



Los Alamitos Child Development Center 2020-2021 School Opening & Safety Plan



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MESSAGE FROM CDC COORDINATOR



Dear Los Alamitos CDC Families,

First off, I hope this communication finds you and your family safe and healthy. The past few months have presented many challenges for us all. I know many of you have faced a number of disruptions in your home and work life. I hope that with the reopening of our program, our center and teachers can provide a return to some sense of normalcy for you and your family in an otherwise very extraordinary time.

Since the onset of the stay-at-home order in March, we have been working closely with the California Department of Education - Early Learning and Care Division and the California Department of Social Services - Community Care Licensing, which provide preschool & childcare programs guidance and direction on how to safely reopen our program. The CDC's number one priority continues to be the health and safety of the children and staff at our center. Every decision, policy and procedure that is being implemented is based on recommendations from those agencies as well as from our local public health department.

Attached you will find our 2020-2021 CDC Reopening and Safety Plan. We have full confidence that with our reduced class sizes and ratios, daily health screenings of staff and children, enhanced hygiene practices, intensified cleaning and disinfection protocols, as well as COVID-19 exclusion policies we can reopen our program safely and responsibly.

In closing, we are extremely eager and excited to be back with our CDC family. We thank you for your patience and continued support during this unusual time, and we look forward to partnering with you to keep our children, families, and staff safe and healthy.

Warmly,

Jean-Mari Dagarin, Coordinator
Los Alamitos Child Development Center



The health and safety of our children, staff, and families is our top priority. When our preschool classrooms re-open for the 2020-2021 school year, our protocols and classroom environments and routines will be different than in previous years. The CDC's plan to re-open our program is based on guidance from public health officials as well as the agencies that govern our preschool program (CA Community Care Licensing - Department of Social Services as well as CA Department of Education - Early Learning & Care Division. As guidance evolves, this document will be revised as necessary.

SUPPLIES & PROTECTIVE EQUIPMENT

The following items are being provided for staff, children and classrooms:

- Cloth disposable masks and clear face shields for staff & children
- Hand sanitizer dispensers at each entrance/exit
- Small hand sanitizer bottles for outside (children will never have direct access to hand sanitizer - adults will provide it to children)
- Disposable gloves
- Disinfecting wipes
- Contactless thermometers - 2 per preschool classroom
- Supplies for 3 sanitation stations - toys/materials will be sanitized. Toys, manipulatives, shared materials will be sanitized prior to being introduced back into the classroom environment and cleaned and sanitized at the end of each day.
- 20 second handwashing timers for each sink in every preschool classroom
- Smocks for each CDC staff member
- Temporary shade structure to provide additional outside space for each preschool patio

SCREENING AT HOME

- Families are **required** to take temperatures and monitor their child for symptoms daily prior to arriving at preschool. Anyone with a fever of 100.4, without fever-reducing/pain relief medication, or higher should not come to preschool.
- Parents and staff are **required** to self-screen and screen their children for respiratory symptoms such as cough and shortness of breath prior to coming to school each day. Children and adults experiencing those symptoms should not attend preschool or come to work.
- CDC staff members are **required** to have their temperatures taken prior to beginning work. If staff members are experiencing symptoms, they should stay home and contact the CDC Director and Human Resources.

OTHER SAFETY CONSIDERATIONS

- Staff members will complete mandated COVID-19 on-line and preschool specific training on new protocols and guidelines.
- CDPH guidelines will be followed for cleaning, disinfection, and classroom ventilation
- Common touch surfaces will be cleaned regularly - countertops, door handles, restrooms, students tables/chairs.
- Children will have their own bucket of supplies/materials kept in their "pod"/"house".
- Children will be asked to bring their own personal water bottle or have an option to use a disposable cup at the water fountain.
- Playground equipment will be regularly inspected and cleaned.

FACE COVERING & PERSONAL PROTECTIVE EQUIPMENT

Following the California Department of Public Health's (CDPH) Guidance, the staff is required to wear face coverings. Also, children 2 years old to 2nd grade are strongly encouraged to wear face coverings.

While the CDC will not send a child home if they refuse to wear a face covering, our teachers will encourage and work with the child to become comfortable wearing a face mask throughout the day. If at first, the child is not comfortable wearing a face mask, the teacher will provide the child with a clear face shield with the idea of transitioning to the mask once the child is comfortable.

It is the expectation that between now and the time the CDC reopens, parents begin the process of getting their child familiar with wearing a mask. Face masks for both the parent and child are required for the transition at drop off and pick up.

Personal Protective Equipment (PPE) will be provided to staff and children, but it is highly encouraged for children to bring their own face covering that can be taken home each night and laundered.

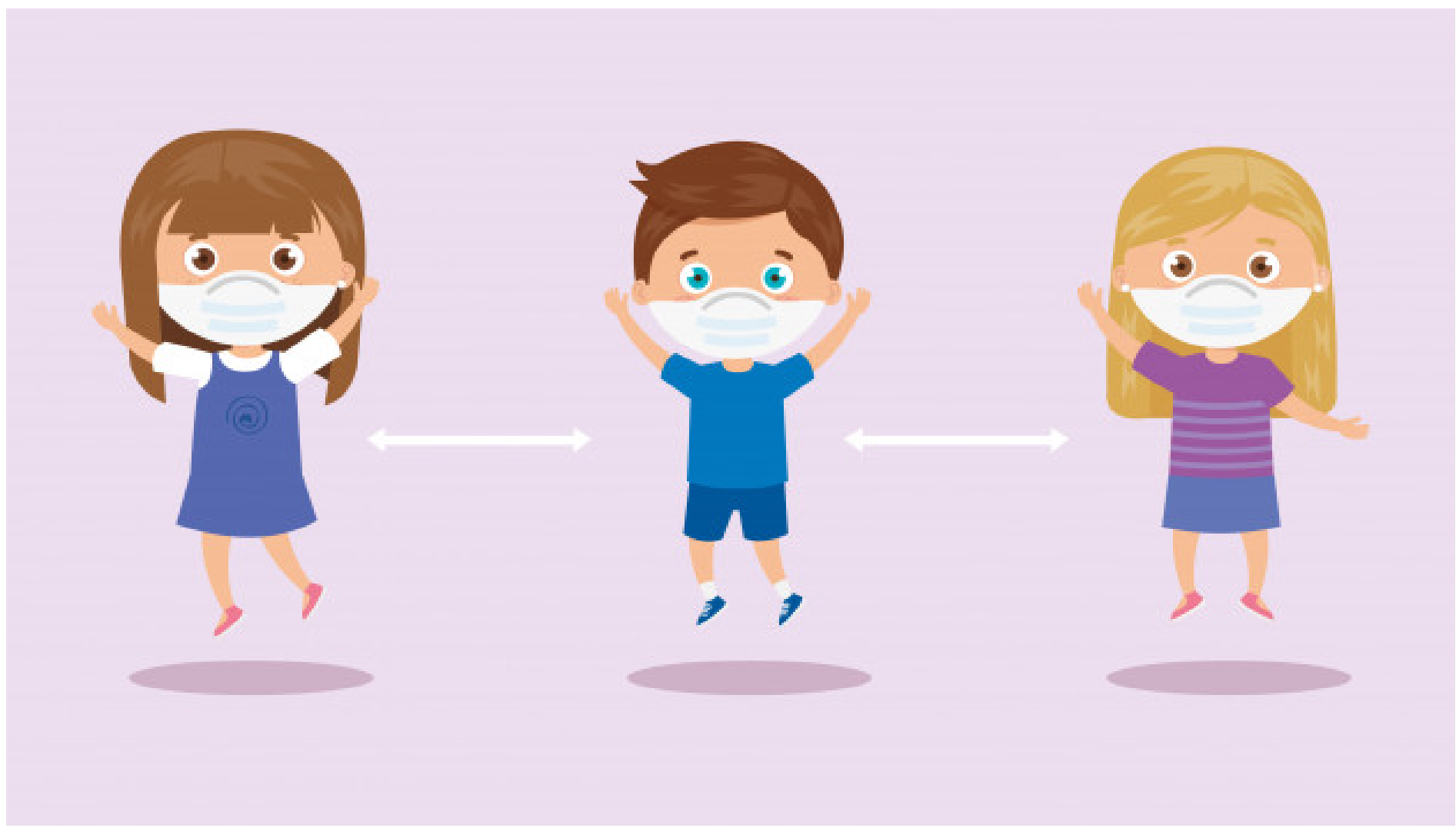
- Personal face covering will be allowed in compliance with staff dress code policies.
- CDC staff will receive a reusable face shield.
- Gloves will be worn by CDC staff during drop-off, pick-up cleaning and sanitizing surfaces/toys/materials, conducting first aid, serving snack/lunches, and supporting children toileting, and otherwise necessary.

DROP OFF & PICK UP PROCEDURES

- Parents will sign-up for a specific time to drop their child off and pick their child up through an on-line application.
- Parents will drop off outside of the classroom at a designated location. Site-specific dropoff information will be communicated at the parent orientation.
- Contactless sign-in with built-in health check Card will be completed by families prior to arrival time of scheduled drop-off. Details to come at parent orientation.
- Children will have temperatures taken at drop-off and periodically throughout the day as needed.
- Children will keep their shoes outside on the classroom patio and only wear socks in the classroom. Shoes will be put back on for outdoor activities.
- Parents will not enter the classroom at any time unless pre-arranged with the CDC Coordinator. Only children and staff will have access to the classroom to minimize exposure.
- Children will hang their backpacks up outside (backpacks will include change of clothes, sheet, and blanket). Backpacks will be taken home each day and the sheet and blanket will need to be laundered nightly.
- Children will wash their hands upon entering the classroom and will go to their designated "pod" or "home" in the classroom.
- Parents will arrive wearing a mask at drop off and to pick up their child at a selected time. It is highly encouraged that the parent who drops off is the same one to pick up the child up.

Implenting Social Distancing in Preschool

Social distancing will limit the spread of the virus. All CDC classrooms will adhere to the following protocols to maintain social distancing as much as possible:



- Reduced class sizes and teacher to child ratio. All CDC class sizes have been reduced from 24 to 16 with a ratio of 1 teacher to every 8 children.
- Preschool will only be offered in a full-day model unless your child is enrolled in the state preschool half-day program. This will limit exposure to different groups of children entering the class.
- Children will be grouped into two groupings of 8 for activities such as toileting, group meetings, snacks/lunch, and outdoor playtime.
- Groups will be designated to the same restroom or stall in the classroom to limit the amount of exposure. For example, CDC classrooms that have two restrooms will have one assigned to each group.
- Group meetings and meals will be outside, weather permitting while implementing 6 feet distance between children.
- Only children and staff can enter the classroom. Parents/caregivers should not enter the classroom and will conduct drop-off and pick-up outside of the classroom. Each classroom will have a mandatory parent orientation via Zoom where specific drop-off locations will be discussed.
- Drop-off and pick-up times will be staggered. An online system of reserving your drop-off and pick-up time will be implemented. Please maintain social distancing during drop-off and pick-up.
- Children will nap at least 6 feet apart with head to toe and toe to head direction between children.
- Children will have their own “pod” or “house” in the classroom that will be their designated area in the classroom space where they keep their personal supplies and where they nap (see Section 6).

Staff will be asked to practice social distancing, including but not limited to the following:

- When working indoors or outdoor areas
- Before and after work shift
- Coming and going from vehicles
- Entering, working, and exiting physical buildings or other structures
- During breaks and lunch periods





**CALIFORNIA DEPARTMENT OF PUBLIC
HEALTH - ACTION GUIDELINES
(See Appendix II)**

Child or staff with COVID-19 Symptoms

(e.g., fever, cough, loss of taste or smell, difficulty breathing):

- Send home student or staff immediately, place in classroom designated isolation area while awaiting pick-up
- Recommend COVID-Testing
- If no test, a doctor’s note is needed to return
- Classroom remains open

Child or staff with close contact to a confirmed COVID-19 case:

- Send child or staff home immediately; place in classroom designated isolation area while awaiting pick-up.
- Recommend COVID-Testing
- If no test, they are required to self-quarantine for 14 days
- Classroom remains open
- Consider classroom community notification of a known contact

Staff or student with confirmed COVID-19 case infection:

- Notify the local public health department
- Isolate case and exclude from class for 14 days from the symptom onset or test date
- Classroom community notification of known case
- 1 confirmed case in a classroom will require mandated 14 day quarantine of all staff and children
- Recommend testing of contacts, prioritize symptomatic contacts
- If no test, doctor’s note is required to return after 14 day quarantine and symptom free
- Disinfection and cleaning of classroom and primary spaces where case spent significant time

Staff or child tests negative after symptoms:

- Staff or child may return to school 3 days after symptoms resolve
- Classroom remains open

CLOSE CONTACT:

A close contact is defined as a person who is less than 6 feet from a case for more than 15 minutes without wearing a face covering.

COHORT:

A cohort is a stable group with fixed membership that stays together for all courses and activities (e.g., lunch, outside play time) and avoids contact with other persons or cohorts.



Our top priority at the CDC is the health and safety of our children and staff. Our classrooms have been thoroughly cleaned and disinfected and our CDC staff is committed to adhering to all necessary safety precautions as we re-open our classrooms. When preschool resumes the following cleaning steps will be followed:

ROUTINE SCHEDULE FOR CLEANING, SANITIZING & DISINFECTING

- Food prep areas & tables will be cleaned and sanitized before and after each use.
- Toilets and sinks will be cleaned and sanitized after each use.
- Countertops will be cleaned after each use and cleaned & sanitized daily at the end of each day.
- Toys, manipulatives, and shared materials will be sanitized prior to being introduced back into the classroom environment and cleaned and sanitized at the end of each day.
- Door & cabinet handles will be sanitized periodically throughout the day and cleaned and disinfected at the end of each day.

USE OF DRINKING FOUNTAINS

Children will no longer have access to drinking fountains. However, water will always be readily available either by filling up a disposable cup with water or bringing their own personal water bottle, that is labeled with their name on it and can be refilled throughout the day.



HANDWASHING

Handwashing is strongly encouraged as one of the most effective ways to prevent the spread of any biological pathogen, including COVID-19. Only when handwashing isn't possible will hand sanitizer be used.

- Wash hands thoroughly with soap and water for at least 20 seconds. Teachers will have a system in place to ensure each child will wash their hands for at least 20 seconds (use of a timer, a song, etc.) and thoroughly dry hands.
- Hand sanitizing dispensers will be placed at each entrance/exit for adult use.
- Hand sanitizer bottles will be available to teachers to dispense to children.
- Hand sanitizer will be out of the reach of children at all times.

INDOOR AIR QUALITY

Indoor air quality is essential to providing a safe and comfortable environment for our preschool classrooms. Proper temperature and humidity levels can help slow down the reproduction of viruses and bacteria. Los Alamitos Unified is ensuring proper preventative maintenance is being performed on all HVAC units and is changing filters on a regular basis and providing adequate air filters.

- All CDC preschool classrooms will be provided baby gates for all doors that lead outdoors to increase the airflow in the classroom. In addition, all classrooms that have the ability to open windows will keep windows propped open as weather permits.

CDC OFFICE STAFF - ROLES & CONTACT INFORMATION OFFICE NUMBER- 562-799-4585

Jean-Mari Dagarin - CDC Coordinator
jdagarin@losal.org, ext. 80630

- Program oversight

Jennifer Hollandsworth - Child Development Program Technician
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- Manages enrollment/registration & program information

Julie McMahon - School Readiness Nurse
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- Provides health & vision screenings
- Provides guidance to teachers and parents regarding health concerns for children
- Provides parent and child education

Tristan Jorden - School Readiness Nurse
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- Provides health & vision screenings
- Provides guidance to teachers and parents regarding health concerns for children
- Provides parent and child education

Kandis Aceves - School Readiness & Community Liaison
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- Provides staff and parent education
- Provides resources to families
- Conducts outreach into the community

Registration & Tuition Payments

- Due to the current social distancing requirements, we ask that for completion of enrollment and registration to please call or email Jennifer Hollandsworth prior to coming to the office in person. Much of the registration can be completed via email.
- Tuition payments must be paid either by mailing a check to our office or paying on-line. To avoid a lot of traffic in our office, please do not drop tuition payment off in person. Specific information regarding on-line payments will be provided at the parent orientation.

Mandatory Parent Orientation

ALL parents, new and returning are required to attend a parent orientation held via Zoom prior to starting with the CDC.



What do I do if my child is experiencing COVID-19 symptoms while at home?

If your child is experiencing COVID-19 symptoms, please keep him/her home and contact your child's health care provider. Please contact the CDC office to report your child's absence and reason for absence. The CDC School Readiness Nurses will be tracking all illnesses COVID-19 related.

What if someone in our household tested positive for COVID-19?

If someone in your household tested positive for COVID-19 and is currently under quarantine or self-isolation, your child should follow the guidelines from the Orange County Health Care Agency (OCHCA) on how long to remain at home and when to return to school.

What happens if a child demonstrates COVID-19 symptoms while at school?

If a child becomes ill during the school day, the following steps will be taken:

- The child will be taken to the designated solation area in the classroom where temperature and symptoms will be evaluated; the child will remain in the isolation area until they are picked up by a parent or guardian.
- The CDC Coordinator & School Readiness Nurses will work with the District COVID-19 response team to coordinate with OCHCA regarding the suspected case and all confirmed cases in the classroom. The CDC office staff will coordinate the response to all possible and confirmed COVID-19 cases with OCHCA, who will assist the CDC in developing a course of action for a possible classroom dismissal for up to 3 days.

What happens if a positive COVID-19 case occurs in a CDC classroom?

For any positive COVID-19 case the following protocol will be applied, in accordance with state and local laws and regulations. CDC Coordinator will notify the District office designee with the following information:

- Name of the person confirmed
- Date of potential exposure
- Date of test
- Last date in CDC classroom
- Names of individuals who had physical contact with an infected person or spent 15 minutes or more within 6 feet of distance.

The CDC Coordinator, along with the District Office designee, will coordinate a response with OCHCA. After receiving direction from OCHCA, the CDC Coordinator will only notify the parents of the children and staff who have been potentially exposed to COVID-19 and provide health recommendations and guidance from OCHCA.

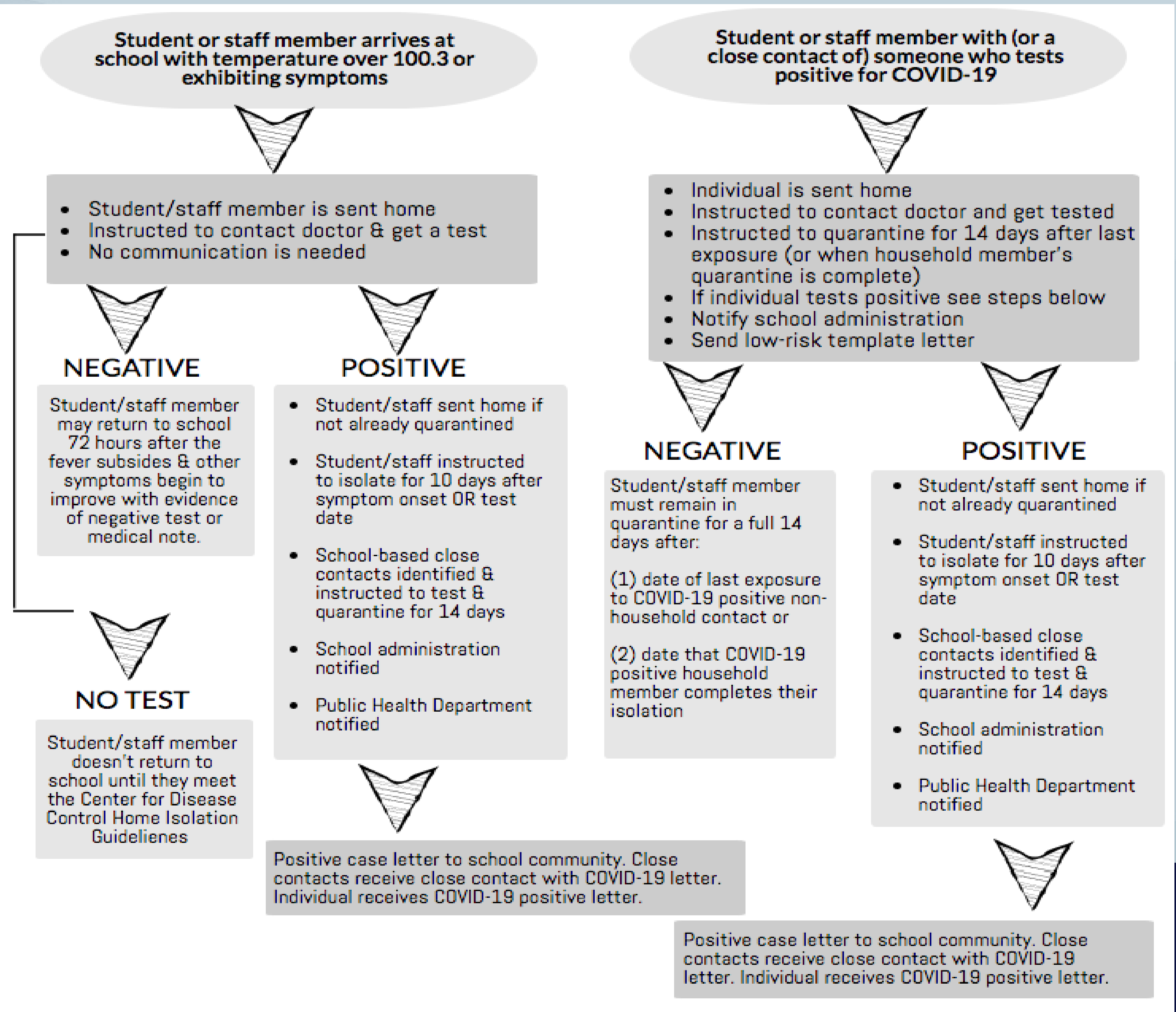
A positive COVID-19 case may result in the closure of the CDC classroom for a two week period. The closure will occur after consultations with OCHCA.

The classroom impacted will receive extensive cleaning and sanitation following District Maintenance & Operations guidelines.

How are others notified they were in contact with an individual who tested positive for COVID-19?

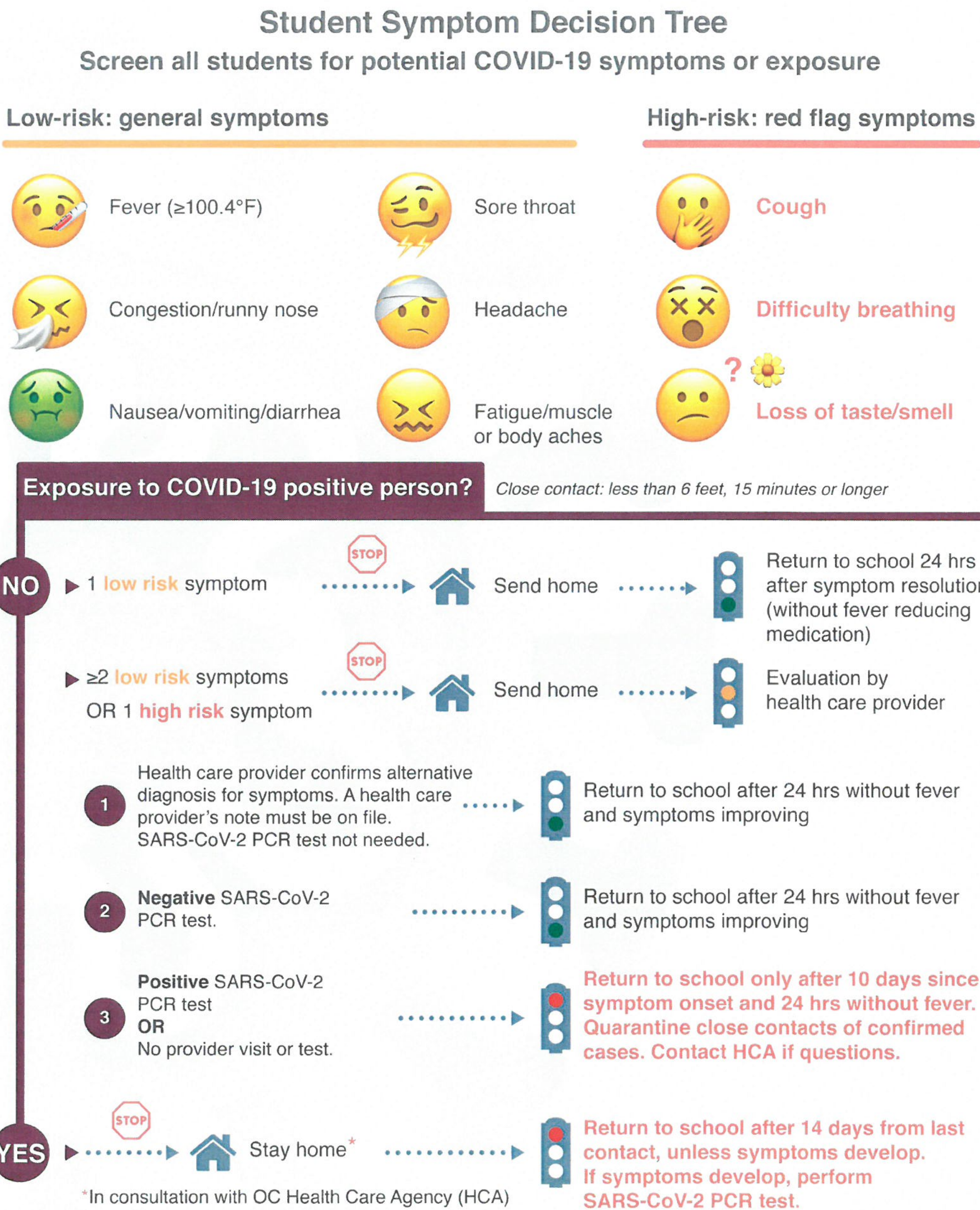
The CDC and the District work with OCHCA to determine close contacts and low-risk contacts. Individuals identified by OCHCA are contacted via email that outlines specifics regarding how long the individual must quarantine, steps to mitigate contracting the virus, and list symptoms associated with the virus.

All HIPPA notifications and guidelines for privacy will be followed.



Orange County Health Care Agency (OCHCA) is responsible for clearance of individual infected with COVID-19, including students. After a positive diagnosis is made, students are expected to be in isolation for at least 14 days after the test, and potentially longer if they continue to remain symptomatic.

Students may not return to school until they have been cleared by OCHCA; school health clerks will work directly with families when they are cleared by OCHCA and ready to return to school.



This care pathway was designed to assist school personnel and is not intended to replace the clinician's judgment or establish a protocol for all patients with a particular condition. Diagnosis and treatment should be under the close supervision of a qualified health care provider. Guidance might change 09-12-20



COVID-19 UPDATE GUIDANCE: Child Care Programs and Providers

July 17, 2020

covid19.ca.gov



OVERVIEW

As stay-at-home orders are lifted for multiple industries to promote California's economic recovery, the need for child care and other supports for working families will increase. Every child care program must have a plan in place to minimize the spread of COVID-19 and to ensure the safety of children, providers, and families. As programs begin to reopen and other programs transition from emergency child care for essential workers to enhanced regular operations, all providers must apply new and updated policies and requirements and must update their emergency preparedness plan.

Social distancing with young children is a challenging effort. However, the recommendations set forth aim to keep children and providers safe and healthy, while ensuring children are in a nurturing and responsive environment. Parents may also be concerned about the safety of returning children back to care. It is important to maintain frequent communication with families about the policies and practices implemented in programs to keep everyone safe. This ongoing communication will aid in supporting young children with this new transition and social and physical distancing practice.

The state recognizes this health crisis is a fluid situation and is coordinating joint efforts with state and local agencies to provide support, as well as current information and guidance that is responsive to questions and suggestions from providers, families, and stakeholders. Child care providers should continue to monitor updated guidelines and information posted at <https://covid19.ca.gov>.

These guidelines and considerations are based on the best available public health data at this time, and the practical realities of managing a child care program; as new data and practices emerge, the guidance will be updated.

The state has provided funding and materials to support child care programs to access cleaning supplies and essential protective gear, such as masks. Please contact your [local child care resource and referral agency](#) to learn more about what resources are currently available.

The California Department of Social Services (CDSS) worked in collaboration with the California Department of Education (CDE) to develop this guidance.

Essential Protective Equipment and Supplies

Items	Child Care Workforce	Children
Face Coverings*	YES	Never place face coverings on babies or children under 2 because of danger of suffocation Children aged 2 years and older should wear face coverings, especially when indoors or when a six-foot physical distance from others cannot be maintained.
Gloves	YES, for tasks such as serving food, handling trash, or using cleaning and disinfectant products	NO
Hand Sanitizer Should contain at least 60% ethyl alcohol (preferred) or at least 70% isopropyl alcohol (a neurotoxin and eye irritant). WARNING Do not use any products that contain methanol	YES, OPTIONAL Note that frequent handwashing is more effective than the use of hand sanitizers	May be used under adult supervision only and must be kept out of children's reach. Call Poison Control if consumed: 800-222-1222 Note that frequent handwashing is more effective than use of hand sanitizers. Sanitizer must be rubbed into children's hands until completely dry. Hand sanitizer is not recommended for children under 24 months.
Disinfectant Cleaning Products	YES Provide training and required protective equipment per manufacturer's recommendations. Must be kept out of children's reach.	NO

*Masks or face shields may also be worn. Face coverings are strongly encouraged for young children between two years old and second grade, if they can be worn properly. A face shield is an acceptable alternative for children in this cohort. Note that local guidance may apply. Please consult recommendations from the local or county health department.

The Healthy Schools Act requires that anyone using disinfectants at child care centers complete annual California Department of Pesticide Regulation-approved training. Online training can be found by going to <https://apps.cdpr.ca.gov/schoolipm/>. This does not apply to family child care homes.



Planning

- Have plans in place to protect and support staff, children, and their family members who are at higher risk for severe illness.
- Establish plans for sharing information and guidelines with parents and caregivers in their preferred language.
- Train all staff and communicate with families on the following:
 - Enhanced sanitation practices
 - Physical distancing guidelines
 - [Proper use, removal, and washing of face coverings](#)
 - Personal hygiene
 - Screening practices
 - COVID-19 specific exclusion criteria.
- Implement the necessary processes and protocols when a workplace has an outbreak, in accordance with CDPH guidelines.
 - Investigate the COVID-19 illness and determine if any work-related factors could have contributed to risk of infection. Update protocols as needed to prevent further cases.
 - Update protocols as needed to prevent further cases. See the CDPH guidelines, *Responding to COVID-19 in the Workplace*, which are incorporated into this guidance and contain detailed recommendations for establishing a plan to identify cases, communicate with employees and other exposed persons, and conducting and assisting with contact tracing.



Cleaning

- Introduce fresh outdoor air as much as possible, for example by opening windows. When cleaning, air out the space before children arrive; plan to do thorough cleaning when children are not present. If using air conditioning, use the setting that brings in fresh air. Replace and check air filters and filtration systems to ensure optimal air quality.
- Implement procedures to frequently [clean and disinfect](#) all high-touch surfaces, such as sink knobs, toilet handles, tables, door handles. (Some programs have one designated staff responsible for routinely cleaning, sanitizing, and disinfecting the site.)
- Designate a container for toys that need to be cleaned, sanitized, or disinfected before being introduced back into the classroom environment.
- Have multiple toys and manipulatives accessible that are easy to clean and disinfect throughout the day or provide individually labeled bins with toys and belongings for each child. Toys that may be put in a child's mouth should be cleaned and sanitized. Ensure toys that are difficult to clean (e.g. soft toys) are either removed from the classroom or carefully monitored for use by individual children only.
- When choosing cleaning products, use those approved for use against COVID-19 on the [Environmental Protection Agency \(EPA\)-approved list "N"](#) and follow product instructions.
 - To reduce the risk of [asthma related to disinfecting](#), programs should aim to select disinfectant products on the N list with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid) as recommended by the US EPA Design for Environment program.
 - Avoid products that mix these ingredients with peroxyacetic (paracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthma.
 - Use disinfectants labeled to be effective against emerging viral pathogens, following label directions for appropriate dilution rates and contact times. Provide employees training on [the chemical hazards](#), manufacturer's directions, proper ventilation, on Cal/OSHA requirements for safe use and as required by the Healthy Schools Act training (for child care centers only).
 - Workers using cleaners or disinfectants must wear gloves, eye protection, and other protective equipment as required by the product instructions.

- All products must be kept out of children's reach.



Hygiene

- Implement and enforce strict [handwashing guidelines](#) for all staff and children. Wash hands for 20 seconds with soap, rubbing thoroughly after application, and use paper towels (or single use cloth towels) to dry hands thoroughly. It may be helpful to sing a 20-second song while children wash.
- Use bathroom time as an opportunity to reinforce healthy habits and monitor proper handwashing.
- Teach children to avoid [contact with one's eyes, nose and mouth](#), and use tissue to wipe their nose and to [cough/sneeze](#) inside their elbow. Model and practice handwashing before and after eating, after coughing or sneezing, after playing outside, and after using the restroom.
- Discontinue brushing teeth during class.
- All personal items should be labeled and kept in a separate bag to ensure personal items are separate from others. Personal toys and blankets should either be sent home with the family each day or washed daily by the provider.
- Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. Keep each child's bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Cots and mats should be labeled for each child. Bedding that touches a child's skin should be cleaned weekly or before use by another child.



Arrival Procedures

If a parent/caregiver is entering the classroom, ask them to wash their own hands and assist in washing the hands of their children before dropping off, prior to coming for pick up, and as soon as they get home.

- Ask parents/caregivers to meet at the facility entryway for pick-up and drop-off of children whenever possible and to be as brief as possible.
- If parents/caregiver must enter, ask them to enter and exit the room one person at a time to allow for social and physical distancing. Consider asking them to wear face coverings.
- Ask parents/caregivers to bring their own pens when signing children in and out. When that is not possible, collect pens immediately after a single use, deposit them in the cleaning area, and provide a sanitized pen.

- Install hand sanitizers, out of the reach of children, near all entry doors and other high traffic areas.
- Take steps to reduce contact between children and adults, including other children's parents during pick-up/drop-off, classroom visits, volunteers.
- If possible, the same parent/caregiver should drop off and pick up the child every day, avoid designating those at high risk.
- Consider staggering arrival and drop off times.
- Consider designating a staff member from each class to escort in or out of facility (if parent/caregiver are comfortable with this option) and signing their child in and out for arrival.



Health Screening

- Providers must implement screening procedures for all staff and children before they enter the facility. Ask all individuals about [COVID-19](#) symptoms within the last 24 hours and whether anyone in their home has had COVID-19 symptoms or a positive test. Exclude anyone who has an affirmative response on any of these points.
- Document/track incidents of possible exposure and notify local health officials, staff, and families immediately of any possible case of COVID-19 while maintaining confidentiality as required by the Americans with Disabilities Act (ADA).
- Conduct visual wellness checks of all children upon arrival and ask health questions when concerned.
- Take children's temperature each morning with a no-touch thermometer. If a thermometer requiring a touch-method (under the tongue or arm, forehead, etc.) is the only type available, it should only be used when a fever is suspected. Thermometers must be properly cleaned and disinfected after each use.
- Monitor staff and children throughout the day for signs of illness; send home children with a fever of 100.4 degrees or higher, cough, or other COVID-19 symptoms after isolating from the general room population and notify parents.
- Child care programs must exclude any child, parent, caregiver, or staff showing symptoms of COVID-19. Staff should discuss with parent/caregiver and refer to the child's health history form and/or emergency card to identify if the child has a history of allergies, which would not be a reason to exclude.

- Establish procedures for safely transporting anyone sick home or to a healthcare facility, as appropriate.
- Advise sick staff members and children not to return until they met CDC criteria to discontinue home isolation.



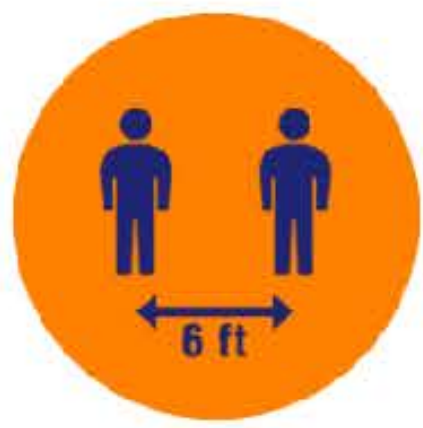
Coronavirus Symptoms

- Fever
- Cough
- Shortness of breath or difficulty breathing
- Chills
- Repeated shaking with chills
- Fatigue
- Muscle pain
- Headache
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea
- New loss of taste or smell



Group Size and Staffing

- Children should remain in groups as small as possible. Should these guidelines differ from local health ordinances, follow the stricter guidance.
- It is important to keep the same children and teacher or staff with each group and include children from the same family in the same group, to the greatest extent possible.



Classroom Space / Physical Distancing

- Arrange developmentally appropriate activities for smaller group activities and rearrange furniture and play spaces to maintain 6 feet of separation, when possible.
- For napping, place cots, cribs, and mats 6 feet apart, with heads in opposite directions.
- Use opportunities to reduce time spend indoors by bringing children outside, weather permitting while maintaining physical distancing.
- Offer more opportunities for individual play.
- Plan activities that do not require close physical contact between multiple children.
- Stagger indoor and outdoor play and adjust schedules to reduce the number of children in the same area.
- Ensure all outdoor play equipment is cleaned and disinfected between use by different groups of children.
- Develop spacing instructions in both indoor and outdoor spaces that are developmentally appropriate and easy for children to understand.



Meal Times

- Utilize more tables to spread children out or use name cards to ensure adequate spacing of children.
- Practice proper handwashing before and after eating. Use paper goods and disposable plastic utensils when possible, following CDC and CDPH COVID-19 food handling guidelines.

- Do not allow children or staff to share or touch each other's food.
- Immediately clean and disinfect trays and tables after meals. Avoid family- or cafeteria-style meals, ask staff to handle utensils, and keep food covered to avoid contamination.
- Ensure meals are provided in individual portions and are delivered by staff wearing gloves.
- Implement outdoor meal times if space and weather allow.



Resources

- California Department of Social Services, Community Care Licensing, Child Care Page: <https://www.cdss.ca.gov/inforesources/child-care-licensing>
- California Division of Occupational Safety and Health (Cal/OSHA): <https://www.dir.ca.gov/dosh/Coronavirus/COVID-19-Infection-Prevention-in-Childcare-Programs-Guidance.pdf>
- California Coronavirus (COVID-19) Resources: <https://covid19.ca.gov/>
- California Department of Pesticide Regulation Health Schools Act information: <https://apps.cdpr.ca.gov/schoolipm/>
- Centers for Disease Control and Prevention (CDC): <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>




APPENDIX V
CONTACTLESS SIGN-IN
& OUT WITH BUILT-IN
HEALTH CHECK CARD
(SAMPLE)



Contactless Sign-in & Sign-out with Built-in Health Check Card

Please ask children parents open Learning Genie App to scan the code below to check in

Learning Genie School



Valid period: 05/01/2020 – 05/12/2020



13:35 Mon May 25

learning genie

Roster

Engagement

Portfolios


Message

More

Jason's mother arrived
05/20/2020 08:00 AM


Jason Brown

Classroom PS
Learning Genie school



Jennifer Miller

Mother
Parent Sign



Site admin/Staff to measure the temperature and confirm the health card information

Here is Learning Genie School health daily repor,please fill it out completely.
Date: 05/25/2020 Issuer: Jane (Agency Admin)

1. Are there any children whose body temperature exceeds 100.4 oF

☐ Yes ☒ No

2. Do you or your child have any symptoms of COVID-19? (multiple)

☐ Cough

☐ Muscle pain

☐ Feve

☐ Shortness of breath

☐ New loss of taste or smell

☐ Chills

☐ Sore throat

☒ None

3. Have you recently been in close contact with anyone who has exhibited any Covid19 symptoms?

☐ Yes ☒ No

4. Do you have anyone in your home with symptoms of COVID-19?

☐ Yes ☒ No

5. Have you recently been in close contact with anyone who tested positive for COVID-19?

☐ Yes ☒ No

6. Has your child taken the medication in the last 24 hours with a fever?

☐ Yes ☒ No

In order to prevent and control the epidemic, I solemnly promise that the personal information filled in the health report is true, complete and valid. I agree to submit the health card nunching information to the school for management and

☒

Reject

Check In