

Child Care COVID Response & Preparedness Plan

Program Information

Child care program name:

Northwest Co-Op Preschool

Introduction

Our Commitment to Health & Safety

Northwest Co-Op Preschool 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. Rearranging classroom areas to seat children as far apart as reasonably possible and limiting the number of children sitting together.
2. Using touchless trash cans to provide a hands-free way to dispose of tissues and contaminants.

Availability of Toys and Classroom Materials

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

1. Given that cloth toys are not recommended at this time, we will remove these from classrooms.
2. We will temporarily suspend use of water and sensory tables.
3. 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. Staff and children will wash hands before and immediately after children have eaten.

Other policies related to mealtimes include:

Each child will bring his/her own snack instead of sharing a community snack.

Naptime

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

1. Ensuring that children's naptime mats/cots/cribs are spaced out as much as possible, ideally 6 feet apart.

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 as much as possible. However, we recognize that placing limits on children's comfort items may increase stress for children and staff as they may be especially needed during this time of transition.

We ask that families and staff follow these guidelines with regard to children's comfort items:

1. If possible, comfort items should remain at the child care facility to avoid cross-contamination.

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:

Kathryn Wilson will report to Brooke Calderon (our class representative) if she has any symptoms or exposure to COVID-19. The in-class adult will also report to Brooke if they have had any symptoms or exposure. Temperature checks will be done daily for both the teacher and the in-class adult.

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

The in-class adult will use a checklist system to ask each family prior to entering the building if they or anyone in the family is experiencing symptoms or has been exposed to COVID-19.

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

(Board President) Heidemarie Petersen at (734) 218-4396
(Health Chairperson) Leann Lahmann at (616) 481-4688

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:

Temperature checks will be taken through the car window by the in-class adult.

Alternatively, the child's masked parent can bring their masked child into the stairwell and the in-class adult does the temp check there.

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).
- The child will wait with the following designated staff member(s):: The gross-motor skills room with the door open.

If a staff member develops symptoms during care hours:

- If no other caregiver is immediately available to be with children, the staff member will put on a cloth face covering (if not already on) and limit close interactions with children until they can be relieved by another staff member. Other procedures include: Class cancellation if Kathryn Wilson is sick in the morning.

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:

(616) 632-7228

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):

The class will be canceled in the event that Kathryn Wilson is developing a fever or cough. If a child has a fever, they must be free from fever for 72 hours before returning to school. In the interest of public health, we also ask that the child remains at home if they have a cough.

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 72 hours without the use of medicine that reduces fevers AND
Other symptoms have improved AND
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:

In the event of long-term sickness, we will ask our normal substitute, Mrs. Campbell, to come in. If she is unavailable, class will not be held.

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

Preschoolers, 3 years of age until 4 years of age

10

Preschoolers, 4 years of age until school-age

10

School-agers

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

1. Limiting non-essential visitors, volunteers, and activities including groups of children or adults.

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. Staff will greet children and families curbside or outside the building and walk children in and out of the building.
3. We will have a hand hygiene station at the entrance to our building so children and parents can clean their hands.
4. We will ask parents and other visitors to wear masks while in the building.
5. We ask that parents avoid congregating in a single space or a large group.

Other policies related to drop-off and pick-up include:

At drop-off, the in-class adult asks if there's been any exposure or symptoms to COVID-19, then takes the temperature of each child from inside their car. If all looks good, the masked child and masked parent can go inside the building for drop-off.

At pick-up, the in-class adult is texted when people arrive. They escort the child to the door for pick-up. This minimizes lingering between parents.

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 should assist children with hand washing (especially infants who cannot wash hands alone) and use of hand sanitizer to ensure proper use and prevent ingestion.
- 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. Use of a **schedule** for regular cleaning and disinfecting tasks.
3. Use of **CDC-recommended disinfectants** such as EPA-registered household disinfectants, diluted bleach solution, and/or alcohol solutions with at least 70% alcohol
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.

Cleaning and Disinfecting Toys

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

1. 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").
2. We will clean toys with soapy water, rinse them, sanitize them with an EPA-registered disinfectant, rinse again, and air-dry.

Other policies related to cleaning and disinfecting include:

There will be a classroom tote for kids to deposit the toys they've played with so that they can get sanitized at the end of the day.

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 are required to wear face coverings/masks at all times when on-site, except during snack time.

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 : Heidemarie Petersen

The staff responsible for handling questions and outreach for **families** is : Leann Lahmann

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.

We commit to supporting our staff in the following ways:

Keeping open communication about comfort level, risks, challenges, and other obstacles with our teacher.

Contact Information

Email address

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