

Child Care COVID Response & Preparedness Plan

Program Information

Fraser Public School Little Learners at Fraser Public School:

Introduction

Our Commitment to Health & Safety

Fraser Public Schools Little Learners is committed to protecting the health of our children, families, staff, and community. The following policies were designed in response to guidance from the Michigan Departments of Licensing and Regulatory Affairs (LARA) and Health and Human Services, in accordance with best practices from the Centers for Disease Control and Prevention, and with everyone's well-being in mind. To limit the potential spread of COVID-19, we will be making some temporary changes to our programming that include robust cleaning and disinfecting procedures and minimizing opportunities for person-to-person exposure (e.g., an infected person spreading respiratory droplets through actions such as coughing, sneezing, or talking). The following plan outlines the recommended practices and strategies we will use to protect the health of our children, staff, and families while at the same time ensuring that children are experiencing developmentally appropriate and responsive interactions and environments.

Please be aware that the following information is subject to change.

Changes to Our Physical Spaces

We will use the following strategies in our classrooms and facilities to minimize the spread of illness:

1. Where possible, limiting or eliminating use of common spaces in the classrooms/facility. When common spaces must be used, we will rotate use of the space and clean between groups.
2. Ensuring ventilation systems operate properly and increasing circulation of outdoor air as much as possible (e.g., keeping windows and doors open to the extent that this does not pose safety risks).
3. Before re-opening we will ensure all water systems and drinking fountains are safe following CDC guidelines.
4. Rearranging classroom areas to seat children as far apart as reasonably possible and limiting the number of children sitting together.

Availability of Toys and Classroom Materials

At this time, we will make the following changes to the toys and materials in our classrooms:

1. We will remove toys and objects which cannot be easily cleaned or sanitized between use.
2. Given that cloth toys are not recommended at this time, we will remove these from classrooms.
3. We will temporarily suspend use of water and sensory tables.
4. Toys will be washed and sanitized before being moved from one group of children to another.

Mealtimes

To limit opportunities for exposure during mealtimes, we will engage in the following recommended practices:

1. We will serve meals in the classroom instead of group dining spaces.
2. Staff and children will wash hands before and immediately after children have eaten.
3. We will space seating as far apart as possible (ideally 6 feet apart) by limiting the number of children sitting together and rearranging seating.

Naptime

To reduce potential for viral spread, we will engage in the following recommended practices:

1. Storing each child's bedding in individually labeled bins, cubbies, or bags.
2. Labeling each child's cot/mat.

3. When possible, children will be placed head-to-toe (i.e., one child with their head at the top of the mat, the next child over with their head at the bottom of the mat).
4. Ensuring that children's naptime mats/cots/cribs are spaced out as much as possible, ideally 6 feet apart.

Items Brought From Home

During this time, we are trying to limit the number of items brought into the facility because this can be a way to transmit the virus, so we ask that families refrain from bringing items from home as much as possible. However, we recognize that placing limits on children's comfort items may increase stress for children and staff as they may be especially needed during this time of transition. All items from home (including jackets and backpacks) will be placed in a bag to keep away from other students' items.

Screening Families & Staff for COVID-19 Symptoms and Exposure

Upon arrival to the program, staff and families are required to report if they or anyone in their household:

have received positive COVID-19 results;
been in close contact with someone who has COVID-19; and/or

have experienced symptoms such as: Temperature 100.4 or signs of fever (chills/sweating), Sore throat, New uncontrolled cough that causes difficulty breathing, diarrhea, vomiting, or abdominal pain, new onset of severe headache

The procedures we will use to screen staff for symptoms and exposure include:

Fraser staff will have a self assessment: <https://form.jotform.com/202416706872153>

This survey includes taking temperature, checking for any symptoms and if anyone has had close contact with someone who has COVID-19.

The procedures we will use to screen children/families for symptoms and exposure include:

Families must complete the Dooley Self Assessment: <https://form.jotform.com/202416706872153>

The Little Learners greeter/door monitor will ask families about child/household members' symptoms and exposure and take the child's temperature.

If families or staff are absent or otherwise off-site but experience exposure or symptoms, they should contact: The school office

Daily Temperature Checks

Temperature Checks

As fever is the key indicator of COVID-19 in children, we will check each child's temperature upon daily arrival to the program. Staff will also be asked to take their own temperatures upon arrival to work. Staff will re-check children's temperatures throughout the day if they appear ill or "not themselves" (e.g., flushed cheeks, rapid or difficulty breathing without recent physical activity, fatigue, or extreme fussiness).

When children arrive to the program, temperature checks will occur

before children enter their classroom.

Each child's temperature will be taken by:

Program staff.

The following staff members will be responsible for temperature checks:

The door monitor or office staff will take the child's temperature.

To minimize potential spread of illness, staff will:

wear a face mask while taking the child's temperature.

Responding to Symptoms and Confirmed Cases of COVID-19

Responding to COVID-19 Symptoms On-Site ([Please see COVID-19 Back to School ToolKit](#))

Students should not go to school or participate in any school activities or sports if having symptoms of COVID-19. If a student starts having symptoms of COVID-19 while at school, they need to be sent home. The student may return based on the guidance for their diagnosis (See “Managing Communicable Diseases in Schools” bit.ly/2PaOz8U) unless they are at risk for COVID-19 exposure.

If a child or staff member has a temperature above 100.4 degrees and/or symptoms such as: temperature 100.4 or signs of fever (chills/sweating), Sore throat, New uncontrolled cough that causes difficulty breathing, Diarrhea, vomiting, or abdominal pain, new onset of severe headache, they will be sent home immediately with the recommendation to contact their primary care physician/medical provider. If anyone shows emergency warning signs (e.g., trouble breathing, persistent pain/pressure in the chest, new confusion, inability to wake or stay awake, or bluish lips or face), we will seek medical care immediately.

If a child develops symptoms during care hours:

- Parents will be contacted for prompt pick-up.
- The child will be isolated from other children and as many staff as possible (the child will not be left alone).
- The child will wait with the following designated staff member(s): Office staff
- The child and designated staff will wait in the following safe, isolated location: The conference room or sick child room.

If a staff member develops symptoms during care hours:

- They will be asked to go home immediately.
- If no other caregiver is immediately available to be with children, the staff member will put on a cloth face covering (if not already on) and limit close interactions with children until they can be relieved by another staff member.
- Children may need to be picked up if no other caregiver is available.
- If the ill staff member needs to be picked up or otherwise cannot leave the facility immediately, they will wait in the following safe, isolated location: The conference room

Reporting Exposure

Reporting Exposure ([Please see COVID-19 Back to School ToolKit](#))

If a child, staff member, family member, or visitor to our program shows COVID-19 symptoms or tests positive for the virus, we will contact our local health department and licensing consultant. Based on the guidance of the local health department, we will determine whether to close individual classrooms or our facility, the duration of the closure, and other next steps. When communicating with families and staff about any COVID-19 cases, we will respect the privacy of individuals and not share health information of a specific person.

Our local health department can be contacted at:

586-783-8190

Returning to the Program After Experiencing Symptoms and/or a Positive COVID

Test ([Please see COVID-19 Back to School ToolKit](#))

To accommodate for the potential need to quarantine staff or allow for longer absences from work than normal, we will implement the following staffing plan to ensure we can meet staff to child ratios:

An appropriate sub will be called in to replace staff that are absent from work. When necessary, either the supervisor will provide coverage for staff that need to quarantine or class may be canceled until coverage for the class is available.

Because child care staff members are part of Michigan’s essential workforce, they are eligible to be tested for COVID-19.

Staff can visit [this resource](#) to locate a nearby test site.

Other policies related to returning to care and work include:

Staff reserves the right to refuse admittance to any child who appears ill.

Maintaining Consistent Groups

During this time, we will maintain the following group sizes:

GSRP- 10 four yr. Olds

Early Childhood Care: 10 three -five year olds

To support these smaller group sizes, we will implement the following policies:

We will be utilizing additional rooms to accommodate smaller group sizes. Children will be divided into groups based on family members and age.

To minimize potential spread of COVID-19, we will engage in the following best practices:

1. To the extent possible, classrooms will include the same group of children and providers that are scheduled for each day.
2. We will limit the mixing of children across groups by staggering times for outdoor play and other activities where children from multiple classrooms are typically combined.
3. Canceling or postponing field trips and special events that convene larger groups of children and families.
4. Limiting non-essential visitors, volunteers, and activities including groups of children or adults.
5. Any in-person staff meetings will be limited to 10 people and social distancing requirements will be followed as much as possible.

Drop-Off and Pick-Up Procedures

We will use the following recommended practices during drop-off and pick-up times to protect the health of children, families, and staff.

1. Only one adult per family should be present at drop-off/pick-up. Ideally, this would be the same parent or designated person every day, though we recognize this is not always possible.
2. Staff will greet children and families in the office.
3. We will ask parents, children and other visitors to wear masks while in the building.

We will temporarily be changing our sign-in/-out policies as follows:

We will confirm attendance times with parents via email.

Other policies related to drop-off and pick-up include:

Staff will log-in students with Time Clock to keep track of attendance.

Hand Washing

We will reinforce regular health and safety practices with children and staff and continue to comply with licensing regulations and CDC hand washing guidelines as follows:

- Staff and children will wash hands often with soap and water for at least 20 seconds.
- Soap and water are the best option, especially if hands are visibly dirty. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available. Staff and children should cover all surfaces of their hands with hand sanitizer, rubbing them together until they feel dry.
- Staff and children (with frequent reminders and support) will cover coughs and sneezes with a tissue or sleeve and wash hands immediately after.
- Wearing gloves does not replace appropriate hand hygiene.
- Hand hygiene is especially important after blowing one's nose, going to the bathroom, before eating or preparing food (or helping children do any of these actions).

Cleaning and Disinfecting

Cleaning and Disinfecting Surfaces

We will engage in the following cleaning and disinfecting practices in accordance with CDC recommendations:

1. Daily cleaning/disinfecting of high-touch surfaces (e.g., sinks, toilets, light switches, door knobs, counter and table tops, chairs).
2. Use of CDC-recommended disinfectants such as EPA-registered household disinfectants, diluted bleach solution, and/or alcohol solutions with at least 70% alcohol
3. Use of a schedule for regular cleaning and disinfecting tasks.

4. Regular cleaning of electronics (e.g., keyboards, parent/staff check-in kiosks) according to manufacturer's instructions.
5. Cleaning dirty surfaces using detergent or soap and water prior to disinfection.
6. Ensuring staff wear disposable gloves to perform cleaning, disinfecting, laundry, and trash pick-up, followed by hand washing.
7. Keeping cleaning products secure and out of reach of children, avoiding use near children, and ensuring proper ventilation during use to prevent inhalation of toxic fumes.

Cleaning and Disinfecting Toys

We will engage in the following best practices to clean and disinfect toys:

1. We will clean toys frequently, especially items that have been in a child's mouth.
2. We will set aside toys that need to be cleaned (e.g., out of children's reach in a dish pan with soapy water or separate container marked for "soiled toys").
3. We will disinfect toys with an EPA-registered disinfectant.

Safety Equipment

Face Mask/Coverings for Staff

Our plan for staff around face masks/coverings is as follows:

Staff are required to wear face coverings at all times on-site unless appropriate documentation is provided from the doctor.

Use of Gloves

Staff will wear gloves in a manner consistent with existing licensing rules (for example, gloves should be worn when handling contaminants, cleaning or when serving food). Staff members should wash hands before putting gloves on and immediately after gloves are removed. Gloves are not recommended for broader use and do not replace hand washing.

Face Masks/Coverings for Children

Our plan regarding children wearing cloth face coverings during care is:

Children are required to wear face coverings unless appropriate documentation is provided from the doctor.

Partnering and Communicating with Families & Staff

Communicating with Staff and Families

We will actively communicate with staff and families to determine when they will return to work/care if they have been out, discuss concerns or questions, share new policies and expectations, and confidentially discuss any extenuating circumstances that have emerged and/or any health concerns/conditions that may elevate risk for complications if exposed to COVID-19.

The staff responsible for handling questions and outreach for staff is : Director of Early Childhood

The staff responsible for handling questions and outreach for families is : Director, Administrator assistant and staff.

Training Staff

To support staff in effectively engaging in best practices and making personal decisions, we will provide learning opportunities to help all of us understand how COVID-19 is transmitted, the distance the virus can travel, how long the virus remains viable in the air and on surfaces, signs and symptoms of COVID-19, and our new policies and procedures as outlined in this plan.

Supporting Children's Social-Emotional Needs

Staff and families will partner together to support the needs and emotional reactions of children during this time. We anticipate that children will experience a wide range of feelings during this transition period. Some children will be relieved, some will have initial challenges with separation from their parent(s), some may demonstrate anger at the "disappearance" of their child care provider, and some may act out toward other children. Whatever the reactions, we

acknowledge that staff and families may need some new tools in their toolkit to assist the child with emotional regulation and we will work together to support all caregivers.

We will make the following resources available for staff and families to support children:

[Crisis Parent and Caregiver Guide](#), from the Michigan Children's Trust Fund

[Talking with Children about COVID-19](#), from the CDC

[Helping Young Children Through COVID-19](#), from Zero to Thrive (includes Arabic and Spanish translations)

[Georgie and the Giant Germ](#), from Zero to Thrive and Tender Press Books

Other - Fraser Public School's website has additional information for supporting Social-Emotional Needs.

<https://www.fraser.k12.mi.us/selresources>

Supporting Staff Members' Social-Emotional Needs

To ensure the well-being of the children, it is also imperative to ensure the well-being of their teachers and caregivers, and to provide them with the emotional and administrative support necessary during this time of reintegration, and in the months ahead. As essential workers in the COVID-19 pandemic, we understand our staff may have worries about their own physical or psychological health, and the potential risk to their family members at home. Because young children internalize the stress of the adults who care for them, we know it is vitally important to provide support and services to ensure the emotional well-being of our staff.

Contact Information

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