

COVID-19 Preparedness Plan Optional Template for Licensed and Certified Child Care Programs Deemed Critical Businesses During Peacetime Emergency

All critical businesses in Minnesota are required to have a COVID-19 preparedness plan that protects staff, children, families and the community you serve. This template is designed to help you create a plan and recognizes the health and safety requirements already required of your program. This template is designed to assist you in meeting the unique needs of your staff and children in care during this peacetime emergency.

According to Executive Order 20-48, critical business, including providers licensed and certified to provide child care services, are required to follow guidance from the [Minnesota Department of Health \(MDH\)](#) and the [Centers for Disease Control and Prevention \(CDC\)](#) to mitigate the spread of COVID-19. MDH encourages providers to follow the [CDC Guidance for Child Care Programs that Remain Open](#). Updated guidance and helpful tools can be found on mn.gov/childcare. Because there is currently no vaccine for this virus, you will need to operate your program for many months with the possibility that COVID-19 could be confirmed in your program. The MDH/CDC guidance is designed to prevent, and mitigate, or respond to the transmission of COVID-19 in your program setting.

[Executive Order 20-74](#), signed by Gov. Walz on June 5, 2020, requires all critical businesses to develop and implement a COVID-19 Preparedness Plan that outlines how you will implement MDH and CDC guidelines. In order to help you comply, DHS is providing this “Child Care COVID-19 Preparedness Plan” (“Plan”) as a resource for you to use in creating a plan, if you do not already have one. This template should be used with the [checklist guidelines for creating a child care COVID-19 Preparedness Plan](#). The use of this particular form is optional. You may create a Plan using your own form but your Plan must address, at a minimum, the eleven topics identified below.

We know that child care providers care about the health and safety of their children in their care, particularly during this pandemic. That’s why the guidance from MDH and CDC is so important for providers to know about – it provides specific steps you can take to continue to keep everyone safe while operating during this unique public health crisis. The guidance from MDH and CDC includes strategies, such as social distancing, limiting group sizes, hygiene and cleaning practices, screening and exclusion criteria.

Your COVID-19 Preparedness Plan must describe how your program will implement, at a minimum, the following components, in compliance with MDH and CDC guidelines for child care programs:

1. frequent handwashing;
2. cleaning and disinfecting;
3. arrival and departure;
4. social distancing throughout the day;
5. plans for identifying and excluding sick staff, volunteers and children;
6. source control and cloth face coverings;

7. workplace ventilation
8. playground use
9. meals and snacks;
10. field trips and events, and
11. communication and training about the Plan.

You must develop your Plan by June 29, 2020. Providers need to evaluate, monitor, and update their plans if necessary, on a regular basis. The Plan needs to be posted at all of the business's workplaces in readily accessible locations that will allow for the Plan to be readily reviewed by all workers.

You do **not** need to send the completed plan to your DHS (or county) licenser for review or approval.

However, you will need to:

- notify enrolled families about the plan and make it available to them upon request;
- train staff, substitutes and volunteers on the plan and ensure they are capable of implementing it, and
- post the plan in a prominent place or make it accessible to staff and volunteers who need to review it.

HOW TO USE THIS PLAN TEMPLATE:

This template should be used with the [checklist guidelines for creating a child care COVID-19 Preparedness Plan](#). For each required element of the Plan, there are highlights from the relevant MDH and CDC guidance as it relates to that specific topic; however, we encourage you to review the full guidance with its more detailed information to determine what is most applicable to your setting. The bullet points are followed by a space for you to explain how you are incorporating the guidance into your program within each of the content areas, if you choose to use this form as your Plan. Otherwise, you must ensure your Plan, however it is written, addresses the required elements.

1. Frequent Handwashing

- Reinforce handwashing routines, especially upon arrival, after having been in a public place or after blowing your nose, coughing, or sneezing. If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol. Ensure children are supervised when using hand sanitizer and that it is inaccessible to them when not in use.
- CDC guidance on handwashing can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#HandHygiene>

DESCRIBE PLAN FOR HANDWASHING:

When staff and students arrive at the building they wash their hands before entering into the program space. Any time they go outside or out of their classroom, they sanitize or wash their hands with soap and water. Before all meals, they sanitize or wash their hands. Staff supervise any time sanitizer is used. It is kept out of reach of children when not in use.

2. Cleaning and disinfecting

- Protocols related to cleaning and disinfection of programs should be detailed so that staff know what is expected of them. Follow MDH and CDC guidance for frequent cleaning and disinfecting of your program:
 - <https://www.health.state.mn.us/diseases/coronavirus/schools/clean.pdf>
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>
- Ensure high-touch surfaces such as doorknobs, light switches, stair rails, counters, tables and chairs, shared toys, program equipment and other items are regularly cleaned and disinfected.
- Minimize the use of shared supplies (e.g. arts and crafts, office supplies) that cannot be sanitized and consider using designated bins for clean and used items.
- Establish procedures for cleaning and disinfection after persons suspected or confirmed to have COVID-19 have been in the program.

DESCRIBE PLAN FOR CLEANING AND DISINFECTING:

Toys are sanitized at the end of each day and throughout programming as needed. Materials are often exclusive to one group rather than the entire program. Staff also sanitize tables & chairs when finished in a space. Use the sanitizer spray in the room, let it sit for 5 minutes, dry off with paper towel or until dry. Throughout the day, custodial staff are responsible for wiping down the high touch points (door knobs, push plates on doors, light switches, hand rails, stair hand rails, elevator buttons, intercom call buttons, conference table tops, desks, flush handles, faucet handles, drinking fountain handles, service counters.

If a person is suspected or confirmed to have COVID-19, the room will be cleaned out and disinfected thoroughly. Any supplies will also be sanitized prior to any other uses.

3. Arrival and Departure

- Whenever possible, pick-up and drop-off should occur outside and/or limit the extent to which parents enter the program and interact with each other.
- Consider use of multiple entrances and exits when these can be used safely by the staff, volunteers and visitors.
- Before children enter the space, screen them to ensure those with symptoms are not attending.
 - Screening process for children: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#ScreenChildren>

DESCRIBE FOR ARRIVAL AND DEPARTURE:

Parents are not allowed to enter the building past the atrium where we use a doorbell and camera device to identify parents. They are required to wear masks and asked to allow for appropriate distancing when dropping off/picking up alongside other parents. Parents are expected to complete health screenings with their child at home before arriving the day.

When children arrive, staff sign them in and supervise students washing hands before entering the programming space.

4. Plans for sick children, staff, and volunteers

- Conduct daily health checks. This includes screening for children, staff, volunteers, and household members for family child care programs to ensure those who exhibit any symptoms of illness are not present.
- Follow exclusion guidance and ensure children, staff, and volunteers stay home when sick: <http://www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf>
- Use CDC guidance to develop a plan for what you will do if someone becomes sick with COVID-like symptoms: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#General>
- If a child, staff member, or volunteer is diagnosed with COVID-19 or if you have questions about a child, staff member, or volunteer who is exhibiting symptoms, reach out to MDH at health.schools.covid19@state.mn.us and follow their direction.
- Using the MDH and CDC resources above, create a communication plan for how and when you will notify parents, staff, and volunteers if a child, staff member, volunteer or household member for family child care programs has been exposed, is exhibiting symptoms, or has tested positive.
 - Contact MDH if you have questions (at the email address above)
 - Ensure the parent or guardian contact information in each child's record is up-to-date.

DESCRIBE PLANS FOR SICK CHILDREN, STAFF, AND VOLUNTEERS:

Every day all staff and students are required to take their temperature at home and run through the checklist to ensure that they have not had any of the following symptoms: Cough, sore throat, shortness of breath, loss of taste or smell or body chills. If they register a fever or have experienced any of the previously stated symptoms they are required to stay home and notify the site so that proper action can be taken.

If symptoms develop while at program, we follow MDH guidelines for exclusion of children and staff and send them home if necessary.

We will contact the designated district nurse on call with any questions/concerns we have regarding symptoms/exposure of staff or children. They will contact MDH and then provide us appropriate information and direction. We will maintain updated records for each child.

5. Social distancing throughout the day

- Limit group sizes as much as possible and create consistent groups of children and providers, staff, or volunteers who stay together throughout the day.
- Add visual cues or barriers to direct traffic flow and distancing. For example, you may want to tape "Xs" on the floor to let children know where they should sit to promote social distancing.
- At nap time, ensure that children's naptime mats (or cribs) are spaced out as much as possible. Consider placing children head to toe in order to further reduce the potential for viral spread.

DESCRIBE PLAN FOR SOCIAL DISTANCING THROUGHOUT THE DAY:

We will have no more than 16 people in a group including staff and children (1:15 ratio). Groups have designated rooms that allow for appropriate social distancing. Intermixing of groups is to be avoided to all extents possible. When groups must mix, the total size will not exceed 30.

6. Source control and cloth face coverings

- Cloth face coverings are an important piece for mitigating the spread of the virus but are most effective if it can stay in place without being pulled on or touched by the person wearing it or others. Within this context, the provider, staff members, and volunteers are required to wear cloth face coverings during the work day as much as possible, recognizing the development needs of the children in their care.
- Children should not wear cloth face coverings unless they can reliably wear, remove, and handle the cloth face covering throughout the day. Cloth face coverings should NOT be put on infants or children younger than 2 because of the danger of suffocation.
- Face covering guidance is available here:
<https://www.health.state.mn.us/diseases/coronavirus/schools/masks.html#child>
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

DESCRIBE PLAN FOR SOURCE CONTROL AND CLOTH FACE COVERINGS:

All staff and children are required to wear cloth face coverings over both nose and mouth when in program. Short designated mask breaks for children will be implemented outdoors when possible.

All staff are strongly encouraged to wear a face shield as well as their mask when working with children.

7. Workplace ventilation

- Recognizing this may be difficult in center or school buildings, where possible work to maximize the amount of fresh air being brought in, limit air recirculation and make sure ventilation systems are being properly used and maintained. Take steps to minimize air flow blowing across people. It could mean keeping windows open where possible, removing or repositioning fans, and encouraging outdoor time.

DESCRIBE PLAN FOR VENTILATION AND AIR FLOW, IF POSSIBLE:

We encourage outside time as much as possible. Custodians will make sure air flow is being monitored.

8.

9. Playground use

- Stagger playground use rather than allowing big groups to play together.
- Wash hands before and after touching play structures. If possible, consider cleaning high touch areas of the play structure between groups.
- If you choose to bring children in your care to a public playground, be careful to ensure children wash hands after touching play structures and maintain six feet of space from other children as much as possible. <https://www.health.state.mn.us/diseases/coronavirus/schools/playground.pdf>

DESCRIBE PLAN FOR MITIGATING COVID-19 IN PLAYGROUND USE:

Playground times are staggered for each group to avoid any large gathering of staff and students. Hands are washed both before and after being on the playground. Distancing of 6ft is encouraged while outside and on the playground.

10. Meals and snacks

- If meals are typically served family-style, plate each meal and serve it so that multiple children are not using the same serving utensils.
- To the extent possible, serve meals in individual classrooms. If using a cafeteria, the meal should be served to one small group of children at a time, with cleaning and sanitizing occurring in between groupings.

DESCRIBE PLAN FOR MITIGATING COVID-19 DURING MEALS AND SNACK TIMES:

Meals are eaten in classrooms, the cafeteria, and outside when weather permits. Hands are washed before and after meals. When eating in the cafeteria, groups are separated and will rotate in and out as needed to adhere to distancing guidelines. Tables are sanitized before and after meals.

11. Field trips and events

- Do not plan large group activities, such as field trips and family events. Consider changing field trips and events to a virtual format where appropriate.
- If you have an in-house field trip, screen the presenter. It would be best if in-house field trips are held outside in small group settings. Remember that social distance needs to be maintained, groups should not be mixed, and whenever possible, cleaning and sanitizing should occur between groups.

DESCRIBE PLAN FOR MITIGATING COVID-19 DURING FIELD TRIPS AND EVENTS:

We will not be doing any field trips or large group events at this time. On non-school days we will do virtual trips in classrooms. We may bring in on-site presenters only when MDH guidelines can be met.

12. Communications and training

- The plan must be available to the Commissioner and offered to families. Be sure to communicate to families, using plain language, the expectations for parents and children in implementing this plan (e.g. outdoor pick-up/drop-off protocols).
- The plan must be posted in a prominent place and readily accessible to all of your employees, adult caregivers, substitutes, and volunteers who need to review it. Provide training to ensure everyone is following your plan. Keep these individuals updated on any changes to the plan.
- Staff with concerns about their employer’s COVID-19 Preparedness Plan or questions about their rights should contact MNOSHA Compliance at osha.compliance@state.mn.us, 651-284-5050 or 877-470-6742.

DESCRIBE PLAN FOR COMMUNICATIONS AND TRAINING:

The COVID-19 plan is located in each site’s on-site binder for easy access to staff. All staff have read through the plan and been trained on all necessary procedures. The plan is also posted on the Community Education website for parents to view.