Holt Public Schools Kids Club Child Care Midway Early Childhood Center



COVID-19 Preparedness and Response Plan

January 15, 2021

The mission of Holt Public Schools Child Care and Early Childhood Center has always been to create a safe environment that earns the trust of the children and families we serve. We are as dedicated to that mission now as we have ever been. Holt Public will continue to lead the industry in best practices during this time, a responsibility we do not take lightly. Accordingly, we have created a Covid-19 Operating Manual that details the necessary policy and procedures and aggressive actions we have taken to mitigate the potential spread of Covid-19. This new operating model supplements our existing and overarching operations manual. As we move forward in the midst of the COVID-19 pandemic, we would like to communicate those aggressive actions we have taken to assure you of our steadfast commitment to the health and safety of our Holt and Dimondale families.

Note: This should be considered a live document. Updates and changes may be made in response to new information acquired or guidelines set forth.

Note: This preparedness and response plan is specific to the Holt programs that follow LARA guidelines. This written plan is not the Holt Public specific plan. All guidelines set forth in the Holt Public Covid-19 Preparedness and response plan are applicable in the Kids' Club program as well. The Holt Kids' Club Covid-19 Preparedness and Response plan is written to address the specific operational procedures of the Kids's Club Child care and Midway preschool programs.

Table of Contents

| Section | 1: OverviewPg 3 |
|--|--|
| Section | 2: Preparation of the buildingPg 3 |
| • D • R | 3: Monitoring for Symptoms of COVID-19 |
| MLiALiTi | 4: Movement and Access: Social Distancing PracticesPg 10 laintain Consistent Groups imit, or Eliminate, Use of Common Spaces rrival and dismissal procedures imiting visitors ransportation leals and snacks |
| HC | 5: Best practices to promote hygiene and healthPg 13 andwashing leaning and Disinfecting ems from home |
| UM | 6: Use of safety equipmentPg 15 see of gloves lask or cloth face covering for staff lask or cloth face covering for students ace shields |
| • C | 7: Partnering and communicating with familiesPg 18 ommunication with families ommunication with staff ommunication with local health agencies |

Section 1: Overview

All child care providers must develop and implement a COVID-19 preparedness and response plan consistent with LARA guidelines. The Holt Public plan will be available online on our district website. A digital copy will be sent to parents and staff for signature prior to reopening.

Our plan will include:

- How Holt Public will monitor symptoms of COVID-19.
- How Holt Public will practice social distancing, as developmentally appropriate.
- How Holt Public will ensure hygiene (including regular cleaning and disinfecting).
- How Holt Public will use safety equipment (including PPE, when appropriate).
- Communication protocol for families to report symptoms or a positive test and policies on when children will be excluded from care.
- Isolation procedure in case of symptoms or confirmed cases onsite.
- · How to maintain required staff to child ratios in the event that a staff member(s) becomes ill.

All family questions related to COVID-19 are to be directed to Peter Tresize our Human Resources Director. He will be responsible for handling questions and reporting about COVID-19 concerns.. Email: peter.trezise@hpsk12.net Phone number: 517-694-6392

Section 2: Preparing the Building

Holt Public will make changes to our physical space to make it safer for children and staff. Each guideline below helps prevent the spread of COVID-19 and encourage social distancing.

- 1. *A separate room in the building will be used to safely isolate children who develop symptoms during care.
- 2. Post signage or visible markers to indicate proper social distancing, hand washing, and cloth face mask wearing. Printable signs are available from:
 - a. CDC, including signs in multiple languages (<u>handwashing</u>; <u>symptoms</u>; <u>stay home</u> <u>when you're sick</u>; <u>stay home when you're sick for children</u>; <u>all signs</u>).
 - b. Department of Labor and Economic Opportunity (workplace safety; masks).
- 3. Toys and objects which cannot be easily cleaned or sanitized between use will be removed to the fullest extent possible.
 - a. Wooden toys will be appropriately cleaned at least on a daily basis.

- b. Cloth toys will not be in circulation at this time.
- 4. Children's books, and other paper-based materials, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
 - a. Some have recommended that toys should be cleaned after each child uses them (especially if a child has mouthed the toy). Although this is ideal, it is not a recommendation most childcare settings can implement due to time and staff resource limitations. If cleaning is possible throughout the day: Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys."
 - b. Keep the dish pan and water out of reach from children to prevent the risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- 5. Limit use of common spaces.
 - a. When possible, divide large group spaces to allow more children to safely use the space. For example, use child-sized furniture, such as rolling shelves and kitchenettes, to divide a room and prevent mixing between groups of children.
 - b. If common spaces are used, consider rotating the use of the space.
 - c. Playground and outdoor equipment may be used.
- 6. Rearrange seating to seat children six feet apart (when possible) and limit the number of children sitting together. This is especially true for meal times
- 7. Use touchless trash cans to provide a hands-free way to dispose of tissues and contaminants if they are available.
- 8. Weather permitting, we will increase circulation of outdoor air as much as possible.
- 9. Ensure water is safe. Drinking fountains have been closed and water bottle filling stations have been installed.

Section 3: MONITOR SYMPTOMS OF COVID-19

*Holt Public will perform a health screening on anyone entering the building.

Holt Public will strictly enforce their sick policy. The presence of any of the symptoms below generally suggests a child has an infectious illness and should not attend child care, regardless of whether the illness is COVID-19. For children with chronic conditions, a positive screening should represent a change from their typical health status.

Sick Policy:

- Temperature of 100 degrees Fahrenheit or higher
- Sore throat

- Cough (for children with chronic cough due to allergies or asthma, a change in their cough from baseline)
- Difficulty breathing (for children with asthma, a change from their baseline breathing)
- Diarrhea or vomiting
- New onset of severe headache, especially with a fever.
- Nasal discharge (especially if thick, green or yellow in color)
- Eye discharge (conjunctivitis is extremely contagious)
- Unidentified rash

Children should also stay home if they:

- Are in quarantine due to exposure to an individual with a confirmed case of COVID-19 or
- Have other signs of illness described in a provider's sick policy.

Providers should encourage families to contact their healthcare provider or follow up with a local clinic/urgent care before returning to care.

Where Can Children Get Tested for COVID-19?

If a family is concerned that their child may have COVID-19, they should contact their healthcare provider or follow up with a local clinic/urgent care.

Families can also find a testing site using the <u>Testing Site Look Up Tool</u> or call the COVID-19 hotline at 888-535-6136 for help finding a site near you.

When Can A Sick Child Return to Child Care?

When a child can return to care depends on their symptoms, whether they have a high risk for Covid-19 exposure, and whether they test positive.

A child has a high risk of COVID exposure if they have had a close contact with a person with COVID-19 within the past 14 days.

Close contact includes exposures within 6 feet of a person with COVID-19 for 15 minute or more. This includes brief exposures totaling 15 minutes in a 24-hour period.

When children arrive:

- Parents/Guardians are <u>NOT</u> permitted to enter the buildings. A staff person will be assigned to relay the children from the check in/out station outside to the classroom each day.
- 2. That staff member will perform a temperature check at the check in station. A touchless FDA approved thermometer will be used to scan the body temperature. Children arriving

with fever at or above 100.0 or other symptoms will be sent home or not permitted into the building.

3. Parents will be asked:

- a. Has your child been in close contact with a person who has COVID-19? (If yes, the family should self-quarantine for 14 days after the last exposure, even with a negative test result.
- b. Has your child felt unwell in the last 24 hours? (persistent cough, temperature, shortness of breath, sore throat, difficulty breathing or new onset of severe headache, diarrhea and/or vomiting)
- 4. If the answer to any of the health screener questions is yes your student will be asked to stay/go home.
- 5. Staff will visually check the child for signs of illness, including flushed cheeks, rapid or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.

As young children are not reliable reporters of their symptoms, asking children about additional coronavirus symptoms is not useful (for example, shortness of breath, change in taste).

Staff will continue to monitor symptoms throughout the day and monitor temperatures when children appear ill or "not themselves."

Children with a fever alone, or a fever with a cough and/or diarrhea will be isolated from the group and parents will be contacted for **PROMPT** pick up. At that point, parents should contact their primary care physician/medical provider.

When staff arrive:

- 1. Upon entering the building, staff will apply hand sanitizer to their hands.
- 2. Temperature checks will be performed when staff arrive. A touchless thermometer will be used for scanning.
- 3. Staff will be screened for cough, shortness of breath, difficulty breathing, change in smell or taste, and diarrhea by filling out a health screening form.
- 4. Staff arriving with fever above 100 or other symptoms will be sent home.
- 5. Staff should report contact with anyone outside of work who has had a documented case of COVID-19. Staff will be instructed to self-quarantine if they have been exposed to COVID-19.
- 6. Staff will wash their hands immediately when entering their classroom.

Due to child care staff members being part of Michigan's essential workforce, they are eligible to be tested for COVID-19. Find a test site near you here.

Families

A communication of this plan will be sent to families prior to reopening and will be posted on our website.

Parents should communicate with the center if they are concerned about possible or confirmed cases of COVID-19. Families should report possible illness if anyone in their household shows symptoms or has tested positive for COVID-19, including the child or family members if they or their children experience possible symptoms or have a positive test. Please contact the Community Ed office at 517-694-3411, or Jenn Phinney at 517-699-1587 to report an illness.

*Respond to Possible or Confirmed Cases of COVID-19

Child care providers are a critical part of helping communities limit the spread of the virus.

- Anyone who becomes symptomatic will be sent home **immediately**.
- Those who can not leave immediately will be isolated in a separate room until able to be picked up. A staff person will stay with a child until their parent comes to pick them up. If the child has not been picked up in 30 minutes we will contact the emergency contact person.

Report exposure.

If a Child or Staff Member Has a Confirmed Case of COVID-19

1. Report the case to your local health department and respond to questions such as:

- When was the staff/child in attendance?
- Who is the staff/child near (less than 6 feet) throughout the day?
- Has there been adequate physical distancing throughout the day?
- Are there others at the childcare facility that live with the staff or child?
- When are face coverings worn in the facility?
- Your local health department will also ask you to participate in contact tracing to limit the spread of the virus.

To help, childcare providers should collect the contact for any <u>close contacts</u> of the affected individuals while at the center or child care home from two days before he or she showed symptoms or tested positive to the time when he or she was last present in care.

The local health department will ask for this information to support contact tracing. A <u>close</u> contact includes:

 You were within 6 feet of someone who has COVID-19 for a total of 15 minutes or more within a 24-hour period. This includes brief exposures totaling 15 minutes in a 24-hour period.

- You provided care at home to someone who is sick with COVID-19.
- You had direct physical contact with the person.
- You shared eating or drinking utensils.
- They sneezed, coughed, or somehow got respiratory droplets on you.

2. Determine the appropriate steps to take to reduce transmission.

- Your local health department will assess your specific situation and identify the steps you should take to reduce transmission. This may include closing a classroom or your facility.
- At a minimum, your local health department will recommend the classroom/facility be cleaned, and they may recommend that everyone in that classroom be quarantined for up to 14 days.
- The local health department may also recommend a 14-day quarantine for all other household members and close contacts.

If you cannot reach your local health department immediately:

- Monitor children and staff members for symptoms.
- Clean and disinfect the classroom or your facility. If possible, close off the area for at least 24 hours. If that is not feasible, wait as long as possible and then clean and disinfect your home or the facility following CDC guidance.
- Clean high touch surfaces more frequently.
- Clean hands more frequently.
- Wear a cloth face covering, whenever possible.

Local health departments typically respond within 24 hours. If you don't receive a response within 24 hours, reach out to them again.

3. Report the case to your licensing consultant.

4. Notify families and staff members.

- You are required to notify families of possible exposure to a communicable disease, like COVID-19. Your local health department can help you do this.
- Speak with your local health department before notifying families.
- Remember to maintain confidentiality consistent with the Americans with Disabilities Act
 (ADA) and other applicable federal and state privacy laws. Even if a family/student
 acknowledges and publicly discloses a positive test, childcare staff must not participate in
 discussions or acknowledge a positive test. LARA has posted a sample letter you can
 share with families at www.michigan.gov/michildcare.

*Set Guidelines for Returning to Care and Work

 Providers must cooperate with the local public health department to determine when children and staff members may return to care and work after testing positive for COVID-19.

If a Child or Staff Member Has a Fever or Cough.

- Follow your child and staff illness policy.
- The CDC recommends that children be fever free for 24 hours before returning to care (even if other symptoms are not present).

If a Child or Staff Member Has Symptoms of COVID-19 •

- If a child or staff member visits a healthcare provider and another cause is identified for the symptoms, the individual may return to care <u>ONCE</u> symptoms improve
- They have been fever-free for at least 24 hours without the use of medicine that reduces fevers.
- If another cause is not identified, the individual should be tested for COVID-19. If a test is not done, the individual should stay home until:
 - Has been fever-free for at least 24 hours without the use of medicine that reduces fevers <u>AND</u>
 - Other symptoms have improved AND
 - At least 10 days have passed since symptoms first appeared or the individual tested positive.

If a Child Tests Negative for COVID-19 or No Testing Was Done.

No testing was done.

- If a child visits a healthcare provider and another cause is identified for the symptoms, the
 individual may return to care once symptoms improve and they have been fever free for
 24 hours without the use of medicine that reduces fevers.
- If a test is not done, the individual should stay home until:
 - Has been fever free for at least 24 hours without the use of medicine reduces fevers AND
 - Other symptoms have improved AND
 - At least 10 days have passed since symptoms first appeared.

Tests Negative

• If a child was not exposed to COVID-19, a child may return to care based on a provider's illness policy.

- If a child was exposed to COVID-19 within the past 14 days current , <u>CDC guidelines</u> and <u>MDHHS guidelines</u> recommend they quarantine for at least 10 days, even with a negative test result and follow all instructions from the local health department.
 - After 10 days if no symptoms have developed, quarantine may end early, however continue to watch for symptoms until 14 days after exposure.
 - If symptoms appear, the child should be immediately isolated and contact the local health department or a health care provider.

*If a Child or Staff Member Tests Positive for COVID-19

Your local health department will tell you when the individual may return. In general, individuals must stay home until:

- Has been fever-free for at least 24 hours without the use of medicine that reduces fevers
 AND
- Other symptoms have improved **AND**
- At least 10 days have passed since symptoms first appeared or the individual tested positive.

While your child's physician may provide a written note stating that it is okay for him/her to return to child care because he/she is no longer contagious, we reserve the right to not allow your child to return to care until we feel your child is ready to participate in all activities including recess.

A physician MUST include a firm diagnosis for it to be accepted. .

Families are encouraged to have back-up child care plans if the child or a family member becomes ill or is required to self-quarantine due to possible COVID-19.

The CDC recommends people use the following guidelines to determine when to return to child care or work after showing symptoms of COVID-19. You can view the full recommendation from the CDC <u>here</u>.

Section 4 Social Distancing Practices Spacing, Movement and Access

When creating a plan to safely provide care during COVID-19, "less is best." Limiting group sizes, limiting the number of staff members caring for the children, and limiting the number of spaces a child is in during the day as much as possible. We acknowledge that social distancing is very challenging in a child care setting. These best practices identify steps we are taking to help.

Maintain Consistent Groups

Whenever possible, Holt Public will keep group sizes at or below 10 for our Midway children. If a school age center classroom has more than 10 children, Holt Public will attempt to spread out the classes across multiple rooms when possible. This is especially important in classes with more children (for example, preschool classrooms.) As much as possible, classrooms will include the same group of children and caregivers. With limited group sizes there may be only one teacher per room. If your child is experiencing behavior issues, such as running out of the room while care, we may need to visit and discuss if our program is the best placement.

In the center, consistent adults will remain with groups of similar aged children. It is particularly important that our infants less than six months stay separated from older children because they cannot be vaccinated against influenza.

Contact with external adults and between groups of children will be limited.

Cribs, cots and mats for children who rest will be at least six feet apart, when possible. Bedding will be placed in head-to-toe positioning.

Group size guidelines vary based on which phase of the Mi Safe Start plan your community is in.

Phase Group Size Guidelines

- **Phases 1-3** It is highly recommended that group sizes be kept to 10 or fewer children.
- Phases 4 Providers may operate at their licensed capacity and should continue to keep children and staff in consistent groups.
- Phase 5 Providers may operate at their licensed capacity and should continue to keep children and staff in consistent groups. Limit, or Eliminate, Use of Common Spaces

As recommended in the "physical space" section, one strategy to promote social distancing is to close our common spaces. Holt Public has also canceled field trips or special events that convene larger groups of children or families.

Holt Public will:

- Create standing spaces to eliminate bunching together when lining up to go from one location to another (i.e. outside).
- Stagger times for outdoor play and gym times. One classroom will be permitted to use the playground/gym at a time.
- Eliminate use of water and sensory tables. Playground equipment and frequently touched objects will be sanitized regularly.

• If a common space remains in use, staff will clean the space in between groups.

*Drop Off and Pick Up Times

In order for our staff to clean and disinfect properly our Holt Public child care programs will have new operating hours. **Our new program hours will be 7:30-5:30.**

Holt Public will set up hand hygiene stations at the entrance of our facility so children and staff can clean their hands.

Holt Public may consider staggering arrival and drop off times and plan to limit direct contact with parents to the extent possible at a future date as guidelines ease. Holt Public will have designated staff meet children at the front entrance check in station and escort them into and out of the building. These practices will be balanced with the impact on a child's transition time, the parent's work schedule, and the impact on instructional time. Parents should plan to allow additional time at drop off and pick up to allow for health screenings and child transitions.

At drop off:

If no one is standing at the check in station, please call the Community Ed office at 517-694-3411.

- At a later date, when guidelines have eased. Holt Public will limit the number of people dropping off or picking up a child to one adult.
- Please plan for extra time at drop off, while we prepare to get all children into the center safely.
- Staff will sign children in and out for attendance at drop off and pick up.

At pick up:

- Parents will call their child's classroom 15 minutes prior to arrival. If the teacher cannot be reached you will send a direct message to the teacher through your classroom app.
- The teacher will then work to gather your child's belongings and will change them back into their home shoes.
- The staff person will then walk your child out the check out station.
- Upon reentering the building, the staff will use hand sanitizer and then wash their hands again when reentering the classroom.
- Please plan for extra time at pick up, while we prepare to get your child ready to go home.

Late Pick Up

- Parents will be charged \$1.00 for every minute they are late past 5:30
- If picking up late becomes a pattern we will need to discontinue care.

Limit Visitors

Holt Public child care will limit non-essential visitors, to contractors. No volunteers will be allowed.

Transportation

Holt Public will cancel all scheduled field trips until further notice.

Section 5 Best Practices to Promote Hygiene

Child care providers are experts in limiting the spread of illness. Holt Public child care staff will reinforce the best practices we already use with children and staff members to limit the spread of COVID-19 and any other illness.

**Meals and Snacks

- Children and staff are required to wash hands before meals and snacks and should wash hands after meals and snacks.
- In centers, offer food in classrooms or an outdoor area, whenever possible.
- Rearrange seating to seat children six feet apart (when possible) and limit the number of children sitting together.
- Meals provided by the childcare should be delivered to classrooms in centers with disposable utensils, if possible.
- If a cafeteria or common space is used for meals or snacks, arrange seats six feet apart and only have one group of children in the room at a time.
- All lunches must now be provided by parents ready to serve. Staff will not prep lunches

*Hand Washing

Holt Public will reinforce regular health and safety practices with children and staff by washing hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, sneezing; going to the bathroom; and before eating or preparing food.

• Staff will continue to implement CDC handwashing guidelines. Wearing gloves does not replace appropriate hand hygiene. Do not have children wait in line for handwashing. Only have one child at a time at the sink.

- Soap and water are the best option, especially if hands are visibly dirty. If staff use hand sanitizer, due to no soap and water nearby, they will use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of their hands and rubbing them together until they feel dry.
- Holt Public staff will continue to teach children how to cover coughs with a tissue or sleeve.

*Cleaning and Disinfecting

Holt Public staff will continue to use <u>robust</u> cleaning protocols on at least a daily basis for items touched frequently. This may require designated cleaning staff.

- Frequently touched surfaces (including light switches, door handles, playground equipment, benches, bathrooms) should be cleaned and disinfected at least every four hours with either an EPA-approved disinfectant or diluted bleach solution.
- Common areas require at least a daily deep clean (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). Use these guidelines from the CDC for cleaning and disinfecting.
- Toys should be cleaned frequently, especially items that have been in a child's mouth.
 Some have recommended that toys should be cleaned after each child uses them
 (especially if a child has mouthed the toy). Although this is ideal, it is not a
 recommendation most childcare settings can implement due to time and staff resource
 limitations.
- Outdoor areas, like playgrounds, require normal routine cleaning, but do not require
 disinfection.
 - Do not spray disinfectant on outdoor playgrounds- it is not an efficient use of supplies and is not proven to reduce risk of COVID-19 to the public.
 - High touch surfaces made of plastic or metal, such as grab bars and railings should be cleaned routinely.
 - Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.

Holt Public will utilize disinfectant fogger <u>twice</u> a week in open buildings where children are in care.

*Items from Home

• We will limit the number of items brought into Holt Public child care sites because this can be a way to transmit the virus. For example, children should be brought into the center without car seats.

- Parents should leave a pair of shoes at the facility for each child. Those shoes will remain at child care for use the next day.
- Comfort items may be especially needed during this time of transition as they may reduce stress for children. To avoid these items coming into contact with many children, efforts will be made by staff for these items to be placed in a cubby or bin and be used at naptime or as needed. If possible, a comfort item should remain at the child care facility to avoid cross contamination from another site. Items should also be washed at least weekly.
- Soft materials (such as blankets, soft comfort items, or clothing) will be washed daily, at the facility.

Section 6: Use of Safety Equipment

Personal protective equipment (PPE) is necessary in many settings to keep individuals safe. Child care providers do not need to wear N95 or surgical masks, smocks, or face shields, however, other protective equipment is appropriate.

Masks or Cloth Face Coverings:

- Holt Public child care staff MUST wear cloth face coverings when with children/parents.
- Holt Public will provide cloth facing coverings to staff in necessary.

Below is an image for what is considered an acceptable mask. .

Mask Up, Mask Right



Need help getting a mask?

Residents can pick up a free mask from partner sites across the state, including most local DHHS offices and Community Action Agencies. Find a distribution site at Michigan.gov/MaskUpMichigan or call the COVID-19 hotline at 888-535-6136.



Masks or Cloth Face Coverings: For Children

• By Executive Order, Governor Whitmer has required all children be encouraged to wear masks now in child care settings based on age. Parents are required to send their child to care with a mask. Please send an extra mask with your child. Plastic face shields are not a replacement for cloth face coverings

We will be following these guidelines per the executive order:

Here's a full summary of the requirements:

| Phase | Environment | Staff | Children Ages 2-3 | Children Ages 4 | Children Ages 5 and up | Parents and visitors |
|-------|-------------------------------------|----------|-----------------------|-----------------------|------------------------------|----------------------------|
| 1-4 | Classrooms, Small Groups, and Homes | Required | Should be encouraged* | Should be encouraged* | Required | Required |

| Common spaces and Indoor Hallways | Required | Should be encouraged* | Required | Required | Required |
|--|-----------------|--------------------------|-----------------|-----------------|-----------------|
| Outside with social distancing | Not required | Not required | Not required | Not required | Not required |
| Transportation | Required | Required | Required | Required | Required |

Exceptions

- Age: Cloth face coverings should never be placed on young children under age 2.
- Medical condition: Anyone who cannot medically tolerate a cloth face covering, has
 trouble breathing, or is unable to remove the face covering without assistance should not
 wear a face covering.
- **Eating and drinking:** Cloth face coverings may be removed while eating and drinking.
- Sleeping: Children should never wear face coverings while sleeping or resting.
- Activity: Cloth face coverings are not appropriate during some activities:
 - When engaged in high intensity activities, like running, may not be able to wear a cloth face covering if it causes difficulty breathing. If unable to wear a cloth face covering, consider conducting the activity in a location with greater ventilation and air exchange (for instance, outdoors versus indoors) and where it is possible to maintain physical distance from others.

Gloves

Holt Public staff will wear gloves in a manner consistent with existing licensing rules (for example, gloves should be worn when handling contaminated items, changing diapers, 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.

Social Emotional Health While Wearing Face Coverings

Childcare providers will need to use strategies to prepare children for seeing their caregivers in cloth face coverings and attend to children's emotional responses to this new normal.

- One option is for caregivers to share a picture of themselves with and without the cloth face covering in advance of a child's return to care.
- Another option is to use pediatric appropriate cloth face coverings (for example, with child friendly designs or characters) made by community members who will donate them or produce them at an affordable price for providers.

The <u>American Academy of Pediatrics</u> provides tips for how to help children be more comfortable wearing cloth face coverings

Section 7 Partnering and communicating with families, staff, and local agencies

Holt Public staff will actively contact families to determine when children will return to care and discuss new policies and procedures.

Proactively Contact Families

Holt Public staff will reach out to families that have not been in care to:

- Determine when they will return to care.
- Discuss concerns or questions families have about returning to child care and how you can address them together.
- Discuss any health concerns/conditions which may make the child at higher risk for complications if exposed to COVID-19.

Holt Public staff would like to remind families that immunocompromised children and children with chronic respiratory conditions should only return to child care under the direction of their primary care provider.

It is recommended that children should be up to date with current vaccination schedules to protect from vaccine-preventable infectious disease outbreaks, including influenza. If vaccines have been delayed as a result of the stay-at-home order, families should have a plan with their child's medical provider for catch-up vaccinations in a timely manner.

Share New Policies and Expectations

Holt Public staff will review new policies and procedures with parents before a child returns to care and set clear expectations for when sick children must stay home and when they may return.

Support Children's Social-Emotional Needs

Holt Public will provide families and staff with resources to prepare for the transition back to child care.

Children should be prepared for the return to child care by parents and the child care provider.

Resources

- 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

Partner and Communicate with Staff Members

Proactively Contact Staff Members

Holt Public administration will reach out to all staff members to:

- Determine their return to work date.
- Discuss concerns or questions staff members have about returning to work and discuss how you can address them together.
- Discuss any health concerns/conditions which may make a staff member at higher risk for complications if exposed to COVID-19. Staff with underlying health conditions or at higher risk should consult with their primary care physician/medical provider before returning to work.
- Share the steps you are taking to make your facility as safe as possible.

Notify team members of face-covering expectations and provide them with the following information:

- The correct way to wear and remove a mask.
- How to introduce children to the concept of teachers wearing a mask.
- How to respond to children's questions about masks

Share Employees' Rights

Under Executive Order 2020-36, employees may not be discharged, disciplined, or otherwise retaliated against for staying home when he or she is at particular risk for infecting others with COVID-19. See the Executive Order for complete details on whether employees must be paid and when they must return to work.

Create a Staffing Plan

- Holt Public administration/directors will assess staffing needs based on projected enrollment, the need to limit exposure across groups, and the need to practice social distancing.
- Holt Public administration will have on-call staff subs to handle the potential need to quarantine staff or allow for longer absences from work than normal.

Train Staff

Holt Public administration/directors will train employees about COVID-19. This includes 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, steps employees must take to notify employers of signs and symptoms of COVID-19 and a suspected or confirmed diagnosis, and measures the employer and employees are taking to limit the spread of the virus (including PPE).

Holt Public administration will specifically:

- Ensure staff are provided training opportunities to better understand COVID-19 and care for children safely. These courses may help meet our training requirements:
- o Caring for children in care during COVID-19, from the federal Office of Head Start.
- o <u>Preventing and managing infectious diseases in Early Education and Child Care</u>, free from the American Academy of Pediatrics.
- Limit in person staff meetings to no more than 10 people. Maintain social distancing requirements.

Provide Resources to Support Children's Social Emotional Needs

Holt Public staff will work together to develop a plan to support the emotional reactions of children returning to child care. 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..

Provide Resources to Support Staff Members' Social Emotional Needs

To ensure the well-being of the children, it is also imperative to ensure the well-being of Holt Public 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, child care providers may have worries about their own physical or psychological health, and the potential risk to their family members at home. Young children internalize the stress of the adults who care for them, so it is vitally important to provide support and services to the child care providers to ensure their emotional well-being.

Strategies to "help the helpers" can include professional development supports such as access to behavioral health consultation, and reflective consultation, which can help providers remain emotionally available, sensitive, and responsive to the needs of the infants and young children they care for.

- Ingham County Health Department Contact Person: Tamara Jones
- Holt Public HR: Peter Tresize

Email: peter.trezise@hpsk12.net Phone number: 517-694-6392

• LARA Childcare Licensing Consultant: Cheryl Gillespie

RESOURCES

www.michiqan.gov/coronavirus Go to "Frequently asked questions" and click on "Childcare"

Center for Disease Control and Prevention: https://www.cdc.gov/

American Academy of Pediatrics: https://services.aap.org/en/about-the-aap/

State of Michigan Licensing and Regulatory Affairs (LARA) Guidelines for Safe Child Care Operations During COVID-19 https://www.michigan.gov/lara/

This plan was made with guidance from LARA, CDC, MI Safe Schools Roadmap, MI

Department of Health and Holt Public Schools.

These guidelines are subject to change as we know more from the federal government and Ingham County