



Shasta Head Start COVID-19 Prevention Program

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Table of Contents

Introduction	3
COVID-19 Preventative Measures	3
Reporting, Recordkeeping, and Access.....	5
COVID-19 Guidance for All Staff	5
Staff, Parents, Service Providers, & Approved Volunteers Screening Procedure.....	7
Adult Return Guidance.....	8
COVID Standby Pay	8
Shasta Head Start's Temporary COVID Leave	8
COVID-19 Guidance for Children	9
Child Drop-Off/Pick-Up	9
Child Screening Procedure	9
Agency Exposure Plans	10
Exposure Plan – Staff	10
Exposure Plan – Children	10
Child Tests Positive	10
Confirmed COVID-19 in a Child or Staff Member	11
Classroom Guidance	11
General Guidelines.....	11
Mealtime	12
Teaching.....	12
Meeting with Parents On-Site.....	12
In-Person Visit Guidelines	13
COVID-19 Health Screening Form – Staff/Adults.....	14
COVID-19 Health Screening Form – Children.....	15
Formulario de Evaluación de Salud COVID-19 – Niños	16
COVID-19 Exposure Detail Form	17
Center & Classroom COVID-19 Prevention Plan	19
Home Base & Socialization COVID-19 Prevention Plan	23
COVID-19 Daily Cleaning Checklist.....	26
COVID-19 Workplace Inspection.....	27
Poster: Symptoms of Coronavirus (COVID-19)	28
Poster: Symptoms of Coronavirus (COVID-19) – Spanish	29
Poster: Student Symptom Decision Tree	30
Poster: Student Symptom Decision Tree – Spanish.....	31
Poster: Managing Post-COVID-19-Vaccination Symptoms in School Staff	32

Poster: Guidance for COVID-19 Vaccinated Staff Members Exposed to COVID-19 33

Poster: Reduce the Risk of COVID-19..... 34

Poster: Reduce the Risk of COVID-19 – Spanish 35

Poster: Stop the Spread of Germs 36

Poster: Stop the Spread of Germs – Spanish 37

Poster: How to Safely Wear and Take Off a Cloth Face Covering..... 38

Poster: How to Safely Wear and Take Off a Cloth Face Covering – Spanish 39

Poster: Face Shield FAQ 40

Shasta Head Start COVID-19 Prevention Program

Introduction

The following prevention program, along with its procedures and forms, will help support a safe and healthy environment for children, families, and staff. These procedures were written in accordance with California Department of Public Health Guidance for Child Care Programs and Providers, Office of Head Start regulations, and Cal/OSHA Emergency Temporary Standards. Procedures may need to be modified when revised guidance is provided by Office of Head Start, California Department of Social Services, California Department of Public Health, Cal/OSHA, and/or the Governor's Office of the State of California. Implementation of these procedures may result in intermittent classroom closures.

COVID-19 Preventative Measures

The following measures are being taken collectively throughout Shasta Head Start to help prevent and manage the spread of COVID-19:

Screening

- All staff, service providers, and volunteers are required to self-screen before entering Shasta Head Start's facilities using the COVID-19 Health Screening Form – Staff/Adults
 - Adults with symptoms will be required to utilize the [Adult Return Guidance](#)
 - Shasta Head Start's preferred testing sites are [LHI](#), [Lab24](#), & [Rite Aid](#)
 - If symptoms occur within three days of receiving a COVID-19 vaccination, refer to "Managing Post-COVID-19-Vaccination Symptoms in School Staff" poster for further guidance
- All children are screened daily before entering the classroom; throughout the day children are monitored for symptoms
 - Children with symptoms will follow the Student Decision Tree to determine next steps
- If an adult is identified as a 'close contact' of a confirmed COVID-19 case the Exposure Detail Form will be completed, and the appropriate Exposure Plan will be followed

Handwashing

- Wash hands for at least 20 seconds frequently and as needed, but especially upon entry into the classroom, after bathroom use, coughing, sneezing, and nose wiping
- Hand sanitizer (kept out of reach of children) and disposable face masks will be provided near all entry doors and other high traffic areas

Face Coverings/Masks

General

Face coverings are no longer required for anyone in a Shasta Head Start facility. Staff, families, and children are welcome to continue to use face coverings voluntarily and without fear of retaliation. There are some situations (e.g., outbreak) where face coverings would be required.

Per OSHA and CDC guidance, safe face coverings meet the following criteria:

- A solid piece of material without slits, visible holes, or punctures, and must fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face

- Face coverings can be a tightly woven fabric or non-woven material of at least two layers (i.e., fabrics that do not let light pass through when held up to a light source), a surgical mask, a medical procedure mask, or a respirator (e.g., N-95) worn voluntarily
 - Unacceptable face coverings: scarf, ski mask, balaclava, bandana, turtleneck, collar, or singular layer of fabric
- Face shields may be worn in place of face coverings only if they have the following attributes:
 - Extends down below the chin
 - Extends around to the ears
 - No gap between the forehead and the visor (or cover the gap)
 - Addition of a cloth drape extending from the bottom edge of the shield and tucked into the shirt or collar required when a face covering is not worn

Children

Children are no longer required to wear masks. However, if a child chooses to wear a mask or if their parent requests their child wear a mask, the following information should be taken into consideration.

- Children under the age of 2 should not wear masks
- No child will be forced to wear a mask or be excluded from the program for not wearing a mask; staff will not use harsh disciplinary practices or coercion to enforce the wearing of masks.
- Upon daily health screening, staff will conduct a quick visual screening of the child without a mask on to check for any signs or symptoms of illness. Staff should continue to watch for symptoms throughout the day, particularly when masks are not being worn (mealtime, toothbrushing, napping)
- Shasta Head Start will provide masks to children upon request
 - Children can wear a mask from home if it fits appropriately over the child's mouth, nose, and chin. Personal masks from home will be placed in a resealable bag when soiled and sent home to be washed.
 - Masks will be labeled with the child's name
- Staff will guide children in the appropriate use and care of masks
 - Disposable masks will be thrown away at the end of each day or when damaged/soiled during the day
 - All reusable masks should be washed at least once a day by regular laundry or hand washed and dried thoroughly
 - Masks that are not wet or dirty will be stored in a paper bag in the child's cubby or other separate storage option when not in use

Staff

- Face coverings are no longer required to be worn by staff in SHS facilities
- Staff are permitted to wear face coverings at all times regardless of COVID-19 vaccination status without fear of retaliation
- SHS will provide both cloth and disposable face coverings if needed; staff are expected to launder and maintain their agency-provided cloth face coverings
- Respirators are provided upon request for unvaccinated staff, contact HR for more information

Additional Measures

In addition to aforementioned measures, Shasta Head Start will implement the following in our workplaces:

- Maintain physical distancing of six feet or more whenever possible
- Stable groups will be maintained whenever possible

- When stable groups are unable to be maintained, documentation will be created (sign-in/-out sheets, etc.) to help with contact tracing should it be necessary
- Use respiratory etiquette – cover coughs and sneezes
- Frequent sanitization and disinfection of high touch surfaces and common workspaces
- All staff will be required to take COVID-19-related trainings to help inform the workforce of prevention and management measures, risks, and expectations
- Inspections of center and office locations will take place periodically and as needed
- Ventilation of all SHS facilities will be evaluated to maximize efficiency; feasible updates will be made as necessary
- COVID-related leaves of absence may be available to staff who fail the daily health screening or need time away from work to get a COVID-19 vaccination; refer to COVID-19 Leaves of Absence SOP for additional information

Reporting, Recordkeeping, and Access

Shasta Head Start will ensure appropriate reporting, recordkeeping, and access to information regarding COVID-19 within the workplace. Shasta Head Start will implement the following in the workplace:

- Report information about COVID-19 cases and outbreaks at our workplace to the local health department and provide any related information requested by the local health department
- Maintain records of the steps taken to implement this COVID-19 Prevention Program
- Maintain records of all COVID-19 cases within staff as well as children and families
- Supervisors shall ensure COVID-19 signs are posted in appropriate locations
- Maintain employee COVID-19 vaccination records within their confidential medical record
- Staff are encouraged to report potential COVID-19 hazards; reporting can be done by notifying their supervisor or by utilizing the Employee Safety Suggestion form within the Injury & Illness Prevention Program (IIPP)

COVID-19 Guidance for All Staff

All staff members are expected to self-screen before arriving to work. Check for the following symptoms:

- | | |
|---|------------------------------|
| • Temperature of 100.4°F or higher | • New loss of taste or smell |
| • Persistent cough | • Nausea or vomiting |
| • Sore throat | • Diarrhea |
| • Shortness of breath or difficulty breathing | • Fatigue |
| • Muscle or body aches | • Congestion or runny nose |
| • Chills | • Headache |

If you have any of the symptoms listed above (that are unusual to you) notify your supervisor and do not report to work. If you have received a COVID-19 vaccination three days prior to symptom onset, refer to the “Managing Post-COVID-19-Vaccination Symptoms in School Staff” poster for further guidance. The following guidance is subject to change as we move forward in opening classrooms:

- Notify your supervisor if you have had contact with someone who has tested positive for COVID-19
- Wash hands upon arrival and frequently throughout the day (per hand washing policy: hand sanitizer is not a replacement for hand washing)
- Disinfect common workspaces after use (including company vehicles); routinely clean and sanitize your work area and high touch surfaces: tables, doorknobs/handles, light switches, desks, faucets, sinks, etc.
- For electronic devices such as mouse, keyboard, phone, printer panel and paper tray handle, etc., do the following:

- Do not spray sanitizer directly onto electronic devices
- Apply enough sanitizer to dampen, not soak, a clean paper towel and wipe down the device (do this when you are logged off to avoid any computer errors)
- Monitors do not need to be sanitized and should only be wiped with approved wiping cloths
- Clorox wipes can be used if available (follow the manufacturer's directions)
- Use hand sanitizer before/after using touch screens on tablets; do NOT use Clorox wipes or sanitizer on touch screens
- Maintaining stable groups is a priority; when necessary to provide services, managers may move staff to other worksites
- No personal visitors are allowed in Shasta Head Start locations
- Staff may use refrigerators, microwaves, and other shared appliances for personal food or drink
 - Appliances should be cleaned and disinfected after each use
 - Dishes should be washed after each use
 - Personal items should be taken home daily to be washed

Staff, Parents, Service Providers, & Approved Volunteers Screening Procedure

- Service providers are people from outside of Shasta Head Start who provide special or individualized services for children and families (e.g., therapists, behavioralists, case workers)
- Approved volunteers include volunteers who have completed the standard volunteer packet process
 - Short-term volunteers who are not required to complete the standard volunteer packet must be approved by the Area Manager
- Staff, parents, service providers, and approved volunteers will pre-screen themselves using the COVID-19 Health Screening Form for adults prior to coming to SHS locations and will be required to stay home if showing any symptoms (that are unusual to them); adults showing symptoms may return following the Adult Return Guidance
- Staff will ask parents, service providers, or approved volunteers if they (or anyone with them) is experiencing any of the COVID-19 symptoms or has had direct contact in the last 14 days with someone who tested positive for COVID-19
 - Anyone showing symptoms will be excluded immediately and follow the Adult Return Guidance
 - Anyone who has had direct contact with someone who tested positive for COVID-19 will be excluded until cleared to return by the SHS Registered Nurse for parents/service providers or the Human Resources Manager for SHS staff and approved volunteers
 - Supervisors will complete the COVID-19 Exposure Detail Form when a staff member does not pass screening due to direct contact with infected person or personal diagnoses, scan to Human Resources Department, and send in original form (do NOT keep this form at the center)
- Symptoms that are typical for an individual based on preexisting health conditions (allergies, asthma, etc.) should not be considered as a failed screening unless the symptoms have worsened, changed, or are in addition to a fever
- All adults entering the facility will use hand sanitizer or wash hands upon entry
- Supervisors will document staff absence due to COVID-19 symptoms in Paycom by adding comments to timecards

Adult Return Guidance

Adults who have symptoms may return after following at least one of these options*:

- Test
 - Receive a negative COVID-19 diagnostic test (rapid antigen or PCR acceptable)
- Not test
 - Make an appointment with a healthcare provider for evaluation (telemedicine is acceptable); the individual may have a medical note by the provider that clears them to return to work
 - Wait at least 10 days after symptom onset

*In each of these cases, the individual must be 24-hours fever free (without the use of fever reducing medicine) and well enough to work. Additionally, this guidance does not apply to quarantined close contacts from either school or community exposure.

If employees choose to take a COVID-19 test due to having symptoms, Shasta Head Start's preferred testing sites are through [LHI](#) or [Lab24](#). Testing at LHI and Lab24 should be provided at no cost. Additional resources are listed within the [Adult Return Guidance SOP](#).

COVID Standby Pay

Shasta Head Start will pay standby pay to employees whose center's operations have been impacted by COVID and who are not eligible for or have exhausted all other paid leave. Refer to the [Pay Breakdown for Staff SOP](#) for further details.

While this practice is in place, employees of Shasta Head Start receiving standby pay are expected to be available to report to work during their regularly scheduled hours. Employees on standby are expected to remain in a geographic vicinity that permits the employee to report to their scheduled worksite within 60 minutes. Employees on standby are expected to respond to communication from their supervisor within 60 minutes when contacted during their regularly scheduled hours.

If an employee leaves their geographic vicinity and is not available to report for any scheduled day or is otherwise unavailable, this will be considered an absence and the employee must notify their supervisor. Shasta Head Start's Attendance & Punctuality Policy (#704) would apply in this situation. Additionally, it is expected that Shasta Head Start's Drug and Alcohol Policy (#702) is adhered to while on standby.

Shasta Head Start's Temporary COVID Leave

While all state and federal COVID-related leave has expired, Shasta Head Start has created a Temporary COVID Leave (TCL) as an act of goodwill towards our staff in these unprecedented times. TCL will not be applied intermittently or as partial days and will only be paid for scheduled time (some exceptions apply). Paid Time Off (PTO) will not accrue on this leave. Employees should refer to their supervisor or HR with any questions about this leave. Full details of TCL can be found on the [Shasta Head Start Temporary COVID Leave SOP](#). Shasta Head Start reserves the right to modify or discontinue this leave.

COVID-19 Guidance for Children

Child Drop-Off/Pick-Up

Drop-off and pick-up of children can be done inside the classroom or an alternative location outside of the classroom (playgrounds, curbside, etc.). Each center will document their plan for drop-off and pick-up on the Center & Classroom COVID-19 Prevention Plan. Plans must ensure that appropriate staff child ratios and child supervision are always maintained. Plans are subject to change based on staff availability. Each center's layout varies; work with your manager if you have concerns about meeting the following guidelines. All children who enter our classrooms will receive COVID-19 health screening in addition to the standard health screening.

The following procedures will be implemented during child pick-up and drop-off times at all centers:

- As needed, sites will stagger drop off times; sites will develop plans based on their needs
- Maintain physical distancing of six feet apart whenever possible
- To limit exposure and save time, inform parents of the following:
 - Parents are expected to pre-screen themselves and their child for symptoms before coming to the center
 - Keep sick children at home
 - Find an alternate person to drop off/pick up when parents have symptoms
 - Drop-off and pick-up should be brief
 - Parents who are staying 15 minutes or more (e.g., volunteering, meeting with staff, etc.) will be screened by staff
 - Ideally, only one parent and child at drop-off
 - Accommodations can be made to fit family needs for drop-off and pick-up if staff/child ratios and child supervision can be maintained

Child Screening Procedure

Using gloves, no-touch thermometer, COVID-19 Health Screening Form, and Student Symptom Decision Tree:

- Ask the parent if the child has had any of the symptoms or a direct exposure listed on the COVID-19 Health Screening Form
- Screen child for temperature and visual inspection for symptoms; there should be no direct contact
- If the child passes the screener, move on to the standard health check and lice check
- If the child has symptoms:
 - Use the Student Symptom Decision Tree to determine the appropriate exclusion option and document it on the COVID-19 Health Screening Form
 - Communicate to the parent when the child can return (if needed, provide a copy of the Student Symptom Decision Tree to the parent)
 - File the COVID-19 Health Screening Form in the Health section of the child file
- Symptoms that are typical for an individual based on preexisting health conditions (allergies, asthma, etc.) should not be considered as a failed screening unless the symptoms have worsened, changed, or are in addition to a fever
- Between screenings wipe down the thermometer, change gloves, and wash/sanitize hands

Agency Exposure Plans

Exposure Plan – Staff

The following steps will take place when it is determined an employee has come into direct contact with an individual who has tested positive for COVID-19:

1. If vaccinated & asymptomatic, the exposed employee may remain at work but must test within the appropriate timeframe. If unvaccinated or vaccinated with symptoms, the exposed employee will be asked to leave the worksite immediately and get tested within the appropriate timeframe. In all cases, the employee's identity must remain confidential.
2. The completed COVID-19 Exposure Detail Form will be emailed to the manager. Once reviewed it will be emailed to the Human Resources Department.
3. All test results will be sent directly to the Human Resources Department (fax: 530.241.2081) and will remain confidential.
4. No employees with primary exposure are to return to any Shasta Head Start facilities until they have been cleared by Human Resources and their manager.

In the case of positive test results and/or primary exposure, Shasta Head Start will notify the public health department and will follow guidance provided by local health authorities. Shasta Head Start will pay for the employee's time and mileage to get tested for employees who have had direct exposure. If tests are not covered by insurance or other federal/state/local COVID funds, SHS will refund test costs. Tests must be performed within Shasta Head Start's service area. Rapid antigen or PCR tests are acceptable. More details can be found on the [Exposure Workflows SOP](#).

Exposure Plan – Children

The following steps will take place when it is determined a child has come into direct contact with an individual that has tested positive for COVID-19:

1. The staff will monitor exposed children for symptoms. Asymptomatic children may continue to attend. Any children that develop symptoms will be excluded. Staff will complete and follow COVID-19 Health Screening Form and communicate return options to parents.
2. The completed COVID-19 Health Screening Form will be emailed to SHS Health Department for review, Health Department will offer guidance as needed.
3. Children may return based on the options from the COVID-19 Health Screening Form.

Child Tests Positive

1. The child will be asked to stay home until cleared to return to school by SHS Registered Nurse.
2. The Site Supervisor/Head Teacher will email completed COVID-19 Exposure Detail Form to their area manager for review. Once reviewed it will be emailed to the Health Department and filed in the health section of the child's file.
3. If there has been an exposure, the staff will notify all families in the classroom of the exposure and follow SHS exposure plan.
4. SHS Registered Nurse will notify staff and family of expectations for quarantine and determining when the child may return to school.
5. Shasta Head Start will notify Community Care Licensing and the Public Health Department and seek guidance, as needed.

See Exposure Workflows SOP for more details.

Symptomatic or COVID-19 positive children have the option to get tested to potentially return to center sooner. Shasta Head Start will accept PCR and Rapid Antigen tests (home tests will only be accepted for children 2 years old and above). Home test results can be submitted by photo with the child's name and date, through email, Learning Genie, text, or in person. Shasta Head Start will help families locate resources for testing if needed.

Confirmed COVID-19 in a Child or Staff Member

The following steps will take place when it is determined a staff or child has tested positive for COVID-19:

- Close off areas used by the person who is sick or tested positive
- Open outside doors and windows to increase air circulation in areas
- Wait up to 24 hours, or as long as possible, before cleaning or disinfecting to allow respiratory droplets to settle before cleaning and disinfecting
- Clean and disinfect all areas used by the person who is sick (offices, bathrooms, common areas, etc.)

Classroom Guidance

General Guidelines

- Maintaining stable classroom groups is a priority
- Outdoor time can include a maximum of two classrooms; the same two classrooms should be scheduled together and cannot alternate with various classrooms.
- Staff are required to wear smocks; smocks should be cleaned daily, and staff should change them if they become soiled
- Wash hands (for at least 20 seconds) frequently and as needed, but especially upon entry into the classroom, after bathroom use, coughing, sneezing, and nose wiping
- Along with the normal schedule of cleaning, sanitizing, and disinfecting:
 - Routinely clean and disinfect frequently touched toys and surfaces (surfaces such as doorknobs, light switches, tables, sink handles, countertops, and other common areas)
 - Routinely clean and disinfect bathroom surfaces after each child's use
 - See COVID-19 Daily Cleaning Checklist
- Monitor children and staff throughout the day for symptoms of illness
 - For children that exhibit symptoms, if possible, move child to "sick room" and notify parents for immediate pickup; clean and sanitize classroom and materials thoroughly when children are not present
- Limit visitors to essential service providers, approved volunteers, and parents only; visitors must be screened and follow the same guidelines as staff
- Open windows before children arrive and after their departure
- Clean and sanitize drinking fountains in classrooms and on playgrounds regularly; staff may also use a pitcher and disposable cups for drinking water
- Have a container with a lid to place soiled toys
 - The toys and container will be disinfected daily
 - The container can be placed out of reach of children if it does not have a lid

Mealtime

- Staff may eat with children at mealtimes
- Staff must continue to sit at the table with children and facilitate mealtime conversations
- Spread out children as much as possible at tables
- Staff will set the table and serve children individually – family style meals will not be offered at this time; serving dishes will not be passed to children
- Serving utensils must not touch used dishes when serving seconds
- Keep food covered while not serving

Teaching

Our goal is to promote physical distancing when possible. However, children will need to be in close physical proximity with staff when they need individual care and nurturing. Staff are permitted to closely engage with children during these times.

- Cooking projects must use individual trays, utensils, and other supplies
- Establish a curriculum and educational methods to inform children on how they can help prevent the spread of COVID-19, including:
 - Frequent handwashing
 - Telling their teacher as soon as possible if they feel sick
 - Coughing and sneezing etiquette (cover coughs and sneezes with a tissue or sleeve, not hands)
 - Discouraging children from sharing food, drinking cups, eating utensils, towels, etc.
 - Social stories, puppets, Creative Curriculum cards, Mighty Minutes, role play, books, visuals, & modeling
- Model physical distancing, handwashing, and proper hygiene for children and families
 - Use self-talk as you are modeling so children can benefit from hearing appropriate steps
- Staff must wear gloves while assisting children with tooth brushing

Meeting with Parents On-Site

- Parents are discouraged from bringing additional people, including children, with them to meetings unless necessary due to lack of childcare
 - If a parent must bring their children, both the parent(s) and children will be screened
- Parents and children will be screened using the parent screening process prior to entering the center
 - Meetings will be rescheduled if anyone does not pass the screening process
- Parents will be asked to and use hand sanitizer or wash hands upon entry to the center
- Meetings should be held in spaces that allow for six feet of physical distancing as well as good ventilation (classrooms that are not in use or outside spaces may be a good option)
- High-touch surfaces (tabletops, pens used for signatures, etc.) should be disinfected after meetings
- Staff may complete meetings and paperwork with parents over the phone if needed; parent signatures can be obtained at drop-off or pick-up
- When completing home visits, center staff will follow In-Person Visit Guidelines and Expectations outlined for Home Visiting Program Option

Home Visiting Program Option

In-Person Visit Guidelines

In-person visits must be scheduled weekly and continue to follow the Parents as Teachers (PAT) home visit record including the six component areas. Visits should be held in the family's home or an alternate location approved by the Area Manager. As much as possible, spaces should allow for physical distancing as well as good ventilation.

Expectations of Home Visitors

- Call or text before visit to confirm that everyone in the home has passed the COVID-19 Health Screening
 - Visits will be cancelled if anyone does not pass the screening process
 - Follow Home Visit Tracking Form SOP to reschedule visits as needed
- Use hand sanitizer at the beginning and end of each visit
 - Ensure soft toys are laundered after use
 - Materials must be disinfected between uses
 - Have a container with a lid or garbage bag to place mouthed or heavily soiled toys
- Use the COVID-19 Cleaning Checklist to clean and sanitize materials and space used during in-person visits at SHS locations

Expectations of Families

- Screen everyone in the home prior to visits using the COVID-19 Health Screening and notify the Home Visitor if anyone in the home has any symptoms on the list and/or has had direct exposure within the last 14 days
- Limit guests during home visits

Socialization Expectations

- Complete child and parent screenings as families arrive
- Wash hands or use hand sanitizer upon arrival
- Snack may be provided following the mealtime guidance for centers listed above or provide a pre-packaged snack
- Ensure all participants sign in; this information may be used for contact tracing as needed
- Groups may not exceed 11 families
- Along with the normal schedule of cleaning, sanitizing, and disinfecting (see COVID-19 Daily Cleaning Checklist):
 - Routinely clean and disinfect frequently touched toys and surfaces (surfaces such as doorknobs, light switches, tables, sink handles, countertops, and other common areas)
 - Routinely clean and disinfect bathroom surfaces after each child's use
- Open windows before children & families arrive and again after their departure
- Clean and sanitize drinking fountains in classrooms and on playgrounds regularly; staff may also use a pitcher and disposable cups for drinking water
- Have a container with a lid to place soiled toys
 - The toys and container will be disinfected daily
 - The container should be placed out of reach of children if it does not have a lid

COVID-19 Health Screening Form – Staff/Adults

Use this form to complete screenings. This form must be completed when the screening is failed. Failed staff screeners must be submitted to HR. The screening is failed when any symptom is checked and/or there has been an exposure. If the individual has received a COVID-19 vaccine within the last three days, refer to the “Managing Post-COVID-19-Vaccination Symptoms in School Staff” poster.

Name: _____

Date: _____

1. Have you experienced any of the following symptoms* within the last 72 hours? If so, please list the date of onset of symptoms: _____

☐ Persistent cough

☐ Difficulty breathing

☐ Sore throat

☐ Congestion/runny nose

☐ New loss of taste or smell

☐ Fever (100.4°F or higher), temp: _____

☐ Headache

☐ Fatigue

☐ Chills

☐ Muscle or body aches

☐ Diarrhea

☐ Nausea or vomiting

2. Have you been exposed to any confirmed cases of COVID-19 within the last 14 days? ** ☐ Yes / ☐ No
3. Have you received a COVID-19 vaccine (either dose) within the last three days? † ☐ Yes / ☐ No

**Symptoms that are typical for an individual based on pre-existing health conditions (allergies/asthma/etc.) should not be considered as a failed screening unless the symptoms have worsened, changed, or are in addition to a fever.*

***If there has been exposure, use the COVID-19 Exposure Detail Form to gather more information. Follow the Exposure Plan listed in the SHS COVID-19 Reopening Plan. Contact your Area Manager or the SHS Registered Nurse for guidance, if needed.*

† If you have received a COVID-19 vaccine (either dose) within the last three days, refer to the “Managing Post-COVID-19-Vaccination Symptoms in School Staff” poster to determine next steps. The day of vaccination is considered day 1.

COVID-19 Health Screening Form – Children

Use this form to complete screenings. This form must be completed when a screening is failed. Screening is failed when any symptom is checked.

Name: _____

Date: _____

1. Have you experienced any of the following symptoms* within the last 72 hours? If so, please list the date of onset of symptoms: _____

High-Risk: Red Flag Symptoms**

- | | |
|---|---|
| <input type="checkbox"/> Fever (100.4°F or higher), temp: _____ | <input type="checkbox"/> Persistent Cough |
| <input type="checkbox"/> New loss of taste or smell | <input type="checkbox"/> Difficulty breathing |

Low-Risk: Yellow Flag Symptoms**

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Congestion/runny nose | <input type="checkbox"/> Sore throat |
| <input type="checkbox"/> Nausea or vomiting | <input type="checkbox"/> Diarrhea |
| <input type="checkbox"/> Muscle or body aches | <input type="checkbox"/> Fatigue |
| <input type="checkbox"/> Chills | <input type="checkbox"/> Headache |

2. Have you been exposed to any confirmed cases of COVID-19 within the last 14 days? ☐ Yes / ☐ No
Date of last exposure: _____

Student Symptom Decision: Check the appropriate box below based on child's symptoms. File in the Health section of the Child File.

No Exposure

- ☐ Child has 1 low-risk symptom: Sent home, may return to school 24 hrs after symptom resolution
- ☐ Child has 2 or more low-risk symptoms OR 1 high-risk symptom: Sent home and asked to seek evaluation by health care provider OR stay home for 5 days OR get tested†

With Exposure

- ☐ Child has 2 or more low-risk symptoms OR 1 high-risk symptom: Sent home and asked to remain home for 5 days OR get tested†. Email COVID-19 Health Screening Form to the Health Department.

Test Date: _____

Test Result: _____

**Symptoms that are typical for an individual based on pre-existing health conditions (allergies/asthma/etc.) should not be considered as a failed screening unless the symptoms have worsened, changed, or are in addition to a fever.*

***High and low risk symptoms only apply to use of the Student Symptom Decision Tree.*

† Tests accepted: PCR or Rapid Antigen (home test for 2y/o & above, accepted by photo with the child's name and date, via email, text or Learning Genie)

†† Children with negative test results can return after 24 hours fever free and symptoms improving. For children with positive test results, fill out the COVID-19 Exposure Detail Form and follow the exposure plan listed in the SHS COVID-19 Prevention Plan.

Formulario de Evaluación de Salud COVID-19 – Niños

Usar este formulario para completar las evaluaciones. Este formulario debe completarse cuando no pasó la evaluación. No pasará la evaluación cuando alguno síntoma se comprueba.

Nombre: _____

Fecha: _____

1. ¿Usted ha experimentado uno de los siguientes síntomas* en las últimas 72 horas? Si es así, indique la fecha en que los síntomas aparecieron: _____

Síntomas de Alto Riesgo**

☐ Fiebre (100.4°F o más alta), temp: _____

☐ Tos persistente

☐ Pérdida reciente del olfato/gusto

☐ Dificultad para respirar

Síntomas de Bajo Riesgo**

☐ Congestión / secreción nasal

☐ Dolor de garganta

☐ Náuseas o vómitos

☐ Diarrea

☐ Dolor muscular

☐ Fatiga

☐ Escalofríos

☐ Dolor de cabeza

2. ¿Ha estado expuesto a algún caso confirmado de COVID-19 en los últimos 14 días? ☐ Sí / ☐ No
Fecha de la última exposición: _____

Decisión de acuerdo con los Síntomas del Estudiantes: Marque la casilla correspondiente a continuación según los síntomas del niño. Archivar en la sección de Salud del Archivo del Niño.

No Expuesto

☐ El niño tiene 1 síntoma de riesgo bajo: Fue enviado a casa, puede regresar a la escuela 24 horas después de que los síntomas hayan pasado

☐ El niño tiene 2 o más síntomas de riesgo bajo o 1 síntoma de alto riesgo: Lo envían a casa y se le pide que busque una evaluación por parte de un proveedor de atención médica O se queda en casa durante 5 días O se hace la prueba†

Ha Sido Expuesto

☐ El niño tiene síntomas Y ha estado expuesto a un caso confirmado de COVID-19 en los últimos 10 días: Lo enviaron a casa y le pidieron que se quedara en casa durante 5 días O que se haga la prueba† Envíe por correo electrónico el formulario de evaluación de salud de COVID-19 al Departamento de Salud

Fecha de la Prueba: _____

Resultado de la Prueba††: _____

*Los síntomas que son típicos de una persona en función a las condiciones de salud preexistentes (alergias/asma/etc.) no se deben considerar para desaprobación la evaluación, a menos que los síntomas hayan empeorado, cambiado o se sume a una fiebre.

**Los síntomas de alto y bajo riesgo solo se aplican para el uso del Árbol de Decisión de Síntomas del Estudiante.

†Pruebas aceptadas: PCR o Rapid Antigen (prueba casera para niños de 2 años o más, aceptada por foto con el nombre del niño y la fecha, por correo electrónico, mensaje de texto, o Learning Genie)

††Los niños con resultados negativos pueden regresar después de 24 horas sin fiebre y mejorando los síntomas. Para los niños con resultados positivos en la prueba, complete el Formulario Detallado de Exposición al COVID-19 siga el plan de exposición que figura en el Plan de Prevención del COVID-19 de SHS.

COVID-19 Exposure Detail Form

Use this form as a prompt to gather the necessary facts about confirmed COVID-19 exposures. **Questions in bold font are required.** Email the completed form to your manager first. Once reviewed, email the staff exposure to HR and child exposure to Health. PLEASE NOTE: if there are exposures where multiple staff and/or children are impacted, only ONE Exposure Detail Form needs to be completed – a separate form for each staff/child is unnecessary. Email a roster of exposed employees & dates exposed to HR. Children attendance should be updated in ChildPlus.

Child/Parent/Employee Information

Name: _____ Center/Classroom: _____ Date: _____

1. Have you experienced any COVID-related symptoms within the last 72 hours? _____
 - a. What was the date of onset? _____
2. Are you fully vaccinated? ☐ Yes ☐ No ☐ Decline to state
3. What was your last day at center/office? _____

Positive Person Information

1. Who is the original positive person you were exposed to? * _____
2. **What is your most recent exposure date to this person?** _____
 - a. Additionally, did you have other interactions with this person within the last 14 days? Note them in #6.
3. **What was your interaction like with them during the most recent exposure? Check all that apply:**
 - ☐ Less than 6 feet for fifteen (15) minutes or more (cumulative) within 24 hours
Length of time: _____
 - ☐ Physical contact (e.g., hug, kiss, holding child, etc.)
 - ☐ Lives in same household
 - ☐ Able isolate 100% of the time from the positive person
 - ☐ Unable to isolate from positive person, will have ongoing contact
 - ☐ Other info: _____
4. **What date did their symptoms begin? (document if asymptomatic)** _____
5. **What date were they tested?** _____
 - a. If this is a probable exposure & the individual has not yet tested, please note below.
6. Any additional information: _____

**Full name is preferred, if refused, relationship (e.g., friend, brother, etc.) is acceptable.*

Formulario Detallado de la Exposición al COVID-19

Use este formulario como un aviso para recopilar los datos necesarios sobre las exposiciones confirmadas al COVID-19.

Las preguntas en negrita son obligatorias que respondan. Envíe por correo electrónico el formulario completo a su gerente/manejadora primero. Una vez revisado, enviar por correo electrónico la exposición del personal al departamento de Recursos Humanos y la exposición infantil al departamento de Salud. **TENGA EN CUENTA:** si hay exposiciones en las que varios miembros del personal y/o niños se ven afectados, solo se debe completar UN Formulario detallado de exposición; no es necesario un formulario separado para cada miembro del personal/niño. Envíe por correo electrónico una lista de empleados y fechas expuestos a recursos humanos. La asistencia de los niños debe actualizarse en ChildPlus.

Información del Niño / Padre / Empleado

Nombre: _____ Centro/Clase: _____ Fecha: _____

4. ¿Ha experimentado algún síntoma relacionado con COVID en las últimas 72 horas? _____
- a. ¿Cuál fue la fecha de inicio? _____
5. ¿Estás completamente vacunado? ☐ Si ☐ No ☐ Rechazo Declarar
6. ¿Cuál fue su último día en el centro/oficina?? _____

Información de la Persona que Resultó Positiva

7. ¿Quién es la persona que resultó positiva originalmente a la que estuvo expuesto? * _____
8. **¿Cuál es la fecha de exposición más reciente con esta persona?** _____
- a. Además, ¿tuvo otras interacciones con esta persona en los últimos 14 días? Anótelos en el #6.
9. **¿Cómo fue su interacción con ellos durante la exposición más reciente? Marque todos los que aplican:**
- ☐ Menos de 6 pies durante quince (15) minutos o más (acumulativos) dentro de las 24 horas
- Período de Tiempo: _____
- ☐ Contacto físico (por ejemplo, abrazo, beso, sujetando al niño, etc.)
- ☐ Vive en el mismo hogar
- ☐ Capaz de aislarse el 100% del tiempo de la persona que resultó positiva
- ☐ Incapaz de aislarse de la persona que resultó positiva, tendrá contacto continuo
- ☐ Otra información: _____
10. **¿En qué fecha comenzaron sus síntomas? (documentar si es asintomático)** _____
11. **¿En qué fecha se realizaron la prueba?** _____
- a. Si se trata de una probable exposición y la persona aún no se ha hecho la prueba, por favor escribirlo a continuación.
12. Cualquier información adicional: _____
- _____
- _____

**Se prefiere el nombre completo, si se rechaza, la relación (por ejemplo, amigo, hermano, etc.) es aceptable.*

Center & Classroom COVID-19 Prevention Plan

This center- and classroom-specific plan will be used to ensure implementation of the SHS COVID-19 Prevention Program at each center. Along with their team, Site Supervisors/Head Teachers, will complete this plan based on their center and classrooms. For centers with multiple classrooms, additional copies may need to be submitted to describe separate classrooms. Completed plans will be scanned to the Area Manager for review and approval.

Center: _____

Classroom: _____

The Site Supervisor/Head Teacher is responsible for completing the following prior to reopening:

Task	Date Completed	Initials
Answer the site-specific questions in the following plan, make copies for each classroom, and distribute it to each classroom's teaching staff to complete the classroom-specific details. This may vary site to site.		
Ensure COVID-19 posters (Prevention, Symptoms, Handwashing, and COVID-19 Daily Cleaning Checklist) are posted in appropriate locations. COVID-19 Health Screening should be posted at the time clock.		
Ensure all families have been trained on the new drop-off and pick-up procedures.		
Ensure all staff have read & received training on the COVID-19 Prevention Program.		
Ensure the plan for each classroom is submitted to the Area Manager upon completion.		

Each classroom is responsible for completing the following prior to reopening:

Task	Date Completed	Initials
Add toothbrushing to the daily schedule. Scan the updated daily schedule to the Child Development Department.		
Ensure COVID-19 social stories are in the classroom (distributed from the Child Development Department).		
Blankets are stored in a bag/basket in each child's cubby. Extra blankets are available to replace soiled blankets. Infant rooms may store blankets on hooks if they do not touch other blankets.		

Answer, in detail, the following questions specific to your center and classroom. If assistance is needed, contact your Area Manager.

Screening and Drop-Off/Pick-Up in Classroom

1. Where will screening take place?

2. Where will families wait?

3. How will you define waiting area to encourage physical distancing (cones, poly spots, etc.)?

4. Who will complete the screening?

5. Where will the child sign in be kept? What is the plan to streamline the flow of the sign in process?

Screening and Drop-Off/Pick-Up Outside of Classroom

1. How will parents inform you that they are there to drop-off/pick-up their child?

2. Where will families wait?

3. How will you define the waiting area to encourage physical distancing (cones, poly spots, etc.)?

4. Where will screening take place?

5. Who will complete the screening?

6. Where will the child sign in be kept and what is the plan to streamline the flow of the sign in/out process?

7. Who will receive the child and escort them into the classroom after they are screened and escort the child to their parent at pick up?

8. How will staff ensure classroom ratio is maintained?

Classroom

1. How do teachers plan to teach children about frequent handwashing, cough/sneeze etiquette, mealtime, and telling the teacher when they feel sick?

Staff

1. Who will be responsible for the additional cleaning and sanitizing described on the COVID-19 Daily Cleaning Checklist? Include outdoor and indoor tasks.

2. What is the center plan to clean shared office technology (phones, computers, etc.)?

3. How will staff encourage physical distancing throughout the center, including break rooms, shared offices (Teacher/Family Worker offices)? Where will staff eat lunch?

4. Where will children who become ill during the day be moved to (sick room)? Who will supervise them until their parent/guardian picks them up?

Site Supervisor/Head Teacher Name (Printed)

Site Supervisor/Head Teacher Signature

Date

Area Manager Name (Printed)

Area Manager Signature

Date

Home Base & Socialization COVID-19 Prevention Plan

This Home-Base-Socialization-specific plan will be used to ensure implementation of the Shasta Head Start COVID-19 Prevention Program at each location. Along with their Area Managers, Home Visitors will complete this plan based on their location. Completed plans will be scanned to the Area Manager for review and approval.

Location: _____ Home Visitor(s): _____

The Home Visitor is responsible for completing the following prior to first social:

Task	Date Completed	Initials
Ensure COVID-19 posters (Prevention, Symptoms, Handwashing, and COVID-19 Daily Cleaning Checklist) are posted in appropriate locations. COVID-19 Health Screening should be posted at the time clock.		
Ensure all staff have read & received training on the COVID-19 Prevention Program.		
Ensure the plan for each location is submitted to the Area Manager upon completion.		

Each location is responsible for completing the following prior to first social:

Task	Date Completed	Initials
Clean and disinfect all toys.		
Clean and disinfect all tables, chairs, and shelves.		
Designate and label bin for used/dirty/mouthed toys.		
Ensure all Emergency Card info is up to date.		
Clean and disinfect toothbrush holders.		

Answer, in detail, the following questions specific to your location. If assistance is needed, contact your Area Manager.

Screenings for Socialization

1. Where will parent/child screening take place?

2. Who will complete the screening?

3. Where will families wait?

4. How will you define where families wait?

5. Where will parent/child sign-in be kept? What is the plan to streamline the flow of the sign-in process?

Socials & Mealtimes

1. How do Home Visitors plan to teach children & parents about frequent hand washing, cough/sneeze etiquette, and mealtime?

2. Mealtime options for home base are either lunch or a hearty snack served at the location or packaged to go. Food must be served individually rather than family style. What is your plan to provide a meal or snack? Where will it take place?

Staff

1. Who will be responsible for the additional cleaning and sanitizing described on the COVID-19 Daily Cleaning Checklist? Include outdoor and indoor tasks.

2. What is the center plan to clean shared office technology (phones, computers, etc.)?

3. How will staff encourage physical distancing throughout the center including break rooms, shared offices (Teacher/Family Worker/Home Visitor offices)? Where will staff eat lunch? How will office schedules be staggered?

Home Visitor Name (Printed)

Home Visitor Signature

Date

Area Manager Name (Printed)

Area Manager Signature

Date

COVID-19 Daily Cleaning Checklist

This daily checklist is to be completed in addition to the Daily/Weekly/Monthly Cleaning Checklist already in place. This form can be laminated and reused each week. Assigned staff will complete and initial each day. Home Visitors will use this checklist during socials or when home visits are completed at the socialization site.

Focus disinfecting on high touch surfaces including:

- Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, etc.
- Toys and surfaces frequently used by children

Task	M	T	W	Th	F
Disinfect throughout classroom and restroom prior to children's arrival					
Disinfect throughout the classroom and restroom following the children's transition to the playground					
Disinfect throughout the classroom and restroom following children's departure					
Clean and disinfect all toys in the dirty/mouthed toy bin					
Launder all soft toys					
Disinfect playground toys following each group use					
Disinfect playground toys prior to putting them away for the day					
Open windows prior to children arriving, after children depart, and as often as needed throughout the day					

COVID-19 Workplace Inspection

Workplace inspections will be performed periodically and as needed. Inspections will be performed by Site Supervisors, Head Teachers, Managers, or Directors. The purpose of the inspection is to identify any current or potential COVID-19 hazards. Hazard identification will help in our agency's mission to prevent and manage the spread of COVID-19.

Before beginning the inspection, the inspector should take time to review the "COVID-19 Preventative Measures" and "Reporting, Recordkeeping, and Access" sections of the SHS COVID-19 Prevention Program. Initial once the item/process has been inspected. Take note of any potential hazards or issues. Contact your supervisor or HR with any questions. Once complete, scan to your manager and HR.

Topic	Initial	Note
<i>Environment – Are the following environmental precautions being performed as much as possible?</i>		
Air Flow, Fresh Air, Ventilation		
Physical Distancing		
<i>Individual Precautions – Are the following procedures being performed? Are there adequate supplies?</i>		
Handwashing/Hand Sanitizing		
Disinfection/Sanitization		
<i>Safety Procedures – Are the following procedures being done correctly and within the appropriate frequency?</i>		
COVID-19 Daily Cleaning Checklist		
COVID-19 Health Screening Processes		

Additional Comments: _____

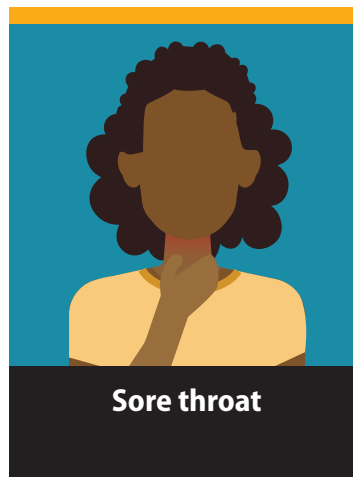
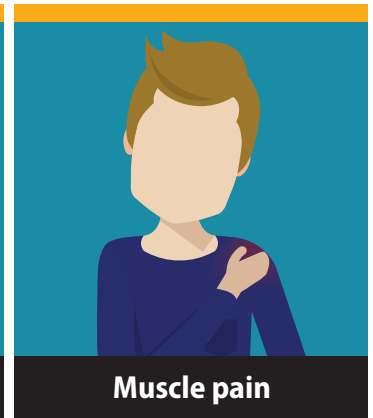
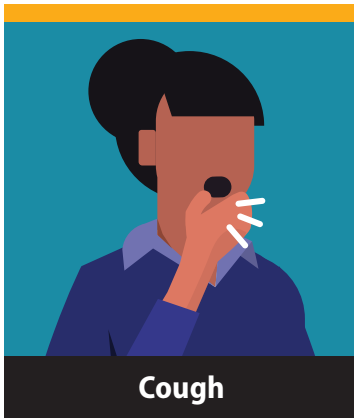
Inspector Name (Printed)

Inspector Signature

Date

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:



Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

***Seek medical care immediately if someone has emergency warning signs of COVID-19.**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

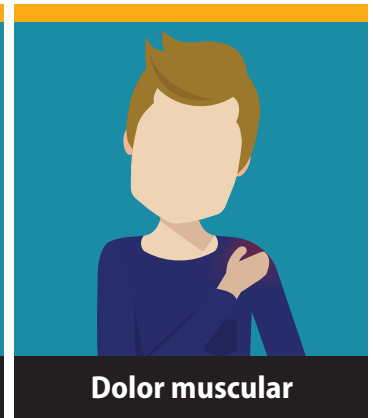
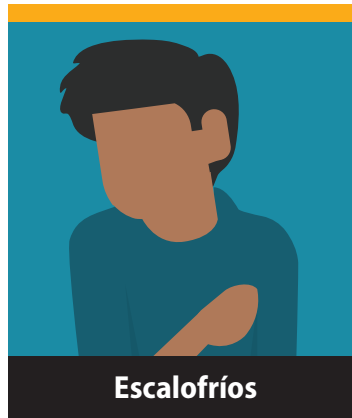
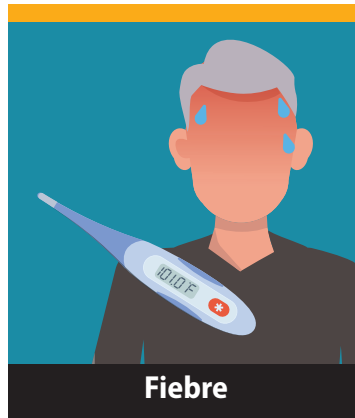
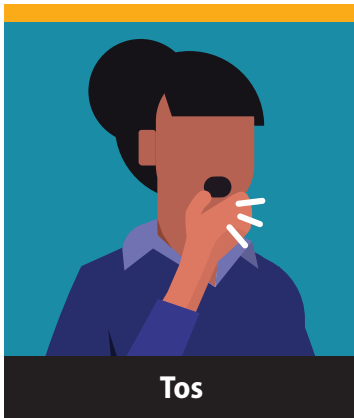
This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.



cdc.gov/coronavirus

Síntomas del coronavirus (COVID-19)

Conozca los síntomas del COVID-19, que pueden incluir:



Los síntomas pueden ser de leves a graves, y aparecer de 2 a 14 días después de la exposición al virus que causa COVID-19.

***Busque atención médica de inmediato si alguien tiene signos de advertencia de emergencia del COVID-19.**

- Dificultad para respirar
- Dolor o presión persistente en el pecho
- Confusión de aparición reciente
- Dificultad para despertarse o mantenerse despierto
- Color azulado en los labios o el rostro

*Esta lista no incluye todos los síntomas posibles. Llame a su proveedor de servicios médicos por cualquier otro síntoma grave o que le preocupe.

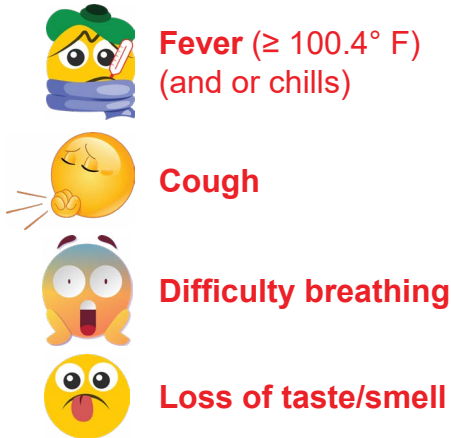


cdc.gov/coronavirus-es

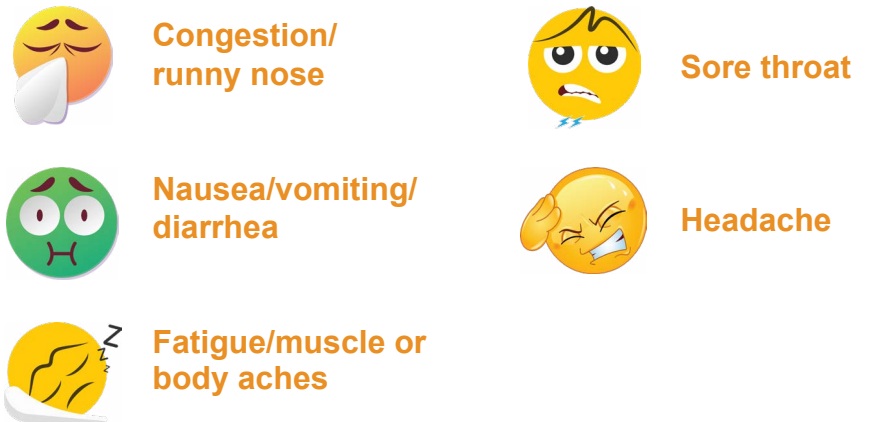
Student Symptom Decision Tree

Screen all students for potential COVID-19 symptoms or exposure

High-risk: red flag symptoms

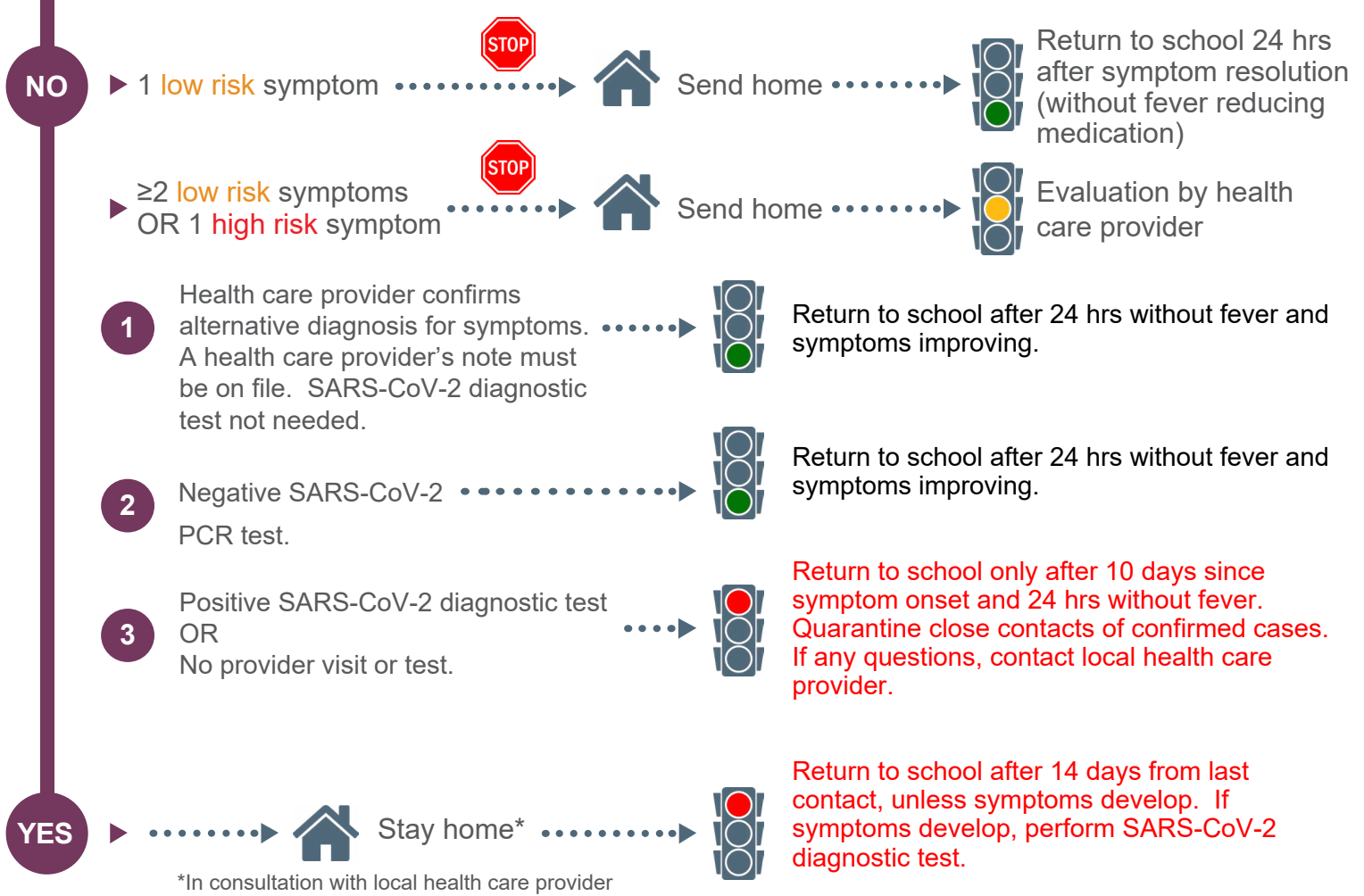


Low-risk: red flag symptoms



Exposure to COVID-19 positive person?

Close contact: less than 6 feet, 15 minutes or longer.



This care pathway was designed to assist school personnel and is not intended to replace the clinician's judgment or establish a protocol for all parents with a particular condition. Diagnosis and treatment should be under the close supervision of a qualified health care provider. Guidance might change; Revision date 03/11/2021.

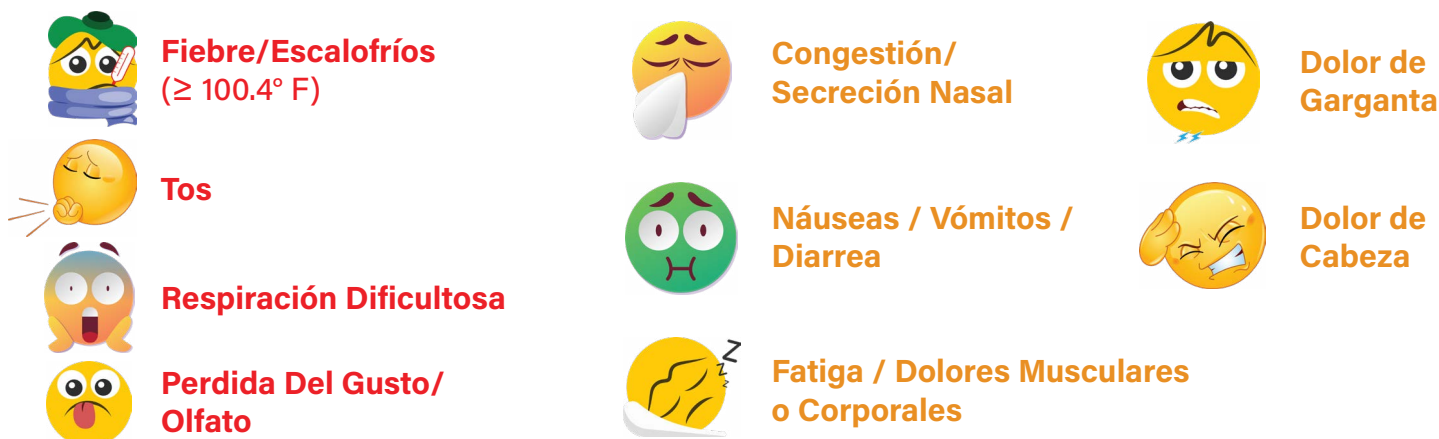
Decision Tree adapted from: Practical School Algorithms for Symptomatic or SARS-CoV-2-Exposed Students Are Essential for Returning Children to In-Person Learning. [https://www.jpeds.com/article/S0022-3476\(20\)31252-X/fulltext](https://www.jpeds.com/article/S0022-3476(20)31252-X/fulltext)

Árbol de Decisión de Síntomas Del Estudiante

Examine a todos los estudiantes para detectar posibles síntomas o exposición al COVID-19

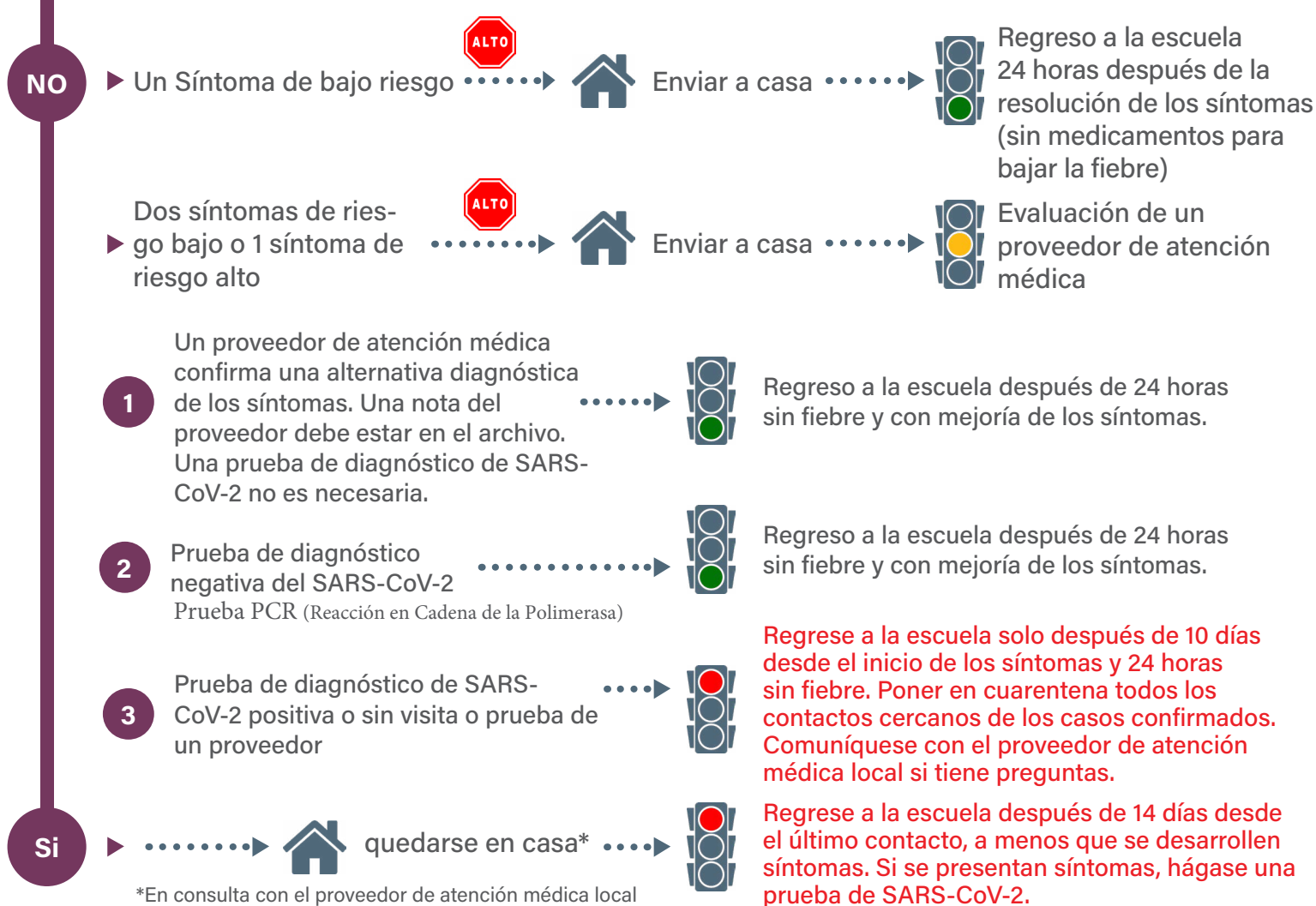
Riesgo Alto: Síntomas de Bandera Roja

Riesgo Bajo: Síntomas generales



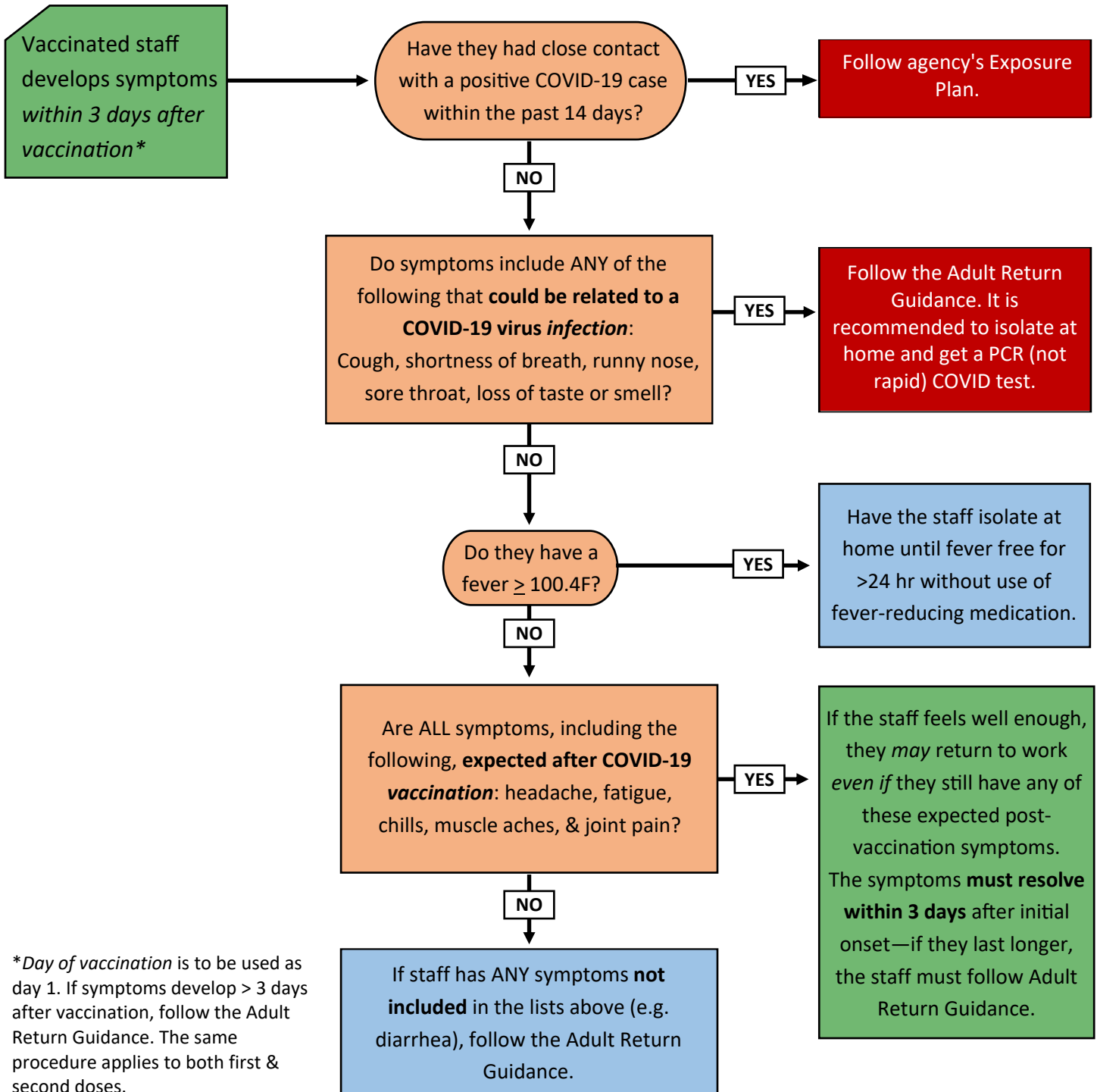
¿Exposición a una persona positiva al COVID-19?

Contacto cercano: menos de 6 pies, 15 minutos o más



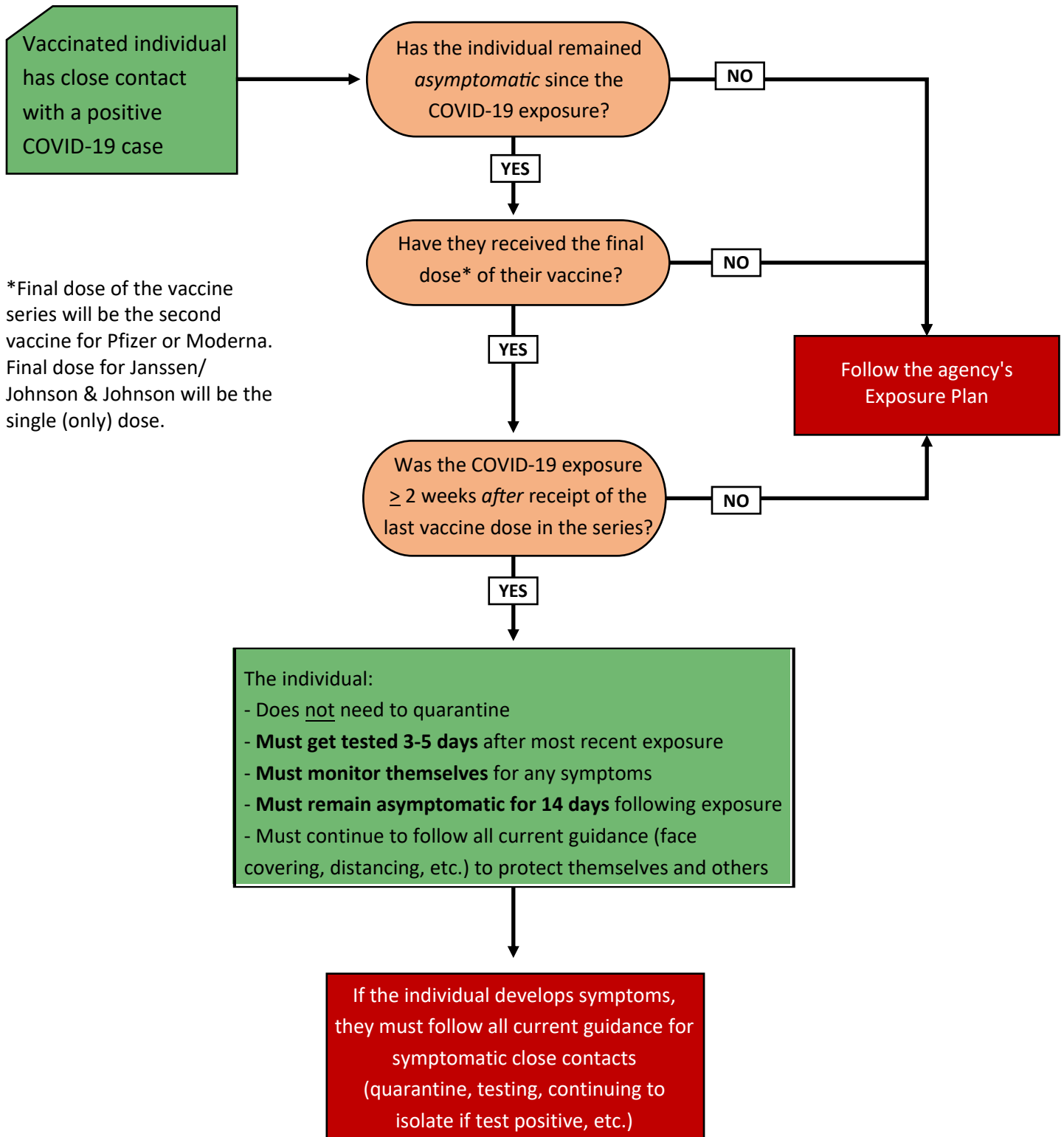
Esta información está diseñada para ayudar al personal de la escuela y no pretende reemplazar el juicio del médico ni establecer un protocolo para todos los pacientes con una condición en particular. El diagnóstico y el tratamiento deben estar bajo la estrecha supervisión de un proveedor de atención médica calificado. Esta información puede cambiar.

Managing Post-COVID-19-Vaccination Symptoms in School Staff



References: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/post-vaccine-considerations-healthcare-personnel.html>
<https://cchcs.ca.gov/wp-content/uploads/sites/60/COVID19/Table5-1-CM.pdf>
<http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/hcpPostVaccinationAssessment/>

Guidance for COVID-19 Vaccinated Staff Members Exposed to COVID-19



References:

<https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>
<https://covid19.ca.gov/vaccines/#What-to-expect-after-vaccination>
<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html>



REDUCE THE RISK OF COVID-19

Wash your hands often with soap and running water.



Avoid touching your eyes, nose or mouth.



Avoid close contact with people who are sick. Open windows for fresh air.



Stay home from work, school and public places when you are sick.



Cover your mouth and nose when coughing or sneezing. Cough and sneeze into your sleeve or use a tissue.



Practice good health habits. Eat nutritious food, exercise, and get plenty of sleep.



PARE
las
enfermedades

REDUCIR EL RIESGO DE COVID-19

Lávate las manos con jabón y agua corriente con frecuencia.



Evita tocarte los ojos, la nariz o la boca.



Evita el contacto cercano con personas enfermas. Abre las ventanas para que entre aire fresco.



Si está enfermo, quédate en casa y no vayas a trabajar, a la escuela, o a lugares públicos.



Cúbrete la boca y la nariz cuando tosas o estornudes. Tose o estornuda cubriéndote con la manga de tu ropa o con un pañuelo descartable.

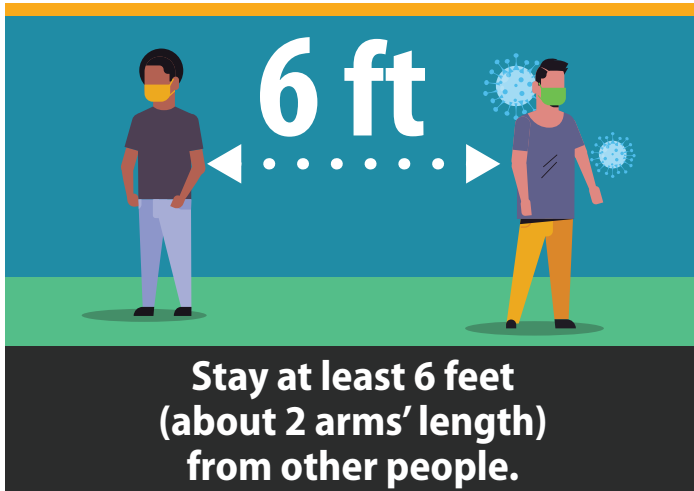


Cultiva otros buenos hábitos de salud. Consume alimentos nutritivos, bebe agua, haz ejercicios y duerme lo suficiente.



Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.



cdc.gov/coronavirus

Detenga la propagación de gérmenes

Ayude a prevenir la transmisión de enfermedades respiratorias como el COVID-19.



Mantenga al menos 6 pies (aproximadamente la longitud de 2 brazos) de distancia de otras personas.



Cúbrase con un pañuelo desechable la nariz y la boca al toser o estornudar, luego bótelos en la basura y lávese las manos.



Cuando esté en un lugar público, use una cubierta de tela para la cara sobre su nariz y boca.



Evite tocarse los ojos, la nariz y la boca.



Limpie y desinfecte los objetos y superficies que se tocan con frecuencia.



Quédese en casa cuando esté enfermo, excepto para recibir atención médica.



Lávese las manos frecuentemente con agua y jabón por al menos 20 segundos.



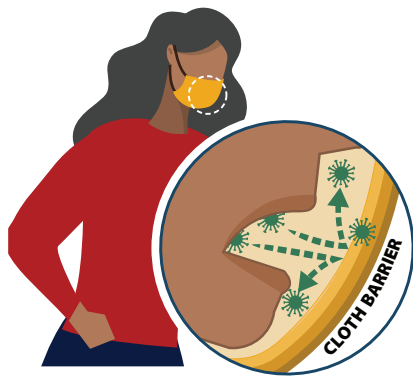
cdc.gov/coronavirus-es

How to Safely Wear and Take Off a Cloth Face Covering

Accessible: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

WEAR YOUR FACE COVERING CORRECTLY

- Wash your hands before putting on your face covering
- 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
- Do not place a mask on a child younger than 2



USE THE FACE COVERING TO HELP PROTECT OTHERS

- Wear a face covering to help protect others in case you're infected but don't have symptoms
- Keep the covering on your face the entire time you're in public
- Don't put the covering around your neck or up on your forehead
- Don't touch the face covering, and, if you do, clean your hands

FOLLOW EVERYDAY HEALTH HABITS

- Stay at least 6 feet away from others
- Avoid contact with people who are sick
- Wash your hands often, with soap and water, for at least 20 seconds each time
- Use hand sanitizer if soap and water are not available



TAKE OFF YOUR CLOTH FACE COVERING CAREFULLY, WHEN YOU'RE HOME

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place covering in the washing machine
- Wash your hands with soap and water



Cloth face coverings are not surgical masks or N-95 respirators, both of which should be saved for health care workers and other medical first responders.

For instructions on making a cloth face covering, see:

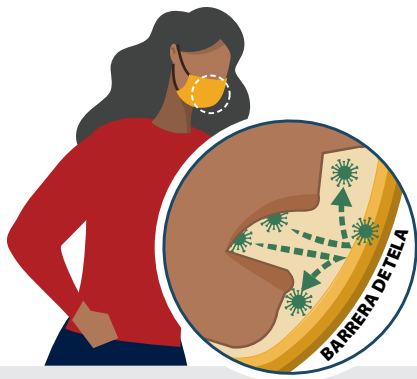
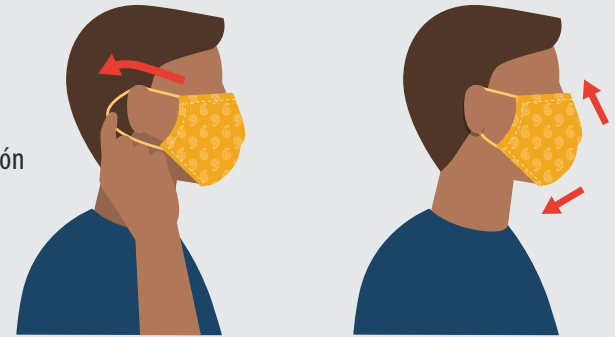
[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Cómo usar y quitarse una cubierta de tela para la cara de manera segura

Accesible: <https://espanol.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

USE SU CUBIERTA DE TELA PARA LA CARA CORRECTAMENTE

- Lávese las manos antes de ponérsela
- Póngasela de manera que le cubra la nariz y la boca y quede sujeta debajo del mentón
- Trate de que se ajuste bien contra los lados de la cara
- Asegúrese de que pueda respirar fácilmente
- No le ponga una mascarilla a un niño menor de 2 años

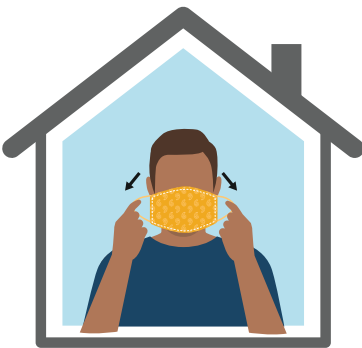


USE LA CUBIERTA DE TELA PARA LA CARA PARA AYUDAR A PROTEGER A LOS DEMÁS

- Use una cubierta de tela para la cara para ayudar a proteger a los demás en caso de que usted esté infectado, pero no tenga síntomas
- Déjesela puesta todo el tiempo que esté en un lugar público
- No se la cuelgue del cuello ni se la deje sobre la frente
- No se la toque y, si lo hace, límpiense las manos

PRACTIQUE HÁBITOS DE SALUD COTIDIANOS

- Manténgase al menos a 6 pies de los demás
- Evite el contacto con las personas que estén enfermas
- Lávese frecuentemente las manos con agua y jabón por al menos 20 segundos cada vez
- Use un desinfectante de manos si no hay agua y jabón disponibles



QUÍTESE LA CUBIERTA DE TELA PARA LA CARA CON CUIDADO, CUANDO ESTÉ EN CASA

- Quítesela desatando las tiras que se atan detrás de la cabeza o estirando las bandas elásticas que se ponen en las orejas
- Solo toque las tiras o bandas elásticas
- Doble la cubierta de tela para la cara juntando las esquinas exteriores
- Meta la cubierta en la lavadora de ropa
- Lávese las manos con agua y jabón



CS 316488A 06/10/2020

Las cubiertas de tela para la cara no son mascarillas quirúrgicas ni respiradores N-95, los cuales se deben reservar para los trabajadores de atención médica y demás personal médico de respuesta a emergencias.

Para ver instrucciones sobre cómo hacer una cubierta de tela para la cara, consulte:

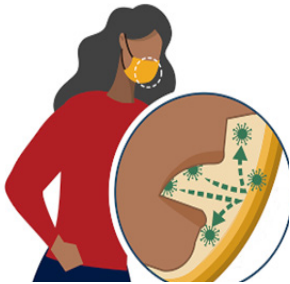
cdc.gov/coronavirus-es

Face Shield Frequently Asked Questions



What are face shields, and how are they used for protection from COVID-19?

A face shield is a transparent barrier that covers the face and is typically open at the sides and bottom. A face shield is a form of personal protective equipment (PPE) primarily used by health care workers to protect their face (eyes, nose, and mouth) from splashes and sprays of body fluids. Face shields are not commonly used alone, but are often worn with other protective equipment, such as respirators or surgical masks, to protect the wearer from COVID-19. Examples include a nurse caring for a hospitalized COVID-19 patient or a health professional collecting a nasal sample from a person being tested for COVID-19.



In contrast, face coverings (cloth or surgical masks) that fit snugly over the nose and mouth are used to prevent the spread of COVID-19 to other people in the event that the wearer of the mask is infected with COVID-19 and doesn't know it, as well as to provide some protection for the wearer.

Can a face shield be used alone as a substitute for a face covering to prevent the spread of COVID-19?

No, **a face shield alone cannot be substituted for a face covering** under guidance of the California Department of Public Health (CDPH). Studies have found that SARS-cov-2 can spread through small, airborne particles known as “aerosols” that are emitted when people talk, cough, or sneeze. These aerosols have been shown to remain suspended in the air for varying periods of time, depending on their size and air flow in the area. We expect, based on what is known about how aerosols behave, that the aerosols exhaled through the nose and mouth of someone wearing a face shield can easily travel around the open sides of a face shield.



Source: MIT Medical



Face Shield FAQ

If these aerosols contain the virus that causes COVID-19, other people may become infected.

What if I cannot wear a face covering due to a medical condition or other exemption?

Face shields may be considered for members of the public who cannot wear a face covering due to a medical condition or other exemption, although they may not work as well as face coverings in their ability to prevent the spread of COVID-19 to others. A cloth “drape” should be attached to the bottom edge of the face shield and tucked into the shirt to minimize gaps between the face and face shield. The drape can be made using cloth material and taped to the bottom of the face shield; face shields with drapes are also available through some vendors. For situations in workplaces where a worker who is required to wear a face covering (other than a respirator) cannot comply, Cal/OSHA currently considers a face shield plus drape an acceptable alternative. To see the list of exemptions from wearing a cloth face covering, see the CDPH *Guidance on the Use of Cloth Face Coverings*.



What attributes should I look for in a face shield?

The following attributes are strongly recommended when purchasing or manufacturing a face shield:

- Extends down below the chin
- Extends around to the ears
- No gap between the forehead and the visor (or cover the gap)
- Addition of a cloth drape extending from the bottom edge of the shield and tucked into the shirt or collar, when a respirator, mask, or cloth face covering is not worn.

