



DEAR FIRST CIRCLE FAMILIES,

Here is our COVID-19 Health and Safety Packet based on the new minimum standards set out by our licensing board and updated as standards are changed. We ask you to take some time to review it and if you have any questions or concerns, we will be happy to address them.

We're so proud of the way our educators have returned to First Circle and worked so hard to keep themselves and the children in their care healthy and safe. We're also extremely grateful to the cooperation and support from families. We are all trying so hard to stay healthy!

This packet describes the health and safety protocols we engage in daily. What is most important for you to know is that as much as we're focusing on the physical health and safety of your child, we are also dedicated to their emotional health and well-being.

While we will work hard to sanitize and disinfect and wash hands and keep COVID-19 out of our program, we will not forget that your child has masterpieces to be painted, friends old and new to play with, towers to build, balls to kick, and a childhood to live. Whether it's providing an opportunity to spend time with beloved teachers, classrooms, and friends, or helping them seamlessly blend new routines with old, we are here as always to help your child learn, grow and thrive.

After four long months of closure, we are delighted to have a building full of the sounds of children again. Thank you for your support, your patience, and your trust in us to care for your children.

COVID-19 SAFETY PLAN



INTRODUCTION	3
DISCLAIMER	3
ABOUT COVID-19*	4
SAFETY IN CHILDCARE	4
OVERVIEW	4
CHILDREN AND COVID-19	6
DECIDING	6
HEALTH + SAFETY CHANGES OVERVIEW	7
KEEPING HEALTHY	7
CLASSROOMS	7
ENHANCED HYGIENE	8
INCREASED SANITIZING + DISINFECTING	8
PHYSICAL (SOCIAL) DISTANCING	8
SOCIAL-EMOTIONAL HEALTH	9
WHAT YOU CAN DO	9
CHANGES TO HEALTH + SAFETY PROTOCOLS	9
KEEPING HEALTHY	9
CLASSROOMS + PLAYGROUNDS	12
ENHANCED HYGIENE PRACTICES	13
RESOURCES AND SUPPLIES	13
INCREASED HANDWASHING	13
COUGHS OR SNEEZES	14
FACE MASKS/COVERINGS:	14
GLOVES	15
CARING FOR INFANTS AND TODDLERS	15
ENHANCED CLEANING + DISINFECTING	16
DISINFECTANT	16
PROPER USAGE	16
GENERAL GUIDELINES	17
PHYSICAL DISTANCING	18
VULNERABLE CHILDREN	18
UNDERSTANDING CHILDREN'S HEALTHCARE NEEDS	18
CHILDREN WITH SPECIAL NEEDS	18
IF A CHILD/EMPLOYEE CONTRACTS COVID-19	19
A POSITIVE CASE AND MEDICAL CONFIDENTIALITY	19
WHO IS AFFECTED – CONTACT TRACING	19
WHAT FIRST CIRCLE WILL DO	19
POSITIVE OR PRESUMED POSITIVE CASES	20
NOTIFICATION	20
SELF-ISOLATING FOLLOWING POTENTIAL EXPOSURE	20
SOCIAL-EMOTIONAL HEALTH	21
HOW YOU CAN HELP	21

COVID-19 SAFETY PLAN

INTRODUCTION

This COVID-19 safety plan is required by the state of Massachusetts Department of Early Education and Care. It has been developed by following the recommendations of and guidance by the Centers for Disease Control and Prevention (CDC), Massachusetts EEC, as well as local boards of health.

First Circle is committed to doing our utmost to safeguard the health and safety of children, staff and families. We are also committed to communicating with you as transparently as possible. As more information and conditions evolve and additional guidance is issued by local, state, and federal authorities, we will update this plan and continue to keep you informed. The date that the plan was most recently updated is noted on the bottom left corner of every page.

We welcome feedback on this plan and your thoughts on how we can be as safe as possible during this crisis, particularly from the many members of the medical and scientific community that are parents and family members of the enrolled children.

DISCLAIMER

The COVID-19 pandemic is an ongoing situation. First Circle encourages all staff members and families to monitor publicly available information and follow federal, state, and local health organization guidance and government mandates. This plan is demonstrating our best efforts to increase safety at our facilities. Given the nature of the COVID-19 pandemic, particularly with respect to transmission by asymptomatic carriers, we can't guarantee an environment free from COVID-19 or any other virus or disease. Despite our best efforts in following all applicable guidance, a parent, child, family member, or staff member of First Circle may be infected, with or without their knowledge, and may be unaware that they carry a virus putting others at risk of contracting COVID-19 or another disease.

The information provided in this packet is obtained from a combination of publicly available sources, including federal agencies and governmental entities, leading trade associations and industry consultants, and legal firms. This information may vary and will be updated depending upon current situations and as the knowledge base concerning COVID-19 grows. As there is yet much to learn about COVID-19, please be advised that First Circle can give no assurances as to the accuracy or completeness of the information provided. Further, the information contained herein is provided for general informational purposes only and should not be construed as a contract or guarantee of performance or results.



ABOUT COVID-19*

SYMPTOMS OF COVID-19

Infection with SARS-CoV-2, the virus that causes COVID-19, can cause illness ranging from mild to severe and, in some cases, can be fatal. Symptoms typically include fever, cough, and shortness of breath. Some people infected with the virus have reported experiencing other non-respiratory symptoms. Other people, referred to as asymptomatic cases, have experienced no symptoms at all.

According to the CDC, symptoms of COVID-19 are varied and may appear in as few as 2 days or as long as 14 days after exposure. CDC distinguishes acute respiratory illness of recent onset from chronic illnesses like asthma, allergies, or chronic obstructive pulmonary disease (COPD). Additional information from CDC regarding COVID-19 symptoms is available at the [Centers for Disease Control website](#).

COVID-19 AND CHILDREN: WHAT WE KNOW

Scientists are still learning about how COVID-19 spreads, how it affects children, and what role children may play in its spread. Limited data about COVID-19 in children suggest that children are less likely to get COVID-19 than adults, and when they do get COVID-19, they generally have less serious illness than adults. Common symptoms of COVID-19 among children include fever, cough, runny nose, sore throat, headache, body ache, and diarrhea; many children may have mild or no symptoms. As of July 21, 2020, 6.6% of reported COVID-19 cases and <0.1% of COVID-19-related deaths are among children and adolescents less than 18 years of age in the United States. While uncommon, deaths and rare illness such as multisystem inflammatory syndrome in children (MIS-C) may occur.

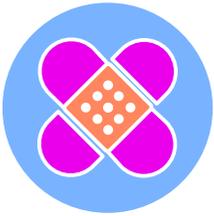
Evidence and information about transmission (the way germs move from person to person) of COVID-19 to children is relatively limited. Evidence from other countries suggest that most pediatric cases resulted from children becoming infected by a family member. The more individuals a person interacts with, and the longer the interaction, the higher the risk of COVID-19 spread. The risk of getting COVID-19 is also influenced by the intensity of transmission in your community.

This section was copied directly from the CDC's [School Decision-Making Tool for Parents, Caregivers, and Guardians](#)

SAFETY IN CHILDCARE

OVERVIEW

In general, childcare providers must follow strict regulations, particularly health and safety protocols. This focus on health and safety is vital in minimizing the spread of infectious diseases. Even pre-COVID, the high degree of sanitizing, disinfecting and health and safety regulations in childcare prevents the transmission of infectious disease. In order to minimize the spread of COVID-19, the [CDC issued guidelines](#) in March of 2020 (updated July 23,



2020). On June 1, 2020, the Department of Early Education and Care (EEC) issued new minimum standards for health and safety to be followed by all childcare programs after the extended mandated closure (followed by several revisions. This packet reflects the revised standards as of 8/28/20).

The CDC has identified that the risk of transmission in schools is related to their ability to implement 5 key mitigation strategies. Schools such as First Circle that are at the lowest risk of transmission implement the following strategies:

1. Consistent and correct use of masks
2. Social distancing to the largest extent possible
3. Hand hygiene and respiratory etiquette
4. Cleaning and disinfection
5. Contact tracing in collaboration with local health department

We recognize that deciding whether to send your child back to group care is complex, and the concerns for their health and safety must be balanced with employment needs. We have had the benefit of being in daily contact with multiple programs around the country and world who have been operating safely throughout the pandemic with new health and safety protocols, and are very reassured to know that families, children and staff have remained healthy. Nearly 45% of childcare programs in the US remained open during the pandemic (including 500 emergency centers in Massachusetts), serving the families of essential workers, and data suggests that safely keeping daycares open does not contribute to the spread of COVID-19, particularly with the implementation of new cleaning and safety protocols. Many countries have either reopened or kept open childcare centers, and none have seen an increase in viral transmission.

As schools and day-care centers were shuttered last spring to slow the spread of the corona-virus, hundreds of emergency child-care centers stayed open to serve the children of essential workers, even amid concerns that little was known about the risk of infection and transmission among children. Now, newly released state data show that few cases of coronavirus spread within those centers—a feat that experts attribute to careful adherence to health and safety protocols.

Only nine of the 550 emergency child-care centers reported more than a single case of COVID-19 from March through May, according to data provided by the Massachusetts Department of Early Education and Care. To date, the Massachusetts Department of Public Health believes there are only a few cases in which COVID-19 transmission occurred within child-care centers.

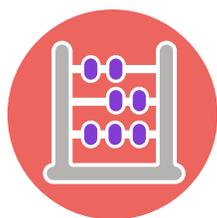
“Because COVID numbers remain relatively low in Massachusetts, the risk of COVID transmission in any setting, including child-care settings, exists but remains low,” said public health spokeswoman Ann Scales. [See the full article in the *Boston Globe*: [The state’s emergency childcare centers kept COVID-19 in check. Here’s how.](#)]



CHILDREN AND COVID-19

We're very closely monitoring the data and studies regarding children and COVID-19. Typically, when it comes to respiratory infections and flu, children are in the high-risk category. While COVID-19 is a disease that scientists and doctors are still learning about, the past months of data have shown that not only do children not get the virus as often nor spread it as easily as adults, the vast majority of children with the virus will have mild disease or be asymptomatic ([according to the CDC](#), slightly over 335 children in the US ages 0-4 have been hospitalized from February to mid-September 2020).

Many months into the pandemic, study after study—in [China](#), [Iceland](#), [Australia](#), [Italy](#), and the [Netherlands](#)—has found that children get less sick and are less contagious. Although some children who present with COVID-19 develop an inflammatory reaction called MIS-C (Multi Inflammatory Syndrome in Children), it is both very rare and highly treatable. Hayes Bakken, a pediatrician leading the pediatric Covid-19 response at Oregon's Children's Hospital, points out: "This condition is new because we believe it's associated with Covid, but we've already been treating kids with these types of conditions very well." This doesn't mean that kids cannot get very sick, and sadly, there have been a small number of deaths. However, it's important to keep that information in context as the numbers of seriously ill children with COVID-19 remains much smaller than the amount impacted by seasonal flu. For further information, [read this very informative article](#) about the risks of children and COVID-19.



DECIDING

In making the decision of whether and when to return to group care, parents need to consider their work situation, childcare alternatives, family health situations, and their own tolerance for risk. While we cannot assure you that there is no risk of a child being exposed to COVID-19 in group care, we can reassure you that the new health and safety protocols have proven very effective in the over 5,000 childcare programs that have reopened in Massachusetts since June and overall, transmission in childcare settings is extremely low.

Only you can decide what is best for your family, and there is more to keeping your child healthy than keeping them COVID-free. There is also their social-emotional health to consider, and their opportunities for learning. You can make an informed decision by evaluating your child's health (if your child has a health condition, you'll want to check with your doctor to help you decide). You'll also need to evaluate your family's health risks, your alternatives, and the epidemiological situation where we live (are test results less than 5% positive, do hospitals have enough PPE and is the rate of hospitalization and new cases going down?). Finally, it is extremely important to consider the steps your childcare provider is taking to stop the transmission of illness. At First Circle, we maintain stable groups of children with consistent teachers; we have a stable group of masked caregivers who can isolate if they get sick; children wash their hands frequently, especially before eating; and we maintain rigorous cleaning practices. Our staff has ample sick leave, and they don't work if they're sick. We have always been an organization that bases our decisions on evidence and data. It's the data and real-life experience from the childcare programs that have operated safely throughout the pandemic that make us confident that childcare programs can continue to keep children healthy and safe.



HEALTH + SAFETY CHANGES OVERVIEW

In order to reopen, all childcare providers in Massachusetts must comply with the new standards. These protocols include changes in the following areas (and as the standards evolve, we will update this packet):

KEEPING HEALTHY

ILLNESS: Parents, children and staff must stay home when sick.

LIMITING VISITORS: Non-essential staff, parents and visitors are restricted from entering the program. Drop-off and pick-up will occur outside the building. Tours will be virtual or on weekends and vendors will drop off supplies outside the building.

DAILY HEALTH CHECKS: All individuals will be required to self-screen at home before arriving at the program, (including a temperature check) and then screened prior to admittance into the program for temperature and symptoms of infection. They will also need to answer a questionnaire about their health. Any individual with a fever (100.0°F or above), cough, shortness of breath, gastrointestinal upset, new loss of taste/smell, muscle aches, chills/shaking, or any of the other signs of illness will not be permitted to enter the program. Upon arrival in the classroom, the teacher will take their temperature with a contactless thermometer.

HEALTH MONITORING DURING THE DAY: Staff will actively monitor children throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting and children exhibiting signs of illness will be separated from the larger group.

SYMPTOM MANAGEMENT: We have a safe space where it is easy to supervise isolated children who may become sick while in care. Children with symptoms of Covid-19 are isolated with immediate parent pick-up. Self-isolation of any family members or staff exposed to or displaying symptoms of the virus is also required.

SENT HOME SICK: If the child has symptoms but has not been exposed to COVID-19, they may return to childcare following our general schedule (attached).

EXPOSURE: If a child or staff has been exposed to COVID-19, regardless of whether the individual has symptoms or not, the child or staff will not be permitted to enter the program. Exposed individuals must stay home for at least 14 days after the last day of contact with the person who is sick. We will follow guidance from the local board of health on quarantine for other children and staff and what additional precautions will be needed to ensure the program space is safe for continued childcare services. We will notify parents if there has been a suspected or confirmed case of COVID-19 among the children or staff, while safeguarding the privacy of the individual.

ISOLATION: Exclusion protocols from the board of health will be followed for any child, staff or family member with a positive test for COVID-19 or who are symptomatic and presumed to have COVID-19.

CLASSROOMS

RESTRUCTURED CLASSROOMS: Classrooms have been restructured to incorporate the larger square footage per child required, or capacities have been lowered.

CONSISTENT STAFFING: Children are grouped in consistent groupings with consistent staffing and limited floaters. This makes it easier to trace contacts if a child or staff member does develop symptoms.

NO MIXING OF CLASSES: Groups of children do not mix with each other indoors or outdoors.

LIMITED SHARING: Children's belongings are separated, and children are provided individual art/ learning supplies to minimize the spread of germs.



ENHANCED HYGIENE

INCREASED HANDWASHING: All individuals entering the building are required to wash hands immediately. Monitored handwashing and hygiene protocols for children are built in at all necessary times during the day. When outside or during activities where soap and water are not readily available for use, we will have carefully monitored use of hand sanitizer appropriate to the age of the child.

PERSONAL PROTECTIVE EQUIPMENT: First Circle requires the use of face coverings among all program staff, especially when physical distancing is not possible. Staff are frequently reminded not to touch the face covering and to wash their hands frequently. Information is provided to all staff on proper use, removal, and washing of face coverings.

At parent discretion, CDC and EEC encourage the wearing of masks/cloth face coverings for children age two and older who can safely and appropriately wear, remove, and handle masks. Masks should not be worn during outdoor play or rest time, or if children are able to physically distance from others.

Scrub jackets are worn by any staff member entering another classroom and while feeding and holding infants and toddlers.

GLOVES: First Circle staff wear vinyl gloves at all times during diapering, food preparation, and sunscreen application.

CARING FOR INFANTS AND TODDLERS: As part of daily care, infants and toddlers are held. First Circle staff practice stringent hygiene and infection control practices to keep themselves and the young children they care for healthy and safe while in care while still being able to hold and care for children.

TOYS FROM HOME: No toys from home are allowed (except a comfort item for sleeping).

TOOTHBRUSHING: Required toothbrushing has been temporarily discontinued by EEC.

TRAINING: Staff have been trained in recognizing symptoms, increased hygiene and disinfection protocols, as well as best practices in physical distancing with young children.



INCREASED SANITIZING + DISINFECTING

ENHANCED DISINFECTION: To ensure effective cleaning and disinfecting, surfaces are cleaned and then disinfected using our hospital grade [EPA-approved disinfectant](#) for use against the virus that causes COVID-19. High-touch surfaces, such as door handles, light switches, faucets, toilet seats and handles are disinfected multiple times throughout the day, and an enhanced deep cleaning is performed every night in all areas, on all touched surfaces. Drinking fountains have been closed and doors to the bathrooms removed where possible.

VENTILATION: Our vents have been cleaned and sanitized, and we will have fans and keep the windows open when possible to increase ventilation.

TOYS: As per usual, toys that children have placed in their mouths or that are otherwise contaminated by bodily fluids will be set aside until they are sanitized in the dishwasher. Cloth toys will not be used at all.

PHYSICAL (SOCIAL) DISTANCING

SIX FEET: Children are kept 6 feet apart as much as feasible and activities that encourage physical contact or close physical proximity have been suspended or held outside. Children eat meals and snacks spaced out at the table, and rest mats are placed head to toe. During the warm weather, we eat outside when possible.

GROUP ACTIVITIES: All field trips this summer will be virtual and/or with visiting specialists held outside on the playground, and we will not be holding any group activities.

NONESSENTIAL VISITORS: For the duration of the pandemic, the program will not be admitting any nonessential visitors (we have curbside drop-off/pick-up, and virtual tours).

PLAYGROUND: Outdoor play is separated by class.



SOCIAL-EMOTIONAL HEALTH

SUPPORT: Our educators are experts at managing and supporting children who may experience anxiety or mixed feelings returning to the classroom.

WHAT YOU CAN DO

WE'RE ALL IN THIS TOGETHER: When we all follow the plan, the chance of transmitting disease is reduced. This plan is specific to COVID-19 and is in addition to our existing policies and procedures, which meet state licensing standards designed to help create a safe environment. Science shows us that when members of a community adhere to the following health and hygiene protocols, we can contain the spread of disease. Please refer to the [CDC recommendations for parents:](#)

- **STAY HOME WHEN SICK.** If your child is sick, keep your child home until free of fever without medication or other symptoms for 24 hours or cleared by a medical professional to return. If you are sick, please arrange for someone else to drop-off or pick up your child.
- **PRACTICE GOOD HYGIENE.** Cover your mouth with tissues whenever you sneeze or cough and discard used tissues in the trash. If that's not possible, cough or sneeze into your elbow. Do not cough or sneeze into your hand.
- **AVOID TOUCHING YOUR FACE,** especially your eyes, nose, or mouth with your hands.
- **WEAR A MASK** or face covering when in public. They are mandatory for adults on our property and in our facility.
- **PRACTICE PHYSICAL DISTANCING,** maintaining a physical separation of at least six feet with others when wearing a mask is not possible.
- **LIMIT SHARING.** Avoid using others' phones, tools, or equipment whenever possible.



Thank you for your support and cooperation.

CHANGES TO HEALTH + SAFETY PROTOCOLS

KEEPING HEALTHY

ILLNESS

Parents, children and staff must stay home when sick.

LIMITING VISITORS

In order to limit direct contact between parents and staff members and adhere to physical distancing recommendations, First Circle will be suspending our open-door policy for families, visitors, and volunteers until further notice. Pick-up and drop-off of children will happen outside of the building at our Hug and Go check-in, and parents will no longer be allowed in the building unless there is a legitimate need to enter (in which case, you must notify Administration, and you will be screened as outlined below). Vendors will be asked to perform contactless drop-off, and tours will be virtual or held on weekends. Specialists will be asked to meet with children at home (in the case of Early Intervention or other specialized services). As of September, licensing has allowed for in-person services on a limited basis. Please speak to the director regarding your child's needs. Music and movement specialists will meet with children outside. We reserve the right to screen any individual seeking admittance to our buildings.



SELF-SCREENING

All staff, parents, children, and any individuals seeking entry into the program space must self-screen at home, prior to coming to the program for the day. We suggest you screen your child while you are applying morning sunscreen.

Self-screening includes checking for symptoms included fever, cough, shortness of breath, gastrointestinal symptoms (diarrhea, nausea, vomiting), fatigue combined with another symptom, headache, new loss of taste/smell, muscle aches, or any other symptoms that feel like a cold. Anyone with a fever of 100.0°F or above or any other signs of illness will not be permitted to enter the program.

It is imperative that you do not bring your child to First Circle if you or they are sick. If your child has any sign of illness, you must keep child home for the amount of time specified on the attached Covid Symptom Checklist without the use of medication or with a doctor's clearance. Our staff will not report to work if they are experiencing any symptoms and must confirm their self-screen results prior to starting work.

DROP OFF

Between the hours of 8:00 to 9:30 AM, First Circle's greeter will greet children and parents at our Hug and Go station outside, where they will collect the required wellness screening outside the building, (or check the completed electronic attestation), and — provided no symptoms of illness are identified — a staff member will take the child into the building, wash hands and escort them to their classrooms, and the teacher will help them settle in and then perform a temperature scan.

In accordance with licensing requirements, First Circle will screen anyone before they are permitted to enter the program following the requirements below:

- We ask that only one adult get out of the car to drop off a child. Please try to be consistent in which adult drops off/picks up daily.
- If possible, because they are more at risk for severe illness from COVID-19, older people such as grandparents should not drop off or pick up children.
- One child will be admitted or released at a time.
- Please remain in your car if you see another drop-off or pick-up in progress.
- Parents and staff must sign written attestations (or submit electronically) daily regarding any household contacts with COVID-19, symptoms (e.g., fever, sore throat, cough, shortness of breath, loss of smell or taste, or diarrhea), or if they have given children medicine to lower a fever. An attestation form [is available on our website](#); please print out and bring one with you every morning (we can give you extra copies on your child's return day if you need them or access it via the QR code on-site).
- Once you arrive at the Hug and Go station, please hand the greeter your self-screening attestation. Children will be electronically checked in by a staff member.
- We ask that if you plan to drop-off or pick-up your child outside of the outlined times, you call us to let us know when you arrive in the parking lot.
- Individuals who decline to complete the screening questionnaire will not be allowed to enter the program space.



PICK UP

For Lexington, text or call (781) 460-3207 5 minutes before arriving. For Framingham, text or call (781) 330-2034 five minutes before arriving.

- Please create line
- One car at a time
- Pull up to Hug and go
- Your child will be waiting!



HEALTH SCREENING

Parents will be required to answer the following questions about their child and sign an attestation form. If any of the below are yes, the child will not be allowed to enter the building and must return home with their parent or caregiver.

- Today or in the past 24 hours, have you or any household members had any of the following symptoms? Fever (temperature of 100.0°F or above), felt feverish, or had chills? Cough? Sore throat? Difficulty breathing? Gastrointestinal symptoms (diarrhea, nausea, vomiting)? Fatigue? Headache? New loss of smell/taste? New muscle aches? Any other signs of illness? Fatigue, headache, runny nose and any other sign of illness must be in conjunction with another symptom in order to be excluded
- In the past 14 days, have you had close contact with a person known to be infected with the novel coronavirus (COVID-19)? (Close contact is defined as being within 6 feet of an individual who has tested positive for COVID-19 for more than 10 minutes while that person was symptomatic, starting 48 hours before their symptoms began until their isolation period ends.)

Staff will make a visual inspection of each child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness. The greeter will confirm that the child is not experiencing coughing or shortness of breath. (In the event a child is experiencing shortness of breath or extreme difficulty breathing, a First Circle staff member will call emergency medical services immediately.)

- Once the child has passed the health screening, the staff member will take the child to wash their hands and deliver the child and their belongings to the classroom.
- Although initially part of the licensing standards, the standards were updated to remove the temperature check screening for children and staff entering programs. In an abundance of caution, First Circle's Healthcare Consultant, a position mandated by licensing, has recommended that we take each child's temperature once they have gotten into the classroom.
- If you answer yes to any of the screening questions, you must keep your child home symptom-free for the amount of time specified on the attached COVID Symptom Checklist (without fever-reducing medication).



HEALTH MONITORING DURING THE DAY

Staff will actively monitor children throughout the day for symptoms of any kind, including fever, cough, shortness of breath, diarrhea, nausea, and vomiting, abdominal pain, and unexplained rash. Children who appear ill or are exhibiting symptoms will be separated from the larger group and isolated until able to leave the building. We will check the child's temperature with a contactless thermometer if the child is suspected of having a fever (temperature above 100°F) and disinfect the thermometer after each use. Since contactless thermometers are not as accurate, to confirm a fever, we will also continue to use our highly accurate hospital-grade thermometer.

If any child or staff appears to have severe symptoms, emergency services will be called immediately. Severe symptoms include the following: extreme difficulty breathing (i.e. not being able to speak without gasping for air), bluish lips or face, persistent pain or pressure in the chest, severe persistent dizziness or lightheadedness, new confusion or inability to rouse someone, or new seizure or seizures that won't stop.

ISOLATION

Exclusion protocols from the board of health will be followed for any child, staff or family member with a positive test for COVID-19 or who are symptomatic and presumed to have COVID-19.

If a child becomes symptomatic, First Circle does the following:

- We immediately isolate the child from other children and minimize exposure to staff. We have a separate room to isolate children or staff who may become sick, with the door closed. Isolated children are supervised at all times by a staff member wearing PPE. A separate bathroom will be made available when possible for use by sick individuals only. Others will not enter isolation room/space without the appropriate PPE.



- The space will offer the child some comfort and allow staff to keep the child away from other children until the child can be picked up.
- We will contact the child's parents and send home as soon as possible. If you are notified that your child is sick, you or an authorized pick-up person must pick up your child as soon as possible.
- We have an emergency back-up plan for staff coverage in case a child or staff becomes sick.
- We have masks available for use by children and staff who become symptomatic until they have left the premises of the program. Whenever possible, we will cover the child's (age 2 and older) nose and mouth with a mask or cloth face covering.
- Those being discharged due to suspected infection will depart from a designated separate exit from the exit used to regularly exit.

Staff regularly self-monitor during the day to screen for new symptoms. If a staff member becomes symptomatic, they immediately stop childcare duties and are removed from others until they can leave. If new symptoms are detected among a staff member, First Circle follows the requirements above on how to handle symptomatic individuals.



EXPOSURE

If a child or staff has been exposed to COVID-19, regardless of whether the individual has symptoms or not, the child or staff will not be permitted to enter the program. Exposed individuals must stay home for at least 14 days after the last day of contact with the person who is sick. We will follow guidance from the local board of health on quarantine for other children and staff and what additional precautions will be needed to ensure the program space is safe for continued childcare services.

TRAVEL

All travelers must follow Massachusetts travel guidelines for quarantining upon their return, found [here on Mass.gov](#).

Note that children who have not traveled do not need to quarantine even if the parents have traveled and are quarantined.

CLASSROOMS + PLAYGROUNDS

SMALLER CLASSES: In order to give children more room, EEC has mandated that we increase the amount of square footage allowed for each child. As of September, we are no longer required to limit the group size.

RESTRUCTURED CLASSROOMS: Where needed, classrooms have been restructured to incorporate the larger square footage per child required. The classrooms have been rearranged to facilitate smaller group and individual play, including setting up play activity stations like puzzles and art. The number of children permitted to use any one space or activity center at the same time will be limited to one or two children. Activity areas/learning centers have been placed as far apart as possible.

CONSISTENT STAFFING: Children will be in consistent groupings with consistent staffing and limited floaters. This will make it easier to trace contacts if a child or staff member does develop symptoms.

NO MIXING OF CLASSES: Groups of children will not be combined or mixed, either indoors or outdoors. The groups of children using the outdoor space will be alternated so that only a small number of children are using the equipment at one time. High-touch surfaces such as grab bars and railings will be cleaned and disinfected between groups.

LIMITED SHARING. Children's belongings will be stored in bags in their cubbies so they don't touch. To minimize sharing of materials such as art supplies and equipment, each child will be given their own



supplies. If children are rotating around to various activities, they will be monitored closely and any materials that were placed in their mouth removed. Whenever materials and spaces are shared, children will be reminded not to touch their faces and to wash their hands after using these items.

We have removed any items that cannot be easily washed (i.e. stuffed animals, pillows) or that encourage children to put the toy in their mouths (i.e. play food, pretend utensils). Shared items that cannot be cleaned or disinfected at all (i.e. playdough) will be removed from activity rotation for the duration of the pandemic, or children will be provided individual portions. Water and sensory tables will not be used at all. We are exploring options for individual water and sensory play.

ENHANCED HYGIENE PRACTICES

RESOURCES AND SUPPLIES

First Circle has planned ahead to ensure that we have adequate supplies to promote frequent and effective hygiene behaviors. We have the following materials and supplies:

- Handwashing sinks are available and readily accessible at the entry to the building, in each classroom for the children and teachers or in adjacent restrooms, and the kitchen.
- Handwashing instructions have been posted near every handwashing sink and where they can easily be seen by children and staff.
- Hand sanitizer with at least 60% alcohol will be utilized at times when handwashing is not available, as appropriate to the ages of children and only with written parent permission to use. Hand sanitizer will be stored securely and used only under supervision of staff. Staff will make sure children do not put hands wet with sanitizer in their mouth and will teach children proper use.



INCREASED HANDWASHING

WHEN: First Circle encourages, teaches, models, and reinforces increased handwashing protocols:

- Parents and caregivers must wash their own hands and assist in washing the hands of their children before dropping off, prior to coming for pick up, and when they get home.
- All individuals entering the building are required to wash hands immediately.
- Children and staff will wash their hands or use hand sanitizer often (while hand sanitizer may be used by children over 2 years of age with parental permission, handwashing is the preferred and the safer method), making sure to wash all surfaces of their hands.
- Staff and children must wash their hands with soap and water for at least 20 seconds after:
 - entry into and exit from program space
 - when coming in from outside activities
 - before and after eating
 - after sneezing, coughing or nose blowing
 - after toileting and diapering
 - before handling food
 - after touching or cleaning surfaces that may be contaminated
 - after using any shared equipment
 - after assisting children with handwashing
 - before and after administration of medication
 - after contact with facemask or cloth face covering
 - before and after changes of gloves



HOW: Staff must know and follow the steps needed for effective handwashing:

- Use soap and water to wash all surfaces of their hands (e.g., front and back, wrists, between fingers) for at least 20 seconds, wait for visible lather, rinse thoroughly and dry with individual disposable towel.
- Visual steps of appropriate handwashing will be posted to assist children or they will be instructed to sing the "Happy Birthday" song TWICE (approx. 20 seconds) as the length of time they need to wash their hands.
- Children will be assisted as needed with handwashing.

HAND SANITIZER: Hand sanitizer will be kept out of the reach of children and its use monitored closely (due to its high alcohol content, ingesting hand sanitizer can be toxic for a child). Children will be supervised when they use hand sanitizer to make sure they rub their hands until completely dry, so they do not get sanitizer in their eyes or mouth. A permission for hand sanitizer use has been included on the sunscreen permission form.

When outside or during activities where soap and water are not readily available for use, we will have carefully monitored use of hand sanitizer appropriate to the age of the child.

COUGHS OR SNEEZES

Children, families, and staff must avoid touching their eyes, nose, and mouth. Children will be taught to use tissue to wipe their nose and to cough inside their elbow and wash their hands immediately afterwards (if soap and water are not readily available and with parental permission and careful supervision as appropriate to the ages of the child). Staff are trained to cover coughs or sneezes with a tissue, then the tissue thrown in the trash. They must wash their hands with soap and water immediately afterwards or use hand sanitizer.



FACE MASKS/COVERINGS:

We remind families and staff that all individuals are encouraged to adhere to the CDC's recommendations for wearing a mask or cloth face covering whenever going out in public and/or around other people. The CDC has extensive information on masks and cloth face coverings [here](#). [The CDC Use of Cloth Face Coverings](#) is included as Appendix D.

STAFF: To slow the spread of COVID-19, First Circle staff must wear a cloth face covering while serving children and interacting with parents and families. First Circle requires our staff to wear masks or face coverings during the program day whenever 6 feet of physical distancing is not possible.

- Masks and face coverings will be washed daily and any time the mask is used or becomes soiled, depending on the frequency of use. Staff masks will be washed in a washing machine in hot water and dried fully before using again.
- Whenever possible, we will use transparent face coverings to allow for the reading of facial expressions, which is important for child development.

CHILDREN: When possible and at the discretion of the parent or guardian of the child, the CDC encourages the wearing of masks or cloth face coverings for children age 2 and older who can safely and appropriately wear, remove, and handle masks. Additional guidance on use of face coverings and masks by children is as follows:

- Children under the age of 2 years should not wear face coverings or masks.
- When children can be safely kept at least 6 feet away from others, they do not need to be encouraged to wear a mask.
- Masks must not be worn while children are eating/drinking, sleeping, and napping. Physical distancing will be practiced during these activities. Masks do not need to be worn while engaging in active outdoor play, if children are able to keep physical distance from others.



- Children 2 years of age and older will be supervised when wearing a mask. If wearing the face covering causes the child to touch their face more frequently, staff must reconsider whether the mask is appropriate for the child.
- Families must provide their children with a sufficient supply of clean masks and face coverings for their child to allow replacing the covering as needed. These families must have a plan for routine cleaning of masks and face coverings, clearly mark masks with child's name, and clearly distinguish which side of the covering should be worn facing outwards so they are worn properly each day.
- First Circle requires that parents/guardians wear a mask when on the premises and at all times during drop-off and pick-up.

EXCEPTIONS: Exceptions for wearing face masks include situations that may inhibit an individual from wearing a face mask safely. These may include, but are not limited to:

- Children under the age of 2 years
- Children who cannot safely and appropriately wear, remove, and handle masks
- Children who have difficulty breathing with the face covering or who are unconscious, incapacitated, or otherwise unable to remove the cover without assistance
- Children with severe cognitive or respiratory impairments that may have a hard time tolerating a face mask
- Children where the only option for a face covering presents a potential choking or strangulation hazard
- Individuals who cannot breathe safely with a face covering, including those who require supplemental oxygen to breathe
- Individuals who, due to a behavioral health diagnosis or an intellectual impairment, are unable to wear a face covering safely
- Individuals who need to communicate with people who rely upon lip-reading

SCRUB JACKETS: Scrub jackets will be worn by any staff member entering another classroom and staff may wear them while feeding and holding infants and toddlers.

GLOVES

First Circle staff will wear vinyl gloves at all times during diapering, food preparation, and sunscreen application. Handwashing or use of an alcohol-based hand sanitizer before and after these procedures is always required, whether gloves are used or not.

To reduce cross-contamination, disposable gloves will be discarded after use. After removing gloves for any reason, staff will wash their hands or use hand sanitizer.

CARING FOR INFANTS AND TODDLERS

As part of daily care, infants and toddlers are held. First Circle staff practice stringent hygiene and infection control practices to keep themselves and the young children they care for healthy and safe while in care while still being able to hold and care for children.

- During washing and feeding activities or any activity when an infant or toddler is being held, we will provide long-sleeved surgical scrub jackets for staff to wear over their clothing. Staff with long hair will tie their hair back so it is off the collar and away from the reach of the child.
 - Staff will change their clothes/scrub jacket if body fluids from the child get on it and change the child's clothing if body fluids get on it. Soiled clothing will be placed in a plastic bag until it can be sent home with the child to be washed. Staff will wash their hands and anywhere touched by a child's secretions.
 - Contaminated clothes will be placed in a plastic bag (children) or washed in a washing machine (staff).
 - Infants and toddlers must have multiple changes of clothes on hand.



- All staff will follow safe and sanitary diaper changing procedures.
- As infants and toddlers are not able to verbalize when they don't feel well, staff will be attentive to any changes in a very young child's behavior. If the child starts to look lethargic, and is not eating as well, staff will notify the parent to determine whether the child's pediatrician must be contacted. If an infant or toddler is showing signs of respiratory distress and having difficulty breathing, staff will call 911 and notify the parents immediately.

TOYS FROM HOME: Comfort items such as lovies, blankets, and other soft items brought to child care from a child's home are allowed, provided they are not shared between children and can be kept secure at all times when not in use by the child.

TOOTHBRUSHING: Required toothbrushing has been temporarily discontinued by EEC.

TRAINING. Staff has been trained in recognizing symptoms, increased hygiene and disinfection protocols, as well as best practices in physical distancing with young children.

ENHANCED CLEANING + DISINFECTING

DISINFECTANT



- Children are at greater risk from toxic exposures because of their immature and rapidly developing physiology. By playing on floors, sprawling on table surfaces, and engaging in hand-to-mouth behavior, children live in their environments in ways adults do not. Pound for pound, children take in more contaminants than adults, increasing their risk. With this in mind, we take our responsibility very seriously to maintain a clean and sanitary and safe environment at First Circle for children to grow, play, and learn. For a number of years, we have used a hospital-grade disinfectant cleaner called Oxivir Five 16. Oxivir is a EPA-approved cleaner and disinfectant for use against the virus that causes COVID-19. Oxivir is based on Accelerated Hydrogen Peroxide technology. AHP has superior cleaning abilities, kills a variety of bacteria and viruses, and is environmentally sustainable (hydrogen peroxide breaks down into water and oxygen).
- Many childcare programs use a solution of bleach and water, and although it is effective for sanitizing and disinfecting, it is also corrosive, stains furniture and clothing, and is a skin irritant. Furthermore, it is known to exacerbate symptoms in those with asthma and breathing issues. For these reasons, we do not use bleach and water. Throughout First Circle, tabletops, diaper areas, toys and school materials used by children are cleaned with a disinfectant cleaner, laundered in a washing machine, or sanitized in a dishwasher.
- Pump or trigger sprays are used, not aerosols.

PROPER USAGE

Proper guidelines are strictly followed when cleaning, sanitizing, and disinfecting.

- All sanitizing and disinfecting solutions are used in areas with adequate ventilation. Chemicals are not sprayed around children and children will be moved to another area or distracted away from the area where a chemical is being used.
- To ensure effective cleaning and disinfecting, surfaces are always cleaned first, then disinfected.
- All cleaning products will be used according to the directions on the label, following the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
- All chemicals will be kept out of the reach of children both during storage and in use.

- Chemicals are not mixed to avoid producing toxic gas.
- We strictly follow directions on the label, ensuring that the disinfectant is approved for that type of surface (such as food-contact surfaces). We follow manufacturer's instructions for application and proper ventilation. Children are never present when mixing solutions. Wait times are in accordance with manufacturer's directions and then surface dried thoroughly or allow to air dry.
- Only single-use, disposable paper towels are used for cleaning, sanitizing, and disinfecting, not sponges or cloths.
- All sanitizing and disinfecting solutions are labeled properly to identify the contents, kept out of the reach of children, and stored separately from food items.

GENERAL GUIDELINES

First Circle follows these general guidelines for cleaning, sanitizing, and disinfecting:

- We have intensified our routine cleaning, sanitizing, and disinfecting practices, paying extra attention to frequently touched objects and surfaces, including doorknobs, bathrooms and sinks, keyboards, and banisters.
- We clean and disinfect toys and activity items used by children more frequently than usual and take extra care to ensure that all objects that children put in their mouths are removed from circulation, cleaned, and sanitized before another child is allowed to use it.
- While cleaning and disinfecting, staff wear gloves as much as possible. Handwashing or use of an alcohol-based hand sanitizer after these procedures is always required, whether gloves are used or not.



INDOOR PLAY AREAS

- Per EEC, 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 regularly inspect and dispose of books or other paper-based materials that are heavily soiled or damaged.
- Machine washable cloth toys are not used at all during this time.
- Toys that children have placed in their mouths or that are otherwise contaminated by bodily fluids are set aside until they are sanitized in a mechanical dishwasher.
- For electronics, such as tablets, touch screens, keyboards, and remote controls, visible contamination will be removed if present. We follow manufacturer's instruction for cleaning and disinfecting. If no guidance, we use alcohol-based wipes or sprays containing at least 70% alcohol.

OUTDOOR PLAY AREAS

- Children use our playgrounds by group and we clean and disinfect frequently.
- High touch surfaces made of plastic or metal, including play structures, tables and benches, are frequently cleaned and disinfected.
- Cleaning and disinfection of mulch and sand is not necessary.

AFTER A POTENTIAL EXPOSURE

If an individual within First Circle has a confirmed/suspected COVID-19 diagnosis, the CDC recommends closing off areas visited by the ill persons, opening outside doors and windows, and using ventilating fans to increase air circulation in the area, then waiting 24 hours or as long as practical before beginning cleaning and disinfection. Cleaning staff will clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, and machines used by the ill persons, focusing especially on frequently touched surfaces.



PHYSICAL DISTANCING

It's one thing to physically distance for adults. We have the ability to remember and follow rules and control our bodies. Young children are naturally social and crave physical contact with their loved ones and caregivers. We are careful to balance the need for health and safety with the social-emotional needs of children. We do not discourage children from playing together, nor do we insist on keeping space between them. When feasible, we limit physical interaction, but we believe there is more to keeping healthy than staying COVID-free, and that returning to the joy of playing with friends, of interacting with others, and of feeling safe in a group is also extremely important for children's mental health.

When possible, First Circle educators will maintain at least 6 feet of distance and limit contact between individuals and groups. When 6 feet is not possible, program staff wear masks. Having more square footage per child in the classroom allows for creativity with how to set up and maintain social distancing while still allowing for conversation and interaction between children.

- We'll limit immediate contact (such as shaking or holding hands, hugging, or kissing).
- Outside play is limited to one group at a time.
- Spaces for children are organized in a way that allows staff to maintain consistent physical distancing guidelines. The classrooms have been physically rearranged to space activity areas and centers as far apart as possible.
- Until further notice, we will not be holding any gatherings, events, and extracurricular activities.
- All field trips and specialists will be virtual or held outside in small groups



VULNERABLE CHILDREN

UNDERSTANDING CHILDREN'S HEALTHCARE NEEDS

To ensure we are adequately prepared to provide safe and appropriate services to children with special needs and vulnerable children, the following steps are taken:

- We will review children's medical information and determine whether and how many high-risk children are in attendance.
- We will reach out to parents of high-risk children and encourage them to discuss with their healthcare provider about whether the program is a safe option for the child and if additional protections are necessary.
- We will discuss with the parent any concerns they have with the new protocols and how we can best help their child understand and adhere as close as possible to the health and safety requirements.

CHILDREN WITH SPECIAL NEEDS

- First Circle is prepared to provide hands-on assistance to children with special needs for activities of daily living such as feeding, toileting, and changing of clothes. To protect themselves, staff who care for children requiring hands-on assistance for routine care activities, (including toileting, diapering, feeding, washing, or dressing), and other direct contact activities wear a long-sleeved, surgical scrub jacket over their clothing and wear long hair up or tied back during all activities requiring direct contact with a child. Staff will change outer clothing if body fluids from the child get on it. They will also change the child's clothing if body fluids get on it. Soiled clothing will be placed in a plastic bag until it can be sent home with the child to be washed.
- First Circle staff have been adequately trained and prepared to support children with health care needs.



- To minimize the risk of infection for children who are unable to wear a face covering, physical distancing will be maintained whenever possible and staff will wear a face covering at all times, including when working with a child who is unable to wear a face covering. For children who are hard of hearing, First Circle will use transparent face coverings to facilitate the reading of lips and facial expressions.
- Ratios, groupings and staffing needs will be considered when caring for a child with special needs. Please contact the director for more information.



IF A CHILD/EMPLOYEE CONTRACTS COVID-19

We'd like to thank you in advance for your patience and understanding about a positive case and the steps we take in response. We take our responsibility to provide healthy and safe care very seriously, and to be here when you need us. While working through a positive case may be new to many parents, epidemiologists are now cautioning that we will be living with COVID-19 for many months to come, so dealing with a positive case needs to be incorporated into our typical policies and routines.

A POSITIVE CASE AND MEDICAL CONFIDENTIALITY

Since we severely restrict access into the building by non-essential visitors, a positive case of coronavirus within First Circle will likely be a child or staff member. Medical confidentiality laws restrict how much personal information we can share about the person who tests positive, including their identity.

WHO IS AFFECTED — CONTACT TRACING

For contract tracing purposes, the state and local health departments differentiate between "close contacts" and "incidental contacts." Close contact is defined as being within 6 feet of a COVID-19-positive person for longer than 10 minutes. First Circle's health and safety protocols limit close contact within the program, reducing possible exposure so only a percentage of children in staff in the program will have been in close contact with the person who tests positive. People identified as close contacts will be contacted individually by First Circle. Others (not in close contact) will receive a group email or other communication.

WHAT FIRST CIRCLE WILL DO

ASSIST IN CONTACT TRACING. Identifying close contacts and requiring isolation/testing helps reduce the risk of further exposure. First Circle will contact close contacts personally, while everyone else will receive a general email.

CLEANING AND SANITIZING. The entire center will be thoroughly deep-cleaned per CDC guidelines.

SELF-ISOLATING. Close contacts who have been exposed will be contacted and must stay home for at least 14 days after the last day of contact with the person who is sick.

WILL FIRST CIRCLE STAY OPEN OR CLOSE?

- If we have a suspected or confirmed case of COVID, the Board of Health will determine whether we need to close. By limiting the use of floaters and not mixing classrooms, we greatly decrease the likelihood of the entire program being closed.

WHY DON'T DAILY HEALTH SCREENINGS CATCH IT?

- Our daily health screenings detect symptoms of coronavirus if they are present. When a person actually tests positive, the health department determines a close contact within 2 days prior to symptoms or a positive test result. Some individuals who test positive are asymptomatic, particularly children.



POSITIVE OR PRESUMED POSITIVE CASES

Sick children or employees who are COVID-19 positive or symptomatic and presumed to have COVID-19 will not be allowed to return until they have met the criteria for discontinuing home isolation and have consulted with a health care provider. If a child or employee is presumed to have COVID-19, First Circle will:

- Determine the date of symptom onset for the child/staff.
- Determine which days, if any, the child/staff was at First Circle while symptomatic or during the two days before symptoms began.
- Determine who had close contact with the child/staff at the program during those days (staff and other children) [see above for definition of close contact].
- If the individual tests positive for COVID-19 but is asymptomatic, isolation may be discontinued when at least 10 days have passed from the date of the positive test, as long as the individual remains asymptomatic. For example, if the individual was tested on April 1, isolation may be discontinued on or after April 11.



NOTIFICATION

In the event that we experience an exposure, First Circle will notify the following parties:

- Employees and families about exposure (while maintaining confidentiality). Close contacts [see definition above] will be contacted personally while incidental contacts will receive a general email.
- The local board of health if a child or staff is COVID-19 positive.
- Funding and licensing agencies if a child or staff member has tested positive.

SELF-ISOLATING FOLLOWING POTENTIAL EXPOSURE

In the event that a staff member or child is exposed to a sick or symptomatic person, First Circle will adhere to the following protocols:

- If a child or staff has been exposed to COVID-19, regardless of whether the individual has symptoms or not, the child or staff will not be permitted to enter the program and will be sent home. Exposed individuals must stay home for at least 14 days after the last day of contact with the person who is sick. First Circle will consult with the local board of health for guidance on quarantine for other children and staff and what additional precautions will be needed to ensure the program space is safe for continued childcare services.
- If an exposed child or staff subsequently tests positive or their doctor says they have confirmed or probable COVID-19, they must meet all three requirements:
 - stay home for a minimum of 10 days from the 1st day of symptoms appearing
 - be fever-free for 72 hours without fever-reducing medication
 - experience significant improvement in symptoms

Release from isolation is under the jurisdiction of the local board of health where the individual resides.

- If a child/staff's household member tests positive for COVID-19, the child or staff must self-quarantine for 14 days after the last time they could have been exposed.
- If an exposed child or staff remains asymptomatic and/or tests negative for COVID-19, they must remain in quarantine and continue to monitor for the full 14 days.





SOCIAL-EMOTIONAL HEALTH

The past months have been the most difficult global event since World War II. For people around the world, COVID-19 raised concerns relating to danger, safety, isolation from loved ones and familiar routines, and uncertainty about the future. Children's mental health experts advise Early Childhood educators to be supportive of children who most certainly have experienced stress arising from quarantine, and the stress may be severe enough to consider it traumatic stress. Because of this, we expect some anxiety and mixed feelings as children return to the classroom.

We will work with your family to help ensure that this is an easy transition and ease the challenges of the past few months. The state of Massachusetts has implemented health and safety protocols and we have had to adapt our program accordingly. While there may be temporary operational differences in our program, our core values of flexibility, respect, growth, integrity and excellence are stronger than ever.

During the next few months as children return, our curriculum will focus on the social emotional health of children and our unique MyCharacter program will continue to emphasize the traits of resilience, courage and positive attitude. We know that children and staff will need reassurance and TLC, and our Admin Team will ensure there is plenty of support. We're still warm and caring even if you can't see our smiles behind our masks! We can't wait to be able to care for your children again.

HOW YOU CAN HELP

To help keep our families, children and staff at First Circle healthy, we ask families to adhere to the following practices:

- **STAY HOME WHEN SICK.** If your child is sick, keep your child home until free of fever without medication or other symptoms for 24 hours or cleared by a medical professional to return. If you are sick, please arrange for someone else to drop-off or pick up your child.
- **PRACTICE GOOD HYGIENE.** Cover your mouth with tissues whenever you sneeze or cough and discard used tissues in the trash. If that's not possible, cough or sneeze into your elbow. Do not cough or sneeze into your hand.
- **AVOID TOUCHING YOUR FACE,** especially your eyes, nose, or mouth with your hands.
- **WEAR A MASK** or face covering when in public. They are mandatory for adults on our property and in our facility.
- **PRACTICE PHYSICAL DISTANCING,** maintaining a physical separation of at least six feet with others when wearing a mask is not possible.
- **LIMIT SHARING.** Avoid using others' phones, tools, or equipment whenever possible.

If you haven't already, please start talking with your child about going back to school and remind them of all the fun things that happen here to create anticipation versus feelings of anxiety. Model the excitement of going back and remind them it is a safe place. Be patient with moodiness - children often don't know how to express their feelings, and the return to pre-COVID routines, as welcome as they are, can be turbulent for all of us. These are challenging times and change is happening at a rapid pace. Emotions are high, and we so desperately want normal back. Please reach out with any concerns you may have. Our door may not be to parents yet, but our ears are!

