Approval of Child Care Operations During COVID-19 Response

Child Care is Critical to Emergency Response
Child care facilities are essential for the critical workforce during any public health emergency. This guidance provides the minimum public health guidance for local public health agencies and providers for operating child care facilities as safely as possible during our community's response. Local public health agencies should focus on these critical public health principles when opening or reopening child care facilities.

Approvals and consultations with providers should be conducted remotely whenever possible using telephone, teleconferencing, photos, email and other documentation. If this is not possible, inspectors should use social distancing principles to ensure everyone’s safety during on site consultations.

Safe Water
Ensure a safe water source is available for drinking, food and bottle preparation as well as handwashing, dishwashing, cleaning, sanitizing and disinfecting. Municipal sources of water are considered safe. Wells, cisterns and other water sources are safe as long as they meet general requirements for chlorination, filtration, etc. For more guidance on wells, cisterns, and other water sources, consult your local health department.

Access to Restrooms
Access to adequate restrooms that meet the needs of the staff and children in care must be provided. If permanent restrooms are not available or adequate, alternative restrooms such as portable toilets can be used. For more guidance, consult your local health department.

Access to Handwashing
Handwashing sinks with fresh water must be available. Handwashing sinks should be ample and located near restrooms, diaper changing areas, food and bottle preparation areas. If permanent, hard plumbed handsinks are not available or adequate in these areas, portable handwashing sinks, or temporary handwashing stations may be used. For more guidance, consult your local health department.
Food Safety
To ensure the safe preparation and service of food and bottles, basic food safety measures must be in place. This includes adequate, working refrigeration for the food on hand, a means to properly wash dishes, wash produce, sanitize surfaces and clean hands.

The types of foods served may be limited in the event that food service equipment and sinks are limited. Consider serving shelf-stable foods, such as canned goods, prewashed produce, or individually wrapped foods. Foods can also be delivered from outside sources or provided by parents for their own children.

If dishwashing sinks or dishmachines are not available, single service utensils can be used. Sinks can be used for multiple purposes, consult your local health department for more guidance.

Food contact surfaces such as countertops and tables should be washed, rinsed and sanitized per food safety guidelines.

In addition, family style meal service should be discontinued to reduce the risk of viral spread during this time.

Diapering
Diaper changing surfaces must be disinfected after each use with an approved disinfectant. Diapering Procedure Guidance can be found here.

Cleaning and Disinfecting
Commonly touched surfaces should be cleaned and disinfected often to control the transmission of the novel coronavirus, influenza, and other communicable diseases.

You can find the CDPHE Environmental Cleaning Guidance for COVID-19 here. If cleaning and disinfectant products you usually use are unavailable, there are many other effective products to consider. You can find a full list within the CDPHE Environmental Cleaning Guidance for COVID-19, mentioned above. You may also consider asking schools in your area or your community if they have products on hand that they can spare.

Social Distancing
Social distancing is important to control the spread of the novel coronavirus responsible for COVID-19. Child care facilities should limit group size to 10 children, keeping a distance of 6 feet as much as possible and not mixing groups of children. Refer to the CDPHE COVID-19 webpage for guidance.
Assessing for Signs of Illness - Isolation, Quarantine and Closure
Children and staff should be assessed for signs of illness when they arrive and frequently throughout the day. Providers should also ask about potential exposures, particularly signs of illness consistent with COVID-19 in parents, guardians and other household members of children and staff.

Children and staff that have symptoms or known exposures to persons who have tested positive for COVID-19 must be isolated. Children and staff should stay home if they are ill and be sent home if they develop symptoms while in care. If a child cannot be picked up right away, they should be isolated from other children while staff continue to supervise them.

Executive Order D2020 035 issued on April 14, 2020, mandates that if a facility has a positive or suspected case of COVID-19 in a child, parent of a child, or staff member at the child care, the facility must close the facility or affected portion of the facility for no less than 24 hours, implement protocols for responding to COVID-19 pursuant to CDPHE guidance and in partnership with their local public health agency. Staff and children in the same group as the positive or suspected case and anyone the case interacted with at facility should be screened for symptoms.

Anyone with signs of illness consistent with COVID-19 should be treated as a new case, isolated and sent home. Closures should be reported to your licensing specialist and your local health department or CDPHE.

During the 24-hour closure, facilities must thoroughly clean and disinfected surfaces, particularly those that are commonly touched, such as toys, tables, chairs, cots, door knobs, and light switches. Toys that may be mouthed and tables or countertops that may be used to prepare or serve food should be rinsed with clean water after they have been disinfected and before they are returned to use.

Limiting Hard to Clean Surfaces
It is important that providers minimize the potential spread of coronavirus by eliminating surfaces that are difficult to effectively clean and disinfect or that may increase transmission.

Providers should limit the number of toys that are in use each day so that washing and disinfecting toys is more manageable and clean toys can be rotated in as needed.

Providers should limit the toys in use to those that are easily cleanable, non-porous, with smooth surfaces and eliminate soft, fabric toys, dress up clothing, sensory tables and water play while social distancing orders are in place.