As an early care and education provider, you can help protect children, their families, and staff and slow the spread of COVID-19 by using CDC’s updated COVID-19 Guidance for Operating Early Care and Education/Childcare Programs. Using multiple prevention strategies together consistently can protect people who are not fully vaccinated, including children and staff. Tailor your COVID-19 plans and actions based on the unique needs of your center.

Actions like promoting vaccination, wearing masks correctly and consistently, physical distancing and cohorting, ventilation, frequent handwashing, staying home when sick, and following all rules on regular and consistent cleaning can help all types of early care and education programs prevent or slow the spread of COVID-19.

Refer to COVID-19 Guidance for Operating Early Care and Education/Childcare Programs for more in-depth information about preventing the spread of COVID-19 in the ECE setting. This CDC guidance is meant to supplement—not replace—any Federal, state, tribal, local, or territorial public health and safety laws, rules, and regulations with which early care and education programs must comply.
A. **Before Drop-off** Encourage families to monitor children at home for signs of infectious illness including COVID-19. Children and staff who have symptoms of infectious illness, such as influenza (flu) or COVID-19, should stay home and be referred to their healthcare provider for testing and care.

B. **Drop-off/Pick-up** Stagger child arrival, drop-off, and pick-up times or locations by cohort and prioritize outdoor drop-off and pick-up if possible.

C. **Masks** Everyone 2 and older who is not fully vaccinated should wear a well-fitted mask that covers the nose and mouth, except when eating or sleeping.

D. **Educate Families** Educate your families about keeping their child home when sick, after close contact to a person with COVID-19, awaiting tests results, or after testing positive for COVID-19.

E. **Meal Times** Eat meals outdoors or in well ventilated areas while keeping physically distanced much as possible.

F. **Physical Distancing** Modify learning stations and in-classroom activities, use available space, and stagger schedules to have fewer children in each area as much as possible.

G. **Nap Time** At nap time, ensure that mats or cribs are spaced out as much as possible and have children sleep head to toe.

H. **Cleaning and Disinfecting** Clean frequently touched objects and surfaces such as toys, door handles, tables, faucets, and drinking fountains regularly. Disinfect if someone has suspected or confirmed COVID-19. Carefully follow rules for cleaning and disinfecting when diapering and feeding infants.

I. **Cohorting** Create cohorts by keeping small groups of staff and children together throughout the day, and across days if possible, and limit mixing between cohorts.


K. **Ventilation** Bringing fresh outdoor air into a building helps keep virus particles from concentrating inside. Consider maximizing the existing air circulation system, using child safe fans, opening doors or windows, and adding HEPA air cleaners.

L. **Vaccination** All COVID-19 vaccines currently authorized in the United States are effective against COVID-19, including serious outcomes like severe disease, hospitalization, and death. Encourage staff and families to get vaccinated as soon as they can.

M. **Shared Objects** Keep each child's belongings including masks and tooth brushes separated.

N. **Hand Hygiene** Wash hands using soap and water for at least 20 seconds. Thoroughly dry hands after washing. Use hand sanitizer that contains at least 60% alcohol (over age 2) if soap and water are not available.

O. **Isolate a Sick Child** Plan to have an isolation room or an area you can use to isolate a sick child or staff member. Make sure isolated children still have adult supervision.