
CHILD DEVELOPMENT CENTER POLICIES & PROCEDURES

TITLE: COVID-19 Health and Safety Plan

POLICY: In an effort to minimize the possibility of exposure to the COVID-19 virus, Vincentian Child Development Center (VCDC) will abide by requirements and recommendations established by the Centers for Disease Control, Department of Human Services, Pennsylvania Department of Health. The Vincentian Collaborative System Clinical Excellence Department will manage COVID-19 Health and Safety Policies and Procedures based on regulatory requirements and recommendations and current data available.

ELIGIBILITY: This policy applies to all VCDC personnel, visitors, parents/guardians, and children.

PROCEDURES:

- I. Use of masks
 - A. Staff
 1. Disposable procedural masks provided at the start of every shift prior to entering the premises
 2. Signage posted throughout the Facility
 - a. Reminders to wear masks
 - b. How to wear mask properly
 - B. Children
 1. Disposable pediatric procedural masks provided at the start of every shift prior to entering the premises
 2. “Mask-up” stickers regularly distributed
 - C. Visitors
 1. All visitors limited to only necessary individuals to maintain Facility operations such as delivery personnel, maintenance staff, and or child therapy staff.
 2. All visitors must wear a face covering either personal or provided by VCDC
 - D. Education for staff and children
 1. Prior to reopen and for all new staff, training in wearing masks properly and when masks are required is provided
 2. Review of mask requirements as needed and at monthly staff meetings
 3. Children provided with developmentally appropriate lessons relating to mask usage
 - E. Monitoring

1. “Mask-Up” campaign including signage and stickers
2. Verbal reminders when inappropriate use of mask or absence of mask

II. Cleaning, Sanitizing and Disinfecting

A. Staff

1. 1-2 individuals assigned daily to complete cleaning/sanitizing/disinfecting
 - a. High touch surfaces including doorknobs, telephones, counters in common areas, adult restrooms
 - b. Laundry-baskets sanitized after placing dirty laundry in washer
 - c. Mouthed toys-placed in “dirty toys” bins and placed outside of the classroom several times a day
 - d. Common play areas-after each use
 - e. Any additional cleaning tasks as they arise
2. Classroom staff to complete at least once a day
 - a. All toys used throughout the day
 - b. Classroom bathrooms
 - c. Changing tables after every use
 - d. Tables and chairs-before/after meals
 - e. Children’s sleeping equipment
 - f. Counters and shelving

B. Children’s bedding

1. Provided by parent
2. Remains at the Facility
3. Removed from equipment daily-except infants
4. Stored nightly in child’s locker
5. Laundered by designated staff weekly

C. Products

1. Clorox Hydrogen Peroxide-Sanitizing/Disinfecting
 - a. Changing tables
 - b. High touch surfaces
 - c. Bathrooms
 - d. Large toys
2. Dawn-for all cleaning
3. All Free and Clear-Laundry
4. Bleach-Laundry and limited sanitizing/disinfecting
5. Mechanical dishwasher-all applicable toys
6. Disinfecting wipes-limit use to items that cannot be sanitized/disinfected using other means

D. Training

1. Prior to reopening
2. New hire-prior to work in classroom

3. Review at monthly staff meetings
 4. Regular reminders-verbal and written
- E. Additional Cleaning Information
1. Open 2-3 classroom windows daily
 2. Electronics wiped with disinfecting wipe

III. Social Distancing and Other Safety Protocols

- A. Classroom social distancing
1. Interest areas labeled with maximum number of children permitted at one time
 2. “Personal space” areas marked within the interest areas where appropriate
 3. Large group activities done in smaller groups and children spaced apart
- B. Staff social distancing
1. Meal breaks
 - a. Outdoors and socially distant recommended
 - b. When indoors, social distancing required
 2. Staff meetings
 - a. Several meetings provided with smaller groups
 - b. Socially distant seating including outside when possible
- C. Child meal times
1. Schedules adjusted to include 2 meal periods for each meal in each classroom
 2. Seating arranged to provide for socially distancing children
 3. Lunches provided by parents must be packed in all disposable containers, i.e. brown bag and plastic baggies
 4. Disposable items used when possible
 - a. Utensils
 - b. Plates
 - c. Cups
 - d. Napkins
 5. Non-disposable items washed in mechanical dishwasher after each use
 - a. Sippy cups
 - b. Infant/young toddler utensils
- D. Child classroom assignments
1. Children transitioned to age appropriate classroom prior to reopening where necessary
 2. Children dropped off in assigned classroom daily
 3. Children remain with assigned classroom group for the entire day
 4. Exceptions due to shared space
 - a. Infant 1 and Infant 2
 - b. Transitional Preschool and Preschool

E. Non-Personnel Individuals in the Facility

1. Parents/Guardians
 - a. Drop-off/pick-up outside
 - b. May enter Facility for emergency reasons and by request
 - c. Must be screened if entering the Facility
 - d. Must wear a mask while on premises
 - e. Must remain socially distant from all children with the exception of their own
2. Maintenance and delivery
 - a. Must be screened prior to entering
 - b. Must wear a mask while on the premises
 - c. Must remain socially distant from all children
3. Facility gross motor spaces
 - a. Only one class permitted in a shared gross motor space at a time
 - b. Only exception to this is the Transitional Preschool and Preschool classes
 - c. Area fully sanitized after each use

F. Hand hygiene

1. Children
 - a. Hands washed upon entering the classroom
 - b. Hands washed
 - (1) After toileting/diapering
 - (2) Before/After meals
 - (3) After returning to the classroom from area other than classroom
 - (4) After wiping nose or coughing
 - (5) At least once every hour
 - c. Hand sanitizer
 - (1) ONLY children two years of age and older
 - (2) Obtain updated hand sanitizer permission slip
 - (3) Use only when soap and water are unavailable
 - (4) DO NOT USE after toileting/diapering or when hands are visibly soiled-
Hands MUST be washed with soap and water
2. Adults
 - a. Hands washed upon entering the classroom
 - b. Hands washed
 - (1) After toileting/diapering including when assisting children
 - (2) Before/After eating/preparing/serving meals
 - (3) After returning to the classroom from area other than classroom
 - (4) After handling any bodily fluids
 - (5) Before/After Administering Medication
 - (6) At least once every hour
 - d. Hand sanitizer
 - (1) Use only when soap and water are unavailable

- (2) DO NOT USE after toileting/diapering or when hands are visibly soiled-
Hands MUST be washed with soap and water

G. Signage

1. “Mask Up” Campaign signage including posters, digital media, and stickers
2. Additional handwashing signs
3. Proper use of masks

IV. Monitoring Health

A. Drop-off and pick-up

1. Drop-Off
 - a. Parents/guardians pull vehicle to the side of the driveway depending on the child’s car seat position
 - (1) Passenger side car seat-right (curb) side of the driveway
 - (2) Driver’s side car seat-left (outer) side of the driveway
 - (3) Two car seats on both sides-either side of the driveway
 - b. Screener completes screening of the child while in the vehicle
 - c. Runner staff removes child from the car and escorts child to classroom
2. Pick-Up
 - a. Parent/guardian pulls vehicle to the side of the driveway as described in “drop-off”
 - b. Runner staff will call for child using two-way radio
 - c. Classroom staff will prepare child for departure
 - d. Runner staff will escort child from classroom to vehicle
3. Screening Procedures
 - a. Staff screenings completed outside before entering building
 - b. Temperature taken-not permitted to enter if over 99.4°
 - c. Asked if experiencing symptoms that are atypical
 - (1) Cough
 - (2) Sore throat
 - (3) Shortness of breath
 - (4) GI
 - (5) Malaise
 - (6) Body rash
 - (7) Loss of taste and/or smell
 - (8) Runny nose/congestion
 - (9) Dizziness
 - d. Additional questions
 - (1) Child

- a) Has child been administered fever reducing Medication in the past 24 hours?
- b) Does the child live with a person who has been exposed or has tested positive for COVID-19 within the past 2 weeks?
- (2) Staff
 - a) Have you been off sick with symptoms?
 - b) If so, how long?
 - c) Number of Days
 - d) Have you worked with or do you live with a person who has been exposed or has tested positive for COVID-19?
- e. If any responses are a yes, the individual may not enter the Facility
- f. If all responses are no, individual provided a mask when applicable and permitted to enter
- g. All information documented on the Childcare Screening Checklist
- 4. Screeners
 - a. Identified screeners trained in proper screening procedures prior to reopening
 - b. Must wear PPE
 - (3) Mask
 - (4) Gown
 - (5) Safety goggles
 - (6) Gloves
- B. Monitoring health throughout the day
 - 1. Classroom staff will monitor children for any symptoms of illness
 - 2. Children exhibiting symptoms of illness will be excluded from group care immediately
 - a. Parent/guardian contacted immediately to pick the child up
 - b. Child brought to office to wait for parent/guardian to arrive
 - 3. All children's temperatures taken at dismissal and recorded on the Childcare Screening Checklist
 - 4. Staff required to self-report any symptoms of illness
 - 5. Staff excluded from the Facility if exhibiting any signs of illness
- C. Return to work/care guidelines
 - 1. The VCS Clinical Excellence Department will make final decisions regarding exclusion and return of staff and children
 - 2. Children and staff exhibiting symptoms of COVID-19 (all criteria must be met)
 - a. At least 10 days have passed since the onset of symptoms
 - b. At least 24 hours have passed since last fever without use of fever reducing medication.
 - c. Symptoms have resolved

3. Children and staff with exposure to an individual who has tested positive for COVID-19 OR with exposure to an individual who is exhibiting symptoms of illness
 - a. Quarantine for a 14-day period from most recent exposure.
 - b. If becoming symptomatic, must also meet additional criteria for “Individuals exhibiting symptoms”
 3. Test based strategy
 - a. Meet criteria for “Individuals exhibiting symptoms”
 - b. Test based strategies require two consecutive negative COVID-19 tests completed \geq 24 hours apart for symptomatic individuals only.
 - c. NOT the recommended approach
 4. Children and staff exhibiting other signs of illness
 - a. Excluded from the childcare environment minimum of 24 hours from the time symptoms have resolved without fever reducing medication
 - b. The VCS Clinical Excellence Department will evaluate individual cases to determine if additional quarantine or testing is necessary prior to returning
- D. Necessary communications of suspected or confirmed COVID-19 cases
1. All communications regarding COVID-19 will be provided by the Senior Director of Child Care Services in collaboration with VCS Clinical Excellence Department and VCS Communications Department
 - d. Individual phone calls to families
 - e. Email
 - f. Written documents
 2. Required reporting to the Department of Health and the Department of Human Services will be completed by the Senior Director of Child Care Services

V. Post COVID-19 closure

A. Staff

1. All staff employed at the time of the COVID-19 closure will be recalled to their prior position upon reopening
2. All staff COVID-19 tested prior to engaging with children
3. Individuals who are uncomfortable returning
 - a. Will be placed on leave for which he/she qualifies
 - b. Must provide anticipated return date
 - c. May or may not be guaranteed a position upon desired return depending on the type of leave

B. Children

1. Parents/guardians provided flexibility to postpone return until a later date
2. Spaces will be held at no cost to the parent/guardian at least until September 2020

3. Beginning September 1, 2020, a 10% holding fee will be charged to save a child's space
 4. The space will be forfeited if the fee is not paid.
 - C. High risk individuals in the Facility
 1. Each case will be evaluated by the VP of Clinical Excellence in collaboration with the Senior Director of Child Care Services with recommendations made by an individual's physician
 2. Accommodations will be made when reasonably possible and safe to do so
- VI. Staff professional development
- A. Hand washing-Relias
 - B. PPE-Relias
 - C. Regular review of Health and Safety Policies/Procedures
 1. Diaper Changing
 2. Hand Washing
 3. Cleaning/Sanitizing
 4. COVID-19 Procedures

POLICY SOURCE: DHS COVID -19 Health and Safety Plan Template
CDC Guidelines

ORIGINATION DATE: June 10, 2020

CROSS-REFERENCE:

DATE REVISED: August 18, 2020

DATE REVIEWED: August 18, 2020