

Our Savior Early Learning Center COVID-19 Preparedness Plan

Our Savior Early Learning Center meets and maintains all health and safety requirements mandated by the State of Minnesota. In addition to these guidelines OSELC has developed a COVID-19 Preparedness Plan to address the unique needs of staff and children in care during this the COVID-19 pandemic.

This plan includes strategies such as social distancing, limiting group sizes, hygiene and cleaning, screening and exclusion criteria as recommended with guidance from the MDH and the CDC.

The COVID-19 Preparedness Plan includes the following components as required by Minnesota DHS Licensing:

1. Frequent Handwashing

- We have established and maintain frequent handwashing routines, especially upon arrival. If soap and water are not available, we use a hand sanitizer that contains at least 60% alcohol. Children are supervised when using hand sanitizer and that it is inaccessible to them when not in use.
- CDC guidance on handwashing can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#HandHygiene>
- Handwashing procedures are posted at all handwashing sinks. Posted handwashing procedures will be adhered to. Staff will monitor and assist a child who needs help. Hands will be washed with soap and water for a minimum of twenty seconds.

Children's hands are washed with soap and water at a minimum:

- Upon arrival to the program and when moving from one child care group to another
- After a diaper change
- After the use of a toilet or a toilet training chair
- Before and after eating a meal or snack
- After coughing, sneezing, blowing nose
- Before and after using a water sensory table or playdough
- After playing outdoors
- After feeding or touching pets or other animals
- Any time hands look or smell dirty
- Before going home

Staff will wash their hands with soap and water at a minimum:

- Upon arrival to the program and when moving from one child care group to another
- After changing a child's diaper or helping a child in the bathroom
- After using toilet facilities
- Before and after handling food, eating or feeding a child
- Before and after preparing or giving medication
- After coughing, sneezing, wiping noses, mouths, sores, or cuts

- After doing First Aid
- After handling body fluids
- After handling sick child
- After feeding or touching pet or other animals
- After touching garbage
- Any time hands look or smell dirty
- After cleaning
- Before going home

2. Cleaning and disinfecting

- Protocols related to cleaning and disinfection of the program are detailed so that staff know what is expected of them. We follow MDH and CDC guidance for frequent cleaning and disinfecting of our program:
 - <https://www.health.state.mn.us/diseases/coronavirus/schools/clean.pdf>
 - <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>
- We ensure high-touch surfaces such as doorknobs, light switches, stair rails, counters, tables and chairs, shared toys, program equipment and other items are frequently cleaned and disinfected during the day, in addition to regular cleaning and disinfecting schedules.
- Toys that cannot be cleaned and sanitized are not to be used.
- Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions are set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry. We also toys as needed in a mechanical NSF rated dishwasher.
- Machine washable cloth toys are used by one group at a time or not be used at all. These toys are washed in hot water and dried in a hot dryer before being used by another group, no less than once per week.
- Toys are not shared with other groups of infants, toddlers, or preschoolers unless they are washed and sanitized before being moved from one group to the other.
- Toys that need to be cleaned are set aside. They are placed in a dish pan with soapy water or put in a separate container marked for “soiled toys.” Dish pan and water are kept out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for first cleaning, followed by disinfection with an EPA registered spray product. We have enough toys so that the toys can be rotated through cleanings.
- Children’s books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- We use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. We keep each child’s bedding separate on individual assigned and labeled cots. Bedding that touches a child’s skin is cleaned weekly or before use by another child.
- We minimize the use of shared supplies (e.g. arts and crafts, office supplies) that cannot be sanitized and use designated bins for clean and used items. We have suspended the use of the sensory tables in all classrooms for the duration of the pandemic.
- With guidance from DHS, we have minimized the volume of toys and activities available in each classroom to better maintain a strict cleaning and disinfecting schedule.

- Procedures for cleaning and disinfection areas in the Program after persons suspected or confirmed to have COVID-19 are as follows:
 - Close off areas used by the person who is confirmed sick. Relocate remaining group outside or to gym.
 - Open outside doors and windows to increase air circulation in the area.
 - After the center is closed, the area may be cleaned and disinfected. This will include all toys, hard and soft, furniture and all surfaces.
 - Vacuum the space as per usual, removing the HEPA filter and discarding after use in the space being disinfected.
 - Once the room is appropriately and completely disinfected, it may be re-opened for use.

3. Arrival and Departure

- Whenever possible, parents/guardians are strongly encouraged to limit the person(s) dropping off and picking up to one family member.
- Ask parents/guardians to take their child’s temperature before coming to the facility.
- Ask the parent/guardian to confirm that the child does not have fever, shortness of breath or cough.
- Make a visual inspection of the child for signs of illness which may include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
- Deny entry to any child with symptoms consistent with COVID-19.

4. Plans for sick children or staff

- We conduct daily health checks. This includes screening for children and staff to ensure those who exhibit any symptoms of illness are not present.
- We follow MDH guidance for exclusion to ensure children and staff with any illness under the exclusion guide <https://www.hennepin.us/-/media/hennepinus/residents/health-medical/infectious-diseases/general-exclusion-ill-persons.pdf> stay at home.
- For children or staff who have symptoms consistent with COVID-19, and who have received either a positive or a negative lab test, or for those who have symptoms consistent with COVID-19 and choose not to seek medical care and recover at home, the exclusions are as follows:
 - Stay at home at least 7 days since symptoms first appeared AND until no fever for at least 24 hours without medication AND absence of other symptoms. Symptoms may include fever (101 or higher), new onset cough or shortness of breath, chills, muscle pain, sore throat, loss of sense of smell or taste, gastrointestinal symptoms of diarrhea, vomiting or nausea.
- If a child or staff is diagnosed with COVID-19, OSELCL will communicate this information in a timely manner to all families and staff in an email.
- If a child/staff becomes sick while at school, that person will be isolated until they leave or are picked up. The child separated from the group will be monitored by staff at a safe distance and the area will be cleaned and disinfected after the child is picked up. Parents and staff will be notified via email of the illness. Appropriate cleaning and disinfecting of the area the sick child/staff used will be done immediately.
- Staff are protected by privacy law and are only required to inform the Director/Assistant Director of possible COVID-19 exposure and testing, whether negative or positive.

- We are minimizing the mix of children by keeping each group of children separate throughout the day, exclusive of the first and last half hour of each day when numbers are low enough to reduce risk to a minimum level.
- Large muscle activities will be staggered to allow each group to use the indoor/outdoor space as scheduled.
- Bathroom usage is staggered between groups.
- Staff assigned to each group remains the same each day, unless they are fully vaccinated (2 weeks post last shot). Unvaccinated staff will stay with the same group each day.
- At nap time, children's naptime mats (or cribs) are spaced out as much as possible, using a map so that each child is placed in the same location each day.
- Unvaccinated staff are mindful of social distance and use the 6 foot rule to maintain distance between each other within in the classroom and the break room. Fully vaccinated (2 weeks post last shot) staff may resume normal social distancing if they choose, consistent with the most recent recommendations from the CDC.

5. Source control and cloth face coverings

- Cloth face coverings are an important piece for mitigating the spread of the virus but are most effective if it can stay in place without being pulled on or touched by the person wearing it or others. Within this context, staff may wear face coverings if they choose to while in the classroom, bearing in mind the viability of maintaining the face covering without touching it during the day while caring for small children. Fully vaccinated (2 weeks post last shot) staff may move about the center without face covering if they so choose, consistent with the most recent recommendations from the CDC. Unvaccinated staff will wear face coverings when in all public, indoor spaces outside the classroom. Children should not wear cloth face coverings unless they can reliably wear, remove, and handle the cloth face covering throughout the day. Cloth face coverings should NOT be put on infants or children younger than 2 because of the danger of suffocation.

6. Workplace ventilation

- Our HVAC is regularly serviced by our maintenance staff, which includes timely replacement of clean filters and cleaning of cold air returns.
- We open windows frequently when possible to bring in fresh air for circulation.
- We add extra outdoor time to our curriculum whenever possible.

7. Playground use

- We stagger playground use rather than allowing big groups to play together.
- Hands are washed before and after touching play structures.
- Hard surfaces are cleaned and disinfected daily of all large muscle equipment.

8. Meals and snacks

- Meals and snacks are prepared in our kitchen by a specific designated staff.

- Meals and snacks are plated and served individually, not family style, using disposable dishes and utensils.
- Meals are served in individual classrooms.

9. Field trips and events

- We have temporarily discontinued large group activities, such as field trips and family events until after the COVID-19 crisis is resolved.
- We may consider in-house field trips using carefully screened presenters. All families would be notified in advance of an in-house field trip, and given the choice to keep their child out of the activity. In-house field trips will be held in small group settings, with group limits in place. Social distancing would be maintained and groups would not be mixed. Cleaning and sanitizing will occur between groups.

10. Communications and training

- This plan is available upon request and has been sent digitally to all staff and families.
- This plan is posted on the center bulletin board and a hard copy is readily accessible to all of our staff and families who need to review it. Training has been provided for staff to ensure everyone is aware of and following the plan. Changes to the plan will be communicated to all staff and families as they occur.
- Staff with concerns about this COVID-19 Preparedness Plan or questions about their rights should contact MNOSHA Compliance at osha.compliance@state.mn.us, 651-284-5050 or 877-470-6742.

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