

CenClear

COVID 19 Health and Safety Plan Template

1. Screening procedures,
2. Child drop-off and pick-up policies,
3. Sick policies,
4. Mask policy, and
5. Cleaning/sanitation procedures

Face Masks

Key Questions

- How will you ensure staff have accessibility to cloth face masks?
- How will you implement staff wearing cloth face masks?
- What protocols will you put in place to ensure staff are wearing masks throughout the day?
- In circumstance where children have been identified to wear face masks, how will you implement?

Summary of Responses to Key Questions:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
* Use of face coverings (masks) by all staff and visitors	<p>Staff and visitors will wear masks at all times when they are in a CenClear preschool building with children present.</p> <p>Any exceptions must be cleared with the Human Resource Dept.</p>	Supervisors	Staff will provide their own masks. CenClear will provide clear mouth masks for staff in classrooms where needed.	Yes
*Home Visit component	Masks and social distancing are required and will be practiced at all time during face-to-dace visits.	FCP Dept/Supervisor		

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
<p>* Use of face coverings (masks) by children 2 years of age and older (as appropriate)</p>	<ul style="list-style-type: none"> • Children over the age of 2 will wear a mask at all times during transport and in preschool centers with few exceptions per guidelines from the PA DOH. • Exceptions will include; <ul style="list-style-type: none"> - when eating or drinking - during an activity that makes mask-wearing unsafe - there will also be 10-minute “face-covering breaks” during activities where 6 feet social distancing can occur. • If in a school district, we follow the policy of the district. • Prior to the start of class, teachers and FSWs will connect with families to review this policy. This can be discussed during virtual program awareness and during the initial home visit. • Staff will model wearing a mask and will put masks on items around the room (doll house people, dolls, characters in books). • Social stories were made for each classroom to promote the wearing of masks. • When dropping off or picking up children, parents are required to wear masks and to practice social distancing. 	<p>Teachers, Bus Driver, Bus Aides, Classroom Support Staff</p>	<ul style="list-style-type: none"> - Masks for children can be provided by parents but CenClear will also have them available. -social stories, materials in classrooms to put “masks” on items - CenClear will provide a clear mouth mask for classroom staff where needed - Masks will be washed daily. In sites where laundry facilities are available, this will occur during work time. In sites where laundry facilities are not available, identified staff will be paid two additional hours per week to wash masks daily, at home. Laundry detergent will be provided. 	

Cleaning, Sanitizing, Disinfecting and Ventilation

Key Questions

- How often will you implement cleaning, sanitation, disinfecting, and ventilation protocols/procedures to maintain children's safety in care?
- What protocols will you put in place to clean and disinfect high-touch surfaces throughout an individual day?
- Which staff will be trained on cleaning, sanitizing, disinfecting, and ventilation protocols? When and how will the training be provided?

Summary of Responses to Key Questions:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
* Cleaning, sanitizing, disinfecting, and ventilating surfaces, and any other areas used by children in care (i.e., restrooms, drinking fountains, toys, hallways, and transportation)	<ul style="list-style-type: none"> • Windows will be open when safe and feasible/possible to allow for optimal ventilation. • Centers in the classroom will only contain items that are currently being used. Extra items will be eliminated to allow for ease of cleaning, sanitizing, and disinfecting. • Heavily used items and areas will be sanitized throughout the class day. Toys that have been mouthed by a child will be put aside until they can be washed and sanitized before use by another child. • Toys will be sanitized throughout the day as often as possible. This can be done using Clorox Anywhere. Clorox Anywhere can be sprayed on all toys and classroom surfaces. It does not have to be wiped off. If Clorox Anywhere is not available is not available, a solution of 1 teaspoon bleach added to a quart of cool water may be used to sanitize toys but it must be 	Health/Safety/Nutrition Department Child Development Department Janitorial Staff	Cleaning Items, sanitizing/disinfecting solution w/ EPA registered product.	yes

<p>*Home visit component</p>	<p>allowed to sit for 2 minutes and then rinsed with potable water.</p> <ul style="list-style-type: none"> • Toys and anything else that a child could put into their mouth cannot be disinfected; an EPA registered sanitizer will be used on anything a child could put into their mouths. • All classrooms will be disinfected after the children have left the building. • High-touch items to be disinfected frequently include; <ul style="list-style-type: none"> - doorknobs, light switches, handles - faucets & sinks - toilet flush handles - soap dispensers - anything else that is frequently touched by more than one person • Drinking fountains will not be used. • One group at a time should use a hallway. Janitorial staff will clean & disinfect common areas, classrooms, restrooms and hallways after children leave for the day. • Bathrooms will be disinfected between different group use. <p>Handwashing or hand sanitizing must be completed frequently where ever appropriate.</p>	<p>FCP Dept/Supervisor</p>	<p>Approved soap and hand sanitizer</p>	
<p>Other cleaning, sanitizing, disinfecting, and ventilation practices</p>				

Social Distancing and Other Safety Protocols

Key Questions

- How will child care spaces be organized to mitigate spread?
- How will you group children in care with staff to limit the number of individuals who come into contact with one another throughout the day?
- What policies and procedures will govern use of other communal spaces within the facility?
- How will you utilize outdoor space to help meet social distancing needs?
- What hygiene routines will be implemented throughout the day?
- How will you adjust transportation to meet social distancing requirements?
- What visitor and volunteer policies will you implement to mitigate spread?
- Will any of these social distancing and other safety protocols differ based on age?
- Which stakeholders will be trained on social distancing and other safety protocols? When and how will the training be provided? How will preparedness to implement as a result of the training be measured?

Summary of Responses to Key Questions:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Child-care space occupancy that allows for 6 feet of separation (when possible) among children in care and staff throughout the day, to the maximum extent feasible or promotes social distancing through grouping	<ul style="list-style-type: none"> • Classroom materials will be reduced to allow for proper cleaning and sanitizing throughout the day. Items will not be stored in bulk and only classroom items currently being used are permitted to be in the room. Toys and other items may be rotated periodically to allow for variety. 	Case Managers	Additional tables as requested	yes

<p>*Home visit component</p>	<ul style="list-style-type: none"> • Sand and water tables will not be used. • Individual centers are set up to allow social distancing. • Smaller areas (ex: computer, calm down areas) are limited to one child at a time. • Social distancing at tables during meal will occur to the extent possible in the room. Additional tables can be added to the room where space allows. Smaller tables also will be used for distancing purposes. All tables must be sanitized before and after use. <p>When face-to face visits happen, staff should make every attempt to conduct the visit out of doors when possible to maintain a social distance of 6 feet per CDC and PA.DOH guidelines</p>	<p>FCP Dept/Supervisor</p>		
<p>*Restricting the use of common areas, and consider serving meals in alternate settings such as where the child care is being provided</p>	<ul style="list-style-type: none"> • Meals will be served in each classroom. • Food will be delivered on a cart and a designated adult will prepare each child's plate from the cart. • Because of CACFP regulations, all food must be plated and the proper serving size must be served to each child. • Adults will serve all condiments. Condiment bottles will be sanitized after use by food service staff. • Milk will be served by staff. An adult will serve milk from the cart and the bottle should remain on the cart. 	<p>Teacher, Food Service, Supervisors</p>	<p>Meal Carts Sanitizer/Disinfectant Serving Utensils and Bowls/Plates</p>	<p>yes</p>

	<ul style="list-style-type: none"> In school district buildings, we will follow the policy of the district. 			
<p>* Hygiene practices for children in care and staff including the manner and frequency of hand-washing and other best practices</p>	<ul style="list-style-type: none"> Staff must adhere to current practices in place for handwashing. Hand sanitizing cannot replace hand washing when soap and water are available. Toothbrushing will not occur. Handwashing will occur immediately upon reentry to the building. Any item “mouthed” by a child must be removed until it can be cleaned and sanitized. Each classroom must have a process in place to assure this happens. (Clean with soap and water, rinse thoroughly, sanitize with an EPA-registered disinfectant, rinse thoroughly again and then air dry). Items could be washed in a dishwasher. 	Supervisors, Teachers	Cleaning/sanitizing/d isinfecting products will be provided. Staff are not permitted to bring these items from home. Disposable sinks, outdoor hand sanitizing stations.	Yes
<p>Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs</p>	Signs are posted in kitchens, bathrooms, hallways, entrances, classrooms	Health Case Managers	Signs	yes
<p>Identifying and restricting non-essential visitors and volunteers</p>	<ul style="list-style-type: none"> Student teachers, therapists and interns are permitted but must adhere to all health and safety policies. Non-essential visitors are not permitted. Outside agency staff serving children will only be permitted if direct service for the child is needed in the classroom. All procedures must be followed. Therapies must occur in the classroom. Children are not be 	Case Managers		Yes

	taken to another location unless absolutely necessary.			
Adjusting transportation schedules and practices to create social distance between children in care	<ul style="list-style-type: none"> • One child per seat on a bus unless siblings • Two children per van • Vehicles will be disinfected between runs • Adults will wear masks in vehicles unless it impedes safety. • Children will wear masks in vehicles. 	Transportation	Masks, disinfectant	yes
Limiting the number of individuals in facility rooms and other facility spaces, and interactions between groups of children in care	<ul style="list-style-type: none"> • Groups should not assemble in lunch areas or other common areas in a building unless six feet of distancing can occur. 			

Monitoring Children and Staff Health

Key Questions

- How will you screen children, staff and others who interact with each other to ensure they are healthy and not exhibiting signs of illness?
- Where will the screening take place?
- When and how frequently will you monitor the health of children, staff and others who interact with each other throughout the day to ensure that they continue to be healthy and do not exhibit new signs of illness?
- What is the policy for quarantine or isolation if a staff and/or child becomes ill or has been exposed to an individual confirmed positive for COVID-19?
- What conditions will a staff or child confirmed to have COVID-19 need to meet to safely return to the facility?
- Which staff will be responsible for making decisions regarding quarantine or isolation requirements of staff or children?
- When and how will families be notified of confirmed staff or child illness or exposure and resulting changes to the COVID-19 Health and Safety Plan?
- Which person will be responsible for reporting suspected or confirmed cases of COVID-19 to the Department of Health and Child Care Certification?
- Which persons will be trained on protocols for monitoring children and staff health? When and how will the training be provided? How will preparedness to implement as a result of the training be measured?

Summary of Responses to Key Questions:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
<p>* Monitoring children and staff for symptoms and history of exposure</p> <p>*</p>	<ul style="list-style-type: none"> • Staff must follow procedures for building entry. Procedures are in place for taking temperatures. • All staff entering buildings must “fob” in. This is an acknowledgement that staff are symptom-free (through self-assessment prior to entry). • Any student or staff member reporting exposure will be asked to quarantine for 14 days and provide confirmation of a negative result prior to returning. • Those in school district buildings must follow the policy of the district. • Parents are responsible for screening their child prior to class. • Temperatures will also be taken according to the following guidelines: <ul style="list-style-type: none"> - Bus-the parent/adult will take the child to the bus. The bus aide will greet the child and take their temperature. The bus aide will then buckle the child into their seat. The parent/adult will not enter the bus. - Van-the parent/adult will take the child to the van. The parent will take the child’s temperature before entry onto the van. - Parent drop off - children will be met at the door by a designated staff person who will take the temperature of each child at drop-off, before the parent leaves. • If the child has a temperature over 100.4 degrees F, they will not be permitted to board the bus/van or attend class. • For home visits, staff contact families in advance to complete the COVID-19 Response Family Health Questionnaire. 	<p>Case Managers, teachers</p>	<p>Thermometer stations, hand sanitizer, signs, Family Health Assessment</p>	<p>yes</p>

	<ul style="list-style-type: none"> • Home visitors, teachers and FSWs will provide information to families on symptoms related to Covid-19. • Upon arrival, staff will complete a visual health check of each child. 			
* Isolating or quarantining children, staff, or visitors if they become sick or demonstrate a history of exposure	<ul style="list-style-type: none"> • Any person who becomes sick with known COVID-19 symptoms or has been notified of a sustained contact with a COVID-19 positive person will be placed in a pre-determined isolated location until they can leave the facility. • A child with symptoms will be isolated until a parent/guardian can pick them up but may never be left alone. • The area will be properly cleaned and disinfected. 	Health Case Managers		yes
* Returning isolated or quarantined staff, children, or visitors to the facility	<ul style="list-style-type: none"> • Students and staff will be permitted to return to class after a confirmed negative COVID-19 test via confirmation as recommended by the CDC or PA DOH. • Student/employee who had virus may return 3 days after no fever and respiratory symptoms have improved and 10 days since symptoms first appeared. • Students/employees who have tested positive but have had no symptoms may return 10 days since test and they continue to have no symptoms. • Students or staff who travel to high-risk areas as identified by the PA DOH / CDC will follow guidelines set forth by CenClear's Human Resource Dept. 			
* Notifying staff and families of suspected or confirmed cases of COVID-19 and facility closures	<ul style="list-style-type: none"> • Families will be notified of suspected and confirmed cases. A letter will be developed and can be delivered through a variety of methods: School Wire, Class Dojo, Remind, Email, Text 	Coordinators		Yes

<p>* Isolating or quarantining children, staff, or visitors if they become sick or demonstrate a history of exposure</p>	<ul style="list-style-type: none"> Any person who becomes sick with known COVID-19 symptoms or has been notified of a sustained contact with a COVID-19 positive person will be placed in pre-determined isolated location until they can leave the facility. A child with symptoms will be isolated until a parent/guardian can pick them up but may never be left alone. The area will be properly cleaned and disinfected. 	<p>Health Case Managers</p>		<p>yes</p>
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Other Considerations for Children and Staff

Key Questions

- How will you determine which staff are willing/able to return? How will you accommodate staff who are unable or uncomfortable to return?
- How will you determine which children are willing/able to return? How will you accommodate children who are unable or uncomfortable to return?
- What special protocols will you implement to protect children and staff at higher risk for severe illness?
- How will you address staff who are ill, or who have family members who have become ill?
- How will you ensure enough substitute staff are prepared in the event of staff illness? Have you considered applying for a Provisional Hire Waiver?

Summary of Responses to Key Questions:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
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<p>* Protecting children and staff at higher risk for severe illness. Unique safety protocols for children with complex needs or vulnerable individuals.</p>	<ul style="list-style-type: none"> • Teachers will survey each family. If there is a concern about a child attending class, remote learning opportunities will be provided. • Situations involving at-risk children will be individually discussed. The Health Case Manager will take the lead with the team. • Services will be provided based on recommendations from the team. • Employees with concerns should contact the Human Resources Department. 	<p>Human Resources Health/Safety/Nutrition Department</p>		<p>Yes</p>
<p>*Home visit component</p>	<ul style="list-style-type: none"> • On the day of the home visit, staff will complete a Family Health Assessment (attached). Family Health Assessments are to be completed the day of the scheduled face-to-face home visit. • While completing a Family Health Assessment, you must ask the caregivers if they, or anyone in the household, has the following symptoms: <ul style="list-style-type: none"> -- Fever of 100.4°F (38.0°C) or higher -- New cough -- Shortness of breath • If staff or any persons in the home are sick or experiencing any of the symptoms related to the COVID-19 pandemic, staff will complete the visit or family contact via the phone or virtually. 	<p>Home Visitor/supervisor FCP Dept.</p>		