



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.

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:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
<p>* Use of face coverings (masks or face shields) by all staff and visitors</p>	<ul style="list-style-type: none"> • Childcare Staff are required to wear a face mask or shield unless they fit one of the exceptions included in the Order. • Masks were provided to staff during orientation and additional masks are available if needed. • Staff will be written up if they don't properly wear their masks. 	<p>Nicole Miller Director Kaitlyn Widdoss Summer Care Manager</p>	<p>Masks/ face shields</p>	<p>N</p>
<p>* Use of face coverings (masks or face shields) by children 2 years of age and older (as appropriate)</p>	<ul style="list-style-type: none"> • Children are required to wear a face mask or shield unless they fit one of the exceptions included in the Order. • All of our children are over the age of two. The only time not required is when the children are outside and maintaining distances, resting, or eating. 	<p>Classroom Teachers</p>	<p>Masks/ face shields</p>	<p>N</p>

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:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
<p>* Cleaning, sanitizing, disinfecting, and ventilating, surfaces, and any other areas used by children in care (i.e., restrooms, drinking fountains, toys, hallways, and transportation)</p>	<ul style="list-style-type: none"> • Maintain routine cleaning and disinfecting of frequently touched surfaces daily throughout facilities • Cleaning procedures include two-stage cleaning and disinfecting. “Cleaning” entails washing with a detergent and water to remove soil, organic matter, and some microorganisms from a surface. • Following a detergent and water wash, “disinfecting” entails use of a U.S. Environmental Protection Agency (EPA)-approved disinfectant that must be applied in accordance with product manufacturer guidelines. • Cleaning and disinfecting of communal spaces between groups. Cleaners will allow for disinfectant to remain on treated surfaces for sufficient time to fully disinfect. • Clean and disinfect all shared items and equipment. Assigning items where possible to reduce the quantity of items shared. Also, cleaning and disinfecting of shared items between uses. • There will be no use of the water fountains. • Hourly scheduled bathroom breaks with time in between groups to sanitize. 	<p>Maintenance (Jack or James)</p> <p>Classroom Staff</p> <p>Additional staff for extra cleaning</p>	<p>Soap, water solution EPA sanitizer and disinfectant</p>	<p>Y- during Orientation</p>

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD (Y/N)
Other cleaning, sanitizing, disinfecting, and ventilation practices	<ul style="list-style-type: none"> • Upon entry, children sanitize their hands. • Once they reach the classrooms, they wash their hands. • Additionally, they often wash hands with soap and water for 20 seconds. • When they wash or disinfect hands –Before and after eating food •After being in contact with someone who may have been sick •After touching frequently touched surface (railings, doorknobs, counters, etc.) •After using the restroom •After using common items, such as sports equipment, computer keyboards and mice, craft supplies, or being outside, etc. •After coughing, sneezing, or blowing their nose • If soap and water are not readily available, they use an alcohol-based hand sanitizer with at least 60% alcohol. • The groups try to be outside as much as possible. 	Classroom teacher	Soap, paper towels	Y- Orientation

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:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
<p>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</p>	<ul style="list-style-type: none"> • Each classroom will be set up with tables that will keep the children six feet apart. • While children are inside, they will keep their masks on. • Spaces are marked on the floor for children to stand if they line up. • Transitions are limited. • Children stay in cohorts of 1 to 9- 1 teacher to 9 children; same teacher, same kids 	<p>Classroom teacher Nicole Miller Director</p>	<p>Tables, chairs, tape for marked spaces</p>	<p>N</p>
<p>Restricting the use of common areas, and consider serving meals in alternate settings such as where the child care is being provided</p>	<ul style="list-style-type: none"> • Children eat their meals in the classroom. • Use of the gym is used only during rainy days and scheduled with staggered times to allow for sanitization in between cohort groups. • Groups are assigned to different bathrooms at different times with sanitization time scheduled in. 	<p>Classroom Teacher Kaitlyn Widdoss Summer Care Manager</p>	<p>Food Schedules</p>	<p>N</p>

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
<p>* Hygiene practices for children in care and staff including the manner and frequency of hand-washing and other best practices</p>	<ul style="list-style-type: none"> • Upon entry, children sanitize their hands. • Once they reach the classrooms, they wash their hands. • Additionally, they often wash hands with soap and water for 20 seconds. • When they wash or disinfect hands –Before and after eating food •After being in contact with someone who may have been sick •After touching frequently touched surface (railings, doorknobs, counters, etc.) •After using the restroom •After using common items, such as sports equipment, computer keyboards and mice, craft supplies, or being outside, etc. •After coughing, sneezing, or blowing their nose • If soap and water are not readily available, they use an alcohol-based hand sanitizer with at least 60% alcohol. • The groups try to be outside as much as possible. 	<p>Arrival Staff Classroom staff</p>	<p>Hand sanitizer Soap, water, sinks</p>	<p>N</p>
<p>Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs</p>	<ul style="list-style-type: none"> • Signs are posted throughout the building; specifically entering and exiting classrooms, hallways and in the restrooms. 	<p>Kaitlyn Widdoss Summer Care Manager</p>	<p>CDC signage, tape, lamination paper</p>	<p>N</p>

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	<ul style="list-style-type: none"> • No visitors are permitted past the drop off points or front desk. • We do not have any volunteers at this time. • Children will be dropped off in the alley between the main building and LCC or in the front room if they are a walker. • Child's temperature will be taken-Temp must be below 100.4 degrees Fahrenheit Screening questions we ask parents when they drop off their children will include: – If the child has experienced any of the following: Fever or chills, Cough, Shortness of breath or difficulty breathing, Fatigue, Muscle or body aches, Headache, New loss of taste or smell, Sore throat, Congestion or runny nose, Nausea or vomiting, Diarrhea – If they have been exposed to anyone who has or is suspected to have COVID 19. – If they have travelled anywhere that is a “Hotspot state” or has had someone staying with them from a “Hotspot state” ❖If they answer “Yes” to any of these questions, children or staff will not be allowed to enter the building. 	Nicole Miller Director Kaitlyn Widdoss Summer Care Manager Front Desk staff Arrival Staff	N/A	N
Handling outdoor play consistent with the CDC Considerations	<ul style="list-style-type: none"> • Children have scheduled time to be on the playground with sanitizing time scheduled in between. • One cohort plays in one section at a time without comingling. • If using the playground, children will sanitize their hands before and after use. • Equipment will be disinfected between each group. 	Classroom teacher	Hand sanitizer, disinfectant spray	N

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Limiting the sharing of materials among children in care	<ul style="list-style-type: none"> • Children will be provided with individual bags that contain materials that are regularly used. • Materials that vary daily by the craft will be distributed by the teacher. 	Classroom teacher	Materials bags	N
Staggering the use of communal spaces and hallways	<ul style="list-style-type: none"> • Different restrooms are assign to different classes to eliminate chances of overlapping. • Restroom and gym use are scheduled with additional time in between in order to stagger and allow for cleaning. 	Kaitlyn Widdoss Summer Care Manager	Restroom schedules	N
Adjusting transportation schedules and practices to create social distance between children in care	<ul style="list-style-type: none"> • We are not offering transportation at this time due to COVID. • Once school starts, Transportation will be provided by the school district. 	Stroudsburg Area School District Transportation		
Limiting the number of individuals in facility rooms and other facility spaces, and interactions between groups of children in care	<ul style="list-style-type: none"> • Groups are limited to a 1 to 9 ratio. • We have assigned restrooms for the staff that works in the facility, the children and the members. Each are disinfected after each use, based off of the “Clean and “needs attention signage. • Children stay in their cohorts and do not comingle. • Facility programs, that share the same space, are offered after the children leave the facility. 	Nicole Miller Director Maintanance Classroom Teachers Steffanie Bush Co-Operations Director	N/A	N
Coordinating with local schools regarding transportation protocol changes and, when possible, revised hours of operation or modified school-year calendars	<ul style="list-style-type: none"> • Communicate regularly with Superintendents and their secretaries to plan and stay abreast of any changes. 	Nicole Miller Director	Phone numbers of the Superintendent and their Secretaries	N

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
Other social distancing and safety practices	<ul style="list-style-type: none"> • CDC encourages physical distancing through increased spacing, small groups, and limited mixing between groups, and staggered scheduling, arrival, and drop off, if feasible. • CDC defines close contact as interactions within 6 feet for more than 15 minutes. • Maintain a small group ratio of 1 to 9. • This group will stay together the whole time and will not mix with other groups. • When possible, children will use their individual materials for activities. • Bathroom and transitions times are built into the schedule in order to keep groups separate with opportunities to clean in between the groups. 	Nicole Miller Director Kaitlyn Widdoss Summer Care Manager	CDC information Observation and feedback	Y- during orientation and regularly reminded in our daily morning meeting.

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:

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
<p>* Monitoring children and staff for symptoms and history of exposure</p>	<ul style="list-style-type: none"> • Communicate to parents the importance of keeping children home when they are sick. • It is included in the Parent Handbook. • Screening questions will be asked upon entry in the morning and temperature will be taken. • Communicate to staff the importance of being vigilant for symptoms and staying in touch with facility management if or when they start to feel sick or see that the children are not feeling well. • Staff and children must quarantine for 14 days upon return from a Hotspot state. • Staff MUST notify Nicole, Maria, Erin or Kait if they or any of their children show any of these symptoms. • If a report of an ill child is made, temperatures will be taken. 	<p>Nicole Miller Director</p>	<ul style="list-style-type: none"> • Open communication with families • Parent Handbook • Screening questions and thermometer 	<p>N</p>

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
<p>* Isolating or quarantining children, staff, or visitors if they become sick or demonstrate a history of exposure</p>	<ul style="list-style-type: none"> • Sick children and staff will be kept separate from well children and staff until they can be sent home. • Children who show symptoms will be moved to the 1st floor of LCC (tarpred area) until their parents show up. • Sick staff members should not return to work until they have met the Criteria to Discontinue Home Isolation. • Immediately inform parents/legal guardians about any potential contact their children may have had with suspected or confirmed cases • Immediately inform parents/legal guardians if their child(ren) are experiencing any symptoms. • Report to DHS and DOH if someone is exposed to a positive case. • Refer to the Summer Care’s Communicable Disease Plan (CDP) 	<p>Nicole Miller Director</p> <p>Kaitlyn Widdoss Summer Care Manager</p>	<ul style="list-style-type: none"> • Isolation room • Criteria to Discontinue Home Isolation • Parent Contact information • DHS & DOH contact information 	<p>Y- Orientation</p>
<p>* Returning isolated or quarantined staff, children, or visitors to the facility</p>	<ul style="list-style-type: none"> • If a child or staff member has been exposed to a person that tests positive they will be required to self-quarantine for 14 days. • If they travel or host someone from a “Hotspot” state, they will be required to quarantine for 14 days. • We will utilize the Discontinuing at Home Isolation strategy that best fits the circumstances the situation provides while ensuring the health and safety of the staff and children. • OR if they present 2 negative COVID tests 	<p>Nicole Miller Director</p> <p>Erika Huber Co- Operations Director/ HR</p>	<ul style="list-style-type: none"> • List of the “Hotspot States • The Discontinuing from Home Strategy List. 	<p>N</p>
<p>* Notifying staff and families of suspected or confirmed cases of COVID-19</p>	<ul style="list-style-type: none"> • Utilize the COVID Response Checklist to determine the severity of the situation. • Phone call and letter will be distributed if there is a suspected or confirmed case. • Additional information will be provided about the closure of the facility for cleaning purposes. 	<p>Nicole Miller Director</p>	<ul style="list-style-type: none"> • COVID Exposure Response Checklist • Coronavirus parent notification letter 	<p>N</p>

Requirements	Action Steps	Lead Individual and Position	Materials, Resources, and or Supports Needed	PD Required (Y/N)
*Reporting to DOH and Certification	<ul style="list-style-type: none"> Director will notify DOH and Certification 	Nicole Miller Director	Phone numbers to the correct officials	N
Other monitoring and screening practices	<ul style="list-style-type: none"> Listen to what the children say and follow up with families about any concerning comments. 	Nicole Miller Director Kaitlyn Widdoss Summer Care Manager	Parent phone numbers	N
Notifying staff and families of facility closures	<ul style="list-style-type: none"> Staff members and families will receive an email letter and a notification through the Remind app. 	Nicole Miller Director Kaitlyn Widdoss Summer Care Manager	Remind, email addresses	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	<ul style="list-style-type: none"> • Staff and children were provided the opportunity to decide whether or not they felt comfortable returning. • Extra cleaning is done as a precaution. • Social distancing and masks are reinforced consistently. 	Nicole Miller Director Staff members	<ul style="list-style-type: none"> • Information from children and staff about their higher risk factors. • Care plan checklist for children with special needs. 	N
Unique safety protocols for children with complex needs or other vulnerable individuals	<ul style="list-style-type: none"> • Develop a care plan for those children with special needs. -If we have children with disabilities, we will talk to their parents about how their children can continue to receive the support they need. 	Nicole Miller Director Staff members	<ul style="list-style-type: none"> • Information from children and staff about their higher risk factors. • Care plan checklist for children with special needs. 	N
Strategic deployment of staff				

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
Summer Care Orientation	Whole staff	Nicole Miller	2 days	Powerpoint, handouts	6/4/2020	6/5/2020
Registration meetings	Families	Erin or Kait	Upon registration	Registration packets, waivers	6/1/2020	ongoing
Daily Morning Meetings	Whole staff	Nicole Miller	15 minutes	Up to date information	6/8/2020	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
Updates/ weekly theme information	Families	Kaitlyn Widdoss	Remind App	6/14/2020	Ongoing
Health and Safety Reminders	Families	Nicole Miller	Email, Remind App	6/5/2020	Ongoing
Daily morning meetings	Staff	Nicole Miller	Meeting	6/8/2020	Ongoing

COVID-19 Health and Safety Plan Summary:

Pocono Family YMCA

Plan Date:6/4/2020 (in Powerpoint format) 8/4/2020 on template

Anticipated Reopening Date, if applicable: 6/8/2020

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
<ul style="list-style-type: none">* 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)	<ul style="list-style-type: none">• Childcare Staff are required to wear a face mask or shield unless they fit one of the exceptions included in the Order.• Masks were provided to staff during orientation and additional masks are available if needed.• Staff will be written up if they don't properly wear their masks.• Children are required to wear a face mask or shield unless they fit one of the exceptions included in the Order.• All of our children are over that age of two. The only time not required is when the children are outside and maintaining distances, resting, or eating.

Facilities Cleaning, Sanitizing, Disinfecting and Ventilation

Requirement(s)	Strategies, Policies and Procedures
<ul style="list-style-type: none">* Cleaning, sanitizing, disinfecting, and ventilating learning spaces, surfaces, and any other areas used by children (i.e., restrooms, drinking fountains, hallways, and transportation)	<ul style="list-style-type: none">• Maintain routine cleaning and disinfecting of frequently touched surfaces daily throughout facilities• Cleaning procedures include two-stage cleaning and disinfecting. "Cleaning" entails washing with a detergent and water to remove soil, organic matter, and some microorganisms from a surface.

Requirement(s)	Strategies, Policies and Procedures
	<ul style="list-style-type: none"> • Following a detergent and water wash, “disinfecting” entails use of a U.S. Environmental Protection Agency (EPA)-approved disinfectant that must be applied in accordance with product manufacturer guidelines. • Cleaning and disinfecting of communal spaces between groups. Cleaners will allow for disinfectant to remain on treated surfaces for sufficient time to fully disinfect. • Clean and disinfect all shared items and equipment. Assigning items where possible to reduce the quantity of items shared. Also, cleaning and disinfecting of shared items between uses. • There will be no use of the water fountains. • Hourly scheduled bathroom breaks with time in between groups to sanitize.

Social Distancing and Other Safety Protocols

Requirement(s)	Strategies, Policies and Procedures
<p>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.</p> <p>Restricting the use of common areas, and consider serving meals in alternate settings such as where the child care is being provided</p>	<ul style="list-style-type: none"> • Each classroom will be set up with tables that will keep the children six feet apart. • While children are inside, they will keep their masks on. • Spaces are marked on the floor for children to stand if they line up. • Transitions are limited. • Children stay in cohorts of 1 to 9- 1 teacher to 9 children <ul style="list-style-type: none"> • Children eat their meals in the classroom. • Use of the gym is used only during rainy days and scheduled with staggered times to allow for sanitization in between cohort groups. • Groups are assigned to different bathrooms at different times with sanitization time scheduled in.

Requirement(s)	Strategies, Policies and Procedures
<p>*Hygiene practices for children and staff including the manner and frequency of hand-washing and other best practices</p> <p>Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs</p> <p>Handling outdoor play consistent with the CDC Considerations.</p> <p>Limiting the sharing of materials among children in care Staggering the use of communal spaces and hallways</p> <p>Adjusting transportation schedules and practices to create social distance between children</p> <p>Limiting the number of individuals in facility rooms and other facility spaces, and interactions between groups of children</p> <p>Coordinating with children regarding on site care, transportation protocol changes and, when possible, revised hours of operation or modified school-year calendars</p> <p>Other social distancing and safety practices</p>	<ul style="list-style-type: none"> • Upon entry, children sanitize their hands. • Once they reach the classrooms, they wash their hands. • Additionally, they often wash hands with soap and water for 20 seconds. • When they wash or disinfect hands –Before eating food •After being in contact with someone who may have been sick •After touching frequently touched surface (railings, doorknobs, counters, etc.) •After using the restroom •After using common items, such as sports equipment, computer keyboards and mice, craft supplies, etc. •After coughing, sneezing, or blowing their nose • If soap and water are not readily available, they use an alcohol-based hand sanitizer with at least 60% alcohol. • The groups try to be outside as much as possible. <ul style="list-style-type: none"> • Signs are posted throughout the building; specifically entering and exiting classrooms, hallways and in the restrooms. <ul style="list-style-type: none"> • No visitors are permitted past the drop off points or front desk. • We do not have any volunteers at this time. • Children will be dropped off in the alley between the main building and LCC or in the front room if they are a walker. • Child’s temperature will be taken-Temp must be below 100.4 degrees Fahrenheit Screening questions we ask parents when they drop off their children will include: – If the child has experienced any of the following: Fever or chills, Cough, Shortness of breath or difficulty breathing, Fatigue, Muscle or body aches, Headache, New loss of taste or smell, Sore throat, Congestion or runny nose, Nausea or vomiting, Diarrhea – If they have been exposed to anyone who has or is suspected to have COVID 19. – If they have travelled anywhere ♦If they answer “Yes” to any of these questions, children or staff will not be allowed to enter the building.

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

- Communicate to parents the importance of keeping children home when they are sick.
 - It is included in the Parent Handbook.
 - Screening questions will be asked upon entry in the morning and temperature will be taken.
 - Communicate to staff the importance of being vigilant for symptoms and staying in touch with facility management if or when they start to feel sick or see that the children are not feeling well.
 - Staff and children must quarantine for 14 days upon return from a Hotspot state.
 - Staff **MUST** notify Nicole, Maria, Erin or Kait if they or any of their children show any of these symptoms.
 - If a report of an ill child is made, temperatures will be taken.
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- **Keep sick children and staff separate from well children and staff until they can be sent home.**
 - **Children who show symptoms will be moved to the 1st floor of LCC (tarpred area) until their parents show up.**
 - **Sick staff members should not return to work until they have met the Criteria to Discontinue Home Isolation.**
 - **Immediately inform parents/legal guardians about any potential contact their children may have had with suspected or confirmed cases**
 - **Immediately inform parents/legal guardians if their child(ren) are experiencing any symptoms.**
 - **Report to DHS and DOH if someone is exposed to a positive case.**
 - **Refer to the Summer Care's Communicable Disease Plan (CDP)**
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- **If a child or staff member has been exposed to a person that tests positive they will be required to self-quarantine for 14 days.**
 - **If they travel or host someone from a "Hotspot" state, they will be required to quarantine for 14 days.**
 - **We will utilize the Discontinuing at Home Isolation strategy that best fits the circumstances the situation provides while ensuring the health and safety of the staff and children.**
 - **If they present 2 negative COVID tests**

Requirement(s)	Strategies, Policies and Procedures
	<ul style="list-style-type: none"> • Utilize the COVID Response Checklist to determine the severity of the situation. • Phone call and letter will be distributed if there is a suspected or confirmed case. • Additional information will be provided about the closure of the facility for cleaning purposes.
	<ul style="list-style-type: none"> • Director will notify DOH and Certification
	<ul style="list-style-type: none"> • Listen to what the children say and follow up with families about any concerning comments.
	<ul style="list-style-type: none"> • Staff members and families will receive letters and a notification through the Remind app.

Other Considerations for Children and Staff

Requirement(s)	Strategies, Policies and Procedures
<p>* Protecting children and staff at higher risk for severe illness</p> <p>Unique safety protocols for children with complex needs or other vulnerable individuals</p> <p>Strategic deployment of staff</p>	<ul style="list-style-type: none"> • Staff and children were provided the opportunity to decide whether or not they felt comfortable returning. • Extra cleaning is done as a precaution. • Social distancing and masks are reinforced consistently. <ul style="list-style-type: none"> • Develop a care plan for those children with special needs. -If we have children with disabilities, we will talk to their parents about how their children can continue to receive the support they need.

COVID-19 Health and Safety Plan Affirmation Statement

The Legal Entity or the Board of Directors/Trustees for **Pocono Family YMCA** reviewed and approved the Phased Child Care Facility Reopening Health and Safety Plan on **(Insert Date as Month, Day, Year)**.

The plan was approved by a vote of:

_____ **Yes**

_____ **No**

Affirmed on: **(Insert Date as Month, Day, Year)**

By:

(Signature of Legal Entity or Legal Entity Representative)

(Print Name of Legal Entity or Legal Entity Representative)