# DAILY STAFF PROCEDURES

Staff members must go through the following process upon arrival:

- 1. Staff must sign in and log their temperature with the thermometers provided. If a staff member has a fever of 100.4 or above, they will not be allowed to stay at the center or continue working.
- 2. Has the staff member had the following symptoms in the last 24 hours?
  - a) Temp of 100.4 or above
  - b) Sore throat
  - c) New onset or worsening cough or shortness of breath
  - d) Nausea, vomiting, diarrhea
  - e) New onset of headache with a fever
- 3. Has the staff member been exposed to or had close contact (defined as within 6 feet of for at least 15 minutes) with someone who has tested positive for COVID-19?

\*If the answer is YES to any symptom in Question 2, but NO to Question 3, the staff member is immediately excluded from school in accordance with existing exclusion policies (fever-free for 24 hours).

\*If the answer is YES to any symptom in Question 2 AND Yes to Question 3, the staff member is immediately excluded and referred to their healthcare provider for possible testing. The staff member must isolate for 14 days after onset of symptoms.

\* If the answer is NO to any symptom in Question 2, but YES to Question 3, the staff member is immediately excluded and referred to their healthcare provider for possible testing.

# CHILD PROCEDURES

# DROP-OFF

- 1. All staff will wear a mask.
- 2. Children will be greeted at the door of the facility. Parents are not permitted in the facility or classrooms at this time, however, on inclement weather days parents are allowed in the doorway of the center, if they put on a mask.
- 3. Parents are required to answer two questions, <u>daily</u>, related to child and family symptoms:
  - 1) Has your child or anyone in your household had the following symptoms in the last 24 hours:
    - a. Temp of 100.4 or above
    - b. Sore throat
    - c. New onset or worsening cough or shortness of breath
    - d. Nausea, vomiting, diarrhea
    - e. New onset of headache with a fever
  - 2) Has your child been exposed to or had close contact (within 6 feet of an infected person for at least 15 minutes) with anyone who has tested positive for COVID-19?

<u>\*If the parent answers YES to any symptom in Question 1), but NO to Question 2), the child is</u> <u>immediately excluded from school in accordance with existing exclusion policies (fever-free for 24 hours).</u>

\*If the parent answers YES to any symptom in Question 1) AND Yes to Question 2), the child is immediately excluded and is referred to their healthcare provider for possible testing. The child must isolate for 14 days after onset of symptoms.

# \* If the parent answers NO to any symptom in Question 1), but YES to Question 2), the child is immediately excluded and is referred to their healthcare provider for possible testing.

- 4. Staff will screen child with a non-contact thermometer
- 5. Temperature and health screen check will be documented on the sign-in sheet
- 6. Utilizing one folder and pen system per child, the parent must sign child in every day
- 7. Provide hand sanitizer to the child and offer to the parents
- 8. Assist Head Start child with putting on their mask
- 9. Staff member walks child to the classroom
- 10. Infants should be transported in their car seats, if available. Car seat handles may be wiped with alcohol wipes when stored at the center.

#### PICK-UP

- 1. Staff member will greet parent at the door of the facility
- 2. <u>Parent signs child out</u> for the day
- 3. Assist child with taking off mask
- 4. Place mask in appropriate laundry bag for washing
- 5. Staff will utilize hand sanitizer, washing hands with soap and water as soon as possible

### **RETURNING TO SCHOOL AFTER TESTING**

#### If test result is negative or healthcare provider chooses not to test:

Children/staff members may return to school with a note from a healthcare provider or proof of a negative COVID-19 test.

#### If test result is positive:

Child/staff stays home for 14 calendar days from exposure date. Before returning, children/staff members must have improved symptoms.

A doctor's note will be required prior to a child/staff member returning to school.

\*If there is a known positive test result, please notify Jen same-day as case reporting and DHS response plans must begin.

#### **Social Distancing Strategies**

- Classrooms will include no more than 10 children in each room. The same group of children and staff should remain in the same group each day.
- Reduce the number of adults coming into the classroom FDS, cooks, community partners as much as possible
- Do not congregate in offices, hallways, kitchens, meeting rooms, etc.
- Family members of children or staff are not allowed in the facilities at this time
- Limit the mixing of groups of children-stagger playground and hallway use as much as possible
- Cots/cribs should be placed 6 feet apart if possible, otherwise implement head to feet method

# Face Coverings

Public Health recommends that people wear face coverings in public settings when around people outside their household, especially when social distancing measures are difficult to maintain.

- Head Start and Early Head Start staff members <u>must wear face masks</u> in classrooms, outside on the playground and when social distancing cannot be maintained
- Each morning, children's face coverings should be brought to the center entrances or on the bus. Children will need to put on their face covering upon entering the building or boarding the bus.
- Each Head Start child will be provided with 3 face coverings. If a face covering gets uncomfortably wet or dirty during the day, replace with a new one.
- Label the child's face covering with a permanent marker. Face coverings should not be shared even after being washed.
- Children do not need to wear face covering when eating or sleeping.
- Place face covering in a paper bag labeled with the child's name when not wearing (during lunch or rest times)
- Each afternoon, children's face coverings should be left at the center entrances or on the bus in the designated classroom bags for laundering.
- Place used face coverings in appropriately marked garment bag and wash face coverings daily in the hottest water setting available.
- Younger children may be unable to wear a cloth face covering properly, particularly for an extended period of time. Wearing of cloth face coverings may be prioritized at times when it is difficult to maintain a distance of 6 feet from others (e.g., circle time, pick up, or when standing in line). Provide children with frequent reminders and education on the importance and proper wearing of cloth face coverings. Intermix activities to allow for frequent social distancing to reduce extended wearing times.

Face coverings should not be worn by:

- Early Head Start children
- Anyone who has trouble breathing, severe asthma, medical conditions, etc.
- Teachers providing care for deaf or hard of hearing children should consider using a clear face shield

# Facility Daily Cleaning and Disinfecting

- Clean, sanitize and disinfect surfaces that are frequently touched using cleaners typically used at your facility. Do not mix chemicals.
- Use soap and water first for visibly soiled areas
- Use Sanidate for tabletops, mouthed toys and high chairs
- Use Oxivir or Triple Threat for toilets, light switches, doorknobs, sinks, faucets and diaper changing tables
- Classrooms must be cleaned at the end of the day or prior to a new set of students entering the classroom (duals)
- Daily cleaning checklists must be completed
- Use alcohol wipes on keyboards, phones, scanners, desk spaces. If wipes are not available, spray Oxivir or Triple Threat on a cloth to clean electronic surfaces but not screens.
- Bedding (sheets and blankets) that touches a child's skin should be washed daily

- Do not use pillows at this time
- Vacuum carpets/rugs daily

# **Toys Cleaning and Sanitizing**

- Toys that cannot be cleaned should not be used
- Minimize the amount of toys in your classroom and clean them daily or in between groups
- Toys that children have placed in their mouths should be set aside. Place in a dishpan with soapy water or put in a separate container marked "soiled toys." Clean toys at the end of each day. Clean soiled toys with soap and water, rinse, sanitize and air dry
- Do not share toys with other groups of children (duals) unless they are washed and sanitized before being moved from one group to another
- Use individual literacy boxes with crayons, pencils, glue sticks limiting the use of shared objects as much as possible
- Use individual bags of playdoh, sand/water tubs, buckets, etc. labeled with the child's name
- Have multiple boxes of duplos, blocks, and other manipulatives on-hand for quick exchange
- Machine washable cloth toys, soft dolls, or clothes should be used by one individual at a time or not be used at all. These toys/clothes should be <u>laundered before being used by another child</u>
- Children's books or other paper-based materials are not considered high risk of transmission and do not need additional cleaning or disinfecting
- Do not spray disinfectant on outdoor playgrounds as it is not an efficient use of supplies and is not proven to reduce the risk of COVID. However, grab bars on tricycles and high touch railings, especially door knobs should be disinfected frequently

# Healthy Hand Hygiene Behavior

All children and staff should engage in hand hygiene at the following times:

- Arrival to the facility and after breaks
- Before and after preparing food or drinks
- o Before and after administering medication or medical ointment
- Before and after diapering
- After using the restroom or helping a child use the restroom
- After coming in contact with bodily fluid
- After playing outdoors
- After handling garbage
- Wash hands with soap and water for at least 20 seconds. If hands are not visibly dirty, alcoholbased hand sanitizers with at least 60% alcohol can be used, if soap and water are not readily available. <u>Make sure hand sanitizer does not contain methanol.</u>
- Supervise children when they use hand sanitizer to prevent ingestion.
- Assist children with handwashing, including infants who cannot wash hands alone.
- After assisting children with handwashing, staff should also wash their hands
- Cough or sneeze in your elbow or shoulder

#### Meal Service

- Distance children while eating meals (extra chair between children if possible)
- One staff will pre-plate meals for children with appropriate food gloves
- <u>All minimum food components</u> must be plated
- Suspend Family Style Meal Service until further notice

- Children are not allowed to scrape plates or clean up their areas until further notice
- Staff will complete FPR, daily
- Kitchen staff will need to wear a mask while delivering meals to classrooms, if social distancing strategies cannot be maintained

# **Transportation**

- Driver and monitor will wear a mask on bus routes
- While wearing gloves, Monitor will take children's temperature and complete health screening on bus roster sheet
- Provide children hand sanitizer and assist with putting their mask on before boarding the bus.
- Supervise children when they use hand sanitizer to prevent ingestion
- Children will wear mask on the bus
- One child per seat unless they are from the same household
- Seats and railings will be disinfected post trip and/or prior to new route

### Fire/Tornado Drills

• Conduct monthly drills by classroom only; do not mix groups of children or classrooms

#### **Music and Movement**

• Outside, whenever possible. On inclement weather days, practice social distancing as much as possible

#### <u>Other</u>

- Suspend large water/sand table play until further notice
- Suspend tooth brushing until further notice
- Provide open space, utilizing the outdoors as much as possible ensuring to not overlap with another classroom
- Provide airflow by opening windows as much as possible
- If a child becomes sick, keep child in a separate space donning a mask if possible until parent arrives
- Children requiring a nebulizer treatment for asthma will not be able to attend. Only inhalers with spacers are allowed at this time.

Be prepared for procedures to update frequently as guidance is ever changing. Please check your email daily.