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Public Health Department**

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Novel Coronavirus (COVID-19) Alameda County Public Health Department Frequently Asked Questions (FAQ) for Childcare Programs: May 4, 2020

This document summarizes the Frequently Asked Questions (FAQ) for Alameda County Childcare programs serving Essential Workers during the COVID-19 pandemic. This FAQ provides Alameda County Public Health Department guidance and orders for childcare, including: **family child care programs, daycare, preschools, and before and after school care. For infants and toddlers, care will be prioritized at sites equipped for the care of infants and toddlers.**

Ideally, child care should be provided in the child's home, by household members, without exposure to other children or ill individuals. However, the ACPHD recognizes that providing care for children at home will not be possible for some Essential Workers. Therefore, ACPHD encourages childcare programs, serving Essential Workers, to stay open and follow the orders and guidance outlined below.

This document answers questions pertaining to the following topics:

- ✓ **COVID-19 Overview**
- ✓ **Alameda County Shelter in Place Order**
- ✓ **Infection Control through Social Distancing**
- ✓ **Additional Infection Control Measures**
- ✓ **When there is a Confirmed positive COVID-19 Case in the Childcare Program**

COVID-19 Overview

What is the 2019 Novel Coronavirus (COVID-19)?

COVID-19 is a respiratory illness caused by a novel (new) virus, and we are learning more about it every day. There is currently no vaccine to protect against COVID-19. At this point, the best way to prevent infection is to avoid being exposed to the virus that causes it. Stopping spread of the virus through everyday practices is the best way to keep people healthy. More information on COVID-19 is available at www.cdc.gov/coronavirus/2019-ncov

The virus that causes COVID-19 is called "novel" because it has never before been seen in human beings. The full name of the virus is SARS-CoV-2. The illness caused by it is known as COVID-19. The first case of COVID-19 was seen in Wuhan, China at the end of 2019.

How does COVID-19 spread?

COVID-19 is thought to be spread from person to person by respiratory droplets. Respiratory droplets transmitting this virus are produced mainly by coughing or sneezing, but it is possible that laughing, singing, or even talking may produce similar droplets.

Larger droplets usually fall within 3 feet, smaller droplets within 6 feet – but tiny droplet nuclei might travel farther in some circumstances. For this reason we are recommending a minimum of 6 feet be maintained between people. Farther away is better. Shorter duration of interaction is better. Risk of transmission is lower outside than indoors.

Because infectious droplets may fall onto surfaces, we can pick them up on our hands and introduce them to the respiratory tract by touching our eyes, nose or mouth with unwashed hands. This is the reason we are recommending frequent handwashing, and frequent cleaning and disinfection of high-touch surfaces.

California Stay at Home Order

On March 19th, California issued a Stay at Home Order. This order differs from the local Alameda County Orders (described below) since it does not have an end date. **Childcare programs will need to adhere to the State's Order to serve ONLY essential sectors until the order is lifted.** For more information, see California Stay at Home Order FAQ [here](#).

Alameda County Shelter in Place Order

To slow and decrease the spread of COVID-19, Alameda County joined Contra Costa, Marin, San Francisco, San Mateo, and Santa Clara counties and the City of Berkeley in issuing a legal order directing their respective residents to shelter at home. The order limits activity, travel, and business functions to only the most essential needs. Governor Newsom issued a similar statewide order on March 19, 2020. Both Orders remain in effect in Alameda County, with the local order prevailing in areas where it is more restrictive than the order issued by the State. For more information, see Shelter in Place Order FAQ [here](#).

Order Extension

The Alameda County Order Extension beginning on **May 4, 2020** extends the shelter in place requirements until **May 31, 2020** at 11:59 p.m. The following activities may resume as long as physical distancing and industry-specific requirements are followed:

- All construction projects that follow the Construction Project Safety Protocols included with the order;
- All real estate transactions, with restrictions on open houses and limited tours;
- Childcare, camps and educational/rec programs that provide care for children of people who are allowed to work outside of their homes;
- Outdoor businesses such as nurseries, landscaping, and agriculture that normally operated outdoors prior to the shelter in place orders; and

- Use of certain outdoor recreational facilities, such as skate parks and athletic fields. Golf courses are permitted under local orders, but prohibited under state orders.

Essential and minimum business operations, as defined in the order, may continue.

All businesses operating in the County must update or create a Social Distancing Protocol to reflect new requirements specified in the order.

How does the Shelter in Place Order impact my childcare (child care center, preschool, family child care home) facility?”

Childcare establishments, summer camps, and other educational or recreational institutions or programs providing care or supervision for children of all ages that enable owners, employees, volunteers, and contractors for Essential Businesses, Essential Governmental Functions, Outdoor Businesses, or Minimum Basic Operations to work are allowed in the Alameda County [Shelter in Place Order](#). List of Essential Workers can be found [here](#).

The programs listed above may also serve vulnerable populations, including:

- Children who are receiving child protective services or who have been deemed to be at risk of abuse, neglect, or exploitation.
- Children eligible through the Emergency Child Care Bridge Program for Foster Children.
- Families experiencing homelessness as defined in Section 11434(a)(2) of Title 42 of the *United States Code*, known as the *McKinney-Vento Homeless Assistance Act*.
- Children of domestic violence survivors.
- Families with children with disabilities or special health care needs whose individualized education programs (IEP) and/or individual family support plans (IFSP) include ELC services.

To the extent possible, these operations must comply with the following conditions:

1. They must be carried out in stable groups of 12 or fewer children (“stable” means that the same 12 or fewer children are in the same group each day). * Note: The Alameda County Shelter in Place Order specifies a group size of 12. However, if a childcare establishment is licensed by the California Community Care Licensing Division (CCCL), they recommend a group size of 10. The Alameda County Public Health Department is also recommending the smaller (more restrictive) group size for CCCL licensed facilities.
2. Children shall not change from one group to another.
3. If more than one group of children is at one facility, each group shall be in a separate room. Groups shall not mix with each other.
4. Providers or educators shall remain solely with one group of children.

For additional guidance around childcare facilities such as infection control, visit <http://www.acphd.org/2019-ncov/resources/childcare-schools-colleges.aspx>

In addition, facilities must follow standard guidelines to prevent spread, such as social distancing when it is feasible in a child care setting, more intensive infection control measures like health screening, more frequent handwashing, and surface cleaning.

Can childcare programs serve Nonessential Workers?

No, not at this time. It is critical for everyone to follow the Orders to prevent the spread of COVID-19 and protect themselves, their loved ones, friends, neighbors, and the whole community. All persons, businesses, and other entities are required to comply if they do not fall within the exemptions that are specified in the Orders.

How will the Order to serve ONLY the children of Essential Workers be monitored?

Only Essential Workers are being referred to your childcare program. It is the responsibility of the parent to self-identify as an essential worker, and it is your responsibility to choose which families you serve.

Infection Control through Social Distancing

Social distancing is deliberately increasing the physical space between people to avoid spreading illness. A distance of at least 6 feet is required to prevent the spread of COVID-19.

How do you create social distancing in an early care and education setting?

- As stated above, limit the number of children to no more than 10 children in a single classroom. This will minimize cross-contagion and promote distancing between children.
- Re-engineer classrooms to put six feet between children's activity stations, tables, and chairs.
- Eliminate circle time and other activities that bring children close together and prevent the sharing of toys and materials. Instead, use a backpack or a large Ziplock bag for each child's individual materials.
- Stagger activities such as outdoor time or other breaks so no two groups are in the same place at the same time.
- Discontinue buffet-style food options and offer pre-packaged foods when possible.
- Have lunch and/or meals in classrooms and avoid sharing tables whenever possible.
- Modify daily operations to minimize exposures (e.g. avoid the use of touchscreens for sign-in/out, implement valet services to avoid parents coming into the child care center).
- Restrict visitors, including volunteers and parents/caregivers.

What are some options for individualized activity?

- Early care and education is often based in group play, but during the COVID-19 outbreak, Childcare providers are encouraged to emphasize individualized activities.
- Individualized activities may include coloring, painting, putting together puzzles, using building blocks or other activities children like to do alone.
- If children are seated apart from one another, some group activities that don't involve physical contact (singing, clapping games, storytelling) are also possible.

Additional Infection Control Measures

What is the recommended Health Screening?

- Screen children and staff for fever or cough daily, before entering childcare.
- If a staff member or child shows signs of respiratory illness (a new cough, complaints of sore throat, or shortness of breath), a fever of 100°F or above, they should enter a separate room and be sent home as soon as possible.
- Seek medical care immediately if symptoms, such as a high fever or difficulty breathing, become more severe.

What are the mild or moderate symptoms in children?

Based on a recent study of children from China, ‘mild’ symptoms included fever, fatigue, myalgias (muscle aches), cough, sore throat, runny nose, and sneezing. Some of these children also had nausea, vomiting, diarrhea, or abdominal pain. The ‘moderate’ symptoms in this study included pneumonia, fever, cough, and sometimes wheezing, but no shortness of breath and no hypoxia (low oxygen levels).¹

Can children/staff come to school if they are coughing but do not have a fever?

If a child or a staff member has a new cough, they should not come to school even if they have no fever. It is not uncommon for people, including children, with COVID-19 to have cough without fever, especially early in the course of illness.

When is it safe for ill children or staff to return to work or the childcare program?

Ill children or staff should not return to work or childcare until they have met all three criteria:

1. Their respiratory symptoms are improving
2. They have had no fever x 72 hours without the use of fever-reducing medicines, **and**
3. At least 7 days have passed since illness onset.

What are the recommended personal hygiene practices for a childcare program?

- Children and staff should wash hands with soap and water or use alcohol-based hand sanitizer containing at least 60% alcohol (if hands are not visibly dirty) before and after eating, drinking, touching eyes/nose/mouth, toileting or diapering, and physical contact with each other. Keep soap dispensers filled.
- Children and staff should cover coughs with a sleeve or tissue. Keep tissues and “no touch” trash cans close by.
- **Staff should wear a [cloth face covering](#) their nose and mouth.** Children, attending child care programs, may wear cloth face coverings to reduce the risk for transmission if the parent and provider determine they can reliably wear, remove, and handle masks following CDC guidance throughout the day, but children under 12 are not required to wear cloth face coverings. A cloth face covering is not intended to protect the wearer,

¹ **Journal:** *Pediatrics*

Citation: Dong Y, Mo X, Hu Y, et al. Epidemiological characteristics of 2143 pediatric patients with 2019 coronavirus disease in China. *Pediatrics*. 2020; doi: 10.1542/peds.2020-0702

but may prevent the spread of virus from the wearer to others. This would be especially important in the event that someone is infected but does not have symptoms. Medical masks and N-95 respirators are still reserved for healthcare workers and other first responders, as recommended by current CDC guidance.

Acceptable face coverings can be made of a variety of cloth materials, be factory-made or handsewn, or can be improvised using bandanas, scarves, t-shirts, sweatshirts or towels. Face coverings should be washed frequently with detergent and hot water and dried on a hot cycle. Ideally, wash your face covering after each use, and have a dedicated laundry bag or bin. Make sure the covering is comfortable – you don't want to have to keep adjusting the mask, which means touching your face. Always wash your hands, or use hand sanitizer, before AND after touching your face or face coverings.

What are the recommended cleaning and disinfecting practices?

The Center for Disease Control (CDC) recommends the following practices:

- Facilities should develop a schedule for cleaning and disinfecting. An example can be found here: <https://nrckids.org/files/appendix/AppendixK.pdf>
- [Routinely clean, sanitize, and disinfect](#) surfaces and objects that are frequently touched, especially toys and games. This may also include cleaning objects/surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, cubbies, and playground structures. Use the cleaners typically used at your facility. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective. Guidance is available for the selection of appropriate for childcare settings. https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV20_19.aspx
- If possible, provide EPA-registered disposable wipes to child care providers and other staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use. If wipes are not available, please refer to CDC's guidance on [disinfection for community settings](#).

How do we ensure that outdoor space is properly cleaned between groups?

Use the same cleaning and disinfecting practices as you would for your indoor environment.

What are recommended practices for cleaning and sanitizing toys?

Recommendations adapted from *Caring for our Children*:

https://nrckids.org/files/CFOC3_updated_final.pdf

- Toys that cannot be cleaned and sanitized should not be used.

- Toys that children have placed in their mouths or that are otherwise contaminated by body secretion or excretion should be set aside until they are cleaned by hand by a person wearing gloves.
- Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, and air-dry or clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.
- 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.
- Do not share toys with other groups of children or between individual children, unless they are washed and sanitized before being moved from one group to the other or being shared between children.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- 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.

When there is a Confirmed positive COVID-19 case in the Childcare Program

What is a recommended process to follow when there is a confirmed positive COVID-19 case in a child care program?

1. If you are made aware of a confirmed COVID-19 case before public health department, please immediately contact Lisa Erickson, Schools Liaison at ACPHD, lisa.erickson@acgov.org; (510) 775-4485, or the ACPHD Acute Communicable Disease Control program at 510-267-3250.
2. The ACPHD will work with the childcare program to determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.
3. Lisa Erickson will provide guidance and will answer any questions you may have about the ACPHD COVID-19 contact investigation process and can serve as a liaison between Alameda County Public Health Department investigation and the Child Care program. Close contacts are currently defined as household members, intimate partners, home caregivers, and those who have spent prolonged, close face-to-face contact with the case during their infectious period. For that last category, the information is obtained by interviewing the case (or in the case of a young child, the parent/guardian), or other caregiver(s).
4. Administrators will be asked to help identify adults or children who may have had contact within **6 feet of the ill individual for more than 10 minutes during the time period between two days prior to when the individual's symptoms appeared and the last time the child or staff attended the childcare facility**. Regardless of how long the facility remains closed,

close contacts should home-quarantine for 14 days from the last date of close contact. If any of them develop a fever, cough or shortness of breath while in quarantine, they should contact their health care provider and follow the return to work/childcare program guidance outlined above.

5. If you determine there is a need to communicate this information to your school community or families in your child care, prepare a letter. Please e-mail lisa.erickson@acgov.org to request a letter template.
6. When developing your communication, be mindful of:
 - Confidentiality when releasing details about the case. Balancing that with transparency is critical.
 - Tailoring information/messaging for different audiences -message to those at impacted sites may differ somewhat from public message.
 - Avoiding messages that stigmatize a site or group of people.

For more information related to the Childcare Program Administration, please contact your local Resource and Referral Agency

BANANAS (Northern Alameda County): 510-658-0381 referrals@bananasbunch.org

4Cs (Southern Alameda County): 510-582-2182 ext. 3198 info@4c-alameda.org

Hively (Eastern Alameda County): 925-417-8733 hello@behively.org

For more information regarding serving Essential Workers, please see this FAQ.

<http://www.acphd.org/media/564306/childcare-provider-faq-for-essential-workers-3.30.2020.pdf>

Additional Information:

World Health Organization (WHO) <https://www.who.int/health-topics/coronavirus>

Centers for Disease Control and Prevention (CDC) Guidance for Childcare Programs that Remain Open <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>

Centers for Disease Control and Prevention (CDC) <https://www.cdc.gov/coronavirus/novel-coronavirus-2019.html>

Centers for Disease Control: Caring for Children <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/children.html>

California Department of Public Health (CDPH)

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx>

California Department of Industrial Relations Division of Occupational Safety & Health Publications Unit <https://www.dir.ca.gov/dosh/Coronavirus/COVID-19-Infection-Prevention-in-Childcare-Programs-Guidance.pdf>

California Department of Social Services Community Care and Licensing Division https://www.cdss.ca.gov/Portals/9/CCLD/PINs/2020/CCP/PIN_20-06-CCP.pdf

Child Care Law Center Resource Page <https://www.childcarelaw.org/resource/coronavirus/>
First 5 of Alameda County Coronavirus Disease 2019 (COVID-19) Resources
<http://www.first5alameda.org/coronavirus-disease-2019-covid-19-resources>

For more information, please contact Lisa Erickson, Alameda County Public Health at lisa.erickson@acgov.org