or smell, or other signs of new illness unrelated to a preexisting condition (such as seasonal allergies) should remain at home. For the most up-to-date COVID-19 symptom list see the Centers for Disease Control and Prevention. 				
Ask parents/guardians to take their child's temperature before coming to the child care.				
Ask staff to check their own temperature daily before coming to the facility.				
Upon arrival, stand at least 6 feet away from the parent/guardian and child (if you cannot maintain a distance of 6 feet, wear personal protective equipment (PPE) as advised by the CDC) to do the following:				
Ask parents/guardians if they took the child's temperature prior to arrival. <ul style="list-style-type: none"> If temperature <u>was</u> taken at home, document temperature parent reports. 				
<ul style="list-style-type: none"> If temperature <u>was not</u> taken at home, ask the parent/guardian to take their child's temperature upon arrival using the thermometer guidance below (staff maintain distance of 6ft from while parent/guardian is doing so). 				
Ask all parents/guardians the following questions and document answers: <ul style="list-style-type: none"> Does your child have any of the following symptoms? <ul style="list-style-type: none"> cough shortness of breath temperature of 100.4°F or higher congestion or runny nose headache muscle or body aches or chills sore throat fatigue nausea, vomiting, or diarrhea new loss of taste or smell or other signs of new illness unrelated to a preexisting condition (such as seasonal allergies) Does anyone in your household have any of the above symptoms? Has your child been in close contact with anyone with suspected or confirmed COVID-19 in the last 14 days? Has your child had any medication to reduce a fever before coming to care? <p>If the answer is "yes" to any of the above questions, the child cannot attend.</p>				

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Throughout the day				
Visually inspect child for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.				
Child care staff must take children’s temperatures if symptoms develop during the day.				
Staff must take their own temperature if symptoms develop during the day.				
Follow the guidelines in the thermometer handout if staff need to take a temperature, including: <ul style="list-style-type: none"> • Use no-contact thermometers, if available, that can read a child’s temperature from a distance. • Gloving/hand-washing/hand-sanitizing practices are not required if no-contact thermometers are used. 				
If using a thermometer that requires direct contact, such as a digital thermometer or forehead scan thermometer, use gloves if available. It is acceptable to wash hands with soap and water or use hand-sanitizer prior to taking each child’s temperature as an alternative to gloves. Use disposable covers if using a digital thermometer each time a temperature is taken. Thermometer must be disinfected between uses (unless it is a no-contact thermometer).				
Increase how often you clean, rinse, and sanitize/disinfect your facility using the 3-Step Method to 1. Clean 2. Rinse and 3. Sanitize/Disinfect. Reference Cleaning and Disinfecting during COVID-19 document .				
Products other than bleach should be approved by licenser before use. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available here .				
Establish and maintain hand hygiene stations stocked with either soap/water/paper towels or alcohol-based hand sanitizer (at least 60% alcohol). These should be available outdoors as well.				
When using hand sanitizer on children: <ul style="list-style-type: none"> • an authorization form must be completed by parent/guardian each year before use. • it must never be used on children under 2 years. 				

Public Health—Seattle & King County’s guidance reflects our commitment to protecting the health and safety of our residents in local circumstances. You may find that there are differences in the guidance issued by local, state, and national agencies.

Checklist for Child Care Administrators: Steps to Take When You Have a Suspected or Confirmed COVID-19 Case in Your Facility

Task	N/A	Completed	Date	Initials
Illness Response				
If child or staff develop symptoms while at child care				
Follow all Keep Me Home If exclusion guidelines.				
If child or staff becomes symptomatic with a cough, shortness of breath, temperature of 100.4°F or higher, chills, congestion or runny nose, headache, muscle or body aches, sore throat, fatigue, nausea or vomiting, diarrhea, new loss of taste or smell or other signs of <i>new</i> illness unrelated to a pre-existing condition (such as seasonal allergies) follow the steps below.				
Complete Illness Log for individuals with symptoms.				
For sick child				
Designate a staff member to care for and supervise the sick child while awaiting the parent/caregiver's arrival.				
Designated staff member separates the sick child from other children and staff. If possible, isolate the child in an unoccupied room while waiting for the parent/caregiver to pick the child up.				
If possible, move all other children into an unoccupied room and out of the classroom where the sick child spent time. Close off all areas used by the sick child to prevent re-entry.				
Designated staff member should wear a face covering or medical mask while caring for the sick child. If the sick child is older than 2, they should wear a face covering/mask. Designated staff member should help the child put the face covering/mask on properly.				
Notify the child's parent/caregiver. Kindly request they pick up the child as soon as possible.				
When the parent/caregiver arrives, the designated staff member should escort the child to the facility entrance.				
Advise family to call child's healthcare provider to get child tested for COVID-19 or go to a free testing site .				
For sick staff				
Separate the sick staff person from children and other staff. Send sick staff person home.				
Ask the staff member to wear a face covering/mask while they are still in the facility awaiting pick up, or if they will be using public transportation to return home.				
If possible, isolate the staff person in an unoccupied room if they are waiting to be picked up.				
Advise sick staff person to call their healthcare provider to get tested for COVID-19 or go to a free testing site .				

Task	N/A	Completed	Date	Initials
Cleaning and disinfecting after sick person leaves				
Designated staff person who cared for a sick child should: <ol style="list-style-type: none"> 1. Wash hands 2. Change their clothes, and bag and seal clothes to be washed. 3. Remove face covering and either dispose of in a plastic-lined garbage can or place in a sealed bag for washing. 4. Wash hands. 5. Put on clean face covering. 				
Any cloth items used by the sick child such as a blanket, napping sheet, and toys should be placed in a sealed bag and laundered.				
Any rooms the sick person spent time in should be cleaned and disinfected. Follow Cleaning and Disinfecting During COVID-19 document for recommended bleach disinfectant concentration and procedures. <ul style="list-style-type: none"> • Open windows and doors to the outdoors to increase air circulation in these areas. • If possible, wait 24 hours or as long as practical after the sick person was in a room before beginning to clean and disinfect. 				
For more information: Guidance for child care administrators: What to do when you have a confirmed COVID-19 case in your facility				
Communication				
Notify facility administration of confirmed or suspected COVID case(s).				
Meet with key staff, including teachers, janitors, and leadership to coordinate action.				
Notify families and staff of a confirmed or suspected COVID-19 infection in the facility. See COVID-19 Fact Sheet for Families .				
Remember: do not tell families anything that can identify the individual who is or may be sick.				
Please report to King County Coronavirus Call Center: 206-477-3977, identifying yourself as a child care program , if: <ul style="list-style-type: none"> • You have a single, mild case or 2 or more children or staff with suspected or confirmed COVID-19 infections in your childcare; • You are considering a brief 2-5 day closure or a longer 14 day closure; OR you are considering a temporary closure • Staff, children, or volunteers become severely sick with suspected or confirmed COVID-19 infections or undiagnosed respiratory illness (requiring hospitalization or causing death). 				
Notify your licensor of a suspected or positive case.				
If you are considering closing for a period of time:				
Please call the Public Health COVID-19 Call Center between 8:00 AM and 7:00 PM PST at 206-477-3977. Identify yourself as a child care provider and you will be connected to a nurse consultant from the Seattle & King County Child Care Health Program.				

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