



Parent's Guide to Child Care during the COVID-19 Pandemic

We know that the health and safety of your child is your top priority. Seeking child care during the COVID-19 pandemic can be challenging. Here are some health and safety questions to ask when evaluating new child care options or speaking with your current child care provider.

What percentage of the adults in the program are fully vaccinated with the COVID Vaccine?

In January 2021, child care staff became eligible to receive the vaccine. The state regulators of child care, NYS OCFS, have not mandated child care staff to become vaccinated. Your child care program/provider cannot share with you, who is or is not vaccinated– it would be illegal for them to do so. However, they should be able to share some general information; like a percentage of staff who are vaccinated. You should also ask your child care program/provider about their policy regarding the COVID vaccine.

Does the program have a drop-off and pick-up procedure to reduce the spread of the virus?

Programs should consider staggering arrival and drop-off times and limiting direct contact with parents as much as possible. Programs should consider placing sign-in stations outside the program or at the entrance. Hand sanitizer with at least 60% alcohol should be displayed next to parent sign-in sheets along with disinfecting wipes for cleaning pens between each use.

Does the program conduct daily health screenings for staff and children?

Programs should perform daily health screenings upon arrival, which should include questions, taking temperatures, and looking for visual signs of illness. Symptoms can include a cough, sore throat, rapid breathing or difficulty breathing, gastrointestinal symptoms, fatigue, or extreme fussiness. Programs should create and document a daily log of child and staff screenings.

Is the program following CDC recommendations for cleaning and disinfecting?

Programs should have a cleaning plan in place that identifies what items must be cleaned, sanitized, or disinfected and with what frequency. Programs should only use toys that can be easily cleaned and disinfected on a daily basis and label containers for dirty toys to be cleaned in all areas. The cleaning plan should include routinely cleaning and disinfecting surfaces and objects that are frequently touched. It should also include cleaning objects/surfaces not ordinarily cleaned daily (e.g., doorknobs, light switches, classroom sink handles, countertops).

Is the program promoting frequent hand washing?

Programs should have handwashing stations at the entrance upon arrival. Staff and children should wash their hands often with soap and water for at least 20 seconds. Hand washing should also take place upon arrival to the first program activity; between all program activities; after using the restroom; before eating; after blowing one's nose, coughing, or sneezing. If soap and water are not available, hand sanitizer with at least 60% alcohol can be used.



Has the program set up the space to encourage physical distancing?

There should be spaces within the program that will allow the staff to enforce and maintain consistent physical distancing guidelines. They should maintain a distance of at least six feet as much as possible for playtime, meals/snacks, bathroom, and naptimes. For the napping area, cribs/cots should be set up so children are sleeping head to toe. If possible, the room should be rearranged to promote individual play, including setting up individual play activity stations like puzzles and art.

Has the program made modifications to facilitate infection control activities?

Programs should provide materials and equipment to be used by children to minimize sharing and promote social distancing. They should remove items that cannot be easily washed (e.g., stuffed animals, pillows) or that may encourage children to put toys in their mouths (e.g., play food, pretend utensils).

Does the program maintain personal protective equipment?

Programs should maintain masks, thermometers, smocks, shoe covers, gloves for food prep and gloves for diapering and handling bodily fluids. Staff members should wear cloth face coverings when interacting with children, regardless of the distance between the employee and children. Children over two years old should wear cloth face coverings if they can reliably wear, remove, and handle the cloth face covering throughout the day.

Does the program have a COVID-19 outbreak plan?

Programs should have a plan in place for identifying and handling sick, symptomatic, and exposed children and staff. This plan should include a location to isolate sick individuals as well as adequate supervision for sick children. Programs should also have parents pick up children when they show signs of illness. The plan should also include how to handle exposed children, staff or family members such as immediately contacting the Department of Health; possibly closing for 14 days; etc.

Has the program implemented strategies to reduce group sizes?

While NYS Office of Children and Family Services regulations permit group sizes of up to 15, we recommend smaller group sizes of up to 10 children, in order to maintain social distancing (not including staff). Programs should have children remain in the same group all day with the same teacher. There should be no mixing of children/staff of different classrooms. The program should also try to limit the total number of children in any one area. Programs should also consider staggering meal time and snack time to lessen the number of children gathered together.



Has the program posted signs on how to stop the spread of COVID-19?

Programs should provide parents with information on COVID-19 including symptoms, transmission, prevention, and when to seek medical attention. Parents should be encouraged to share the information with their children as appropriate.