

Child Care Facility COVID 19 Health and Safety Plan Template

Each child care facility must create a COVID-19 Health and Safety Plan which will serve as the guidelines for the facility's COVID-19 child care activities. As with all emergency plans, the COVID-19 Health and Safety Plan developed for each child care facility should be tailored to the unique needs of each facility and should be created in consultation of guidance and policy issued by Office of-Child Care and Department of Early Learning (OCDEL), Pennsylvania Department of Health (DOH), and comply with the Center for Disease Control and Prevention (CDC) guidelines. Given the dynamic nature of the pandemic, each plan should incorporate enough flexibility to adapt to changing conditions. The templates provided in this toolkit can be used to document a facility's COVID-19 Health and Safety Plan, with a focus on training and communications, to ensure all stakeholders are fully informed and prepared for aspects of phased-in reopening or continuing to operate with a waiver during COVID 19. OCDEL recognizes that many child care providers have developed and are currently implementing their plans, whereas others are in the beginning phases of developing their plan. Though plans do not need to take the form of this template, providers should ensure that all elements of this template are included in their plans and adjust accordingly. A child care facility's COVID-19 Health and Safety Plan should be shared with all families and staff and posted in a conspicuous area. Child care facilities should also consider whether the adoption of a new policy or the modification of an existing policy is necessary to effectively implement the COVID-19 Health and Safety Plan.

Each child care facility should continue to monitor its COVID-19 Health and Safety Plan throughout the year and update as needed. All revisions should be shared with all families and staff and posted in a conspicuous area. Child care providers are not required to use this specific plan, but the following elements must be addressed in any plan format selected by the provider:

- 1. Screening procedures,
- 2. Child drop-off and pick-up policies,
- 3. Sick policies,
- 4. Mask policy, and
- 5. Cleaning/sanitation procedures.

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COVID-19 Health and Safety Plan

All decision-makers should be mindful that if there are cases of COVID-19 in the community, there are no strategies that can completely eliminate transmission risk within a child care population. The goal is to keep transmission as low as possible to safely continue child care activities.

This planning tool is intended to guide those child care programs who are temporarily closed and planning how to reopen in the future. Programs already open and serving children and families can also use the tool to determine activities to improve or enhance health and safety protocol while operating under COVID-19.

Use the template to document your facility's plan to bring back children and staff, how you will communicate the type of reopening or operations with stakeholders in your community, and the process for continued monitoring of local health data to assess implications for child care operations and potential adjustments throughout the year. Some key questions to consider while developing your COVID-19 Health and Safety Plan:

- How do you plan to bring children and staff back to facilities, particularly if you still need social distancing in place?
- How will you develop and communicate drop-off/arrival procedures?
- How will you implement screening procedures?
- How will you implement routine disinfecting/sanitization procedures?
- How will you communicate your plan to your staff and families?

Depending upon the public health conditions in any county within the Commonwealth, there could be additional actions, orders, or guidance provided by the Office of Child Development and Early Learning (OCDEL) and/or the Pennsylvania Department of Health (DOH) impacting child care operations and causing them to cycle back and forth between less restrictive to more restrictive requirements which may occur as public health indicators improve or worsen. This means your facility should account for changing conditions in your COVID-19 Health and Safety Plan to ensure easy transition from more to less restrictive conditions in each of the phase requirements as needed.

• This document is divided in two parts. Pages 4-12 are designed to guide plan responses, pages 13-16 are designed to be the consolidated Health and Safety Plan. Regardless of whether a facility chooses to use this template, the facility's Health and Safety Plan must be shared with staff and enrolled families. It is strongly suggested that the plan be posted in a location accessible to families and when possible posted on the facility website.

Health and Safety COVID-19 Coordinator

Each child care facility should identify a person or persons responsible for health and safety preparedness and response planning during child care operations during the COVID-19 pandemic. The Health and Safety Coordinator will be responsible for facilitating the planning process, monitoring implementation of your COVID-19 Health and Safety Plan, and continued monitoring of local health data to assess implications for child care operations and potential adjustments to the COVID-19 Health and Safety Plan.

The Adams County Head Start Health & Safety COVID-19 Coordinator- Johnnie Shindledecker, LPN, Health & Nutrition Coordinator/Assistant Director

The Adams County Head Start COVID-19 Pandemic Team consists of the Management Staff (Jen Showers, ED; Johnnie Shindledecker, HNC & AD; Shannon Rennhack, Controller; April Howard, FCE Coordinator; Heather Hockensmith, Education & Disabilities Coordinator; Jen Nelson, Education Coordinator/Mentor; Kayla Palmer, ERSEA Coordinator; Joe Nonemaker, Transportation Supervisor; and consulting Pediatrician, Dr Scott Jaeger, Gettysburg Pediatrics and HSAC Member.

Key Strategies, Policies, and Procedures

Once your child care facility has determined to reopen and established a Health and Safety Coordinator, use the action plan templates on the following pages to create a thorough plan. Providers should utilize the direction discussed in the announcement, Interim Guidance for Certified Child Care Facilities operating during the Novel Coronavirus Pandemic (Announcement: C-20-06). For each section of the COVID-19 Health and Safety Plan, draft a detailed summary describing the key strategies, policies, and procedures your child care facility will employ to satisfy each area of the plan. The summary will serve as the public-facing description of the efforts your child care facility will take to ensure health and safety of every stakeholder in your child care community. Thus, the summary should be focused on the key information that staff, children in care, and families will require to clearly understand your COVID-19 Health and Safety Plan. You can use the key questions to guide your summary.

For each requirement within each domain, document the following:

- **Action Steps:** Identify the specific adjustments the facility will make to the requirement during the time period the programs is open or reopening. List the discrete action steps for each requirement in sequential order.
- Lead Individual and Position: List the person(s) responsible for ensuring the action steps are fully planned and the system is prepared for effective implementation.

- Materials, Resources, and/or Supports Needed: List any materials, resources, or support required to implement the
 requirement.
- **Professional Development (PD) Recommended:** In order to implement this requirement effectively, will staff, children, families, or other stakeholders require professional development?

In the following tables, an asterisk (*) denotes a mandatory requirement of the plan. All other requirements are highly encouraged to the extent possible.

Face Masks

Key Questions

- How will you ensure staff have accessibility to cloth face masks?
- How will you implement staff wearing cloth face masks?
- What protocols will you put in place to ensure staff are wearing masks throughout the day?
- In circumstance where children have been identified to wear face masks, how will you implement?

Summary of Responses to Key Questions:

ACHS has purchased cloth face coverings that are washable and reusable. Each staff member will initially be provided with 5 face masks. ACHS will replace as needed. Staff will be required to wear cloth face masks in all ACHS facilities, when 6 feet of physical distancing from others is not possible. Spot checks, both in person and via classroom video cameras will be conducted regularly to ensure that staff are adhering to the mask requirement.

ACHS has also purchased cloth face coverings for program children. These masks are washable and reusable as well. Children will be provided with a mask upon entering the classroom or school bus, and they will leave the mask at the end of the day. Masks will be laundered by ACHS and returned to the appropriate classroom.

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
* Use of face coverings (masks or face shields) by all staff and visitors	-ACHS will provide each staff member with 5, washable and reusable cloth face masks. Staff will launder their own masks. -Visitors will be provided with a disposable mask before entering any agency facilities if they do not have one with them.	Jen S ED	-Cloth face masks -Supply of reusable face masks	N
* Use of face coverings (masks or face shields) by children 2 years of age and older (as appropriate)	-ACHS will provide washable and reusable cloth face masks for all program children. They will be given to children upon arrival and collected at departure. Child masks will be laundered by ACHS. Masks will be labeled with child's name.	Johnnie S HNC Heather H EC Jen N EC	-Child sized cloth face masksLaundry bag for turning in to be laundered.	Y- Staff will be provided with ways to help children get comfortable wearing masks.

Cleaning, Sanitizing, Disinfecting and Ventilation

Key Questions

- How often will you implement cleaning, sanitation, disinfecting, and ventilation protocols/procedures to maintain children's safety in care?
- What protocols will you put in place to clean and disinfect high-touch surfaces throughout an individual day?
- Which staff will be trained on cleaning, sanitizing, disinfecting, and ventilation protocols? When and how will the training be provided?

Summary of Responses to Key Questions:

ACHS will implement daily cleaning, sanitation, disinfecting, and ventilations procedures to maintain children and staff safety. High-touch surfaces and frequently used materials will be cleaned and disinfected at least daily, and more often as needed. All staff will be trained on the procedure at preservice in August 2020.

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
* Cleaning, sanitizing, disinfecting, and ventilating, surfaces, and any other areas used by children in care (i.e., restrooms, drinking fountains, toys, hallways, and transportation)	 -Increased frequency of cleaning and disinfecting high touch surfaces and objects in each classroom daily, including door handles, sink handles, tables, toys, and equipment. -Electrostatic sprayers, with disinfecting tabs, will be used in the classrooms and on buses at the end of each day. -Drinking fountains will not be used. -Buses will be disinfected with disinfectant spray in between each bus run, and after the last run of the am and pm. Rails will be wiped with a disinfectant wipe between each run. -Whenever possible, classroom windows will be opened to allow ventilation. Bus windows, when possible, will be cracked to allow ventilation. -HVAC systems will be monitored and filters changed frequently to ensure proper ventilation and circulation. 	Johnnie SHNC Joe N TS	-Disinfecting spray -Disinfecting wipes -Electrostatic sprayer and tabs -Masks and gloves for staff when disinfecting	Y

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
Other cleaning, sanitizing, disinfecting, and ventilation practices	-Computers and technology equipment will be cleaned and disinfected daily, according to manufacturer guidelines. -Central Office will be divided into	Johnnie S HNC	-Same as above	N
	quadrants with staff assigned to specific areas for daily cleaning and disinfecting.			

Social Distancing and Other Safety Protocols

Key Questions

- How will child care spaces be organized to mitigate spread?
- How will you group children in care with staff to limit the number of individuals who come into contact with one another throughout the day?
- What policies and procedures will govern use of other communal spaces within the facility?
- How will you utilize outdoor space to help meet social distancing needs?
- What hygiene routines will be implemented throughout the day?
- How will you adjust transportation to meet social distancing requirements?
- What visitor and volunteer policies will you implement to mitigate spread?
- Will any of these social distancing and other safety protocols differ based on age?
- Which stakeholders will be trained on social distancing and other safety protocols? When and how will the training be provided? How will preparedness to implement as a result of the training be measured?

Summary of Responses to Key Questions:

Enrollment in ACHS classrooms will be 12 children or less with the same classroom staff daily. Substitutes and Classroom Floaters will be used as needed to maintain ratios when staff are out. Only one classroom of children will be in the hallways or playground at a time. Frequent handwashing will be a part of the classroom day, with the use of hand sanitizer when soap and water are not available. There will be no more than 1 child per seat on program buses, unless children are

coming from the same household or babysitter. Non-essential visitors and volunteers will not be permitted in agency facilities. All staff, families, and children will be trained on social distancing protocols beginning at preservice and enrollment and ongoing throughout the program year.

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Child care space occupancy that allows for 6 feet of separation among children in care and staff throughout the day, to the maximum extent feasible or promotes social distancing through grouping	-Class sizes will be reduced to a maximum of 12 children per classroom. -Staff will be assigned to a specific classroom (including Floaters) and will stay in that classroom as much as possible. -During free choice play, a maximum of 2 children will be permitted in each interest area. -Tables will have a maximum of 4 children per table. Plexiglass dividers will be installed to limit the spread of droplets during meal time. -Spot will be designated on the circle time carpet to ensure as much space between children as possible.	Heather H EC Jen NEC		N

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Restricting the use of common areas, and consider serving meals in alternate settings such as where the child care is being provided	-On inclement weather days, gross motor play will occur within the classroom to the greatest extent possible. -Only 1 class will be permitted on the playground at a time. High touch areas will be wiped by the classroom teachers leaving the playground. -Meals will be served pre-plated. -Children will have assigned seating at the meal tables.	Heather- EC Jen NEC Johnnie- HNC		N

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
* Hygiene practices for children in care and staff including the manner and frequency of handwashing and other best practices	-Frequent handwashing with soap and water will be encouraged for children and staff. -Posters with times/situations for handwashing (ie-before eating, after using the restroom, upon entry to the classroom, etc) will be posted in visible areas in the classroom to help staff remember. -Hand sanitizer, with at least 60% ethyl alcohol, will be used when soap and water are not available (playground, bus, etc.) -Toothbrushing will be suspended in the classroom. Dental kits will be provided to each family along with education on dental hygiene and proper encouragement. -Teach and remind children and staff to cover coughs and sneezes with their elbow. -Children and staff will be taught how to properly wear a mask.	Heather-EC Jen-EC Johnnie-HNC Gale-DA		Y
Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs	-Handwashing signs will be posted at all sinks in the classrooms, adult bathrooms, and central office bathrooms. -Signs from the CDC website about social distancing, signs and symptoms of COVID, healthy hygiene practices, and mask wearing will be displayed in visible areas in each classroom and central office.	Jen S ED		N

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Identifying and restricting non- essential visitors and volunteers	-Limit non-essential visitors and volunteers. -Require all visitors to sign in and comply with ACHS screening procedures. -All visitors to classrooms, including staff, must sign in and out on the white classroom sign-in sheet.	Mgt Staff Classroom Staff		Y
Handling outdoor play consistent with the CDC Considerations	-Outdoor play will be encouraged daily, with only one class group on the playground at a time. -Children and staff should wear masks while engaged in outdoor play, and should only be removed if the child/staff are engaged in play that causes them to have trouble breathing.	Heather- EC Jen N. –EC Classroom Staff		N
Limiting the sharing of materials among children in care	-Limited materials will be provided in interest areas. Materials will be rotated frequently. -Children will have their own bins, labeled with their name, for sensory play (playdough, clay, sand, etc.). -Children will have their own pencil box, labeled with their name, for crayons, markers, pencils, scissors, glue sticks, etc. for art. -Children each have their own, labeled cubby for their personal belongings. Toys from home will not be permitted in the classroom.	Heather-EC Jen N EC		N

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Staggering the use of communal spaces and hallways	-Adjust transitions in hallways so that only one group is in a hallway at a time, to the greatest extent possible. -Visits to or from the Library, Skills, nursing home, etc will be canceled at this time. -ACHS classrooms will not attend any group activities or assemblies held in school district buildings.	Heather-EC Jen N EC		N
Adjusting transportation schedules and practices to create social distance between children in care	-Bus runs will be scheduled with "bus stops" as much as possible, over individual pickups. -Children and parents will be advised to physical distance at the bus stop. -Children will sit one child per seat, unless coming from the same family/babysitter. -ACHS has 2 different bus runs per bus and driver. Children in the first run of the day will be seated on the left of the seat. The seat will be cleaned upon departure. Children in the second run of the day will sit on the right of the seat.	Joe NTS		Y

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Limiting the number of individuals in facility rooms and other facility spaces, and interactions between groups of children in care	-Staff will remain as stable as possible in each room. -Central office staff who visit classrooms will be asked to make as few visits as possible, and to conduct their business on the phone or through email as much as possible. -Non-essential visitors and volunteers will not be permitted in ACHS classrooms.	All Staff		N
Coordinating with local schools regarding transportation protocol changes and, when possible, revised hours of operation or modified school-year calendars	-ACHS will follow the guidelines, schedules, and occupancy of school district facilities. If needed, ACHS will adjust to virtual services in the event that in person services are no longer permitted by the district.	Jen SED		N
Other social distancing and safety practices				

Monitoring Children and Staff Health

Key Questions

- How will you screen children, staff and others who interact with each other to ensure they are healthy and not exhibiting signs of illness?
- Where will the screening take place?
- When and how frequently will you monitor the health of children, staff and others who interact with each other throughout the day to ensure that they continue to be healthy and do not exhibit new signs of illness?
- What is the policy for quarantine or isolation if a staff and/or child becomes ill or has been exposed to an individual confirmed positive for COVID-19?
- What conditions will a staff or child confirmed to have COVID-19 need to meet to safely return to the facility?
- Which staff will be responsible for making decisions regarding quarantine or isolation requirements of staff or children?

- When and how will families be notified of confirmed staff or child illness or exposure and resulting changes to the COVID-19 Health and Safety Plan?
- Which person will be responsible for reporting suspected or confirmed cases of COVID-19 to the Department of Health and Child Care Certification?
- Which persons will be trained on protocols for monitoring children and staff health? When and how will the training be provided? How will preparedness to implement as a result of the training be measured?

Summary of Responses to Key Questions:

All children will be screened using a symptom screening checklist and temperature check before being permitted to enter program buses or classrooms. This will occur at the bus stop or the entrance to the classroom depending upon whether the child is a parent or bus transport. Symptoms and temperatures will be checked throughout the day as needed. Program staff will conduct a self-symptom and temperature check prior to coming to work each day. The HNC and ED will be responsible for making decisions regarding quarantine and isolation, as well as be responsible for reporting suspected or confirmed cases of COVID-19 to the DOH and OCDEL. All staff will be trained on the protocols for monitoring child and staff health, beginning at preservice and ongoing throughout the program year.

Requirements	Action	ı Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
* Monitoring children and staff for symptoms and history of exposure	completed on all childre the classroom or the proA Classroom Teacher parent/guardian dropping developed program syruse the infrared thermotemperature reading. A temperature of 100.4 dhigher, will not be permoclassroom. Likewise, a symptoms, or who has someone with COVID, enter the classroom. Group A (One or More Symptoms)	will confer with the ng off the child using the mptom checklist, and ometer to get a ny child with a egrees Fahrenheit, or litted to enter the any child exhibiting been exposed to will not be permitted to Group B (Two or More Symptoms)	Classroom Staff Bus Aide Johnnie-HNC	-Symptom Checklist -Infrared Thermometers -Staff and children should not enter the facility, bus, or classroom if they meet any of the following criteria:	Y
	-Fever (100.4 or higher) -New Cough -Shortness of breath -Difficulty breathing -New lack of taste or smell -For children using progransportation, the Bus				

* looloting or guernating	day of the week to the Coordinator for review and Coordinator for review and Coordinator for review and Content on their supervisor immed Group A (One or More Symptoms) -Fever (100.4 or higher) -New Cough -Shortness of breath -Difficulty breathing -New lack of taste or smell -On their last working deshould submit their head questionnaire to the He Coordinator for review and coordinator for revi	rned in on the last class Health & Nutrition and filing. d to complete a health and temperature check g to their work site. ature of 100.4 degrees report to work and notify rately. Group B (Two or More Symptoms) -Sore throat -Runny nose/congestion -Chills -Muscle pain -Nausea or vomiting -Headache -Diarrhea ay of the week, staff lth symptom alth & Nutrition and filing.	Inhunio	
ating or quarantining Idren, staff, or visitors if y become sick or nonstrate a history of osure	Children- if a child dem becomes sick while in the classroom staff should in them to a corner of the children as possible. To an area with a child cot purpose. Classroom states.	ne center, the mmediately isolate room as far from other eachers will designate to be used for this	Johnnie- HNC Classroom Staff	Y

	the child's parent/guardian to pick up at school. The child should ideally not be sent home on the school bus, if possible. Staff- If a staff person demonstrates symptoms or becomes sick while at work they will immediately send staff- home. If they are in an outlying center and leaving would put the classroom out of child/staff ratio, they should isolate in the room as much as possible until a substitute can be sent to relieve them. Staff should notify their supervisor immediately of any signs or symptoms of illness. Visitor- Any visitor who demonstrates symptoms or becomes sick will be send home immediately.			
* Returning isolated or quarantined staff, children, or visitors to the facility	-Children and Staff who experience symptoms may return 72 hours (3 days) after resolution of symptoms, and have been cleared by their physician. Doctor's note will be required. -Children and staff who have tested positive for COVID-19 may not return until they have been cleared to do so by the Department of Health or their physician. Doctor's note will be required.	Johnnie- HNC		N
* Notifying staff and families of suspected or confirmed cases of COVID-19	-Staff and families will be notified of suspected or confirmed cases of COVID-19 through a same-day letter, School Messenger telephone call, and an email.	Jen S ED		N
*Reporting to DOH and Certification	-PA Department of Health will be contacted to report any positive cases of COVID-19. -Reporting of positive COVID-19 cases will also be reported to OCDEL and to the OHS Program Specialist, as needed.	Johnnie- HNC Jen SED	-PA Dept of Health- (1-877-724-3258)	N

Other monitoring and screening practices	-Staff and parents/guardians will be provided training/information on the signs and symptoms of COVID-19.	Jen SED	-Flyers, CDC information	Y
Notifying staff and families of facility closures	-Facility closures will be communicated to staff and families via memo/letter, School Messenger automated call, and email. Messages will also be put on the ACHS Facebook page and ACHS website.	Jen SED		N

Other Considerations for Children and Staff

Key Questions

- How will you determine which staff are willing/able to return? How will you accommodate staff who are unable or uncomfortable to return?
- How will you determine which children are willing/able to return? How will you accommodate children who are unable or uncomfortable to return?
- What special protocols will you implement to protect children and staff at higher risk for severe illness?
- How will you address staff who are ill, or who have family members who have become ill?
- How will you ensure enough substitute staff are prepared in the event of staff illness? Have you considered applying for a Provisional Hire Waiver?

Summary of Responses to Key Questions:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
* Protecting children and staff at higher risk for severe illness	-Children and staff who are higher risk for severe illness should consult with their physician about the safety of them attending a group child care setting. -Higher risk children and staff must be extra mindful of hand hygiene practices, as well as mask wearing. Staff should ensure that children are following handwashing and mask wearing. -A Care Plan will be developed with the parent, physician and HNC for any child at risk for severe illness.	Johnnie- HNC		N
Unique safety protocols for children with complex needs or other vulnerable individuals	-As needed, unique safety protocols will be developed in consultation with the child's parent and physician.	Johnnie- HNC		N
Strategic deployment of staff	-Staff may be asked to complete tasks outside of their job descriptions, especially if staff are needed for classroom coverage.	Jen SED		N

COVID-19 Health and Safety Plan Professional Development

The success of your plan for a healthy and safe reopening requires all staff, children (as age appropriate), and parents to be prepared with the necessary knowledge and skills to implement the plan as intended. For each item that requires professional development, document the following components of your professional development plan.

- **Topic:** List the content on which the professional development will focus.
- Audience: List the group(s) who will participate in the professional learning activity.
- Lead Person and Position: List the person or organization that will provide the professional learning.
- Session Format: List the strategy/format that will be utilized to facilitate participant learning.

- Materials, Resources, and or Supports Needed: List any materials, resources, or support required to implement the
 requirement.
- Start Date: Enter the date on which the first professional learning activity for the topic will be offered.
- Completion Date: Enter the date on which the last professional learning activity for the topic will be offered.

Topic	Audience	Lead Person and Position	Session Format	Materials, Resources, and or Supports Needed	Start Date	Completion Date
Overall Health and Safety Plan	All Staff	Jen S. & Johnnie	Live (in small group)	Health & Safety Plan and associated protocols	8-4-20	ongoing
Hygiene Practices	All Staff	Jen S. & Johnnie	Live (in small group)	Handwashing posters Face coverings-use and care	8-4-20	ongoing
Monitoring Child & Staff Health	All Staff	Jen S. & Johnnie	Live (in small group)	Symptom checklist Thermometers	8-4-20	ongoing
Sanitizing & Disinfecting Practices and Procedures	All Staff	Jen S. & Johnnie	Live (in small group)	Protocols	8-4-20	ongoing
Sanitizing & Disinfecting Practices and Procedures for Buses	Transportation Staff	Johnnie & Joe	Live	Protocols	8-10-20	ongoing
Safe Practices for Meal Prep and Service	Nutrition Staff Education Staff	Johnnie	Live	Protocols	8-12-20	ongoing
Overall Health and Safety Plan	Families	Education Staff and FEW's/Mgt	Live or Newsletter	Health & Safety Plan	8-3-20	ongoing
Hygiene Practices	Families	Education Staff and FEW's/Mgt	Live or Newsletter	Posters Face Coverings Toothbrushing Kits	8-3-20	ongoing
Monitoring Child Health	Families	Education Staff and FEW's/Mgt	Live or Newsletter	Symptom Checklist Sign and Symptom Flyer	8-3-20	ongoing
Hand Hygiene	Children	Education Staff	Live	Demonstrations Reminders Handwashing posters	8-24-20	ongoing

Topic	Audience	Lead Person and Position	Session Format	Materials, Resources, and or Supports Needed	Start Date	Completion Date
Covering Coughs and Sneezes	Children	Education Staff	Live	Demonstrations Reminders Germ posters	8-24-20	ongoing
Wearing a Face Mask	Children	Education Staff	Live	Face Mask Social Story Demonstrations Reminders	8-24-20	ongoing

COVID-19 Health and Safety Plan Communications

Timely and effective family and caregiver communication about health and safety protocols and schedules will be critical. Facilities should be particularly mindful that frequent communications are accessible in primary languages and to all caregivers (this is particularly important for children residing with grandparents or other kin or foster caregivers). Additionally, facilities should establish and maintain ongoing communication with their certification representative or regional office.

Topic	Audience	Lead Person and Position	Mode of Communications	Start Date	Completion Date
Health & Safety Plan	Staff	Jen S.	Live	8-4-20	ongoing
Health & Safety Plan	Families/Stakeholders	Jen S.	Media-website, Facebook	8-4-20	ongoing
Updates	Staff and Families	Jen S.	Live, School Messenger, Newsletter, Website and Facebook	8-4-20	ongoing

COVID-19 Health and Safety Plan Summary:

(Adams County Head Start)

Plan Date: <u>7-27-2020</u>

Anticipated Reopening Date, if applicable: August 24, 2020

Use these summary tables to provide your staff, facilities, and other invested persons with a detailed overview of your Health and Safety Plan. Facilities are required to share with staff and children this summary on their website. To complete the summary, copy and paste the summaries from the COVID-19 Health and Safety Plan tables above.

Face Masks

Requirement(s)	Strategies, Policies and Procedures
* Use of face coverings (masks or face shields) by all staff and visitors * Use of face coverings (masks or face shields) by older children (as appropriate)	-ACHS will provide each staff member with 5, washable and reusable cloth face masks. Staff will launder their own masks. -Visitors will be provided with a disposable mask before entering any agency facilities if they do not have one with them. -ACHS will provide washable and reusable cloth face masks for all program children. They will be given to children upon arrival and collected at departure. Child masks will be laundered by ACHS. Masks will be labeled with child's name.

Facilities Cleaning, Sanitizing, Disinfecting and Ventilation

Requirement(s)	Strategies, Policies and Procedures
* Cleaning, sanitizing, disinfecting, and ventilating learning spaces, surfaces, and any other areas used by children (i.e., restrooms, drinking fountains, hallways, and transportation)	 -Increased frequency of cleaning and disinfecting high touch surfaces and objects in each classroom daily, including door handles, sink handles, tables, toys, and equipment. -Electrostatic sprayers, with disinfecting tabs, will be used in the classrooms and on buses at the end of each day.

Requirement(s)	Strategies, Policies and Procedures
	-Drinking fountains will not be used.
	-Buses will be disinfected with disinfectant spray in between each bus run, and after the last run of the am and pm. Rails will be wiped with a disinfectant wipe between each run.
	-Whenever possible, classroom windows will be opened to allow ventilation. Bus windows, when possible, will be cracked to allow ventilation.
	-HVAC systems will be monitored and filters changed frequently to ensure proper ventilation and circulation.
	-Computers and technology equipment will be cleaned and disinfected daily, according to manufacturer guidelines.
	-Central Office will be divided into quadrants with staff assigned to specific areas for daily cleaning and disinfecting.

Social Distancing and Other Safety Protocols

Requirement(s)

Child care space occupancy that allows for 6 feet of separation among children and staff throughout the day, to the maximum extent feasible or group management to limit cross-group interactions.

Restricting the use of common areas, and consider serving meals in alternate settings such as where the child care is being provided

Strategies, Policies and Procedures

-Space- Class sizes will be reduced to a maximum of 12 children per classroom. Staff will be assigned to a specific classroom (including Floaters) and will stay in that classroom as much as possible. During free choice play, a maximum of 2 children will be permitted in each interest area. Tables will have a maximum of 4 children per table. Plexiglass dividers will be installed to limit the spread of droplets during meal time. Spot will be designated on the circle time carpet to ensure as much space between children as possible.

Requirement(s)

*Hygiene practices for children and staff including the manner and frequency of hand-washing and other best practices

Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs

Handling outdoor play consistent with the CDC Considerations

Limiting the sharing of materials among children in care Staggering the use of communal spaces and hallways

Adjusting transportation schedules and practices to create social distance between children

Limiting the number of individuals in facility rooms and other facility spaces, and interactions between groups of children

Coordinating with children regarding on site care, transportation protocol changes and, when possible, revised hours of operation or modified school-year calendars

Other social distancing and safety practices

Strategies, Policies and Procedures

--Common Areas and Meals- On inclement weather days, gross motor play will occur within the classroom to the greatest extent possible. Only 1 class will be permitted on the playground at a time. High touch areas will be wiped by the classroom teachers leaving the playground. Meals will be served pre-plated. Children will have assigned seating at the meal tables.

*Hygiene- Frequent handwashing with soap and water will be encouraged for children and staff. Posters with times/situations for handwashing (ie-before eating, after using the restroom, upon entry to the classroom, etc) will be posted in visible areas in the classroom to help staff remember. Hand sanitizer, with at least 60% ethyl alcohol, will be used when soap and water are not available (playground, bus, etc.)

Tooth brushing in the classroom will be discontinued. Kits will be sent home to encourage dental hygiene at home. Teach and remind children and staff to cover coughs and sneezes with their elbow.

- -Signs-Handwashing signs will be posted at all sinks in the classrooms, adult bathrooms, and central office bathrooms. Signs from the CDC website about social distancing, signs and symptoms of COVID, healthy hygiene practices, and mask wearing will be displayed in visible areas in each classroom and central office.
- -Outdoor Play-Outdoor play will be encouraged daily, with only one class group on the playground at a time. Children and staff should wear masks while engaged in outdoor play, and should only be removed if the child/staff are engaged in play that causes them to have trouble breathing.
- -Materials- Limited materials will be provided in interest areas. Materials will be rotated frequently. Children will have their own bins, labeled with their name, for sensory play (playdough, clay, sand, etc.). Children will have their own pencil box, labeled with their name, for crayons, markers, pencils, scissors, glue sticks, etc. for art. Children each have their own, labeled cubby for their personal belongings. Toys from home will not be permitted in the classroom.

Requirement(s)

Strategies, Policies and Procedures

- -Transportation- Bus runs will be scheduled with "bus stops" as much as possible, over individual pick-ups. Children and parents will be advised to physical distance at the bus stop. Children will sit one child per seat, unless coming from the same family/babysitter. ACHS has 2 different bus runs per bus and driver. Children in the first run of the day will be seated on the left of the seat. The seat will be cleaned upon departure. Children in the second run of the day will sit on the right of the seat.
- -#'s-Staff will remain as stable as possible in each room. Central office staff who visit classrooms will be asked to make as few visits as possible, and to conduct their business on the phone or through email as much as possible. Non-essential visitors and volunteers will not be permitted in ACHS classrooms.
- -Communication- ACHS will follow the guidelines, schedules, and occupancy of school district facilities. If needed, ACHS will adjust to virtual services in the event that in person services are no longer permitted by the district.

Monitoring Children and Staff Health

Requirement(s)

- * Monitoring children in care and staff for symptoms and history of exposure
- * Isolating or quarantining children, staff, or visitors if they become sick or demonstrate a history of exposure
- * Returning isolated or quarantined staff, children, or visitors to school
- *Reporting to DOH and Certification
- *Notifying staff, families, and the public of facility closures

Strategies, Policies and Procedures

Monitoring- Daily symptom and temperature check will be completed on all children prior to them entering the classroom or the program bus. A Classroom Teacher will confer with the parent/guardian dropping off the child using the developed program symptom checklist, and use the infrared thermometer to get a temperature reading. Any child with a temperature of 100.4 degrees Fahrenheit, or higher, will not be permitted to enter the classroom. Likewise, any child exhibiting symptoms, or who has been exposed to someone with COVID, will not be permitted to enter the classroom. For children using program provided bus transportation, the Bus Aide will complete the same teachers as noted above before permitting a child on the bus. All checklists will be turned in on the last class day of the week to the Health & Nutrition Coordinator for review and filing. All staff will be required to complete a health symptom questionnaire and temperature check one hour prior to arriving to their work site. Any

Requirement(s)

Strategies, Policies and Procedures

staff with a temperature of 100.4 degrees F or higher should not report to work and notify their supervisor immediately. On their last working day of the week, staff should submit their health symptom questionnaire to the Health & Nutrition Coordinator for review and filing.

Group A	Group B
(One or More	(Two or More
Symptoms)	Symptoms)
-Fever (100.4 or higher) -New Cough -Shortness of breath -Difficulty breathing -New lack of taste or smell	-Sore throat -Runny nose/congestion -Chills -Muscle pain -Nausea or vomiting -Headache -Diarrhea

Isolating/Quarantining- Children- if a child demonstrates symptoms or becomes sick while in the center, the classroom staff should immediately isolate them to a corner of the room as far from other children as possible. Teachers will designate an area with a child cot to be used for this purpose. Classroom staff will immediately call the child's parent/guardian to pick up at school. The child should not be sent home on the school bus. Staff- If a staff person demonstrates symptoms or becomes sick while at work they will immediately send staff- home. If they are in an outlying center and leaving would put the classroom out of child/staff ratio, they should isolate in the room as much as possible until a substitute can be sent to relieve them. Staff should notify their supervisor immediately of any signs or symptoms of illness. Visitor- Any visitor who demonstrates symptoms or becomes sick will be send home immediately.

Requirement(s) Strategies, Policies and Procedures Returning to school- Children and Staff who experience symptoms may return 72 hours (3 days) after resolution of symptoms, and have been cleared by their physician. Doctor's note will be required. Children and staff who have tested positive for COVID-19 may not return until they have been cleared to do so by the Department of Health or their physician. Doctor's note will be required. Reporting- PA Department of Health will be contacted to report any positive or suspected cases of COVID-19. Reporting of positive COVID-19 cases will also be reported to OCDEL and to the OHS Program Specialist. Closure Notifications- Facility closures will be communicated to staff and families via memo/letter, School Messenger automated call, and email. Messages will also be put on the ACHS Facebook page and

ACHS website.

Other Considerations for Children and Staff

Requirement(s)	Strategies, Policies and Procedures
* Protecting children and staff at higher risk for severe illness	-Children and staff who are higher risk for severe illness should consult with their physician about the safety of them attending a group child care setting. Higher risk children and staff must be extra mindful
Unique safety protocols for children with complex needs or other vulnerable individuals	of hand hygiene practices, as well as mask wearing. Staff should ensure that children are following handwashing and mask wearing. A Care Plan will be developed with the parent, physician and HNC for
Strategic deployment of staff	any child at risk for severe illness.
	As needed, unique safety protocols will be developed in consultation with the child's parent and physician.
	-Staff may be asked to complete tasks outside of their job descriptions, especially if staff are needed for classroom coverage.

COVID-19 Health and Safety Plan Affirmation Statement

The plan was approved by a vote of:

The Legal Entity or the Board of Directors/Trustees for (ACCESS INC/ Adams County Head Start) reviewed and approved the Phased Child Care Facility Reopening Health and Safety Plan on (July 29,2020).

₹Yes No	
Affirmed on: (July 29, 2020)	
Ву:	
Linda Kocher	
(Signature of Legal Entity or Legal Entity Representative)	
LINDA KOCHER	
(Print Name of Legal Entity or Legal Entity Representative)	



School Entity Day Reporting for School Year 2019-20

Act 13 of 2020 ("Act 13") waived the requirement under section 1501 of the School Code requiring school entities to be kept open for a minimum instructional term of 180 days for the 2019-20 school year. While waiving this requirement, Act 13 does require school entities to make good faith efforts to implement continuity of education plans during the period of extended school closures. School entities, as defined by Act 13, includes school districts, comprehensive career and technical centers, intermediate units, charter schools, cyber charter schools and regional charter schools.

Given current circumstances, school entities are to report total days for the 2019-20 school year to the department using the template below. While these data will not be utilized for subsidy calculation and section 1501 of the School Code does not apply for the 2019-20 school year, these data are important for cataloging the implementation of continuity of education plans and for ensuring a consistent state-level basis for evaluating COVID-19's impact on core educational services.

Complete each section below and submit electronically to the School Services Office at RA-PDE-SchoolService@pa.gov no later than June 30, 2020.

Name of School Entity:
Primary Contact Name:
Title:
Phone Number:
Email Address:

Complete the following	
A. Number of days school was in session up to and including March 13, 2020	
B. Number of days providing continuity of education after March 13, 2020	
C. Number of days used for school entity-wide closures during the 2019-20 school year	
D. Last day of school for the 2019-20 school year, as indicated on the school calendar	
E. Number of make-up days used for closures during the 2019-20 school year	

By signing below, I acknowledge that the above information is true to the best of my knowledge and belief.

Signature of Chief School Administrator	Date