Lower Columbia College
Head Start/EHS/ECEAP

TRANSITIONAL COVID-19 Operating Plan
& Supplemental Health Guidance
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Employees, Parents, and Visitors are to follow the procedure outlined below while at any of our school sites until lifted by program management. This procedure is to be used as transitional supplemental guidance to our existing Health & Safety policies and procedures. This is a working document that may be revised and updated throughout the school year per the Centers for Disease Control (CDC) and Washington’s Department of Health guidance. Our program may choose to implement the COVID-19 Operating Plan & Supplemental Health Guidance (HLTH1g) if there is a rise in cases at our school sites or in the community. This is to ensure continuity of in-person instruction and care.

GENERAL GUIDANCE
LCC cannot allow children, employees, parents/guardians, or guests on site if they:
- Show symptoms of COVID-19; AND/OR
- Have tested positive for COVID-19 in the past 5 days or are awaiting results of a COVID-19 test due to symptoms and not from routine asymptomatic COVID-19 screening or surveillance testing.
- Have been told by a public health or medical professional to self-monitor, self-isolate or self-quarantine because of concerns about COVID-19 infection in the last 5 days.

We ensure employees are trained in health and safety protocols. This includes:
- How to screen for symptoms
- How to maintain physical distance
- The use of appropriate personal protective equipment (PPE)
- Understanding and practicing frequent cleaning and handwashing
- How to handle situations when someone develops signs of COVID-19.

COVID-19 MOST COMMONLY SPREADS DURING CLOSE CONTACT
- People who are within 6 feet of a person with COVID-19, or have direct contact with that person, are at greatest risk of infection.
- When people with COVID-19 cough, sneeze, sing, talk, or breathe, they produce respiratory droplets.
  - Infections occur mainly through exposure to respiratory droplets when a person is in close contact with someone who has COVID-19.
  - Respiratory droplets cause infection when they are inhaled or deposited on mucous membranes, nose, mouth, eyes).
  - As the respiratory droplets travel further from the person with COVID-19, the concentration of these droplets decreases. Larger droplets fall out of the air due to gravity. Smaller droplets and particles spread apart in the air.
  - With passing time, the amount of infectious virus in respiratory droplets also decreases.

DROP-OFF AND PICK-UP
- Drop off and pick-up times should be staggered and physical distancing maintained at entry and exit of the building.
- Parents and guardians must wash hands and/or use hand sanitizer before signing their child in and out each day.
  - Hand sanitizer should be at least 60% alcohol, fragrance-free, and kept out of the reach of children.
- If parents have a mask, they are encouraged to wear one at pick up and drop off.
  - Our program may provide masks for parents as they are available.
ENTRY INTO BUILDING

Employees monitor themselves for symptoms and stay home if ill. Daily sign-in sheets with health screening attestation are no longer required at entry to the centers. Daily COVID-19 health screenings will end March 25, 2022. Employees, parents, and children must ensure they wash hands per program procedure upon entry and exit of classroom and/or building (See Hygiene Policy/Procedure for guidance on hand washing (HLTH4a). The program resumes its regular Daily Health Checks & Observations (HLTH1d) for all children per childcare licensing requirements. These checks and observations are a general overview of the child’s appearance and health status and include the following:

- **HEAD**: lice and/or nits; sores/cuts; bumps/bruises;
- **EYES**: dull/circles under; red, runny, itchy, discharge-clear; discharge-pus, lids swollen and/or red;
- **EARS**: ear ache, discharge-pus(clear), pulling at/digging in, discharge-wax;
- **NOSE**: discharge-clear, discharge-yellow-green, swollen-red nostrils, sneezing;
- **MOUTH**: blisters/bumps/sores, white coating, teeth decayed, missing, appear loose, swelling-lips and/or tongue;
- **BREATHING**: noisy/wheezing, fast, cough/hoarseness, labored (difficulty);
- **SKIN**: dry, chapped, swollen, red skin, rash, burns, bruised/discolored, scratches, feels feverish/temperature, bug/insect bites, teeth bite marks;
- **STOMACH**: vomiting or nausea;
- **BOWEL MOVEMENTS**: diarrhea-watery or soft stools, constipated-firm stools, diaper rash, or body itch;
- **BEHAVIOR**: frequent mood changes, restless/irritable, fearful, angry, seldom smiles or laughs, inactive/sluggish, clumsy/sits poorly, fussy/cries often;
- **COMPLAINTS**: headache, body itch or suspect communicable disease.

COVID-19 EXPOSURES AND FOLLOW UP

Vaccination is the most effective prevention strategy available to protect vaccine-eligible children and adults from the most severe outcomes due to COVID-19 illness.

ALL STAFF ARE FULLY VACCINATED

People are considered fully vaccinated:

- Two (2) weeks after their primary shot series. That is after the second dose for Pfizer or Moderna vaccines or after the single dose for Johnson & Johnson.
  - Recommended booster 5 months after the Pfizer or Moderna vaccine OR 2 months after the Johnson & Johnson vaccine.

If it has been less than two weeks since your primary shot series, or if you still need to get your second dose, you are NOT fully protected. Keep taking all prevention steps until you are fully vaccinated.

EMPLOYEE NOTIFICATION PROCESS FOR COVID LIKE ILLNESS (CLI) SYMPTOMS

If an employee has CLI symptoms or tested positive for COVID-19:
- Isolate: Do not come to work OR leave work if already on site.
- The employee will notify their Supervisor.
- The Supervisor will notify the Health Specialist, Director, or Assistant Director when the Health Specialist is not available.
The Health Specialist, Director, or Assistant Director will complete an LCC COVID intake form by calling the staff member and will forward the intake to Human Resources and COVID@lowercolumbia.edu. Human Resources will contact the staff member about their leave options and copy and Supervisor and Director.

EXCLUSION OF INDIVIDUALS WITH CLI SYMPTOMS OR POSITIVE COVID-19 DIAGNOSIS, AND RETURNING TO PROGRAM

Children and employees who have CLI symptoms are required to stay home and should get tested and/or see a health care provider. Follow the Return to Campus Guide for Childcare: Return to Campus for Childcare Guide

Any child or employee who tests positive for COVID-19 is required to isolate, regardless of vaccination status.

The individual may return to care after 5 full days of isolation if:
- Their symptoms have improved or they are asymptomatic, AND
- They are without fever for the past 24 hours without the use of fever reducing medications

If returning to care after day 5, the individual:
- Continues masking as required by federal mandate

SUSPECTED COVID-19 CASE WHEN ON SITE

If a child or employee arrives to school and is a suspected COVID-19 case, they must be sent home immediately. Employee must report the suspected case to their supervisor and the Health Specialist.

If a child or employee becomes ill during the school day and is experiencing signs and symptoms of COVID-19:
- A child must be placed in a separate room away from others, a “low traffic” area within the building, or a separate corner within the classroom where child can wait for parent/guardian if no other spare area within the building has been established. There must be an assigned employee that will wait with child until parent/guardian pick up.
- An employee must leave the building and ensure that they notify their supervisor immediately before leaving their work site for the day.
- If possible, the designated room or area should be open to the outside to provide for adequate airflow.
- If no appropriate indoor space is available, and the child can be supervised and made comfortable, and outdoor setting is an acceptable emergency alternative if weather and privacy permit.
- Employee and/or Supervisor is to follow-up with the Health Specialist.
- It is especially important that anyone experiencing COVID-19 signs or symptoms isolate themselves right away, even before they are confirmed to have COVID-19, because if you have COVID-19, you are already contagious.

If a child or employee is instructed by their health care provider to stay home and self-quarantine or if they are informed that they are a probable coronavirus case, it is essential that they report this information immediately. For the child, report to the classroom teacher or family advocate. For the employee, report to their Supervisor. This should be done while also following their health care provider’s plan of care. It is critical that employees support families in providing timely follow-up. This is in order to allow time to best support children and all other employees who may have come in contact with the individual.
Supervisors are to keep an illness log of any employees that becomes ill with CLI symptoms and/or those who are suspected or confirmed COVID-19 cases. Supervisors are to ensure that all suspected or confirmed cases are reported to the Health Specialist who then must follow up with the contact person within the college. The Health Specialist will then follow up with the health department as required.

**NOTIFYING GROUPS OR INDIVIDUALS OF POTENTIAL EXPOSURES**

For any potential classroom-based exposure of COVID-19, the Health Specialist will directly call any employees, and families will be notified of a with a letter. Potentially exposed children and employees may continue all in-person instruction and care as long as they are not symptomatic. If a child or employee develops symptoms, they are required to immediately isolate at home and follow the procedure outlined on the previous page. The COVID-19 Intake Checklist form will no longer be required for employees identified as a close contact.

Regardless of vaccination status, children and employees who were potentially exposed to COVID-19 are encouraged to:

- Monitor for symptoms, AND
- Get tested 5 days after their last exposure. PCR, antigen, and at-home test are acceptable. If they test positive, they must isolate.
  - For individuals who have been infected in the past 90 days, antigen or at-home testing should performed as PCR results may remain positive and not be indicative of a new, active infection.

**RESPONDING TO COVID-19 OUTBREAKS**

Outbreaks are situations in a classroom or school site where enhanced mitigation efforts should be considered, and may be required, to prevent disease transmission. Our program may choose to temporarily re-implement the COVID-19 Operating Plan (HLTH 1g) in the case of an outbreak.

DOH defines an outbreak of COVID-19 in a childcare setting as:

- Two (2) or more COVID-19 cases who tested positive by viral test, AND
- At least two cases have symptom onsets (or positive specimen collection dates when asymptomatic) within 14 days of each other, AND
- Cases were linked in the child care setting or a child care associated activity (e.g. fieldtrip), AND
- There is no other linkage suggesting transmission is more likely to have occurred in another setting (e.g. household) outside of the child care setting.

**ON SITE TESTING AVAILABLE TO EMPLOYEES**

LCC HS/EHS/ECEAP employees have optional access to on-site COVID-19 testing when they do not have access to home tests or provider tests. When the employee’s COVID-19 Intake is completed, the employee notifies the Health Specialist of testing needs. The Health Specialist and employee schedule a testing time if needed. Testing protocol:

- Upon arriving at the LCC HS/EHS/ECEAP Administration, park in the 30-minute parking spots facing campus towers, and call the Health Specialist at 360-442-2807.
- The Health Specialist will meet the employee at their vehicle to collect the consent form and the test sample.
- The Health Specialist uses the BD Veritor analyzer provided by the Health Department to determine results which will show as “positive,” “negative,” or “invalid.”
  - The BD Veritor is then synched with ImageMover on the Health Specialists LCC computer.
  - The Health Specialist will then email test results to the employees LCC email and to LCC Human Resources.
  - If the results are positive the Health Specialist will contact the employee via phone to discuss their return to work timeline.
The employee is responsible for reporting their positive test results to the local Health Department.

**STRATEGIES FOR LAYERED PREVENTION**

School sites need to maintain flexibility in how mitigation procedures are applied. Removal of layers of protection will be done by factoring in considerations such as community levels of transmissions and local outbreaks. If COVID-19 prevalence increases, schools will add back additional layers of prevention or mitigation measures.

Individuals who choose to continue to use preventative measures to protect themselves will be supported. Assumptions regarding someone’s beliefs or health status should neither be made nor commented about.

**COHORTING**

No longer required.

**PHYSICAL DISTANCING**

Both DOH and CDC recommend that children physically distance by at least three feet or more within groups and in rooms as much as possible. Continue to maintain six feet of distance as much as possible when children are eating and sleeping. Your ability to do this will depend on children’s ages and on their developmental and physical abilities.

**MEAL SERVICE**

Resume family style meal service.

**PLAYGROUND**

Children and employees do not need to wear face masks while on playground when physically distancing. Masks are required for use outdoors in crowded settings or during activities that involve sustained close contact with other people. Face shields must be removed when on playground and/or when engaging in physical activity due to safety concerns.

**WATERPLAY ACTIVITIES**

Resume group waterplay.

**TOOTHBRUSHING**

Toothbrushing is suspended*. Staff will be notified when toothbrushing is to resume as part of the daily classroom routine. Promoting tooth brushing at home at this time is critical in order to help support the importance of dental care and cavity prevention. *When masks are no longer required toothbrushing will resume.

**TRANSPORTATION**

Transportation (school bus) may resume pick-up and drop-off during the mid-day route. Masks continue to be required on school buses. Continue assigned seats for children to sit in rows with their class group. Resume daily cleaning routine per program procedures. Maximize ventilation on the bus by keeping at least 2 front and 2 rear windows open a few inches, weather permitting. Encourage students to wash or sanitize hands when they leave their home or classroom before boarding the bus.
FACE MASKS – ADULTS

Preschool Centers:
Indoors – All employees, families, visitors, volunteers, youth, and children 2 years of age and older must wear facial coverings indoors regardless of vaccination status except when eating or sleeping.

Infant & Toddler Center:
Follow Preschool Center guidance above (facial coverings are required). Due to longer duration of close contact, staff in infant rooms will need to wear a surgical style face mask.

**Guidance collected from Office of Head Start – final rule regarding mask requirements

FACE MASKS – CHILDREN

There are specific exceptions based on age, development or disability; outlined below. Face masks with ear loops are preferred over ones that tie around the neck or behind the head during physical activity to reduce the risk of injury. School sites must provide face coverings for employees and youth who don’t have them.

Children age 2 and up are required to wear a face covering at child care and preschool when indoors.

- Face coverings should not be worn by:
  - Children younger than age 2 years.
  - Children while they are sleeping.
  - Those with a disability that prevents them from comfortably wearing or removing a face covering.
  - Those with certain respiratory conditions or trouble breathing.
  - Those who are deaf or hard of hearing and use facial and mouth movements as part of communication.
  - Those advised by a medical, legal or behavioral health professional that wearing a face covering may pose a risk to that person.

- In rare circumstances when a cloth face covering cannot be worn, children and employees may use a clear face covering or a face shield with a drape as an alternative to a cloth face covering. Face shields should extend below the chin, to the ears, and have no gap at the forehead.

- Younger children must be supervised when wearing a cloth face covering. These children will need help with their masks getting used to wearing them.

- Children may remove cloth face coverings to eat and drink and when outside. If children need a “mask break”, take them outside or to a large, well ventilated room where there is sufficient space to ensure more than 6 feet of physical distance between people.

- The child care is responsible for providing appropriate PPE for all employees, including those who provide assistance to children and youth who have special needs.

**Guidance collected from Office of Head Start – final rule regarding mask requirements

HAND SANITIZER

Alcohol based hand sanitizers with at least 60% alcohol may be used by adults and children over 24 months of age with proper supervision only when hand washing facilities are not available and hands are not visibly soiled. Hand Sanitizer must be stored where it is not accessible to children. Alcohol based hand sanitizer is not a substitute for hand washing when hands are dirty, after diapering or toileting, or before eating. An alcohol-based hand sanitizer must contain 60% to 90% alcohol to be effective.
HOME VISITS

Preparing for the Home Visit
To ensure families understand the COVID procedures LCC is obligated to follow, staff will review this guide prior to (or during) the first home visit with each enrolled family (include all members who will be present during home visits to the extent possible). Upon completion of reviewing the guidance, have the parent sign and date the Parent Statement of Understanding. Employees will consider the in-person visit options in the section below with each family to establish where the in-person visit(s) will occur. Before beginning the home visit staff will ask the caregiver if anyone in the home is experiencing COVID-19 symptoms.

Home Visit – Environment
In-person visits are required and may occur indoors or outdoors. Visits occur at the family home. A virtual visit may be offered if any family member participating in the visit has COVID-19 symptoms. The family can also opt for a rescheduled in-person visit in lieu of a virtual visit.

All employees completing home visits are supplied with a home visitor kit which includes hygiene items for use during home visits (ex. gloves, hand sanitizer, mask, etc.). It is the responsibility of each staff member to request supplies and replenish their kits when supplies are needed.

Handwashing, Hygiene, Face Masks
Employees are to wash hands and/or use hand sanitizer at beginning and end of each home visit. Employees will be supplied with hand sanitizer and non-latex gloves to use as needed. Handwashing or the use of hand sanitizer must occur regardless of non-latex glove use. All materials (ex. books, pens, markers, scissors, etc.) used during home visit must be wiped down between home visits. Face Masks at the Home – Employees are required to wear face masks during the visit when indoors. All other adults and children ages 2 and up that are present in home, are encouraged to wear a disposable or cloth face mask when interacting with employees at their home. Refer to Face Mask section (Adult and Children) within this plan.

CLEANING, SANITIZING, AND DISINFECTING
Clean, sanitize, and disinfect throughout the day in accordance with the licensing regulation WAC 110-300-0241. The procedure is located in each sites Health Care Plan.

IN CASE OF EXPOSURE
- Open outside doors and windows to increase air circulation in the area.
- Follow Cleaning, Sanitizing, and Disinfecting Health procedure to prevent further spread of disease and other illnesses.
- If it has been more than 7 days since the person with suspected/confirmed COVID-19 visited or used the facility, additional cleaning and disinfection is not required.

COMPROMISED IMMUNE SYSTEM/SPECIAL HEALTH CARE NEEDS

INDIVIDUALS WITH CHRONIC HEALTH CONDITIONS
Employees should be extra vigilant of children with chronic health conditions, such as those with Asthma. During times when COVID-19 cases are on the rise, it is advisable that children with serious chronic conditions (ex. Asthma) be kept at home while following strict hygiene and physical distancing guidelines.
Employees living with chronic health conditions should contact their health care provider for guidance when considering when to provide or participate in childcare. Employees should work with their supervisor and LCC Human Resources when accommodations are needed.

WOMEN WHO ARE PREGNANT
Women who are pregnant should follow employee/volunteer procedures, wash hands often, maintain proper physical distance from others, and wear a face mask at all times. It is recommended that women who are pregnant avoid high traffic areas as often as possible to prevent exposure.

CARING FOR SOMEONE WITH COVID-19
Limit Contact
- Staying away from others helps stop the spread of COVID-19
- If possible, have the person who is sick use a separate bedroom and bathroom.
- If you have to share space, make sure the room has good air flow.
  - Open the window to increase air circulation.
  - Increased air circulation helps in removing respiratory droplets in the air.

Caregivers and anyone who has been in close contact with someone who has COVID-19 should follow their health care provider’s plan of care, while also following the guidance provided within this procedure and that which is provided by their Supervisor.