**COVID-19 Handbook**

**Safe Child Care Standards**

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CHILD CARE & PARENT INSTITUTE

**MISSION STATEMENT**

We are committed to striving for the highest possible standards in childcare and early education programs and, in so doing, supporting the children, families, students and professionals of the Nest Child Care and Parent Institute. At Nest, children are encouraged to explore the world around them and we are motivated to help them discover their world by providing a space that is emotionally secure, physically safe and fun!

**VISION**

We strive to be a dynamic, professional force dedicated to improving the lives of young children through providing consummate care and early education for children, support systems and resources for families, model training, and development opportunities for early childhood educators.

**Introduction**

Nest Child Care and Parent Institute has always prioritized the health and safety of the children in our care. With the spread of COVID-19, new health and safety protocols are necessary to ensure children, families, and staff members are as safe as possible.

This document provides guidance to help make the best decisions possible to limit the spread of COVID-19 and to create safe spaces for children and staff members. We will continue to update the document based on our best knowledge, the Governor’s most recent Executive Orders as well as updates received respectively from CDC, LARA, Office of Head Start and other agencies working in the field to learn about how best to fight this virus while providing quality child care. We will continue to monitor https://www.michigan.gov/coronavirus for up-to-date information about whether child care providers can open and which families we can serve.

These COVID-19 Safe Child Care Standards will address how we will prepare for and respond to COVID-19. In this standard, we will address:

* How we will monitor symptoms of COVID-19.
* How our programs will practice social distancing, as developmentally appropriate.
* How we will ensure hygiene (including regular cleaning and disinfecting).
* How we will use safety equipment (including PPE, when appropriate).
* How we will communicate protocol for families to report symptoms or a positive test and policies on when children will be excluded from care.
* What isolation procedures we will use in case of symptoms or confirmed cases onsite.
* How we will maintain required staff to child ratios in the event that a staff member(s) becomes ill.

Please familiarize yourself with the information in this handbook. It should give you a clear guidance on handling COVID-19 in the center while detailing policies and procedures that we will use in order to stop the spread and keep our staff, children and families safe.

**Preparing Our Physical Space for Child Care Programming**

Nest Child Care and Parent Institute will make the following updates or changes to our physical space to make it safer for children and staff to help prevent the spread of COVID-19.

* We will utilize our multi-purpose room (Conner) and lobby (Inkster) to safely isolate individuals who develop symptoms during care. These areas are in a separate area away from other children where the sick child/staff can wait until they are picked up.
* We will remove toys and objects which cannot be easily cleaned or sanitized between use.
  + Toys will be limited to items made of materials that can be easily sanitized or disinfected.
  + Wooden toys are not ideal but can be used if appropriately cleaned after use or at the end of the day.
  + Cloth toys are not recommended at this time.
* We will limit the use of common spaces. When possible, we will divide large group spaces or rearrange seating to allow more children to safely use the space. For example, use child-sized furniture, such as rolling shelves and kitchenettes, to divide a room and prevent mixing between groups of children. If common spaces must be used, we will be rotating the use of the space.
* We will not practice family style meal service, we will modify meal service to have students eat together, but not serve themselves.
* We will continue to use touchless trash cans to provide a hands-free way to dispose of tissues and contaminants.
* We will perform a health and safety check prior to opening and ongoing to ensure ventilation systems operate properly and that we are continually practicing COVID-19 safe practices.
* We will increase circulation of outdoor air as much as possible. Open windows and doors, whenever possible. We will not open windows or doors if doing so poses a safety or health risk to children in the center.

**General Healthy Hygiene and Behavior**

We will continue to reinforce the best practices we already use with children and staff to limit the spread of COVID-19.

**Hand Washing**

We will continue to reinforce regular health and safety practices with children and staff.

* Children and staff will wash hands often with soap and water for at least 20 seconds. Children and staff will wash hands after blowing nose, coughing, sneezing; going to the bathroom; and before eating or preparing food.
* Wearing gloves does not replace appropriate hand hygiene. Staff will wash hands before and after glove use.
* Children and staff will primarily use soap and water as it is the best health and safety option, especially when hands are visibly dirty. Hand sanitizer will only be used when soap and water is not readily available, children and staff will use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of their hands and rubbing them together until they feel dry.
* Children and staff will continue to cover coughs with a tissue or cough into their elbow.
* Children and staff will avoid touching eyes, noses, and mouths with unwashed hands.
* Staff will continue to *implement CDC handwashing guidelines*. We will print and post the CDC handwashing flyers throughout the center to continue to educate and promote healthy handwashing.

**Parent Drop-Off And Pickup**

To minimize the potential spread of COVID-19, we will limit the number of individuals in our center at drop-off, pick-up and throughout the day. Only essential visitors will be allowed into the center. The multi-purpose room or lobby will be used for drop-off and pick-ups limiting parents from entering the center. We will also stagger arrival and drop off times and limit direct contact with parents to the extent possible.

* Limit the number of people dropping off or picking up a child to one adult.
* Upon arrival, parents and children will enter the multi-purpose room for screening.
* Parents will answer a questionnaire about the health of everyone in their household.
* Parents will sign their child in/out via HiMama. Any health and safety concerns will be documented in the child’s profile.
* Children will have their temperature taken, exchange indoor shoes from outdoor shoes, wash their hands at the portable sink station, and then enter into the center.
* Once in the center, the child will be directed to the lavatory to wash their hands again for 20 seconds with soap and warm running water. We will identify handwashing songs to ensure that the children wash their hands for at least 20 seconds.
* The child will then be taken to their respective classroom.

**Food Preparation And Meal Service**

Our food will continue to be delivered and prepared as usual. The food already comes packaged for each classroom. We will continue to deliver the food to the classrooms. However, the children will not be served family-style; instead the teachers will make plates and serve the children.

**Vulnerable/High Risk Groups**

Children with pre-existing health conditions that could make them more vulnerable to COVID-19 will need verification from a doctor to return to child care at the NEST. We will speak with parents that may have children with underlying issues such as Asthma to determine whether or not if they feel that their child can return. An asthma plan will be put in place. *We will also follow the recommendations of the CDC for other vulnerable and high risk groups.*

**Cleaning And Disinfecting**

We will continue to use our current cleaning protocols at least twice on a daily basis for items touched frequently. Common areas will require a deep clean at least twice a day. We will also use these guidelines from the CDC for cleaning and disinfecting.

* Clean toys frequently, especially items that have been in a child’s mouth.
* Continue to use robust cleaning protocols on at least a daily basis for items touched frequently. This may require designated cleaning staff.
* Common areas require at least a daily deep clean (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). *Use these guidelines from the CDC for cleaning and disinfecting.*

**Items From Home**

For health, safety and sanitary reasons, we prohibit items from home. The only acceptable items from homes are changes of clothes and shoes.

* If it is necessary, to reduce the stress for children we will allow comfort items needed during this time of transition as they may reduce stress for children and staff members. To avoid these items coming into contact with many children, efforts will be made for these items to be placed in a cubby or bin and be used at naptime or as needed. A comfort item will only be allowed if it can remain at the center to avoid cross contamination. The comfort items should also be washed at least weekly.

**Personal Protection Equipment (PPE)**

Personal Protective Equipment (PPE) is necessary in childcare settings to keep individuals safe. Child care staff *do not* need to wear N95 or surgical masks, smocks, or face shields, however, other protective equipment is appropriate.

**Masks or Cloth Face Coverings: STAFF**

* Staff will wear cloth masks at all times. By Executive Order, Governor Whitmer has required all employers whose workers perform in-person work to provide non-medical grade face coverings to their workers. This includes child care providers. Cloth face coverings, such as a homemade mask, scarf, bandana, or handkerchiefs, are best. N95 masks and surgical masks are not recommended at this time. The CDC provides more guidance for how to properly wear and sanitize a cloth face covering.
* Staff will also attend to children’s social emotional health. We will use strategies to prepare children for seeing their caregivers in masks and attend to children’s emotional responses to this new normal. One option is for caregivers to share a picture of themselves with and without the mask in advance of a child’s return to care.

**Masks or Cloth Face Coverings: CHILDREN**

* Children will not be required to wear masks. We will maintain consistent groups and limit the use of common spaces.
* Parents of children over the age of 3, can request that their child wear a mask. However, the parent must provide the mask, the child must also be able to apply/remove the mask without assistance, the mask must be taken home and sanitized on a daily basis.
* Cloth face coverings will be prohibited on young children under age 3, anyone who has trouble breathing, or anyone unable to remove the face covering without assistance. *The American Academy of Pediatrics provides tips for how to help children be more comfortable wearing cloth face coverings.*

**Masks or Cloth Face Coverings: PARENTS**

* Parents will need to have masks on at drop- off and pick- up times, hand sanitizer will be available for parents. There will be no entry into the building without face mask or covering.

**Gloves**

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

**Monitoring of Symptoms of COVID-19**

We will screen for COVID-19 symptoms when children and staff arrive, throughout the day and when re-check is required if an individual appears sick or displays symptoms for COVID-19. We will utilize our HiMama app to communicate and document all health and safety concerns with children and staff as it relates to COVID-19. We will encourage open dialogue with families to report possible illness if anyone in their household shows symptoms or has tested positive for COVID-19.

**Health Screening for Children**

Fever is the key indicator for young children. If a child’s temperature is above 100.4 degrees, the child will be excluded from care. Cough and/or diarrhea in addition to fever is suggestive of coronavirus.

* When children arrive we will perform temperature checks. We will have multiple thermometers available for screening. Thermometers will be cleaned and disinfected between uses, following the manufacturer’s instructions. Temperatures can be taken orally or by a body scan.
* We will be screening for cough, shortness of breath, difficulty breathing, change in smell or taste, and diarrhea. Children arriving with a fever above 100.4 or other symptoms must be sent home.
* We will visually check the child for signs of illness, including flushed cheeks, rapid or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
* We will continue to monitor symptoms throughout the day and monitor temperatures when children appear ill, “not themselves” or if we suspect COVID-19 symptoms.
* Children with a fever alone, or a fever with a cough and/or diarrhea will be isolated from the group and their parents contacted for prompt pick up. Their parents should contact their primary care physician/medical provider.
* Parents should report contact with anyone outside of work who has had a documented case of COVID-19. The parent and the child will be instructed to self-quarantine if they have been exposed to COVID-19 for 14 days.

During the drop-off screening, we will ask parents:

1. Has your child been in close contact with a person who has COVID-19? (If yes, the family should self-quarantine for 14 days.)
2. Has your child felt unwell in the last 3 days (such as persistent cough, temperature, difficulty breathing, cold, diarrhea and/or vomiting)? If yes, the child must stay home until the symptoms are no longer present.

**Health Screening for Staff**

* When staff members arrive we will perform temperature checks. We will have multiple thermometers available for screening. Thermometers should be cleaned and disinfected between uses, following the manufacturer’s instructions.
* Staff arriving with fever above 100.4 or other symptoms must be sent home.
* Staff should report contact with anyone outside of work who has had a documented case of COVID-19. Staff should be instructed to self-quarantine for 14 days if they have been exposed to COVID-19 and will need to be tested with a negative result status. Because child care staff are part of Michigan’s essential workforce, they are eligible to be tested for COVID-19 for free.

**Health Screening for Families**

We will have a discussion with our families about the importance of these COVID-19 safety guidelines. Families will be informed in advance of daily temperature checks and the protocol for sending children and staff home. Families should report possible illnesses if anyone in their household shows symptoms or has tested positive for COVID-19, including the child or family members. These children will need to be in quarantine for 14 days, and COVID-19 testing should be done.

During the drop-off screening, we will ask parents:

1. Has your child been in close contact with a person who has COVID-19? (If yes, the family should self-quarantine for 14 days.)
2. Has your child felt unwell in the last 3 days (such as persistent cough, temperature, difficulty breathing, cold, diarrhea and/or vomiting)? If yes, the child must stay home until the symptoms are no longer present.
3. Have you had a positive COVID-19 test result? (If yes, the family should self-quarantine for 14 days.)
4. Are you experiencing any symptoms such as fever, cough, diarrhea/nausea, reduced smell/taste or shortness of breath? (If yes, the family should self-quarantine for 14 days.)
5. Have you been in close contact with others exhibiting symptoms or texted positive? (If yes, the family should self-quarantine for 14 days.)

**Responding to Possible / Confirmed Cases of COVID-19**

We will do our part in helping our community limit the spread of the virus.

* We will **send anyone who becomes symptomatic home immediately.** If possible, children and staff should leave care right away if they are ill.
* We **will isolate individuals who become ill while in care but can’t leave immediately.**
  + For children: We will isolate the child in a safe location (multi-purpose room or lobby area) until the child can be picked up. We will not leave children alone.
  + For staff: We will immediately send staff home.
  + If an individual is the only caregiver, they should 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.
* *We will follow the CDCs guidance for how to watch for warning signs that symptoms are escalating and how to keep yourself safe when caring for someone who is sick.*
* We will **report exposure**. If a child, staff member, family member, or visitor to our center becomes ill with COVID-19 symptoms, we will contact our local health department and licensing consultant for next steps. Staff and families of children in care are also required to report to the Nest if they become symptomatic or receive positive COVID-19 test results. When notifying parents if COVID-19 was present in the facility, we will remember to respect the privacy of individuals in our care by not sharing health information of a specific person.
* We will **determine whether to close the classroom or facility based on guidance from the local health department**. If an individual in a classroom is identified with a positive test for COVID-19 the classroom should be closed, cleaned and everyone in that classroom should be quarantined for 14 days initially.
* We will contact our local health department for guidance and best practices and to determine if our entire facility must close.

**Guidelines for Returning to Care and Work**

**All Staff will be required to take the COVID-19 Testing with a negative Result before returning to work.**

Staff members and children should stay home and self-isolate if they show symptoms of COVID-19. It can be challenging to determine when to isolate young children because they are ill more often than adults, and the cause of a fever is sometimes unknown.

If a staff member or child has a fever or a cough, we will follow our child and staff illness policy. At this time, it is recommended that children be fever free for 72 hours before returning to care (even if other symptoms are not present).

**Symptoms and Exclusions**

Any one of the following symptoms requires children or staff to stay home from school and inform us as soon as possible.

* + A fever of 100.00 above
  + Cough
  + Shortness of breath
  + Stomach cramping
  + Diarrhea or nausea
  + Fatigue

If a staff member or child exhibits multiple symptoms of COVID-19, if we suspect possible exposure, or an individual tests positive for COVID-19, the individual must stay home or self-isolate until:

* Has 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 your symptoms first appeared.

Most children and staff members can return to care/work based on improved symptoms and the passage of time. Local health departments may recommend that some individuals (for example, immunocompromised individuals) receive two negative tests in a row, 24 hours apart. Families will be encouraged to have back-up child care plans if the child or a family member becomes ill or is required to self-quarantine due to possible COVID-19.

We will allow staff who are not feeling well to remain home without penalty. Under Executive Order 2020-36, employees may not be discharged, disciplined, or otherwise retaliated against for staying home when he or she is at particular risk for infecting others with COVID-19.

**Reporting Exposure**

We will **report all exposure**. If a child, staff member, family member, or visitor to our center becomes ill with COVID-19 symptoms, we will contact our local health department and licensing consultant for next steps. Staff and families of children in care are also required to report to the Nest if they become symptomatic or receive positive COVID-19 test results. When notifying parents if COVID-19 was present in the facility, remember to respect the privacy of individuals in our care by not sharing health information of a specific person.

**Determination to Close Classrooms or Facility**

We will **determine whether to close the classroom or facility based on guidance from the local health department**. If an individual in a classroom is identified with a positive test for COVID-19 the classroom should be closed, cleaned and everyone in that classroom should be quarantined for 14 days initially. We will contact our local health department for guidance and best practices and to determine if our entire facility must close.

**Center and Classroom**

**Sanitation and Cleaning Schedules**

We will continue to use our current cleaning protocols at least twice on a daily basis for items touched frequently. Common areas will require a deep clean at least twice a day. We will also use these guidelines from the CDC for cleaning and disinfecting.

* Clean toys frequently, especially items that have been in a child’s mouth.
* Continue to use robust cleaning protocols on at least a daily basis for items touched frequently. This may require designated cleaning staff.
* Common areas require at least a daily deep clean (for example, sinks, bathrooms, doorknobs, tabletops, and shared items). Use these guidelines from the CDC for cleaning and disinfecting.

**Products Being Used for Daily Cleaning**

For now, until alternative cleaning products are identified and available. We will continue to use bleach solution for cleaning and sanitizing.

**Room Arrangements**

Where possible we will divide our rooms to accommodate two small groups of children and 1 teacher using our shelving units as dividers. The teachers will have the same children to keep the consistency.

**Outdoor Play**

Outdoor Play will be scheduled to where only ½ of a class will be outside at a time. The director or ECE Coordinator will go outside with the class to ensure that 2 adults are outside at all times.  Play equipment will be sprayed down with bleach solution after each use. If this is not adequate we will revisit, revise and/or eliminate outdoor play.

**Maintaining Groups (Consistent Teaching Staff with Children)**

Whenever possible, we will limit group sizes to be less than 10 and

teaching staff will divide class into small groups of 4-5 children depending on age. This is especially important in classes with more children (for example, preschool classrooms). As much as possible, classrooms should include the same group of children and caregivers.

* Consistent adults should remain with groups of similar aged children. It is particularly important that infants less than six months are separated from older children because they cannot be vaccinated against influenza.
* Contact with external adults and between groups of children should be limited.
* Place cribs, porta-cribs, cots and mats at least six feet apart, when possible. Place bedding in head-to-toe positioning.
* If smaller groups sizes are not possible for smooth daily child care operation, we will continue using Head Start/licensing guidelines for group size. Adhering to strict hand hygiene, social/physical distancing, no mixing of groups, and cloth face coverings (for those staff and children that can tolerate) recommendations are a must.
* Symptom screening and protocols on how to handle illness for staff and children need to be followed and enforced.

**Assess Drop Off and Pick Up Times**

To minimize the potential spread of COVID-19, we will limit the number of individuals in our center at drop-off, pick-up and throughout the day. Only essential visitors will be allowed into the center. The multi-purpose room or lobby will be used for drop-off and pick-ups limiting parents from entering the center. We will also stagger arrival and drop off times and limit direct contact with parents to the extent possible.

**Limit or Eliminate Use of Common Spaces, i.e. Playgrounds**

We will limit the use of common spaces. When possible, we will divide large group spaces or rearrange seating to allow more children to safely use the space. For example, use child-sized furniture, such as rolling shelves and kitchenettes, to divide a room and prevent mixing between groups of children. If common spaces must be used, we will be rotating the use of the space.

* We will create smaller child use areas when using large spaces to keep children from gathering outside of their group whenever possible.
* We will stagger times for outdoor play or gym time, whenever possible.
* We will eliminate the use of water and sensory tables and frequently touched objects.
* If common spaces remain in use (such as the playground), we will clean the space in between groups.

**Practice Social Distancing**

We acknowledge that social distancing is very challenging in a child care setting. However, we will practice safe COVID-19 practices to ensure the safety of children and staff. We will exclude parents from entering the center, require essential visitors to wear masks, gloves and shoe covers, limit group sizes, limit the number of staff members caring for a child, and the number of spaces a child is in during the day as much as possible.

**Staffing**

**Date of Expected Return to Work**

It is unknown at this time.

**Training Provided Regarding COVID-19 Precautions Prior To First Day With Children**

Training is currently being identified for re-opening.

**Medical Clearances**

All Staff will be required to take the COVID-19 Testing with a negative Result before returning to work.