Seattle Parks & Recreation/Associated Recreation Council Preschool Protocols - COVID-19 Response: For Families and Participants UPDATES 9/1/2020

Purpose:

To provide updates on best practice in implementing childcare programs based on current recommendations, guidelines or directives from Governor Inslee, Mayor Durkan, Department of Health (DOH), Public Health-Seattle/King County (PHSKC) and Centers for Disease Control (CDC) in response to the Coronavirus COVID-19 pandemic.

Health & Wellness:

- 1. Drop off and pick up should occur at designated entry door of the facility
 - A. Parents should not enter building
 - B. No one answering 'yes' to screening questions or that has a fever should pass the screening station.
- 2. Staff, children, or youth sick with any illness must stay home and are not allowed entry.
- 3. ARC staff will utilize electronic sign in/out for attendance tracking after a child has passed screening.
- 4. ARC staff implement wellness check protocols throughout the day.
- 5. Use of proper PPE for children and staff as outlined below:
 - A. Staff PPE: Cloth face mask to be worn at all times during work hours. Gloves to be worn during food preparation and preparing materials for children's activities.
 - a. Safety goggles and gloves for staff conducting routine wellness checks.
 - B. Children PPE: Cloth face masks families should bring child(ren) to program with a cloth mask/covering.
 - Public Health Seattle/King County (PHSKC) guidelines mandate face masks/coverings for participants over the age of 2 years old in indoor or outdoor settings where they cannot adequately maintain proper social distancing of at least six feet. Children will not be expected to wear face masks/coverings when doing indoor or outdoor physical activity where it is possible to maintain proper social distancing of at least six feet.
 - Center for Disease Control (CDC) guidelines state cloth face coverings should:
 - fit snugly but comfortably against the side of the face
 - be secured with ties or ear loops
 - include multiple layers of fabric that: allow for breathing without restriction and can be laundered daily and machine dried without damage or change to shape

Participant Illness Protocols (including illness during program):

Participant wellness questionnaire includes the following questions parents will be asked daily. Care will not be provided if the answer is "yes" to any item:

Does your child/youth have any of the following symptoms? [on the first day for a new program or for a new child questions should be answered to include the past 3 days (72 hours)]:

- ✓ A cough
- ✓ Shortness of breath or difficulty breathing
- ✓ A fever of 100.4°F or higher or a sense of having a fever
- ✓ A sore throat
- ✓ New loss of taste or smell

- ✓ Muscle or body aches
- ✓ Nausea/vomiting/diarrhea
- Congestion/running nose not related to seasonal allergies
- ✓ Unusual fatigue
- ✓ Headache
- Does anyone in your household have any of the above symptoms?
- Has your child/youth been in close contact with anyone with suspected or confirmed COVID-19?
- Has your child/youth taken any medication to reduce a fever before coming to care?

If the answer to all of the above questions is "no", your child will also be observed for signs of being sick, such as flushed cheeks and tiredness.

Seasonal Allergies

- A. Children with physician confirmed seasonal allergies may show some COVID-like symptoms, this does not exclude them from participating in childcare programs.
- B. If your child has seasonal allergies that might present as COVID-like Symptoms (runny nose, sore throat, etc.) you must document your child's allergies in ePACT. You will also need to complete the Allergy Form with Physicians signature (available for download in ePACT). If a child with COVID-Like symptoms attributed to allergies has a doctor verified Allergy Form on file, we can still admit them if the parent verifies the symptoms are consistent with the child's allergies and cannot be attributed to COVID-19."
- C. You should:
 - Ensure child's forms list allergies
 - Ensure Supplemental Allergy form is completed and signed by Physician.

Isolating an ill Child:

'Isolation' area in each facility will be designated and will not be used for any other purpose. We will isolate and support children who are showing illness symptoms until they can be immediately picked up by parent. (Children will never be left unsupervised). If, while in our care, a child displays symptoms of illness and/or fever, the child will be isolated and kept comfortable while the parent or guardian is notified. If removal from the program is warranted, the parent will be contacted for immediate pick up of the child by the parent/guardian, an emergency contact, or authorized pick up person. If the parent or guardian cannot be reached, emergency contacts and/or authorized pick up persons will be called.

Returning to a program after illness or suspected signs of COVID-19:

- If a staff member or child has been ill and the illness is confirmed, in writing from a Doctor, as non-COVID-19 related they can return to program once they are symptom free for 72-hours (3 days).
- A staff member or child who is sick or has a suspected or confirmed COVID-19 case must stay home and away from others until:
 - \circ $\;$ at least 10 days have passed since their symptoms first appeared AND $\;$
 - they have had no fever for at least 72 hours (three full days without the use of medicine that reduces fever)
 - AND
 - other symptoms have improved (for example, symptoms of cough or shortness of breath have improved)
- People who interacted closely with a confirmed case but do not have symptoms should stay home for 14 days, look for symptoms, and tell their healthcare provider if symptoms develop.
- Students and staff who were not exposed (i.e. did not interact closely with the infected person) should still look for symptoms.
- Following exclusion, children or staff are readmitted to the program when they no longer have any symptoms and/or Public Health exclusion guidelines for childcare are met.

CONTAGIOUS DISEASE - Parents/guardians are to inform the program director immediately when their child contracts a contagious disease (including, but not limited to coronavirus, chicken pox, conjunctivitis, mumps, measles, viral infections, lice) or is exposed to one.

• Incidents of contagious disease will be reported to the County Health Department at 206-296-4774. To ensure the safety of ALL participants in our program, we require a doctor's note indicating that the child is no longer contagious, and it is safe for the child to return to the program.

Children or Staff in close contact with someone suspected or confirmed with COVID-19:

A "suspected case" = a person who shows symptoms of COVID-19 but has not yet been tested or is waiting for test results. A "confirmed case" = a person (with or without symptoms) who received a positive result from a COVID-19 laboratory test.

- Seattle Parks and Recreation and ARC management staff, in consultation with Public Health Seattle/King County, will assess and determine appropriate action and will notify staff and participant's parents of situation to include:
 - Whether your child(ren) in our childcare community had close contact with the individual while that person was sick or in the 48 hours prior to the illness. Close contact includes being within 6 feet of a suspected or confirmed case for about 10-15 minutes.
 - Information about self-quarantining children, staying home and watching for symptoms for a period of time (potentially 3-14 days) while test results are pending.
 - A copy of the **COVID-19 Fact Sheet for Families**.
 - Results of test when available.
 - A positive test result will require all people that had close contact to self-quarantine for 14 days from point of exposure.
- Families working in essential services (such as health care workers and first responders) who are able to keep their child at home and out of childcare during this 14-day period *without* affecting these vital services should do so. *However*:
 - Public Health Seattle & King County encourages childcares to *consider* staying open to families that work in essential services (e.g. healthcare) who do not have this option, as long as the child remains well.
 - Childcare providers *may* continue to work during the 14-day period if they:
 - do not have symptoms AND
 - wear a cloth face covering at all times while working in the childcare facility
 - Families should not send their children to other childcare facilities while recovering from illness or watching for symptoms.

General Childcare Operations:

- Outdoor activities will be increased to promote greater physical distancing and healthy activity.
- Structured programming will support social distancing guidelines.
- Restrictions on what children may bring from home (e.g., toys, baseball gloves, food)
- Providing virtual learning supports families must provide electronic device, charging cord, child's schedule, passwords for device and on-line learning portal.
- Enhanced cleaning and personal safety protocols (e.g., repeated hand washing, cleaning of restrooms, cleaning of countertops and door handle, cleaning of other high contact surfaces).
- Staff and participant health and safety is the priority and PHSKC recommendations will be followed.
- Note: Playgrounds are closed. NO Field Trips.

Hygiene Practices:

- Practice frequent hand washing with soap and water for at least 20 seconds, and handwashing will be required upon arriving at the center, when entering the classroom, before meals or snacks, after outside time, after going to the bathroom, and prior to leaving for home.
- If soap and water are not readily available, an alcohol-based hand sanitizer with at least 60% alcohol will be used.
- Children will be advised to avoid touching their eyes, nose and mouth with unwashed hands.
- Cover coughs or sneezes with a tissue, then throw the tissue in the trash and clean hands with soap and water or hand sanitizer (if soap and water are not readily available).

Group Size & Social Distancing:

- Staff-to-child ratio: 2 staff per classroom. A single room cannot exceed 22 people and cannot exceed licensing capacity. The actual room capacity is determined by size of room and number of people so that 6-foot distancing can be maintained.
- The same staff and children will remain in the same assigned classroom/areas. Groups will not combine, and youth will remain in the same group day to day. This includes not combining for meals and outdoor play.
- Planned activities will not require physical contact between children.
- Shared equipment will be sanitized between each group's uses.

If a float person is brought into the room, these practices should be followed:

- Any staff who is not a normal part of the classroom group must wash hands immediately upon entering and upon leaving the space.
- Any staff providing breaks who is not a normal part of the group must wear a cloth face covering at all times when they are in the group space.
- We will consider timing when bringing in staff who are not normally part of a group to minimize close interactions with children.
- Staff who are taking breaks will keep a physical distance of at least 6 feet from other staff.

Food & Meals:

- Families will provide or ensure their children have a lunch.
- If meal opportunities through Seattle School District or City of Seattle Human Services Department are available families will be notified.
- Afternoon snacks will be provided for all participants.
- Family-style meals will not be allowed, children will not serve themselves.
- Pre-packaged meals will be served when possible.
- Staff will not eat with children or in classroom spaces.

Public drinking fountains, Water Jugs and bottle fillers:

- If drinking fountains are open the button or lever will be regularly cleaned and disinfected.
- Water fountains may be closed in facilities by direction of the Safety Office.
- Water alternatives will be provided to participants.

Indoor Activities:

- Staff will facilitate small group activities with an optimal ratio of 1:4 and/or 1:8 whenever possible.
- Large group activities, including morning circle time, will not be allowed per guidance on social distancing.
- Free play will be supervised to maintain social distancing.
 - For preschool nap time, mats/cots will be placed six feet apart with a minimum distance of three feet apart.
 - WAC requires cots/mats to be cleaned, sanitized and air-dried at least one per week or more often as needed if used by only one child, or after each use if used by more than one child.

Outdoor Play:

- Outdoor play is encouraged with maintaining social distancing.
- Playgrounds will be closed for use and not permitted for outdoor play until directed for reopening by Seattle Parks and Recreation.
- Only same classroom groups and not over 8 youth will be permitted to play together. Groups will not combine.

General Cleaning Expectations:

Due to the highly contagious nature of the Coronavirus (COVID-19) and the need to protect the health of participants, staff, and families all program staff will conduct enhanced cleaning, on a daily basis, to all areas and surfaces that are frequently touched by staff and participants (i.e. light switches, door knobs, bathrooms and all fixtures etc.) to support the prevention of the spread of COVID-19.

Children's toys

- Will be washed and sanitized according to PHSKC guidelines.
- We will rotate toys out so they can be adequately cleaned and sanitized.

Program Closures:

- Decisions to close or change operations of programs will be made by the Recreation Director, in consultation with ARC's Executive Director, using guidance from our SPR Superintendent and PHSKC recommendations.
- Staff or Participant Exposures and Confirmed Case:

- Exposure of a staff or participant to a person with a confirmed case may result in that person selfquarantining for recommended period of time and program closing temporarily to deep cleaning.
- A staff person or participant has a confirmed case of COVID-19, the program will close. PHSKC recommendations will be followed for self-quarantine and future program operation.

If there is a case of COVID-19 in our childcare community operations will be assessed considering:

- The person sick with COVID-19 spent time in the childcare setting and interacted closely with others while ill. Close interactions include being within 6 feet of a confirmed case for about 10 minutes, or if someone with COVID-19 coughed on you, kissed you, shared utensils with you, or you had contact with their body secretions.
- 2. High rates of absenteeism among staff/children makes it difficult to provide quality care.

Actions that will be taken during a closure:

Notification will be sent to families whose children had close contact with the person while the person was sick. See COVID-19 Fact Sheet for Families.

- Participants and staff, who had close contact and have symptoms, will be advised to stay at home and away from others and to tell their doctor.
- Participants and staff, who had close contact with the sick individual and do not have symptoms, will be advised to stay at home for 14 days from their last contact with that person and to look for possible symptoms.
- Clean and disinfect facility.
- We will maintain communication with families.
 - \circ $\;$ Making families understand that sick people should remain home until well.
 - Ensuring to address potential stigma and discrimination.
 - Maintaining confidentiality of children, students and staff members as required by the Americans with Disabilities Act (ADA), Health Insurance Portability and Accountability Act (HIPPA), and the Family Education Rights and Privacy Act (FERPA).

Steps to take when re-opening the program and facility for serving children:

- We will regularly communicate and advise all parents about steps everyone can take to protect themselves and prevent further spread, including: staying home and away from the facility while ill, minimizing non-essential activities in the community, frequent handwashing for 20 seconds, and avoiding ill people.
- We will pay attention to student and staff members' health and look for possible COVID-19 symptoms.
- We will pay attention to children who may be exhibiting symptoms of COVID-19 or other respiratory infections. Look for symptoms like fever, cough, shortness of breath. Children with COVID-19 usually have milder symptoms that can seem like a cold, including a runny/stuffy nose or sore throat.
- Separate ill children and staff from others. Immediately send ill people home and advise them to call their healthcare provider.
- Request that all individuals who enter the childcare program check their temperature before they leave home. If the temperature is equal to or greater than 100.4°F or if the person has a cough, they should remain at home, stay away from others, and notify their healthcare provider.
- Staff must take children's temperatures upon arrival and, if symptoms develop, throughout the day.
- We will pay attention to absences. Collect information about absences and maintain documentation of illnesses on an illness log per WAC 110-300-0465.
- Perform routine environmental cleaning. Frequently clean, rinse, and sanitize or disinfect commonly touched surfaces (for example, doorknobs, light switches).