## ReOpening

All these guidelines are based on the CDC daycare recommendations and altered slightly for church ideas--These are just my suggestions to start with....we should/can change as necessary.

## Phased Re-open

- 1. Start with the youngest of our kids and move upward in age as volunteers, supplies and space allows.
  - a. Thought is 3 and under at first...IF we have enough volunteers.
- 2. Sunday mornings to begin before Wednesday nights

### Check-In/Out

- 1. Volunteers are needed at each computer station so that only 1 person is touching the screens.
- 2. Socially distant markers to spread people out for lines
- 3. Wellness/Temp Checks before each student goes into the class--no recording needed (other than our normal attendance)
  - a. If someone has any symptoms or a temp of 100 or above, they will be asked to stay at home for this week's services.
  - b. Volunteers must also be checked each day.
    - i. Temps can be rechecked after 10 minutes of resting if it is suspected that the temperature was elevated due to car/outdoor heat or exertion.
- 4. Pick up will probably need to be at each room instead of together at one station area. Only one person should be present to pick up.

#### Class Names:

Nursery--Born after September 1 2018

Toddlers--Born between September 1, 2017 and August 31, 2018 (Used to be 2 year olds)

Preschool--Born between September 1, 2016 and August 31, 2017 (Used to be 3 year olds)

Pre-K--Born between September 1, 2015 and August 31, 2016 (Used to be Preschool)

This would include all 5 year olds not yet in kindergarten

Kindergarten--Those in Kindergarten (generally those born between September 1, 2014 and August 31, 2015)

#### Disinfecting

- 1. In rooms with toys we get "Dirty Toy" bins. Once a toy leaves a child's hand (or mouth especially for the younger) it goes into the dirty bin.
- 2. Plastic or water resistant toys can go through the dishwasher or into soapy hot water to be cleaned.
- 3. In order to not cross contaminate between two services, there will be separate supplies for each service time.
- 4. Soft toys will mostly be removed, but can go through the washing machine.
- 5. As per CDC unless a book goes into a child's mouth, they are okay to return to the shelves as paper/cardboard are very low risk transmitters. (see CDC list below)
- 6. Cleaning Team will clean hard surfaces between services and any toys left in the hallway during service. They will also wipe down tables before and after snack time.
- 7. After the morning services, the entire room will be sanitized with new machine spray
- 8. Handwashing and sanitizer will be encouraged OFTEN.
  - a. Hand sanitizer will be supplied to each classroom. Most classrooms have access to an in-room sink to wash hands as well.

b. Hand washing guidelines: before and after snack, before returning to parents, after restroom breaks, generally between activities.

#### Masks

- 1. All volunteers are required to wear a face covering, but HIGHLY recommended that to use clear face shields for teachers so kids can see faces of the adults they're interacting with.
- 2. Children Kindergarten and under are not required to wear masks, but may if parents wish.
- 3. Children 2 and under may NOT wear face coverings as per recommendations of the CDC

## Social distancing

- 1. Every attempt at social distancing will be made when possible.
- 2. Volunteers will still hold babies and toddlers appropriately (as recommended by CDC)
- 3. In classrooms, social distancing will be attempted by using tables and chairs spread out and use foam squares 6' apart for floor time.
- 4. No classes will mix together for any activities. There will be playground/gym times for each class so as to not overlap.

## Limiting numbers

- 1. Full Capacity means 8 in the 2 year old room, less in nursery and no more than 14 in 3s and Preschool.
- 2. We need at least 2 volunteers per classroom.

#### Attendance

- 1. Attendance must be taken accurately so if CDC tracing needs to be done, we can hand over records
  - a. This includes all teachers and helpers
  - b. Attendance charts will be left with the room leaders for the entire service and collected after for safe keeping.

#### Snacks

- 1. We will still provide a small snack for each child, but all will be delivered by our snack team.
- 2. Hands will be washed/sanitized before and after.
- 3. See schedule.

# \*\*\*No outside toys should be permitted in the classroom--only essential items from home will be permitted (i.e. pacifiers, bottles, etc.)\*\*

## When Someone Gets Sick

- 1. Plan to have an isolation room or area that can be used to isolate a sick child until parents can take the child home.
- 2. Remove other children from the room where the sick child has been.
- 3. If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.
- 4. Have an extra volunteer on standby each week in case it is a worker that needs to go home.
- 5. If COVID-19 is confirmed in a child or staff member:
  - Close off areas used by the person who is sick.
  - Open outside doors and windows to increase air circulation in the areas.

- Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting.
- Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
- If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.

#### EVERYTHING BELOW IS COPIED STRAIGHT FROM CDC WEBSITE

If Your Child Care Program Remains Open

Child care programs that remain open during the COVID-19 pandemic should address these additional considerations:

- Implement social distancing strategies
- Intensify cleaning and disinfection efforts
- Modify drop off and pick up procedures
- Implement screening procedures up arrival
- Maintain an adequate ratio of staff to children to ensure safety.
  - Plan ahead and recruit those with child care experience to ensure you have a roster of substitute caregivers who can fill in if your staff members are sick or stay home to care for sick family members.
- When feasible, staff members and older children should wear face coverings within the facility. Cloth face coverings should NOT be put on babies and children under age two because of the danger of suffocation.

## Washing, Feeding, or Holding a Child

It is important to comfort crying, sad, and/or anxious infants and toddlers, and they often need to be held. To the extent possible, when washing, feeding, or holding very young children: Child care providers can protect themselves by wearing an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other updo.

- Child care providers should wash their hands, neck, and anywhere touched by a child's secretions.
- Child care providers should change the child's clothes if secretions are on the child's clothes.
   They should change the button-down shirt, if there are secretions on it, and wash their hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
- Infants, toddlers, and their providers should have multiple changes of clothes on hand in the child care center or home-based child care.
- Child care providers should wash their hands before and after handling infant bottles prepared
  at home or prepared in the facility. Bottles, bottle caps, nipples, and other equipment used for
  bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by
  washing with a bottlebrush, soap, and water.

# Clean and Sanitize Toys

Tips for cleaning toys

- Toys that cannot be cleaned and sanitized should not be used.
- Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered

- disinfectant, rinse again, and air-dry. You may also clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.
- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be <u>laundered</u> before being used by another child.
- Do not share toys with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.

#### Clean and Disinfect

(CFOC) provides national standards for cleaning, sanitizing and disinfection of educational facilities for children. Toys that can be put in the mouth should be cleaned and sanitized (see below). Other hard surfaces, including diaper changing stations, door knobs, and floors can be disinfected.

## Cleaning and disinfection efforts:

- Facilities should develop a schedule for cleaning and disinfecting.
- Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games. This may also include cleaning objects/surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, cubbies, and playground structures. Use the cleaners typically used at your facility. Guidance is available for the selection of appropriate sanitizers or disinfectants for child care settings.
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available here
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. Follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
- If possible, provide EPA-registered disposable wipes to child care providers and other staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use. If wipes are not available, please refer to CDC's guidance on disinfection for community settings.
- All cleaning materials should be kept secure and out of reach of children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.

- Hand hygiene stations should be set up at the entrance of the facility, so that children can
  clean their hands before they enter. If a sink with soap and water is not available, provide hand
  sanitizer with at least 60% alcohol next to parent sign-in sheets. Keep hand sanitizer out of
  children's reach and supervise use. If possible, place sign-in stations outside, and provide
  sanitary wipes for cleaning pens between each use.
- Consider staggering arrival and drop off times and plan to limit direct contact with parents as much as possible.
  - Have child care providers greet children outside as they arrive.
  - Designate a parent to be the drop off/pick up volunteer to walk all children to their classroom, and at the end of the day, walk all children back to their cars.
  - o Infants could be transported in their car seats. Store car seat out of children's reach.
- Ideally, the same parent or designated person should drop off and pick up the child every day.
   If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children, because they are more at risk for <u>severe illness from</u> COVID-19.

#### IF SOMEONE GETS SICK

- Plan to have an isolation room or area (such as a cot in a corner of the classroom) that can be used to isolate a sick child. Additional information about isolation in related settings can be found here: isolation at home and isolation in healthcare settings.
- Be ready to follow CDC guidance on how to disinfect your building or facility if someone is sick.
- If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.
- If COVID-19 is confirmed in a child or staff member:
  - Close off areas used by the person who is sick.
  - Open outside doors and windows to increase air circulation in the areas.
  - Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting.
  - Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
  - If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
    - Continue routine cleaning and disinfection.