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## **Adrian Community Preschool COVID Response & Preparedness Plan**

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### **Introduction**

#### *Our Commitment to Health & Safety*

Adrian Community Preschool 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.

### **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. Rearranging classroom areas to seat children as far apart as reasonably possible and limiting the number of children sitting together.
3. Using touchless trash cans to provide a hands-free way to dispose of tissues and contaminants.
4. 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).
5. Before re-opening we will ensure all water systems and drinking fountains are safe following CDC guidelines.

Other policies related to our physical space include:

- Separate small trash cans for used tissues.

### 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.

Other policies related to toys and materials include:

- Each child will have an individual set of art materials including crayons, scissors, glue, etc to minimize shared materials.

### Mealtimes

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

1. We will modify our family-style meal service and have staff plate each child's meal so that multiple children are not using the same serving utensils.
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.

## 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.

## 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 persistent cough, fever, difficulty breathing, chills, change in smell or taste, diarrhea, and/or vomiting.

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

The Director will provide and collect staff symptoms and information via a daily written survey. The Director will also take this survey daily.

Prior to children arriving for the day, staff will record each other's temperatures on the written survey.

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

Parents will complete an online health screening for their child via the Remini App. This information will be kept in the child's file to protect privacy.

Upon arrival, each person will be required to get their temperature taken by a staff member before entering the building (weather permitting), or right inside the front door before signing their child in.

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

Kristen Howard, Director  
517-263-8676  
kristen.howard@acpreschool.org

## Daily 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 the building.

Each child's temperature will be taken by program staff. The following staff members will be responsible for temperature checks:

Teachers, Director, Foster Grandparent, Board Member

To minimize potential spread of illness, staff will:

1. wash their hands (using soap and water for 20 seconds or using a hand sanitizer with at least 60% alcohol) between checks.
2. disinfect non-disposable thermometers between uses (e.g., cleaned with an alcohol wipe or isopropyl alcohol on a cotton swab).
3. wear a face mask while taking the child's temperature.

4. wear disposable gloves, which will be changed before the next check if physical contact with the child occurred.

## Responding to Symptoms and Confirmed Cases of COVID-19

### *Responding to COVID-19 Symptoms On-Site*

If a child or staff member has a temperature above 100.4 degrees and/or symptoms such as persistent cough, difficulty breathing, chills, diarrhea, or vomiting, 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 and designated staff will wait in the following safe, isolated location: Motor/storage 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: Staff Office

## Reporting Exposure

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: (517) 264-5243*

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

If a staff member or child has a fever OR a cough (but no other symptoms):

- Staff will be REQUIRED to wear a mask if a cough is present with no other symptoms.
- Staff will be REQUIRED to stay home if they have a fever and no other symptoms until fever free (below 100.4) without medication for 72 hours before returning.
- Children with a cough and no other symptoms will be asked to wear a mask.
- Children will be REQUIRED to stay home if they have a fever and no other symptoms until fever free (below 100.4) without medication for 72 hours before returning.

If a staff member or child exhibits multiple symptoms of COVID-19, possible exposure is expected, OR an **individual tests positive for COVID-19**, the individual must stay home until:

They have been fever-free for at least 72 hours without the use of medicine that reduces fevers AND other symptoms have improved AND at least 10 days have passed since their symptoms first appeared.

As per Executive Order 2020-36, if staff or their close contacts have possible or confirmed cases of COVID-19, staff will be allowed to remain home without penalty of discharge, discipline, or other retaliation.

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:

- Provide an adequate list of substitute teachers and/or Board Members to fill in.

- Maintain lower than required staff to children ratios on a regular basis.

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

## Maintaining Consistent Groups

During this time, we plan to reduce our three-year-old program class size, with a maximum of 15 students; and our GSRP class size with a maximum of 18 students.

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 each day.
2. Canceling or postponing field trips and special events that convene larger groups of children and families.
3. Limiting non-essential visitors, volunteers, and activities including groups of children or adults.
4. Any in-person staff meetings will be limited to 10 people and social distancing requirements will be followed as much as possible.

## Visitor Policy

We plan to limit the number of individuals in the classroom by eliminating non-essential visitors. However, pre-approved visitors including LISD employees, Board Members, and others will be necessary on occasion. Visitors will be subject to temperature checks and a health screening upon arrival. Per Executive Order 2020-164, visitors will be required to wear facial coverings, following the same guidelines outlined in this plan for staff members.

## 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. We will implement staggered drop-off and pick-up times to limit contact among parents.
3. We will have a hand hygiene station at the entrance to our building so children and parents can clean their hands.
4. We will provide hand sanitizer or wipes at the sign-in station for parents/guardians to clean pens/keypads between each use.
5. We ask that parents avoid congregating in a single space or a large group.
6. We will ask parents and other visitors to wear masks while in the building.

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

- Parents will utilize a digital sign in program.
- Curbside/outdoor drop-off and pick-up

## 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 should assist children with hand washing (especially infants who cannot wash hands alone) and use of hand sanitizer to ensure proper use and prevent ingestion.
- 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

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

- Daily cleaning/disinfecting of high-touch surfaces (e.g., sinks, toilets, light switches, door knobs, counter and tabletops, chairs).
- Normal routine cleaning of outdoor spaces, with special attention to high-touch plastic/metal surfaces (e.g., grab bars, railings).
- Regular cleaning of electronics (e.g., keyboards, parent/staff check-in kiosks) according to manufacturer's instructions.
- Ensuring staff wear disposable gloves to perform cleaning, disinfecting, laundry, and trash pick-up, followed by hand washing.
- Use of a schedule for regular cleaning and disinfecting tasks.
- Cleaning dirty surfaces using detergent or soap and water prior to disinfection.
- Use of CDC-recommended disinfectants such as EPA-registered household disinfectants, diluted bleach solution, and/or alcohol solutions with at least 70% alcohol
- 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:

- We will clean toys frequently, especially items that have been in a child's mouth.
- 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").
- We will clean toys with soapy water, rinse them, sanitize them with an EPA-registered disinfectant, rinse again, and air-dry.
- We will clean toys in a dishwasher when applicable.

## Safety Equipment

### *Face Mask/Coverings for Staff*

Per Executive Order 2020-164, Staff members are required to wear masks indoors, unless the region moves to Phase 5 of the Michigan Safe Start Plan, though masks are strongly recommended.

*Non-medical grade face coverings will be available to staff upon request.*

### *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:

Executive Order 2020-164 encourages the use of face masks for children in child-care centers, though it is not required. Parents are welcome to send their child in a face covering if they so choose.

Children with a cough (no other symptoms that would require them to stay at home) will be asked to wear a mask to protect staff and other children.

*Non-medical grade masks will be provided to adults and children in need.*

## 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 families and staff is:

Kristen Howard

### *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

### *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 supports necessary during this time of re-integration, 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 supports and services to ensure the emotional well-being of our staff.