Best Practices for the Implementation of Guidance for New Jersey Child Care Programs on COVID-19 Related Health and Safety Requirements
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This implementation guide was created by the Department of Human Services in collaboration with the Child Care Health Consultants, Department of Children and Families and other key stakeholders. The Department of Children and Families released the Guidance for New Jersey Child Care Facilities on COVID-19 Related Health and Safety Requirements on May 29, 2020 based on recommendations from the Department of Health and the Center for Disease Control at that time.

This guidance follows the announcement of Executive Order 149, which permitted child care facilities to resume operations effective June 15, 2020 and includes guidance issued through September 18th, 2020 by the New Jersey Department of Health’s EXECUTIVE DIRECTIVE NO. 20-032 COVID-19 CHILD CARE STANDARDS PURSUANT TO EXECUTIVE ORDER NO. 149. The purpose of this implementation guide is to provide additional information, resources, and support related to the health and safety requirements.

Note that the guidance in this document does not supersede New Jersey state requirements, but instead provides best practices for implementation. There are frequent updates to health and safety guidelines and regulations regarding COVID-19. Visit the Office of Child Care website frequently for the most current version of this document.

For information on the NJ Child Care Subsidy Program, available resources and grants, and Grow NJ Kids, please visit the Office of Child Care website.

Photos were taken in 2019 before the COVID-19 pandemic at Better Beginnings Child Development Center, Hightstown, NJ.
Perform HVAC maintenance and adjustments to allow more fresh air flow.

Incorporate additional outside time into daily schedules.

Open windows frequently with safety measures in place.

Check that hand washing sinks and restrooms work and are stocked with liquid soap and disposable towels.

Follow CDC’s Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation.

Follow CDC’s Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes.

Identify screening area for children and staff. The area can be indoors, the immediate entryway of the facility, or outdoors.

Indoor screening areas must be separated from where care is being provided. When walls or physical barriers are not present, staff must wear face shields (when using method 2 as defined on page 9).

Outdoor screening areas must be usable during inclement weather.

**Recommended Supplies**

- Hand Soap
- Paper Towels
- Facial Tissue
- Toilet Paper
- Alcohol Wipes
- Gloves
- Masks
- Food Serving Gloves
- No Contact Thermometer
- 60% Alcohol-Based Hand Sanitizer Not Containing 1-Propanol or Methanol
- Barrier or Partition for Health Screening Method Two
- No Touch Soap/Hand Sanitizer Dispensers
- Disposable Plates, Cups, and Utensils
- Bins for Dirty Toys
- EPA Disinfectant
- Disposable Nonabsorbent Lining for Diapering Table
- Individual Bins/Bags for Personal Items
- Plastic Bags for Soiled Clothes & Linens
- Over-Sized Smocks for Infant & Toddler Staff
- No Touch/Foot Pedal Trash Cans
- 70% Isopropyl (Rubbing) Alcohol to clean thermometer

**Environmental Safety**

- Test that water systems and devices are safe to use to minimize the risk of Legionnaire’s Disease and other diseases associated with water.
- Perform HVAC maintenance and adjustments to allow more fresh air flow.
- Incorporate additional outside time into daily schedules.
- Open windows frequently with safety measures in place.
- Check that hand washing sinks and restrooms work and are stocked with liquid soap and disposable towels.

**Screening Area**
Preparing to Open

Posters & Informational Bulletins

Below are links to resources you can print and display in your care setting.

- Post the sign at the entrance that reads "Visitors and Non-Essential Persons May Not Enter" (pgs. 22 & 23 of this guide).

- Distribute the CDC’s, *Use of Cloth Face Coverings to Stop the Spread of COVID-19*, to staff and post it in a prominent location.

- Post the CDC’s’ *Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes* in a prominent location in the center.

- Hang the CDC’s, *Safe and Healthy Diapering to Reduce the Spread of Germs* poster prominently near all diapering stations.

- Hang handwashing posters ("When to Wash Your Hands" and "How to Wash Your Hands") at each sink. (pages 18 & 19 of this guide).

- Post the CDC's *Cover Your Cough* poster (page 24 of this guide).
Preparing to Open

Communicate with Staff

- Review COVID-19 exclusion criteria.
- Review social distancing guidelines.
- Ask staff who are at-risk to consult with their medical provider to determine if they should come to work. This may include staff who:
  - are older;
  - are pregnant; or
  - have underlying medical conditions.
- Review health screening entry procedures. Update emergency contacts.
- Review updated sanitation and hygiene practices—including hand hygiene, proper use of personal protective equipment (PPE) like gloves and masks, cleaning and disinfecting, social distancing, and illness policies.
- Develop a Plan in case the facility needs to close, and determine how staff will communicate this information with parents.
- Consult with your local health department for guidance on cleaning and closure.
- Contact your Child Care Health Consultant for consultation, technical assistance, and training on best practice standards in Health & Safety.

Communicate with Parents

- Review COVID-19 exclusion criteria.
- Review new policies and procedures with parents/guardians.
- Review social distancing guidelines.
- Ask parents/guardians of at-risk children with underlying medical conditions to consult with their healthcare provider to determine if the child should attend the program.
- Request any updated special needs care plans.
- Explain health screening processes prior to entry.
- Continue to ensure that children are up to date on immunizations.
- Update emergency contacts.
- Consider requesting extra clothes and indoor shoes.
- Limit personal items being brought from home to the child care facility.
- Create a communication system for staff and families for regular communication, as well as self-reporting of symptoms/notification of exposures and closures.
Drop Off/Pick Up Procedure

• Encourage parents/guardians to designate one person to drop off and pick up the child every day. They should avoid designating a person who is high-risk or has underlying medical conditions.

• Stagger drop-off and pick-up times to avoid crowding.

• Maintain at least six feet of distance from others. Mark spaces with tape.

• Require adults to wear a mask, unless medically contraindicated.

• Assign a staff member to greet children at entry and walk children out at pick-up time. When social distancing cannot be maintained, children shall be greeted by their individual classroom teacher to prevent potential exposure.

• Put hand hygiene stations at the entrance. If a sink is not available, provide hand sanitizer with at least 60% alcohol and keep this out of children’s reach.

• Have staff record time of child/staff’s arrival and departure.
Health Screening

Look for Signs of Illness

- Encourage parents/guardians to look for signs of illness in their children and to keep them home when they are sick.

- Screen children, staff, and essential visitors for a 100.4 fever or above, or for symptoms of COVID-19 illness, before entering the program.

- Include the screening results in the daily log report to the NJ Office of Licensing as directed.

- Non-essential visitors must enter outside of operating hours.

Ask Screening Questions

Anyone who answers "yes" to the following questions should not be admitted into the program:

1. Does someone in the household have symptoms of COVID-19 or diagnosed with COVID-19?

2. Have you been in close contact (within 6 feet for at least 10 minutes) with a person with confirmed COVID-19 in the past 14 Days?

3. Have you travelled to an Area of High Community Transmission?

4. Was medicine taken to lower a fever in the last 24 hours?
Health Screening Prior to Entry

Choose one of the two permissible screening methods accepted by DCF:

Method 1:

Reliance on Social Distancing

- Ask parents/guardians to take the child’s temperature upon arrival at the facility. Stand at least six feet away from the parent/guardian and child.

- Ask the parent/guardian to confirm that the child does not have symptoms of COVID-19.

- Inspect the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.

- Staff does not need to wear any PPE beyond a mask during this process if they can maintain a distance of six feet.

Method 2:

Reliance on Barrier/Partition Controls

- Stand behind a physical barrier, such as a glass/plastic window or partition that can protect the staff member’s face. When a physical barrier is not present, a face shield shall suffice.

- Staff are required to wear a mask even when a face shield is worn in place of the physical barrier.

- Inspect the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
Health Screening Prior to Entry

**Conduct Temperature Screening**

- Wash hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol.

- Put on disposable gloves.

- Check the child’s temperature, reaching around the partition or through the window.

- Make sure your face stays behind the barrier at all times during the screening.

- Remove gloves and wash/sanitize hands to perform hand hygiene.

- Clean the thermometer in between each check using the manufacturer’s instructions unless using a non-contact thermometer.

Childcare programs operating in public school buildings and receiving children directly from school are not required to screen children a second time upon arrival at childcare.

**Using Thermometers**

- A non-contact thermometer is recommended. **Do not take the child’s temperature under the tongue.**

- Use a disposable thermometer cover if using an ear, forehead, or under-the-arm thermometer. Use a new cover for each child. If disposable thermometer covers are not used, ensure the thermometer has been thoroughly cleaned in between each check.

- If a non-contact thermometer was used and there was no physical contact with the child, gloves do not need to be changed before the next check.
Visitors

All Visitors are required to wear a mask unless doing so creates a risk to their health.

Who are Essential Visitors?

- Emergency/law enforcement personnel in their official capacity
- Department of Children and Families personnel (child protection or child care licensing purposes)
- Local/state health officials
- Providers of therapeutic/treatment services (including Early Intervention Services program staff/any provider of required service from an Individual Education Plan)
- Emergency repair services person (if repair cannot be reasonably delayed until the center is closed). All essential visitors are subject to the health screening prior to entry and shall be denied admission on the same basis unless the center is legally precluded from denying access (e.g. a law enforcement agent with an appropriate warrant)
- Parents for purposes related to the wellbeing of their child (including nursing of infants)

Non-Essential Visitors

If permitted:

- Are required to stay 6 feet from children/staff
- Required to wear a mask
- Consider hosting visitor in an outdoor setting
- If permitted indoors, limit the visitor’s movement and length of visit within the program
Response Procedure for COVID-19
Symptoms or Exposure

Developing Symptoms of COVID-19 While at the Program

Report any confirmed or suspected exposure to COVID-19 occurring in a child care center to the local department of health and the DCF Office of Licensing immediately.

- Separate the ill person from others immediately and until the ill person can leave the program, provide an isolation room or area with a cot/crib.

- If a child has symptoms of COVID-19 the caregiver waiting with the child should remain as far away as possible from the child (preferably, six feet).

- Whenever possible, cover children’s (age 2 and older) noses and mouths with a mask.

- If a mask is not tolerated by the child, staff should remain as far away as safely possible from the child (ideally, six feet).

- Individuals should be sent home and advised to follow CDC’s What to Do If You Are Sick.

- Call a health care provider if symptoms persist or worsen. Advise the employee or child’s parent/guardian to inform the program immediately if the ill person is diagnosed with COVID-19.

Child or Staff Test Positive for COVID-19

When an individual tests positive for COVID-19, the program should immediately notify local health officials, Office of Licensing, staff, and families of a possible or confirmed case while maintaining confidentiality.

- In the event of closure, advise symptom-free children and staff not to attend or to go to another program during the closure.

- Follow the guidance of local health officials to determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19. For more information, go to NJ Department of Health COVID-19 Guidance for Reopening Child Care.
Returning After COVID-19 Diagnosis or Exposure

- Prohibit entry to any staff or child who contracts or is exposed to COVID-19 until the criteria for lifting transmission based precautions and home isolation have been met.

- Refer to the isolation and quarantine chart on pages 4 and 5 of the New Jersey Department of Health COVID-19 Guidance for Reopening Childcare to determine when they may return.

Cleaning/Disinfecting After a COVID-19 Case

- View the Centers for Disease Control and Prevention’s Coronavirus Disease 2019 Environmental Cleaning and Disinfection Recommendations for additional guidance on cleaning/disinfecting areas visited by those with suspected or confirmed COVID-19.
Social Distancing Strategies & Best Practices for Child Care Providers

Face Coverings

How to Wear Masks

Wear Your Mask Correctly:

- Wash your hands before putting on your mask.
- Put it over your nose and mouth and secure it under your chin.
- Try to fit it snugly against the sides of your face.
- Make sure you can breathe easily.
- CDC does not recommend use of masks or cloth masks for source control if they have an exhalation valve or vent.

Removing Face Masks

Removal of face covering from the CDC

- Untie the strings behind your head or stretch the ear loops.
- Handle only by the ear loops or ties.
- Fold outside corners together.
- Be careful not to touch your eyes, nose, and mouth when removing and wash hands immediately after removing.
- Don’t put the face covering around your neck or up on your forehead.
- Don’t touch the face covering, and, if you do, wash your hands or use hand sanitizer to disinfect.

Considerations:

- Label masks with names or initials, to avoid confusion or swapping. Masks may also be labeled to indicate top/bottom and front/back.
- **Masks should be washed** after every day of use and/or before being used again, or if visibly soiled.

When removing facemasks, they should be carefully folded so that the outer surface is held inward and against itself to reduce contact with the outer surface during storage. The folded mask can be stored between uses in an individually labeled clean sealable paper bag or container.
**Face Coverings**

**Face Shields**

- There is currently not enough evidence to support the effectiveness of face shields for source control. Therefore, CDC does not currently recommend use of face shields as a substitute for masks.

- Wearing a mask may not be feasible in every situation for some people.

- Although evidence on face shields is limited, the available data suggest that the following face shields may provide better source control than others:
  - Face shields that wrap around the sides of the wearer’s face and extend below the chin
  - Hooded face shields.

- **Plastic face shields for newborns and infants are NOT recommended.**

More information and updates on face coverings can be found here.
### Social Distancing Strategies & Best Practices for Child Care Providers

#### Groups
- Form groups of 15 children or fewer.
- No combining or mixing groups. Limited commingling of groups is allowed at times when total attendance is substantially decreased (e.g. the last hour of operation) only if limited to sibling groups, or commingling occurs outdoors. Social distancing must be strictly observed. Close contact is prohibited.
- Ensure classes include the same groups of children each day, as much as possible.
- Assign the same staff to care for the same groups, each day, as much as possible.
- Minimize time standing in lines, keeping children at safe distances apart from each other. Six feet of separation between children is preferred.

#### Distance
- Space groups 10 feet apart in all directions from each other or be separated by walls or other physical partitions.
- Reduce group spacing to six feet during sleep periods, if necessary.
- If there is simultaneous use of outdoor play space, maintain at least six feet of separation between groups.
- Use carpet squares, mats, or other visuals for spacing, when possible.

#### Shared Spaces
- Monitor shared spaces (entryways, restrooms) to ensure children and staff maintain at least six feet from children or staff from other groups.
- Stagger outdoor time on shared playgrounds to prevent mixing groups.
- Close non-essential shared spaces, such as game rooms or dining areas, if possible.
- When non-essential shared spaces must stay open, stagger group times and clean/disinfect spaces between uses.

#### PPE
- Require staff to wear masks while working, unless doing so is medically contraindicated. Deny entry to any staff who refuses to wear a mask for non-medical reasons.
- Encourage children over age 2 to wear masks within the center. Do not put masks on anyone who has trouble breathing, is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- Require staff to wear gloves for diaper changing.
Social Distancing Strategies & Best Practices for Child Care Providers

**ACTIVITIES**

- Eliminate large group activities including field trips, assemblies, large meetings, and performances.
- Avoid activities where children are likely to be in close contact. Modify them to maintain social distancing, or replace them with no-contact activities.
- Separate groups by at least six feet during shared outdoor play.

**SHARED ITEMS**

- Limit the sharing of supplies, food, toys, and other high-touch items (art supplies, school supplies, equipment, etc). Use individual materials when possible.
- If items must be shared, restrict use to one group at a time, and select items that can be cleaned and disinfected between uses.
- Clean and sanitize tables before and after meals and snacks for each group.
- Refrain from shared use of sensory items such as rice, beans, sand, or play dough. Water tables are prohibited at this time.

**FOOD**

- Provide meals and snacks in the classroom or area where groups are regularly situated.
- If meals must be provided in a lunchroom, stagger mealtimes and arrange tables to ensure at least six feet of distance between groups.
- Do not provide family style meals (where the children/staff participate in passing and serving shared foods).
- Provide individual storage bins within a large refrigerator for children’s lunch boxes or require that parents provide lunches adequate for storage at room temperature (with or without an ice pack) within their child’s individual storage bin or cubby.
- Use caution when delivering food and handling silverware (disposables are recommended). Use gloves or utensils on food contact surfaces.
- Follow existing food safety practices as required in N.J.A.C. 8:24, Retail food regulations (good food safety practices).

**ADDITIONAL AREAS**

- Position cots/bedding head-to-toe during nap time, ideally six feet apart.
- If providing transportation, maximize space between riders (e.g., one rider per seat in every other row).
- Strictly limit close person-to-person contact, (e.g., hugging, wrestling, games involving touching or tagging).
- Give children frequent positive reminders about social distancing, but avoid reprimanding them for age-appropriate behavior.
- Babies shall continue to be held during bottle-feeding.
**Teach and reinforce hand washing and covering coughs and sneezes.**
- Remind children, families, and staff not to touch their eyes, nose, and mouths with unwashed hands.
- Practice frequent hand washing with soap and water for at least 20 seconds—approximately the amount of time it takes to sing the "Happy Birthday" song twice.
- Monitor children to ensure they are washing effectively.
- Place posters describing handwashing steps near sinks (page 18 for poster).

**CLOTHING - BEDDING**
- Staff caring for infants/toddlers may wear button-down, long-sleeved shirts or smocks and keep hair off the collar.
- Keep multiple changes of clothes for infants, toddlers, and their providers.
- Change any clothing soiled with secretions. Place contaminated clothes in a plastic bag or wash in a washing machine.
- Store each child's bedding separately in individually labeled bins, cubbies, or bags. Label cots and mats for each child. Clean bedding that touches a child's skin weekly or before use by another child.

**WHEN TO WASH HANDS:**
- Upon entering the program
- Upon entering the classroom
- After playing outside
- After going to the bathroom
- Prior to leaving for home
- Before and after eating snacks and meals/feeding a child
- After toileting/assisting child with toileting/changing diapers
- After cleaning or handling garbage
- After blowing/wiping noses, coughing, sneezing or coming in contact with body fluids, mouths or mouth sores
- Before and after preparing/handling food or beverages, including infant bottles prepared at home or in the program
- Before and after administering medication
- After handling animals or cleaning animal waste
- After applying sunscreen
COVID-19 Hygiene & Sanitation

SANITIZING - SHARING TOYS

- Use alcohol wipes, or other approved method, to clean electronics and wash hands after use.
- Follow cleaning measures when groups are moving from one area before a new group enters the area.
- Rotate toys so that they can be cleaned and sanitized.
- Do not permit any item brought from home to be shared; return items home with the child each day for washing.
- Machine wash cloth toys between uses.
- Remove toys that cannot be cleaned/sanitized easily (e.g., stuffed animals, play dough, pillows, cloth dress-up clothes, sensory tables/water tables).
- Designate a bin for dirty toys in each room. Place mouthed/high touch toys into the bin when a child is finished with it, and clean/sanitize it before returning it for play.
- Clean mouthed toys with water and detergent, rinse, sanitize with an EPA-registered disinfectant according to manufacturer’s instructions.

For the latest COVID-19 updates and best practices: CDC Website, NJ DCF, or NJ DOH website.

IMPORTANT CDC GUIDELINES

- Intensify pre-COVID-19 Cleaning and Disinfecting Efforts.
- Post and follow the CDC’s Guidance for Cleaning & Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes.
- Use an EPA approved disinfectant for use against COVID-19.
- Follow the manufacturer’s instructions for concentration, application method, and contact time for all cleaning and disinfecting products.

CLEANING & OUTDOOR SURFACES

- Do not use cleaning products near children.
- Use products in a well ventilated area.
- Develop a schedule with staff for regular cleaning and disinfecting.
- Store cleaning products and hazardous substances out of the reach of children.
- CDC recommends normal routine cleaning, but outdoor surfaces do not require disinfection.
- Clean high touch surfaces made of plastic or metal, such as grab bars and railings.
- Do not clean/disinfect wooden surfaces (e.g., play structures, benches, and tables) or ground covers (e.g., mulch and sand).
A step-by-step guide to:

HAND WASHING

**STEP 1**
Moisten hands with water and apply liquid soap.

**STEP 2**
Rub hands together away from the flow of water for 20 seconds. (Tip! Teach children to sing “Happy Birthday” two times to help children monitor the time while they wash.)

**STEP 3**
Rinse hands free of soap under running water.

**STEP 4**
Dry hands with a clean disposable paper towel or a one-time use cloth towel.

**STEP 5**
If faucets do not shut off automatically, turn faucets off with a disposable paper or single-use cloth towel.
WHEN TO WASH YOUR HANDS

Staff and Children

ALL STAFF SHOULD WASH THEIR HANDS:

- Preparing food or beverages
- Eating, handling food, or feeding a child
- Giving medication or applying a medical ointment or cream

Before and after:

On arrival for the day, after breaks, or prior to leaving for home.

After:

- Using the toilet or helping a child use a toilet
- Handling bodily fluid (mucus, blood, vomit)
- Diapering a child
- Cleaning or handling the garbage
- Applying sunscreen
- Playing with children outdoors

ALL CHILDREN SHOULD WASH THEIR HANDS:

- When arriving for the day
- Before and after eating or being fed
- After being diapered or helped with changing soiled clothes
- After sneezing, wiping and blowing noses
- After using the toilet
- After handling animals
- After playing outdoors
- When hands are visible dirty
- Prior to leaving for home
PROPER CLEANING, SANITIZING & DISINFECTING

1. CLEAN SURFACE WITH SOAP AND WATER.
   Wipe with a clean paper towel.

2. IF VISIBLE SOILING WAS PRESENT, RINSE WITH WATER.
   Dry with a clean paper towel.

3. APPLY SANITIZER/DISINFECTANT TO SURFACE.
   Allow solution to stay on surface according to standing time on manufacturer’s instructions from product label.
   Then wipe dry with a clean paper towel.

Sanitizers are used on food preparation and contact surfaces, utensils, dishes, high chairs, meal tables, mouthed toys and pacifiers.

Disinfectants are used on diaper changing tables, bathroom sinks and toilets, high touch areas that collect lots of germs, such as doorknobs, cabinet handles, hand rails, drinking fountains, etc.

Choose an Environmental Protection Agency (EPA) Registered Disinfectant for use against COVID-19. Follow manufacturer’s instructions from the product label for use as a sanitizer or disinfectant.

Bleach solutions should be made fresh daily according to the manufacturer’s instructions from the label!

Keep all toxic substances out of the reach of children.

Source: ECERS-3 Table Cleaning/Sanitizing Guidelines and Author Clarifications of June 2013, Table Cleaning and Disinfecting Guidance PDF from nj.gov
GUIDANCE FOR CLEANING & DISINFECTING
PUBLIC SPACES, WORKPLACES, BUSINESSES, SCHOOLS, AND HOMES

1 DEVELOP YOUR PLAN
Determine what needs to be cleaned. Areas unoccupied for 7 or more days need only routine cleaning. Maintain existing cleaning practices for outdoor areas.

Determine how areas will be disinfected. Consider the type of surface and how often the surface is touched. Prioritize disinfecting frequently touched surfaces.

Consider the resources and equipment needed. Keep in mind the availability of cleaning products and personal protective equipment (PPE) appropriate for cleaners and disinfectants.

Follow guidance from state, tribal, local, and territorial authorities.

2 IMPLEMENT
Clean visibly dirty surfaces with soap and water prior to disinfection.

Use the appropriate cleaning or disinfectant product. Use an EPA-approved disinfectant against COVID-19, and read the label to make sure it meets your needs.

Always follow the directions on the label. The label will include safety information and application instructions. Keep disinfectants out of the reach of children.

3 MAINTAIN AND REVISE
Continue routine cleaning and disinfection. Continue or revise your plan based upon appropriate disinfectant and PPE availability. Dirty surfaces should be cleaned with soap and water prior to disinfection. Routinely disinfect frequently touched surfaces at least daily.

Maintain safe practices such as frequent handwashing, using cloth face coverings, and staying home if you are sick.

Continue practices that reduce the potential for exposure. Maintain social distancing, staying six feet away from others. Reduce sharing of common spaces and frequently touched objects.

For more information, please visit CORONAVIRUS.GOV
Entry is limited to staff, children, and essential visitors only. Daily health screening completion is required prior to entry and, in addition to our general exclusion criteria, individuals will be excluded for:

- At least one of the following symptoms:
  - Shortness of breath
  - Difficulty breathing
  - Cough
  - New olfactory disorder
  - New taste disorder

- Or, at least two of the following symptoms:
  - Fever
  - Nausea or Vomiting
  - Diarrhea
  - Chills, Shivers
  - Fatigue
  - Congestion or Runny nose
  - Headache
  - Muscle aches
  - Sore throat

Please do not enter if you or anyone in your household:

- Has symptoms of COVID-19 or diagnosed with COVID-19.
- Has been in close contact (within six feet for at least 10 minutes) with a person with confirmed COVID-19 in the past 14 Days.
- Has travelled to an Area of High Community Transmission.
- Has received medication for the purpose of lowering a fever.

If you have any of these symptoms, contact your healthcare provider.

Anyone older or with underlying medical conditions or pregnant should contact their healthcare provider to determine the risk of attending this program.

Staff and visitors are required to wear acceptable face coverings except those exempt for medical reasons.

Please wash your hands immediately upon entry.
La entrada está limitada solo al personal, a los niños y a los visitantes esenciales. Se requiere el cumplimiento diario del examen de salud antes de entrar y, además de nuestros criterios generales de exclusión, las personas serán excluidas por:

Por favor, no entre si usted o cualquier persona en su hogar:
- Tiene síntomas de COVID-19 o se le diagnostica COVID-19.
- Ha estado en estrecho contacto (dentro de seis pies durante al menos 10 minutos) con una persona con COVID-19 confirmado en los últimos 14 días.
- Ha viajado a una área de alta transmisión comunitaria.
- Ha recibido medicamentos con el propósito de reducir la fiebre.

Si tiene alguno de estos síntomas, comuníquese con su proveedor de atención médica.

Cualquier persona mayor o con condiciones médicas subyacentes o embarazada debe comunicarse con su proveedor de atención médica para determinar el riesgo de participar en este programa.

El personal y los visitantes deben llevar coberturas faciales aceptables, excepto aquellos exentos por razones médicas.

Por favor, lávese las manos inmediatamente al entrar.
Cover your Cough

Stop the spread of germs that can make you and others sick!

Cover your mouth and nose with a tissue when you cough or sneeze. Put your used tissue in the waste basket.

If you don’t have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.

You may be asked to put on a facemask to protect others.

Wash hands often with soap and warm water for 20 seconds. If soap and water are not available, use an alcohol-based hand rub.
Links and Additional Resources

Coronavirus (COVID-19) Information from the Department of Children and Families
https://www.nj.gov/dcf/coronavirusLicensedChildcare.html

CDC Guidance for Child Care Programs that Remain Open

CDC's Use of Cloth Face Coverings
https://www.healthychildren.org/English/health-issues/conditions/chest-lungs/Pages/Cloth-Face-Coverings-for-Children-During-COVID-19.aspx

Department of Health and Human Services Child Care & Preschool Pandemic Planning Checklist

CDC's Safe and Healthy Diapering

Resources for Children: Developmentally appropriate handwashing posters from the CDC
https://www.cdc.gov/handwashing/materials.html

Resources for Parents/Guardians: CDC's Handwashing: A Family Activity
https://www.cdc.gov/handwashing/handwashing-family.html

Guidance for New Jersey Child Care Facilities On COVID-19 Related Health and Safety Requirements

CDC Guidance for Cleaning and Disinfecting

What's the Difference Between Cleaners, Sanitizers, and Disinfectants?

CDC Guidance for Child Care Programs that Remain Open

The National Child Traumatic Stress Network
https://www.nctsn.org
Guidance for Child Care Programs that Remain Open: Supplemental Guidance

Interim Guidance for Administrators of US K-12 Schools and Child Care Programs: Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19)

Toolkit for Childcare Programs and Summer Camps

K-12 Schools and Child Care Programs: FAQs for Administrators, Teachers, and Parents

Talking with children about Coronavirus Disease 2019: Messages for parents, school staff, and others working with children
If you are providing child care services during this time, you are not alone! Support and resources are available through the joint efforts of the following organizations.

**SOCIAL-EMOTIONAL HEALTH RESOURCES**

**Socio-Emotional Formation Initiative**

[www.montclair.edu](http://www.montclair.edu)

(973) 655-3890 or sefi@montclair.edu

- Short-term mental health support for children under age 18 and their families
- Support for program staff, how to work with challenging behaviors and strategies for including children with special needs
- Support for directors/administrators on managing stress, including webinars on the impact of stress and trauma, and emotional wellness for staff

**HEALTH & SAFETY RESOURCES**

**Child Care Health Consultants**

[www.cjfhc.org](http://www.cjfhc.org)

1-888-999-1780 or cchc@cjfhc.org

- Statewide email blasts providing new and updated resources on COVID-19
- Webinars to discuss and support the implementation of child care guidance and best practice standards in health & safety
- Health consultations and technical assistance for child care providers by phone, online and virtually

**RESOURCES FOR SCHOOL-AGE CARE PROVIDERS**

**NJSACC The Statewide Network for New Jersey’s Afterschool Communities**

[www.njsacc.org](http://www.njsacc.org)

(908) 789-0259 or sac@njsacc.org

- NJSACC’s COVID-19 Update Page provides links to important topics such as:
  - Guidelines for Emergency Child Care and Afterschool Services
  - How to Talk to Your Kids About Coronavirus
  - Addressing Hunger During the Outbreak
- Virtual meetings to discuss the impact of the COVID-19 pandemic on school-age programs/services
- Free online professional development: [https://njsacc.org/weblearning](https://njsacc.org/weblearning)
  - New Jersey Quality Standards for Afterschool (NJQSA) - Overview of the development and use
  - On the Road to Quality - Overview of how to use the NJQSA self-assessment tool and rating form
  - Positive Behavior Management - Techniques to encourage positive behavior in youth

Please refer to [www.childcarenj.gov](http://www.childcarenj.gov) for information on training and technical assistance