



The Vine Preschool Updated Policy Regarding COVID-19

(latest update: June 12, 2020)

The Vine Preschool's primary goal is to ensure the health and wellbeing of our children, families, and staff. We are actively monitoring the latest guidance from local health departments and the latest updates from the CDC and World Health Organization to follow their most up-to-date information. For more information and resources on coronavirus, please visit the following websites:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

Below are our current procedures around classroom access and contact with anyone who is ill or at risk of becoming ill, in general:

Classroom Access

We see our centers as safe and clean places for children to learn and grow. We also want you and your children to continue to have the best possible pick-up and drop-off experiences, including great conversations with teachers. However, at this time and until further notice, we will be retrieving children outside of the building and will be unable to let parents into the building nor any other individuals authorized for pick up.

Drop Off and Pick Up Procedures

When parents arrive, the Director or one additional assigned staff member will come out to meet you half way as you walk your child towards the preschool entrance. The parent's temperature will be taken and recorded then the child's temperature will be taken and recorded. If either the Parent or child has a fever of 100.4 F or higher, the child will not be able to enter school. Your child's temperature will be taken three additional times



throughout the day; before nap, after nap and at pick up in the presence of the person who is picking up the child. At pick up, your child's hands will be washed again before they exit the building and the adult who is picking up the child will have their temperature taken and recorded then the child's temperature will be taken and recorded.

(All staff members will have their temperatures taken upon arrival and one oximeter reading will be recorded daily)

Oximeter Readings

No one at The Vine Preschool is in the medical profession but from what we are learning about the coronavirus is that it has affected the lungs of some people, the heart of some people and/or some organs in other people. We are also learning about a new type of coxsackie virus occurring in children as an "overactive immune response" after having had asymptomatic COVID-19 in some cases.

We have decided that once daily, the staff and the children will have their oxygen levels read by an oximeter to measure their oxygen saturation levels. Doing this daily will help us observe and respond when there are substantial changes in the oxygen levels or heart rate. Our response would be to contact the parents if we observe any unusual changes in the oximeter readings.

Sources:

<https://blogs.webmd.com/webmd-doctors/20200428/what-is-a-pulse-oximeter-and-can-it-help-against-covid19>

<https://www.cbsnews.com/news/coronavirus-pulse-oximeter-device-oxygen-levels/>

Traveling Domestically or Internationally

At this point, traveling anywhere by airplane or any other form of transportation can increase risk for exposure. If anyone in your household plans to travel anywhere using any form of transportation, you must inform the Director of the travel plans and destination. This includes notifying us if you will have family members or friends staying at your home for any



duration of time. For example, even if you are “just” going to Richmond to visit a relative or “just” going to the beach for the weekend or plan to attend a gathering where there will be 20 people or more (even with social distancing measures in place) we would like to be notified for the purpose of contact tracing. If traveling by airplane to any destination even for just the day, please also inform the Director of the departure, layover and arrival airport locations. This also includes anyone with pick-up or drop-off privileges.

Suspected Case of Coronavirus

Anyone with a **suspected** case of coronavirus must remain out of our center for 14 days or until receiving medical clearance to return. This includes anyone with pick-up or drop-off privileges. Once the individual returns we’ll welcome them back to our center at the end of 14 days if they haven’t experienced any symptoms. If there were symptoms, they’ll need to notify us and get medical clearance before returning.

Confirmed Case of Coronavirus

Anyone with a **confirmed** case of coronavirus must remain out of our center for a minimum of 14 days and they will need medical clearance to return. This includes anyone with pick-up or drop-off privileges. Once the individual returns we’ll welcome them back to our center after a minimum of 14 days and they must obtain medical clearance including a negative test result before returning.

Close Contacts

Anyone who has been in close contact with people who have traveled, or with someone with a suspected or confirmed case of coronavirus, must remain out of our center for 14 days after contact. Please communicate this to our Director immediately.

For COVID-19, a [close contact](#) is defined as any individual who was within 6 feet of an infected person for at least 15 minutes starting from 2 days before illness



onset (or, for asymptomatic patients, 2 days prior to positive specimen collection) until the time the patient is isolated.

<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html>

Anyone living in the same household, as well as those who may be staying there or are present on a regular basis, like nannies or caregivers, are considered to be in close contact. We'll welcome them back to our center at the end of 14 days if they haven't experienced any symptoms. If there were symptoms, they'll need to notify us and get medical clearance before coming back. (This information is subject to change).

Exclusion for Illness Policy

We'll continue to be diligent about enforcing our existing policy of excluding sick children and employees. While we understand the additional burden this may cause, staying home when sick is one of the best ways to stop illness from spreading.

If a child or teacher begins to show symptoms of coronavirus or any other illness, we'll follow our exclusion for illness policy. In that case, the child or teacher would be asked to return home, see a doctor, and partner with the local health department to obtain a recommendation on how to proceed.

Health and Hygiene Practices

As always, we're following our existing hygiene and cleaning procedures, including disinfecting high-touch surfaces like door handles, and rotating toys so we can sanitize them even more frequently.

As part of our daily curriculum, we continue to emphasize the importance of hand washing and align with **recommended 20-second hand-washing techniques**. We're reinforcing this action with children multiple times throughout the day.



If your child has had a fever or trouble breathing, we ask that you seek medical attention for your child, and we also recommend they stay home until they've been symptom-free and for fevers of 100.4 or higher, they can return to school once they are fever-free without the use of fever reducing medication for 48 hours. This also applies to cases of diarrhea or vomiting. Prior to COVID-19 the requirement was after 2 consecutive loose stools or 2 consecutive vomiting episodes, children could return after 24 hours of no episodes but now the requirement for return will also be after 48 hours of no episodes.

Frequently Asked Questions

We have compiled some frequently asked questions and answers to provide more information and recommendations.

We have adopted the following:

1. How can we promote social distancing with young children and keep children 6 feet apart?

- Implement small group activities and encourage individual play/activities. For example, if the class has 8 children, break into two small groups, and designate space in the classroom for individual play. In infant classrooms, keep the non-mobile infants separate from the mobile infants and implement small group, focused activities with this group.
- Consider using unconventional, but safe spaces i.e., common areas with enough space to accommodate a small group, if they are large enough.
- Physically rearrange the room to promote individual play.
- Feed children in their individual classes. If meals must be provided in a lunch room, stagger meal times, arrange tables to ensure that there is at



least six feet of space between groups in the lunchroom, and clean and disinfect tables between lunch shifts.

- Stagger recess, and play outside one classroom at a time.
- Keep the same small group of children together throughout the day, do not combine groups (e.g., at opening and closing). To the degree possible, maintain the same groups from day to day. This will help reduce potential exposures and may prevent an entire program from shutting down if exposure does occur.
- Alter programming to increase distance between children, such as allowing only one classroom of children outside at a time. Spread children out within the classroom.

Activity Recommendations

- Explain for a child's understanding: "social distancing" and "physical boundaries" and "personal boundaries."

Below are some good resource links:

<https://childmind.org/article/talking-to-kids-about-the-coronavirus/>

<https://www.pbs.org/parents/thrive/how-to-talk-to-your-kids-about-coronavirus>

<https://www.brainson.org/shows/2020/03/10/understanding-coronavirus-and-how-germs-spread-for-kids>

- Plan activities that do not require close physical contact between children.



- Refrain from activities that promote touching or closeness (circle time, hand-holding, center play, etc.).
- Set up individual play activity stations, i.e. art, puzzles, and reading.
- Eliminate large group activities. Avoid gathering in larger groups for any reason. Outside time and lunch should be taken with group (no large gatherings or combining groups).
- Limit the number of children in each program space.
- Increase the distance between children during table work.
- Limit item sharing, to those that can be easily cleaned and disinfected at the end of the day or more often as needed.
- Playdough cannot be cleaned or sanitized, so consider individual containers labeled with names, or discontinue use.
- Refrain from use of water or sensory tables.
- Minimize time standing in lines.
- Incorporate additional outside time and open windows if possible.

2. Should we keep adults and children 6 feet away from each other?

- Social distancing should be practiced to the maximum extent while still allowing for the care of children. We understand that staff need to be in close proximity to children when providing care, but programs should keep children apart from each other and limit physical proximity as best as they are able.



- Encourage all adults to stay 6 feet away from each other, including staff and parents, using signage and other reminders.

3. How can programs operate if there are only 10 individuals allowed in each room?

- This will be challenging and make take creative and strategic planning. Many classrooms are already small, but facilities may need to limit how many children can be served.
- Limit facility events or gatherings.

RECOMMENDATIONS FOR PARENTS TO DO AT HOME

It is suggested that children have their clothes changed when they get home.

Linens, Clothing, and Other Items That Go in the Laundry

- Do not shake dirty laundry; this minimize the possibility of dispersing virus through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.