UNITED WAY OF ACADIANA
EARLY HEAD START

COVID-19
Revised Policies and Procedures

PREPARE.  PROTECT.  PREVENT.
A MESSAGE TO OUR PARENTS AND STAFF

The Louisiana Department of Education has provided child care facilities with a checklist of recommendations to consider as they prepare to reopen their programs.

Although our facilities were physically closed on March 16, 2020, our staff continued to provide services to meet the needs of our children and families. We provided prepacked meals to ensure that families were able to meet their basic need for food. We remained connected through the use of technology like Facetime, Zoom and daily phone calls. Our team continued to educate our children through Weekly Lesson Plans, video storytelling and hands-on activities. We wanted in-home learning to continue. We provided books, supplies and more! Our team knew that it was also important to keep parents abreast of information related to COVID-19 and did so through a weekly EHS Coronavirus Newsletter that included available resources, educational information and ways to stay safe during the pandemic.

United Way of Acadiana Early Head Start (UWA EHS) has reviewed these recommendations, along with information provided to us from the Center for Disease Control (CDC), Office of Head Start and the Office of Public Health. Our commitment is to ensure that we adhere to these guidelines and that our centers provide a safe space for our children and staff.

Reducing the risk of COVID-19 by cleaning and disinfecting is an important part of reopening our facilities. Everyone has been called upon to slow the spread of the virus through social distancing and prevention hygiene, such as frequently washing their hands and wearing face coverings. Everyone also has a role in making sure our classrooms remain as safe as possible to reopen and remain open. We are all in this together!

These guidelines require that we make immediate changes to several key parts of our program. These changes are safety practices that may limit the spread of the virus and it is our hope, that we can work together to keep everyone safe. We ask for your patience and cooperation during this transition. We want learning to continue to be rich, engaging and fun and will call on our staff to be creative and innovative in their lessons, while practicing social distancing and healthy hygiene. We are taking these extra steps to support the health and safety of our children, families and our staff.

If you have any questions or concerns, please do not hesitate to contact me directly or see your Center Director. Thank you for your confidence and support of UWA EHS!

Keler Mitchell
Vice-President of Early Head Start
What you should know about COVID-19 to protect yourself and others

Know about COVID-19
- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.

Know how COVID-19 is spread
- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.

Practice social distancing
- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.

Prevent the spread of COVID-19 if you are sick
- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.

Protect yourself and others from COVID-19
- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.

Know your risk for severe illness
- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.

cdc.gov/coronavirus
CHECKLIST FOR OPEN CHILD CARE FACILITIES

UWA EHS values the partnerships established between teachers and parents and we will need your support as we implement these new procedures within our program. Prior to reopening, all staff will be trained on COVID-19, Infectious Disease or other pertinent content.

Additionally, parents will be asked to participate in a re-orientation session prior to reopening to review these new procedures.

- Staff must take everyday precautions to prevent the spread of respiratory illness such as COVID-19 such as washing hands often, clean and disinfect frequently touched surfaces, avoid close contact, cover coughs and sneezes and cover mouth and nose with cloth face masks.

- Require sick children and staff to stay home.

- Plan isolation steps, if a child becomes sick, followed by cleaning and disinfecting processes.

- Implement social distancing strategies.

- Change parent drop-off and pick-up processes.

- Screen children and staff upon arrival.

- Intensify cleaning and disinfecting efforts.

- Ensure proper diapering techniques are followed.

- Ensure proper washing, feeding, and holding of children.

- Ensure healthy hand hygiene.

- Ensure healthy food preparation and meal service.

- Address vulnerable/high risk groups.
PARENT DROP-OFF AND PICK-UP PROCESSES

Parent drop-off and pick-up will be curbside to limit direct contact between parents and staff.

Staff will be positioned outside of the facility to pick up the children as they arrive.

Parents will be provided a color-coded car tag, identifying the child and the classroom he/she is assigned to.

*Family members dropping off or picking up children MUST remain inside of their vehicles at all times.*

Center staff will no longer require parents to sign children in and out, however, individuals picking up children will be required to show identification.

The plan for curbside drop off and pick up limits direct contact between parents and staff and adheres to social distancing recommendations. UWA EHS will incorporate staggered drop-off and pick-up times.

*All* children and adults entering our facility will be screened for fever upon arrival. Prior to parents leaving the site, a staff member will take the temperature of each child, conduct a visual observation and ask parents to confirm that their child has not been on fever reducing medication in the last 24 hours and does not have shortness of breath or a cough.

*Once a child has been approved to enter the facility, parents will be notified that they are free to leave. Parents will be asked to remain in their vehicles and on the premises until the screening process is completed.*

A hand hygiene station will be set up at the entrance of the facility, so that children and staff can wash their hands before entering. Hand sanitizer with at least 60% alcohol will be utilized, or alternatively, soap and water.

Upon arrival to pick up a child, a staff member will bring the child out to the parent/guardian. Doing so will limit direct contact and help us to maintain social distancing. Individuals picking up children will be required to show identification.

Ideally, the same parent or designated person should drop off and pick up the child every day. If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children, because they are more at risk for severe illness from COVID-19.

As per the CDC, those at high-risk for severe illness from COVID-19 are people aged 65 years and older, individuals of all ages with underlying medical conditions, particularly if not well controlled, people with severe obesity, those who have diabetes, chronic kidney disease and people with liver disease.

We ask that you consider these factors when determining who will drop-off and pick-up your child(ren).
Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.

1. Stay at least 6 feet (about 2 arms’ length) from other people.
2. Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.
3. When in public, wear a cloth face covering over your nose and mouth.
4. Do not touch your eyes, nose, and mouth.
5. Clean and disinfect frequently touched objects and surfaces.
6. Stay home when you are sick, except to get medical care.
7. Wash your hands often with soap and water for at least 20 seconds.

cdc.gov/coronavirus
SCREEN CHILDREN AND STAFF UPON ARRIVAL

Persons who have a fever of 100.4°F or above or other signs of illness WILL NOT be admitted to the facility.

ALL children and adults entering our facility will be screened for fever upon arrival. Additional temperature checks will be conducted throughout the day should a child show signs or symptoms similar to those of COVID-19.

In addition to temperature checks, staff will be asking the parent/guardian to confirm that the child has not been on fever reducing medication in the last 24 hours and does not have shortness of breath, sore throat, rash (other than diaper rash), or a cough.

Staff will conduct a visual inspection of the child for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing, fatigue, rash (other than diaper rash), or extreme/unusual fussiness.

DUE TO THE SEVERITY OF COVID-19, PARENTS ARE ASKED TO BE ON ALERT FOR SIGNS OF ILLNESS IN THEIR CHILD. PLEASE KEEP YOUR CHILD AT HOME WHEN THEY ARE SICK.

UWA EHS will utilize a barrier/partition to conduct screenings upon arrival to eliminate or minimize exposures, due to close contact to a child who has symptoms during screening. A staff member will stand behind a physical barrier, such as a plexiglass or partition that will serve to protect the staff member’s face and mucous membranes from respiratory droplets that may be produced, if a child being screened sneezes, coughs, or talks.

- Staff will conduct a non-contact temperature screening. Staff will practice proper hand hygiene and will wear disposable gloves. The child’s temperature will be checked by reaching around the plexiglass or partition, making sure their face stays behind the barrier at all times during the screening.
- UWA EHS will be utilizing non-contact thermometers, which means that there will be NO physical contact during this screening process.
- Thermometers will be cleaned with an alcohol wipe or isopropyl alcohol on a cotton swab between each screening.

If a child/adult shows symptoms associated with COVID-19, but has not been tested and has a confirmed diagnosis, the Louisiana Department of Health recommends that children and staff be excluded from centers at least 7 days after the illness begins or at least 3 days after the resolution of fever, whichever is longer, AND resolution or improvement of respiratory symptoms.
As an extra safety precaution, all staff and children granted entrance into the facility will immediately practice safe hand hygiene by utilizing soap and water or hand sanitizer before entering the classroom.

The safety of our children and staff remains a priority of UWA EHS. Although not required, we will provide face masks for all staff members and for children 2 years and older. Masks will be temporarily removed during meals and for naptime. Our staff will also be provided smocks as a form of protection against accidents that may occur throughout the day.

REQUIRE SICK CHILDREN AND STAFF TO STAY HOME.

Persons who have a fever of 100.4°F or above, or other signs of illness WILL NOT be admitted to the facility.

There have been cases of COVID-19, where an infected person is considered asymptomatic. This means they do not exhibit symptoms often identified with this virus.

Therefore, it is extremely important for parents to keep their child(ren) home when they are sick. This step is necessary to slow down the spread of COVID-19.

It is important for parents to be vigilant for symptoms and that they communicate with their Center Director if or when their child starts to feel sick. Staff will be required to do the same.

PLAN ISOLATION STEPS IF A CHILD BECOMES SICK FOLLOWED BY CLEANING AND DISINFECTING PROCESSES

UWA EHS has identified a place of isolation, away from the rest of the children and staff that will be utilized should anyone exhibit COVID-like symptoms during hours of operation. Parents will be immediately notified and MUST pick up the child as soon as possible.

We will follow CDC guidance to disinfect our facility, if someone is sick.

UWA EHS understands that it is difficult for a parent/guardian to leave work. Therefore, it is suggested that alternative arrangements be made for occasions when children must remain at home or be picked up due to illness. Exclusion from the center will be necessary to reduce the transmission of illness or because the center is not able to adequately meet the needs of the child.
If COVID-19 is confirmed in a child or staff member,

UWA EHS will implement the following steps:

UWA EHS will close off areas used by the person who is sick. Additionally, we will wait up to 24 hours, or as long as possible, before we clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting. We will contract services with a professional business to ensure that this cleaning is thorough and will include cleaning and disinfecting of all areas used by the person who is sick, such as offices, bathrooms and common areas.

Additionally, UWA EHS will notify local health officials. All students and most staff will be dismissed for 2-5 days. Temporarily dismissing children and staff is a strategy to stop or slow the further spread of COVID-19.

Parents will be notified immediately regarding next steps and our plan of action. A note will be sent home giving parents the necessary precautions for their child and family. The centers are not equipped to care for children or staff while they are contagious. Specific details will remain confidential as per the Americans with Disabilities Act and the Family Education Rights and Privacy Act.

This initial short-term dismissal will allow time for the local health officials to gain a better understanding of the COVID-19 situation impacting the center. This allows the local health officials to help UWA EHS determine appropriate next steps, including whether an extended closure is needed to stop or slow further spread of COVID-19.

If the facility is closed for an extended period of time, UWA EHS will provide support for distance learning and staff will maintain daily communication with children and parents.

All parents are encouraged to Like us on Facebook at UWAEarlyHeadStart and visit our website at www.unitedwayofacadiana.org.

The child or staff will not be allowed to return to the center until the illness has run its course and the person’s physician sends a note stating that they are no longer contagious. The physician must complete a Physician’s Report stating that the child or staff may return and the report must be submitted to UWA EHS.
IMPLEMENT SOCIAL DISTANCING STRATEGIES

Group size

STUDENT/TEACHER RATIO

For each classroom, there is one (1) teacher assigned to four (4) children. Our infant room allows for five (5) children assigned to one (1) teacher.

To support the requirements of social distancing, UWA EHS will have a maximum of ten (10) to a classroom.

CONTINUITY OF CARE

UWA EHS utilizes the continuity of care which allows children to develop a secure attachment to their teachers. Children remain with the same teacher from the time of entry into the program until they transition to the next early childhood education setting. This also means that children remain with the same teacher and the same group of children throughout the day, every day, which is ideal when enforcing required safety methods necessary for combating the spread of COVID-19.

As a strategy to support social distancing, UWA EHS will stagger playground times, allowing only one classroom, which includes 8 children and 2 teachers on the playground at a time. The playground will be cleaned before and after each group’s use.

Children and staff will return to the classroom in a single line through all entry and exit points.

When returning back to the classroom from the playground, all children and staff will practice proper hand hygiene.
ENSURE HEALTHY HAND HYGIENE

All children and staff must engage in hand hygiene throughout the day, to include at arrival and when exiting the facility. We have revised the daily schedule to incorporate more opportunities for children to implement this safe practice.

Sample Daily Schedule - Orange Room

7:30 – 7:50  Temperature Checks
7:50- 8:00  Arrival/Greetings/Toileting/Hand washing
8:00 – 8:30  Outdoor Activities
8:30-8:40  Hand washing
8:40 – 9:00  Breakfast
9:00-9:10  Hand Washing
9:10 – 9:45  Circle time/Whole Group Activity
9:45 – 10:20  Center Time (Free Choice)
10:20-10:50  Music & Movement
10:50-11:00  Hand washing
11:00 – 11:35  Lunch
11:35 – 11:45  Toileting/Hand washing
11:45 – 12:00  Story time
12:00 – 1:15  Nap time (Mats must be placed 6 feet apart)
1:15 – 1:25  Diapering/toileting/Hand washing
1:25 – 2:00  Physical Activity
2:00 – 2:10  Snack
2:10-2:20  Hand Washing
2:20 – 2:30  Dismissal/Experiences/Goodbyes

Staff will assist children with handwashing, including infants who cannot wash hands alone. After assisting children with handwashing, staff will also wash their hands.

Staff will incorporate handwashing before and after preparing food or drinks, when handling infant bottles, before and after administering medication or medical ointment and when diapering.

Staff will also wash hands after helping a child use the bathroom and/or when coming in contact with bodily fluids.
After breaks, all staff must wash their hands prior to returning to the classroom. UWA EHS hand washing will consist of soap and water for at least 20 seconds. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used. Children will be supervised when using hand sanitizer to prevent ingestion.

**DAILY TOOTH BRUSHING**

Healthy habits should be practiced daily at home with daily tooth brushing, emphasis on hand washing and other habits that help reduce the spread of illnesses. UWA EHS will suspend daily tooth brushing during the day. However, information and resources will be provided to parents to ensure that daily brushing occurs within the home.

**INTENSIFY CLEANING AND DISINFECTING EFFORTS**

Prior to reopening our centers, UWA EHS will contract services from a professional cleaning company to prepare our facilities by cleaning and sanitizing them as an extra safety measure.

Normal routine cleaning with soap and water will decrease how much of the virus is on surfaces and objects, which reduces the risk of exposure. Every hour, staff will clean and disinfect surfaces, bathrooms, and objects that are frequently touched, such as doorknobs, light switches, classroom sink handles, countertops, toilet training potty, etc.

UWA EHS will schedule and follow additional procedures for cleaning and disinfecting, including cleaning and sanitizing toys and bedding. All cleaning materials will be kept secure and out of the reach of children.

Staff will assess classrooms and will reduce the number of toys to create more opportunities for social distancing.

Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions will be set aside until they are cleaned by hand by a staff person wearing gloves. Children’s books, like other paper-based materials, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.

UWA EHS will clean and disinfect all bedding. Each child’s bedding will be kept separate and will be stored in individually labeled bins, cubbies or bags. Bedding that touches a child’s skin will be cleaned at a minimum of weekly or before use by another child.

Cots and mats will be labeled for each child. As a social distancing strategy, cots/mats will be spaced out as much as possible, ideally 6 feet apart. Children will be positioned head to toe in order to further reduce the potential for viral spread. Masks will be temporarily removed during naptime.
UWA EHS will utilize EPA-registered disinfectants. These products are used against the virus that causes COVID-19. Dirty surfaces will be cleaned using a detergent or soap and water prior to disinfection. All cleaning materials will be kept secure and out of the reach of children.

**ENSURE PROPER WASHING, FEEDING AND HOLDING OF CHILDREN**

It is important to comfort crying, sad, and/or anxious children and they often need to be held. To the extent possible, when washing, feeding, or holding children, teachers will protect themselves by wearing a long sleeved smock.

Staff will wash their hands, neck and anywhere touched by a child’s secretions.

Additionally, staff will change the child’s clothes, if secretions are on the child’s clothes. Staff will change the long sleeved smock, if there are secretions on it and wash their hands again.

Infants, toddlers and their teachers will be required to have multiple changes of clothes on hand in the child care center. Soiled clothing will be placed in a plastic bag or washed in a washing machine.

During this pandemic, when diapering a child, staff will wash their hands before beginning and they will wear gloves. Staff will proceed to clean the child. They will remove the trash, to include the soiled diaper and wipes. They will replace the diaper, wash the child’s hands and clean the diapering station.

After diapering, staff will practice proper hand hygiene and disinfect the diapering area with an EPA-registered sanitizing or disinfecting solution.

**ENSURE HEALTHY FOOD PREPARATION AND MEAL SERVICE**

Meals will be served in the classroom by the classroom teacher to maintain the 10 person capacity. We will continue to practice family-style dining, however, each child’s meal will be plated to serve, so that multiple children are not using the same serving utensils.

Food preparation will never be done by the same staff who diaper children.

Sinks used for food preparation will not be used for any other purposes.

Teachers must ensure children wash hands prior to and immediately after eating.

Teachers must wash their hands before preparing food and after helping children to eat.
HOME BASED PROGRAM

For the safety and well-being of pregnant moms, children and staff, UWA EHS will postpone in-home visitation until further notice. We will continue to provide quality service by incorporating new approaches designed to meet the needs of our families. Our Home-Based teachers will conduct story time, educational activities and physical exercises utilizing technology like Zoom. Virtual home visits will be conducted weekly via Facetime, Zoom or conference call to ensure that parents obtain much needed information and support.

UWA EHS is dedicated to making sure that parents have the tools and resources they need. When necessary, staff will make weekly drop-offs of “porch-packs” that will include materials, cutouts and supplies needed to complete planned activities for the week.

Once we have determine that it is safe to resume normal home visit protocols, we will notify parents to begin scheduling appointments.

Parents are encouraged to be involved in our program. However, to minimize exposure and as a necessary precaution, UWA EHS will temporarily postpone all in-person events, such as monthly socializations, Parent Committee meetings and other large group events that may promote the transmission of COVID-19. We will utilize technology to continue to create opportunities to remain connected.

VOLUNTEERING AT UWA EHS

UWA EHS welcomes the support of community partners and has established a Yearly Engagement Calendar of events and activities. To minimize exposure and as a necessary precaution, UWA EHS will temporarily discontinue all volunteer engagement events and activities.

We invite local businesses, individuals and community partners to consider donating much needed supplies such as educational tools, books, backpacks, masks and more! Individuals should like us on Facebook to learn more about our program and how they can support our efforts.

We look forward to welcoming our parents and volunteers back into our centers at a later time. To learn more about how you can continue to support our program, please contact your Center Director.
COMMUNICATION

Now more than ever the partnership between parent and teacher is vital. This partnership requires that there be clear communication on issues that are important to everyone involved.

UWA EHS values your input and we want to know your concerns. We will continue to provide information, resources and educational material regarding COVID-19. Regular communication will occur between teachers and parents.

Should a parent have a question or concern, they may call the Center Director and/or leave a message for their child’s teacher. Our commitment is to keep parents involved, even if they must be physically distant. Our goal is to establish new innovative ways for parents to remain socially engaged in your child’s education.

All parents are encouraged to Like us on Facebook at UWAEarlyHeadStart and visit our website at www.unitedwayofacadiana.org. We will utilize these tools to share our stories, communicate issues and stay connected!

ADDRESS VULNERABLE/HIGH RISK GROUPS

Based on current information, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19. To protect those at higher risk, it’s important that everyone practices healthy hygiene behaviors.

Staff members who are age 65 or older, or with serious underlying health conditions, are encouraged to talk to their healthcare provider and thereafter, speak to their Center Director to assess their risk and to determine if they should stay home.

Information about COVID-19 in children is somewhat limited, but the information that is available suggest that many children have mild symptoms. However, a small percentage of children have been reported to have more severe illness. If any child has underlying health conditions, parents should notify the Center Director to discuss potential risks.

Staff will speak with parents who have a child with a disability to discuss how their children can continue to receive the services they need.
Important Information About Your Cloth Face Coverings

As COVID-19 continues to spread within the United States, CDC has recommended additional measures to prevent the spread of SARS-CoV-2, the virus that causes COVID-19. In the context of community transmission, CDC recommends that you:

- Stay at home as much as possible
- Practice social distancing (remaining at least 6 feet away from others)
- Clean your hands often

In addition, CDC also recommends that everyone wear cloth face coverings when leaving their homes, regardless of whether they have fever or symptoms of COVID-19. This is because of evidence that people with COVID-19 can spread the disease, even when they don’t have any symptoms. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

How cloth face coverings work

 Cloth face coverings prevent the person wearing the mask from spreading respiratory droplets when talking, sneezing, or coughing. If everyone wears a cloth face covering when out in public, such as going to the grocery store, the risk of exposure to SARS-CoV-2 can be reduced for the community. Since people can spread the virus before symptoms start, or even if people never have symptoms, wearing a cloth face covering can protect others around you. Face coverings worn by others protect you from getting the virus from people carrying the virus.

How cloth face coverings are different from other types of masks

Cloth face coverings are NOT the same as the medical facemasks, surgical masks, or respirators (such as N95 respirators) worn by healthcare personnel, first responders, and workers in other industries. These masks and respirators are personal protective equipment (PPE). Medical PPE should be used by healthcare personnel and first responders for their protection. Healthcare personnel and first responders should not wear cloth face coverings instead of PPE when respirators or facemasks are indicated.

General considerations for the use of cloth face coverings

When using a cloth face covering, make sure:

- The mouth and nose are fully covered
- The covering fits snugly against the sides of the face so there are no gaps
- You do not have any difficulty breathing while wearing the cloth face covering
- The cloth face covering can be tied or otherwise secured to prevent slipping

Avoid touching your face as much as possible. Keep the covering clean. Clean hands with soap and water or alcohol-based hand sanitizer immediately, before putting on, after touching or adjusting, and after removing the cloth face covering. Don't share it with anyone else unless it's washed and dried first. You should be the only person handling your covering. Laundry instructions will depend on the cloth used to make the face covering. In general, cloth face coverings should be washed regularly (e.g., daily and whenever soiled) using water and a mild detergent, dried completely in a hot dryer, and stored in a clean container or bag.

For more information, go to: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-faq.html

cdc.gov/coronavirus