



Child Care Facility COVID 19 Health and Safety Plan Template

Cleaning, Sanitizing, Disinfecting and Ventilation

Requirements	Strategies, Policies and Procedures
* Use of face coverings (masks or face shields) by all staff and visitors	Child care staff are required to wear cloth face coverings and will be checked throughout the day to ensure compliance.
* Use of face coverings (masks or face shields) by children 2 years of age and older (as appropriate)	All children 2 years of age and older are required to wear face masks unless a child fits into one of the exceptions included in Section 3 of the Order of the Secretary of the Pennsylvania Department of Health Order for Universal Face Coverings

Cleaning, Sanitizing, Disinfecting and Ventilation

Requirements	Strategies, Policies and Procedures
* Cleaning, sanitizing, disinfecting, and ventilating, surfaces, and any other areas used by children in care (i.e., restrooms, drinking fountains, toys, hallways, and transportation)	We are following a daily schedule to ensure the cleaning, sanitizing, disinfecting, and ventilating, surfaces, and any other areas used by children in care. We also clean and sanitize throughout the day as needed, toys, surfaces, high touch areas, etc.
Other cleaning, sanitizing, disinfecting, and ventilation practices	We sanitize all rooms, hallways, door knobs, etc., at the end of each day, and after all children have left the building.

Social Distancing and Other Safety Protocols

Requirements	Strategies, Policies and Procedures
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	Smaller care groups and additional staff on hand to help the children maintain 6 feet distance from other children.
Restricting the use of common areas, and consider serving meals in alternate settings such as where the child care is being provided	Our reduced capacity gives us more space to ensure distancing.
* Hygiene practices for children in care and staff including the manner and frequency of hand-washing and other best practices	We are following the hygiene practices that we are required to follow as well as the CDC recommendations. Children and staff sanitize their hands upon entering the building, and routinely throughout the day.
Posting signs, in highly visible locations, that promote everyday protective measures, and how to stop the spread of germs	Signs are posted in highly visible locations. Emails and notifications have also been sent out to all parents, as well as reminders.
Identifying and restricting non- essential visitors and volunteers	Only staff and children are permitted into the building.
Handling outdoor play consistent with the CDC Considerations	We have staggered outdoor play times, and activities to encourage distance.
Limiting the sharing of materials among children in care	We have bought more toys and supplies to reduce sharing.
Staggering the use of communal spaces and hallways	Staff breaks are staggered. Only allowing 1 parent in the lobby at a time, red distancing lines have been placed.
Adjusting transportation schedules and practices to create social distance between children in care	Drop-off and pick-up times are staggered.
Limiting the number of individuals in facility rooms and other facility spaces, and interactions between groups of children in care	Parents are dropping off in the lobby, a staff member then walks the child to their classroom. We are combining classrooms less.
Coordinating with local schools regarding transportation protocol changes and, when possible, revised hours of operation or modified school- year calendars	The local school district has not announced yet.
Other social distancing and safety practices	

Monitoring Children and Staff Health

Requirements	Strategies, Policies and Procedures
* Monitoring children and staff for symptoms and history of exposure	We conduct a daily health screening of any person entering the building, including children and staff, to identify symptoms, diagnosis, or exposure to COVID-19.
* Isolating or quarantining children, staff, or visitors if they become sick or demonstrate a history of exposure	The individual will be quarantined immediately in the office, sent home, and not allowed to return according to our policy, See below.
* Returning isolated or quarantined staff, children, r visitors to the facility	Individuals who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions: <ul style="list-style-type: none"> • Resolution of fever without the use of fever-reducing medications and • Improvement in respiratory symptoms (e.g., cough, shortness of breath), and • Negative COVID-19 test results from at least two consecutive respiratory specimens collected 24 hours or more apart (total of two negative specimens).
* Notifying staff and families of suspected or confirmed cases of COVID-19	All staff and families will be notified immediately via email and the Tadpoles app.
* Reporting to DOH and Certification	All suspected or confirmed cases of COVID-19 will be reported immediately.
Other monitoring and screening practices	
Notifying staff and families of facility closures	All staff and families will be notified immediately via email and the Tadpoles app.

Other Considerations for Children and Staff

Requirements	Strategies, Policies and Procedures
* Protecting children and staff at higher risk for severe illness	Reducing the amount of people in contact with the high risk individual.
Unique safety protocols for children with complex needs or other vulnerable individuals	Additional distancing and monitoring.
Strategic deployment of staff	We have additional staff on stand-by and have also filed the provisional hire waiver.

