
Child Care COVID Response & Preparedness Plan

Program Information

Child care program name:

Muskegon Catholic Preschool Small Blessings

Introduction

Our Commitment to Health & Safety

Muskegon Catholic Preschool Small Blessings is committed to protecting the health of our children, families, staff, and community. The following policies were designed in response to guidance from the Michigan Departments of Licensing and Regulatory Affairs (LARA) and Health and Human Services, in accordance with best practices from the Centers for Disease Control and Prevention, and with everyone's well-being in mind. To limit the potential spread of COVID-19, we will be making some temporary changes to our programming that include robust cleaning and disinfecting procedures and minimizing opportunities for person-to-person exposure (e.g., an infected person spreading respiratory droplets through actions such as coughing, sneezing, or talking). The following plan outlines the recommended practices and strategies we will use to protect the health of our children, staff, and families while at the same time ensuring that children are experiencing developmentally appropriate and responsive interactions and environments.

Changes to Our Physical Spaces

We will use the following strategies in our classrooms and facilities to minimize the spread of illness:

1. Where possible, dividing large group spaces to allow more children to safely use the space (e.g., using child-sized furniture, such as rolling shelves and kitchenettes, to divide a room and prevent mixing between groups of children).
2. Where possible, limiting or eliminating use of common spaces in the classrooms/facility. When common spaces must be used, we will rotate use of the space and clean between groups.
3. Before re-opening we will ensure all water systems and drinking fountains are safe following CDC guidelines.
4. Ensuring ventilation systems operate properly and increasing circulation of outdoor air as much as possible (e.g., keeping windows and doors open to the extent that this does not pose safety risks).
5. Using touchless trash cans to provide a hands-free way to dispose of tissues and contaminants.
6. Rearranging classroom areas to seat children as far apart as reasonably possible and limiting the number of children sitting together.

Other policies related to our physical space include:

Use of plexiglass dividers for use with small groups of children.

Availability of Toys and Classroom Materials

At this time, we will make the following changes to the toys and materials in our classrooms:

1. We will remove toys and objects which cannot be easily cleaned or sanitized between use.
2. Given that cloth toys are not recommended at this time, we will remove these from classrooms.
3. We will temporarily suspend use of water and sensory tables.
4. Toys will be washed and sanitized before being moved from one group of children to another.

Mealtimes

To limit opportunities for exposure during mealtimes, we will engage in the following recommended practices:

1. We will space seating as far apart as possible (ideally 6 feet apart) by limiting the number of children sitting together and rearranging seating.
2. We will serve meals in the classroom instead of group dining spaces.
3. Staff and children will wash hands before and immediately after children have eaten.

Naptime

To reduce potential for viral spread, we will engage in the following recommended practices:

1. Using bedding (sheets, pillows, blankets, sleeping bags) that can be washed.
2. Bedding that touches a child's skin will be cleaned weekly or before use by another child.
3. Storing each child's bedding in individually labeled bins, cubbies, or bags.
4. Labeling each child's cot/mat.
5. Ensuring that children's naptime mats/cots/cribs are spaced out as much as possible, ideally 6 feet apart.
6. When possible, children will be placed head-to-toe (i.e., one child with their head at the top of the mat, the next child over with their head at the bottom of the mat).

Items Brought From Home

During this time, we are trying to limit the number of items brought into the facility because this can be a way to transmit the virus, so we ask that families refrain from bringing items from home.

Screening Families & Staff for COVID-19 Symptoms and Exposure

Upon arrival to the program, staff and families are required to report if they or anyone in their household:

**have received positive COVID-19 results;
been in close contact with someone who has COVID-19; and/or
have experienced symptoms such as persistent cough, fever, difficulty breathing, chills,
change in smell or taste, diarrhea, and/or vomiting.**

The procedures we will use to screen staff for symptoms and exposure include:

Mrs. Stephanie Callow, elementary principal, will be responsible for asking staff about COVID-19 symptoms and exposure. Staff is responsible for completing an online symptom/exposure checklist by 6:00 am every morning. Written documentation is stored in HR files.

The procedures we will use to screen children/families for symptoms and exposure include:

Childcare staff will be responsible for asking children and families about COVID-19 symptoms and exposure. Screenings will take place before entering the building. Information will be collected verbally.

If families or staff are absent or otherwise off-site but experience exposure or symptoms, they should contact:

Mrs. Kristi Wagenmaker, elementary administrative assistant,
kwagenmaker@muskegoncatholic.org
231-755-2201 ext.3450

Daily Temperature Checks

Temperature Checks

As fever is the key indicator of COVID-19 in children, we will check each child's temperature upon daily arrival to the program. Staff will also be asked to take their own temperatures upon arrival to work. Staff will re-check children's temperatures throughout the day if they appear ill or "not themselves" (e.g., flushed cheeks, rapid or difficulty breathing without recent physical activity, fatigue, or extreme fussiness).

When children arrive to the program, temperature checks will occur

before children enter the building.

Each child's temperature will be taken by:

program staff.

The following staff members will be responsible for temperature checks:

Childcare staff

To minimize potential spread of illness, staff will:

1. wear a face mask while taking the child's temperature.
2. **disinfect non-disposable thermometers between uses (e.g., cleaned with an alcohol wipe or isopropyl alcohol on a cotton swab).**

Responding to Symptoms and Confirmed Cases of COVID-19

Responding to COVID-19 Symptoms On-Site

If a child or staff member has a temperature above 100.4 degrees and/or symptoms such as persistent cough, difficulty breathing, chills, diarrhea, or vomiting, they will be sent home immediately with the recommendation to contact their primary care physician/medical provider. If anyone shows emergency warning signs (e.g., trouble breathing, persistent pain/pressure in the chest, new confusion, inability to wake or stay awake, or bluish lips or face), we will seek medical care immediately.

If a child develops symptoms during care hours:

- Parents will be contacted for prompt pick-up.
 - The child will be isolated from other children and as many staff as possible (the child will not be left alone).
- Other procedures include:: child will wear face mask

If a staff member develops symptoms during care hours:

- They will be asked to go home immediately.
- Children may need to be picked up if no other caregiver is available.

Reporting Exposure

Reporting Exposure

If a child, staff member, family member, or visitor to our program shows COVID-19 symptoms or tests positive for the virus, we will contact our local health department and licensing consultant. Based on the guidance of the local health department, we will determine whether to close individual classrooms or our facility, the duration of the closure, and other next steps. When communicating with families and staff about any COVID-19 cases, we will respect the privacy of individuals and not share health information of a specific person.

Our local health department can be contacted at:

231-724-1287

Returning to the Program After Experiencing Symptoms and/or a Positive COVID Test

If a staff member or child has a fever OR a cough (but no other symptoms):

If a staff member or child has a fever they will be sent home. Children must be fever free for 24 hours before returning to care. If a staff member or a child has a cough but no other symptoms we will follow existing illness policies.

If a staff member or child exhibits multiple symptoms of COVID-19, possible exposure is expected, OR an individual tests positive for COVID-19, the individual must stay home until:

- They have been fever-free for at least 24 hours without the use of medicine that reduces fevers
- Other symptoms have improved
- At least 10 days have passed since their symptoms first appeared.

As per [Executive Order 2020-36](#), if staff or their close contacts have possible or confirmed cases of COVID-19, staff will be allowed to remain home without penalty of discharge, discipline, or other retaliation.

To accommodate for the potential need to quarantine staff or allow for longer absences from work than normal, we will implement the following staffing plan to ensure we can meet staff to child ratios:

We will have administrators fill in for staff members and have an adequate rotation of caregivers to provide care if a staff member becomes ill or needs to care for a family member.

Because child care staff members are part of Michigan's essential workforce, they are eligible to be tested for COVID-19.

Staff can visit [this resource](#) to locate a nearby test site.

Maintaining Consistent Groups

During this time, we will maintain the following group sizes:

Leave blank if this age group does not apply to your program.

Infants and Toddlers, birth until 30 months of age

Preschoolers, 30 months until 3 years of age

12

Preschoolers, 3 years of age until 4 years of age

12

Preschoolers, 4 years of age until school-age

18

School-agers

18

To minimize potential spread of COVID-19, we will engage in the following best practices:

1. To the extent possible, classrooms will include the same group of children and providers each day.
2. Each group of children will be kept in a separate room.
3. We will adjust staffing patterns to have children dropped off and picked up in their classrooms rather than a combined before-/after-care space.
4. Limiting non-essential visitors, volunteers, and activities including groups of children or adults.
5. Canceling or postponing field trips and special events that convene larger groups of children and families.
6. We will limit the mixing of children across groups by staggering times for outdoor play and other activities where children from multiple classrooms are typically combined.

Drop-Off and Pick-Up Procedures

We will use the following recommended practices during drop-off and pick-up times to protect the health of children, families, and staff.

1. Only one adult per family should be present at drop-off/pick-up. Ideally, this would be the same parent or designated person every day, though we recognize this is not always possible.
2. We will implement staggered drop-off and pick-up times to limit contact among parents.
3. Staff will greet children and families curbside or outside the building and walk children in and out of the building.
4. We will have a hand hygiene station at the entrance to our building so children and parents can clean their hands.
5. We will provide hand sanitizer or wipes at the sign-in station for parents/guardians to clean pens/keypads between each use.
6. We will ask parents and other visitors to wear masks while in the building.
7. We ask that parents avoid congregating in a single space or a large group.

Transportation

We will use the following CDC-recommended practices to ensure the safety of children and staff during transportation:

1. We will limit non-essential work-related travel and have staff participate in training and technical assistance virtually whenever possible.

Hand Washing

We will reinforce regular health and safety practices with children and staff and continue to comply with licensing regulations and CDC hand washing guidelines as follows:

- Staff and children will wash hands often with soap and water for at least 20 seconds.
- Soap and water are the best option, especially if hands are visibly dirty. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available. Staff and children should cover all surfaces of their hands with hand sanitizer, rubbing them together until they feel dry.
- Staff and children (with frequent reminders and support) will cover coughs and sneezes with a tissue or sleeve and wash hands immediately after.
- Wearing gloves does not replace appropriate hand hygiene.
- Hand hygiene is especially important after blowing one's nose, going to the bathroom, before eating or preparing food (or helping children do any of these actions).

Cleaning and Disinfecting

Cleaning and Disinfecting Surfaces

We will engage in the following cleaning and disinfecting practices in accordance with CDC recommendations:

1. Daily cleaning/disinfecting of **high-touch surfaces** (e.g., sinks, toilets, light switches, door knobs, counter and tabletops, chairs).
2. Regular cleaning of **electronics** (e.g., keyboards, parent/staff check-in kiosks) according to manufacturer's instructions.
3. Ensuring staff wear **disposable gloves** to perform cleaning, disinfecting, laundry, and trash pick-up, followed by hand washing.
4. Keeping cleaning products **secure and out of reach** of children, **avoiding use near children**, and ensuring **proper ventilation** during use to prevent inhalation of toxic fumes.
5. Normal routine cleaning of **outdoor spaces**, with special attention to high-touch plastic/metal surfaces (e.g., grab bars, railings).
6. Cleaning **dirty surfaces** using detergent or soap and water prior to disinfection.
7. Use of **CDC-recommended disinfectants** such as EPA-registered household disinfectants, diluted bleach solution, and/or alcohol solutions with at least 70% alcohol
8. Use of a **schedule** for regular cleaning and disinfecting tasks.

Cleaning and Disinfecting Toys

We will engage in the following best practices to clean and disinfect toys:

1. We will clean toys frequently, especially items that have been in a child's mouth.
2. We will set aside toys that need to be cleaned (e.g., out of children's reach in a dish pan with soapy water or separate container marked for "soiled toys").
3. We will clean toys with soapy water, rinse them, sanitize them with an EPA-registered disinfectant, rinse again, and air-dry.

Safety Equipment

Face Mask/Coverings for Staff

Our plan for staff around face masks/coverings is as follows:

Staff are required to wear face coverings at all times on-site.

Use of Gloves

Staff will wear gloves in a manner consistent with existing licensing rules (for example, gloves should be worn when handling contaminants, changing diapers, cleaning or when serving food). Staff members should wash hands before putting gloves on and immediately after gloves are removed. Gloves are not recommended for broader use and do not replace hand washing..

Face Masks/Coverings for Children

Our plan regarding children wearing cloth face coverings during care is:

Children over the age of 2 years of age shall wear a face covering whenever they are not with their consistent group or while eating.

Partnering and Communicating with Families & Staff

Communicating with Staff and Families

We will actively communicate with staff and families to determine when they will return to work/care if they have been out, discuss concerns or questions, share new policies and expectations, and confidentially discuss any extenuating circumstances that have emerged and/or any health concerns/conditions that may elevate risk for complications if exposed to COVID-19.

The staff responsible for handling questions and outreach for **staff** is : Mrs. Stephanie Callow
The staff responsible for handling questions and outreach for **families** is : Mrs. Stephanie Callow

Training Staff

To support staff in effectively engaging in best practices and making personal decisions, we will provide learning opportunities to help all of us understand how COVID-19 is transmitted, the distance the virus can travel, how long the virus remains viable in the air and on surfaces, signs and symptoms of COVID-19, and our new policies and procedures as outlined in this plan.

Supporting Children's Social-Emotional Needs

Staff and families will partner together to support the needs and emotional reactions of children during this time. We anticipate that children will experience a wide range of feelings during this transition period. Some children will be relieved, some will have initial challenges with separation from their parent(s), some may demonstrate anger at the "disappearance" of their child care provider, and some may act out toward other children. Whatever the reactions, we acknowledge that staff and families may need some new tools in their toolkit to assist the child with emotional regulation and we will work together to support all caregivers.

We will make the following resources available for staff and families to support children:

[Crisis Parent and Caregiver Guide](#), from the Michigan Children's Trust Fund
[Talking with Children about COVID-19](#), from the CDC
[Helping Young Children Through COVID-19](#), from Zero to Thrive (includes Arabic and Spanish translations)
[Georgie and the Giant Germ](#), from Zero to Thrive and Tender Press Books

Supporting Staff Members' Social-Emotional Needs

To ensure the well-being of the children, it is also imperative to ensure the well-being of their teachers and caregivers, and to provide them with the emotional and administrative supports necessary during this time of re-integration, and in the months ahead. As essential workers in the COVID-19 pandemic, we understand our staff may have worries about their own physical or psychological health, and the potential risk to their family members at home. Because young children internalize the stress of the adults who care for them, we know it is vitally important to provide supports and services to ensure the emotional well-being of our staff.

Contact Information

Email address

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