

# CORONAVIRUS, COVID-19 Emergency Preparedness Plan

**UPDATED: 12/8/2020**



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## Introduction

The plan has been developed to assist Hand in Hand in protecting the health and safety of the employees, families, and participants in its care during the COVID-19 pandemic. The safety and health of the staff, participants, and families is the primary goal of Hand in Hand.

The following pages will describe policies and procedures as of **November 18, 2020**. Because we are in an unprecedented time and information is changing frequently, this document and its described policies and procedures could change at any time. Should any information change, an updated copy will sent out via email to all Directors. All information included in this plan is an assortment of material compiled and summarized from the Center for Disease Control and Prevention, World Health Organization, Iowa Department of Public Health Departments and many others.

We are doing our best at obtaining information, analyzing each piece of information and applying it to our organization, and being flexible with the information and circumstances. We ask that you flexible with us as we go through the coming weeks.

**And, please, if you are ill, stay home.**

Thank you for your dedication to our organization and the families and participants we serve.

Angie Kendall, CEO

## Team and Communications

The Crisis Team for the current situation consists of CEO, Director of Waiver Care and Program Development, Director of Licensed Care, Director of Development and Marketing, Director of Recreation, Assistant Director of Licensed Care and Director of Dayhab. The team will be led by the CEO. The Crisis Team will convene as needed to discuss any happenings, changes, or updates to processes.

### Assignment of Responsibilities

It is the responsibility of all staff to understand their roles and responsibilities in the event of an emergency.

- Incident Commander (IC): **CEO** initiates Emergency Operations Plan, directs staff, delegates tasks/procedures, gives “All Clear” once emergency has passed
- Primary Communications: **Director of Licensed Care** notifies other sites/staff of emergency situation, takes direction from Incident Commander for communication to staff or other emergency contacts, maintains staff emergency contact list and staff attendance list
- Back-Up Communications: **Director of Development and Marketing** assists Communications and IC, serves as Primary Communications in absence/incapability of designated staff

The CEO will communicate any needs necessary to the Board of Directors.

## COVID-19 Testing Communication Plan

The following scenarios are examples of processes that will likely occur in the event of pending COVID-19 test, quarantine, or positive COVID-19 test. \*\*This is subject to change based on the evolving situation.

- **Pending test due to suspicion of COVID**– if an employee, participant, or a family member of an employee or participant in our care has a pending test due to suspicion of COVID all individuals in the household will remain out of programming until they receive a negative COVID test or they have quarantined for 14 days and symptoms are improving/the individual remains symptom free (if test results are still not returned).
- **Positive test** – if an employee or participant is known to have had a positive test, then they will not be allowed on premises for up to 14 days. Hand in Hand will:
  1. Notify DHS and the Childcare Nurse Consultant at the Scott County Health Department and follow all directives.
  2. Identify all contacts (defined as contact within 6 feet for at least 15 minutes) within the center.
    - Contacts will be instructed to self-quarantine for 14 days after last exposure to confirmed case
  3. Deep clean in accordance with COVID-19 Cleaning Guidance at the CDC website.
  4. Implement screening procedures for staff and participants for fever and symptoms at least twice a day.
  5. Notify all families of the positive test, maintain confidentiality of the individual who tested positive.

## Symptoms, Testing, and Exclusion from Work or Care at Hand in Hand

### Experiencing Symptoms

#### Symptoms As Defined by the CDC

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

*This list does not include all possible symptoms. CDC continues to update the list. This list is updated as of 11.11.20.*

## Testing and results

Symptomatic children and staff should be tested.

- Children and staff should be instructed to contact their healthcare provider to pursue testing. Children older than 1 year of age may access testing through Test Iowa
- Children and staff ill with COVID-19 symptoms should be isolated in accordance with the guidance below.
  - Persons with **symptoms of COVID-19** should self-isolate (this includes persons who test PCR positive, persons who are not tested, and symptomatic persons waiting for their test results) until after the following three things have happened:
    - They have had no fever for at least 24 hours (without the use of fever reducing medicine) AND
    - Symptoms have improved (for example, when cough or shortness of breath has improved) AND
    - At least 10 days have passed since symptoms first appeared
  - People with **severe, advanced immunosuppression who test positive for COVID-19** should stay home until:
    - They have had no fever for at least 24 hours (without the use of fever reducing medicine) AND
    - Symptoms have improved (for example, when cough or shortness of breath has improved) AND
    - At least 20 days have passed since symptoms first appeared OR
    - OR they have had 2 negative tests in a row, 24 hours apart
  - Persons with **symptoms of COVID-19 who are tested and test PCR negative** and who are a close contact of a person who tested positive for COVID-19 should continue to self-quarantine until 10 days after their last exposure to the confirmed case, or until 7 days after their last exposure if an additional PCR test is taken 5 days post exposure and the result is negative.
  - Persons with **symptoms of COVID-19 who are tested and test PCR negative** and who are not a close contact of a person who tested positive for COVID-19 can go back to daily activities 24 hours after their fever and other symptoms resolve.
  - Persons who test **PCR positive for COVID-19 but do not experience symptoms** should self-isolate until:

- At least 10 days have passed since the date of the first positive test AND
  - They continue to have no symptoms (cough or shortness of breath) since the test.
- Persons **without any symptoms and who have not been identified** as a close contact of a confirmed case, being tested for surveillance purposes only, are not required to be isolated while results are pending.
- Persons who **test positive for COVID-19 on serologic testing** should not be excluded, unless they also test positive for COVID-19 on PCR testing or are sick with COVID-19 symptoms and have not yet met the isolation release guidance described above.
- **Retesting is not recommended** for a previously diagnosed person (unless immunosuppressed, see above) if it has been less than three months after the date of symptom onset (or date of test if asymptomatic persons) for the initial COVID-19 infection.
- Quarantine is not recommended in the event that a person previously diagnosed with COVID-19 is in close contact with a new infected person during the three month time period since their diagnosis, as long as the previously diagnosed person remains asymptomatic (i.e., has not developed symptoms of Comm. 548 (12/20) 4 a new illness).
- Positive COVID-19 laboratory results are mandated to be reported to public health.
- Public health will conduct a case investigation and identify close contacts.
  - Public health investigates cases by calling the person who tests positive for COVID-19 infection to direct them to isolate in accordance with the guidance above and asking them a series of questions about their illness, risk factors, and most importantly who they have been in close contact with (persons within 6 feet of the case for more than 15 minutes) during the time in which they could have spread illness to others.
    - *People with symptoms of COVID-19 can spread the virus from 2 days before symptoms started until 10 days after their symptoms started, they have been fever free for three days, and all other symptoms have improved.*
    - *People without symptoms of COVID-19 (who test positive for COVID-19 infection) can spread the virus from 2 days before they are tested until 10 days after they are tested.*
  - Public health investigators then call the identified close contacts to direct them to self-quarantine:
    - Quarantine can end after 10 days without testing and if no symptoms have been reported during daily monitoring.
    - Quarantine can end 7 days and a negative COVID-19 test and if no symptoms were reported during daily monitoring. The specimen may be collected and tested within 48 hours before the time of planned quarantine discontinuation, but quarantine cannot be discontinued earlier than after Day 7.
  - If a shorter quarantine period is considered the person would need to continue to do the following:
    - Watch for symptoms until 14 days after exposure.
    - If symptoms develop, they would need to immediately self-isolate and contact their local public health or healthcare provider.
    - Wear a mask and stay at least 6 feet away from others.

*Note: Quarantine is NOT recommended for the exposed close contact, if the close contact was diagnosed with COVID-19 infection during the previous three month time period, as long as close contact remains asymptomatic (i.e., has not developed symptoms of a new illness).*

The Equal Employment Opportunity has confirmed that employers may now inquire into an employee's symptoms if there is "reasonable belief based on objective evidence that the severe form of pandemic influenza poses a direct threat." Hand in Hand administration team may ask employees if they are experiencing COVID-19 symptoms. Federal or state law may require the employer to handle the employee's response as a confidential medical record.

### Contact

If an employee or participant has direct contact with someone who tests positive for COVID, they must self-quarantine for 14 days.

Only the person with close contact to a positive case needs to be in quarantine. If an exposed family member becomes ill with COVID symptoms or tests positive, then the child or staff member must also stay home for 14 days.

The definition of contact is to be within 6' of an individual for at least 15 minutes.

### Travel

There is no longer a recommendation to self-isolate for 14 days after returning home from travel outside of Iowa and within the United States. The Centers for Disease Control continues to recommend that persons returning from international travel stay home for 14 days after they return.

### Illness in Center

**If someone is or becomes sick in our center they will be moved to an isolated room or area until participant is picked up. The room will then be cleaned and disinfected after the participant has left.**

- If COVID-19 is confirmed in a participant or participant member Hand in Hand will do the following:
  - Close of areas used by the person who is sick.
  - Open outside doors and windows to increase air circulation in the areas.
  - Wait up to 24 hours or as long as possible before we clean or disinfect to allow respiratory droplets to settle before cleaning and disinfect.

Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas

**\*\*We will continue to significantly err on the side of caution if there is any potential exposure or suspicion of COVID-19 symptoms.**

### Hand in Hand Fees

Fee policies remain much the same as typical Hand in Hand policies. All participant care fees must be paid on Monday morning for the upcoming week. Checks can be made payable to Hand in Hand. A family will pay the same weekly rate even if there is a holiday, a day missed due to illness, isolation, quarantine, or a family vacation. Failure to pay for participant care will result in a loss of services.

If Hand in Hand closes programs due to staffing shortages, exposure, requirements of public health officials or any other reason, fees will not be assessed for families. If fees have already been added to the bill they will be credited, and any payment will be applied for future charges.

## COVID-19 Case Reporting

When a child or staff member is sent home due to symptoms or is exposed to someone with COVID-19 staff must immediately notify their Director. The director must notify the CEO of the name(s) of the individual, details surrounding the situation. The CEO will contact the Scott County Health Department and DHS Licensing Consultant.

## Access to Buildings, Travel, etc.

All individuals seeking access to the building must consent to and disclose the following before entering:

1. All individuals who enter the building must consent to a health and temperature screening.
  - a. An individual with a temperature of 100.4 degrees or higher may not enter the building.
  - b. Move to question 2 for an individual with a temperature under 100.4
2. Has the individual seeking access to the building traveled internationally?
  - a. If yes, they may not enter the building for 14 days
  - b. If no, go to question 3
3. Does the individual or any member of their home have any [symptoms related to COVID](#)?
  - a. If yes, they may not enter the building
  - b. If no, go to question 4
4. Has the individual had direct contact with anyone who tested positive for COVID-19?
  - a. If yes, they may not enter the building
  - b. If no, they may come into the building

## Discrimination and Harassment

To prevent stigma and discrimination, we will not make determinations of risk based on race or country of origin, and must maintain confidentiality of everyone (employees, participants, customers/families) with confirmed COVID-19.

- The EEOC has said that the employment laws continue to apply, but they do not interfere with or prevent employers from following the guidelines and suggestions made by the CDC about steps employers should take regarding the COVID-19.
- The Americans with Disabilities Act prohibits making disability-related inquiries or medical exams, unless job related and consistent with business necessity, or the employer has reasonable belief that the employee poses a direct threat to the health or safety of employees. During an outbreak, employers should seek public health advice to make reasonable assessments to determine if situations rise to a “direct threat.” We cannot deny hire, but we can choose to delay hiring or a return to the workplace for the safety of others.

## Illness Prevention, Care, and Cleaning/Sanitizing Procedures During COVID-19

Hand in Hand will implement common-sense practices for preventing disease spread, such as: covering a cough or sneeze with a bent elbow, staying home when sick, and washing hands.

### Basic Daily Care

- Hand washing will occur frequently throughout the day. See further stipulations below.
- Sneezing and coughing needs to be into your elbow or a tissue and the tissue needs to be immediately thrown in the trash.
- Avoid touching your eyes, nose, and mouth with unwashed hands.



- Stay home when ill.
- All signs authored by the CDC need to be placed around your site for all employees, families, and customers to see.

## Masks

Participants are encouraged to wear masks, children ages 2-5 will be asked to regularly wear a mask per DHS recommendations. Participants age kindergarten and up and all staff are required to wear masks. Participants who have trouble breathing or are unable to remove the mask without assistance should not wear cloth face coverings. Hand in Hand will provide masks upon request. If a participant struggles wearing a face mask, Hand in Hand will work with the individual to meet their needs while also keeping the rest of the individuals safe. This may include frequent private breaks from a mask, or in specific circumstances approval to wear a Humanity Shield. These shields may not leave Hand in Hand property and will be provided to participants who are approved to wear them.

All staff are required to wear masks in all common areas and when providing care in close proximity to others. They may remove their mask if they are alone in an office or at least 6' away from others. Hand in Hand will provide masks upon request.

- Participants may bring a mask. Masks should NEVER be put on babies and participants under age two because of the danger of suffocation.
- Staff will be provided a cloth face mask. They may provide their own. Staff will be required to wash their own mask at home daily.
- How to Wear Cloth Face Coverings
  - Cloth face coverings should—
    - fit snugly but comfortably against the side of the face
    - be secured with ties or ear loops
    - include multiple layers of fabric
    - allow for breathing without restriction
    - be able to be laundered and machine dried without damage or change to shape
- Cleaning
  - Staff should wash their mask daily in the washing machine.
- Removal
  - Individuals should be careful not to touch their eyes, nose, and mouth when removing their cloth face covering and wash hands immediately after removing.
- CDC on Homemade Cloth Face Coverings

CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies), especially in areas of significant community-based transmission. CDC also advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others. Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used as an additional, voluntary public health measure.

Cloth face coverings should not be placed on young participants under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the cloth face covering without assistance.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance.

## Handwashing

All participants, staff, and volunteers should engage in hand hygiene at the following times:

- Arrival to the facility and after breaks
- Before and after preparing food or drinks
- Before and after eating or handling food, or feeding participants
- Before and after administering medication or medical ointment
- Before and after diapering
- After using the toilet or helping a participant use the bathroom
- After coming in contact with bodily fluid
- After handling animals or cleaning up animal waste
- After playing outdoors or in sand
- After handling garbage

Wash hands with soap and water for at least 20 seconds using the following steps:

1. Pull down on paper towel dispenser
2. Turn on water
3. Wet hands
4. Apply soap
5. Wash hands for 20 seconds
6. Rinse hands for 10 seconds
7. Dry hands
8. Turn off water with paper towel, or if there is a line leave the water on
9. Toss paper towel in a covered, lined, hands free container

Supervise participants when they use hand sanitizer to prevent ingestion. Hand sanitizer shouldn't be used in replace of handwashing but a "extra" precaution when handwashing isn't immediately available.

Assist participants with handwashing, including infants who cannot wash hands alone. After assisting participants with handwashing, staff should also wash their hands.

Place [posters](#) describing handwashing steps near sinks. Developmentally appropriate posters in multiple languages are available from CDC.

## Food Preparation:

Meals will be served in the classroom. If meals are typically served family-style, plate each participant's meal to serve it so that multiple participants are not using the same serving utensils. Food preparation should not be done by the same staff who diaper participants. Sinks used for food preparation should not be used for any other purposes.

Caregivers should ensure participants wash hands prior to and immediately after eating. Caregivers should wash their hands before preparing food and after helping participants to eat.

Hand in Hand will follow all other applicable federal, state, and local regulations related to safe preparation of food.

### Classroom Practices:

- No plush toys, clothing and other soft toys are allowed in the classrooms. Participants may not bring plush toys from home.
- Wash blankets daily.
- Use of shared objects (e.g., toys) should be limited when possible, or if shared use is required, thoroughly clean objects between each use.
- Minimize the number of toys in the program space and disinfect them daily.
- Implement regular deep-cleaning practices at a minimum once a week, while continuing daily cleaning as normal.
- Toys that cannot be cleaned and sanitized will not be used.
- Recess, activities, and hallway passing should be staggered to limit interactions.
- During rest time, participants' cots should be placed as far away from one another as possible and in a head to foot pattern.
- Windows should be opened at all possible times to increase and improve ventilation.
- We will not use group sensory/water tables. Instead, we will provide individual sensory experiences with individual materials for each participant which are then cleaned and sanitized immediately after use. Similarly, participants will be provided individual art materials that can be sanitized and disinfected i.e. crayons, colored pencils, pencils etc.
- All classrooms will implement use of 'Yuck Bucket' for mouthed/high-contact toys that must be disinfected immediately. Toys that participants have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry. You may also clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.
- 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.

### Washing, Feeding, or Holding a Participant

It is important to comfort crying, sad, and/or anxious infants and toddlers, and they often need to be held. To the extent possible, when washing, feeding, or holding very young participants: Participant care providers can protect themselves by wearing an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other updo.

- Staff should wash their hands, neck, and anywhere touched by a participant's secretions.
- Staff should change the participant's clothes if secretions are on the participant's clothes. They should change the button-down shirt, if there are secretions on it, and wash their hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
- Infants, toddlers, and their providers should have multiple changes of clothes on hand at Hand in Hand.
- Staff should wash their hands before and after handling infant bottles prepared at home or prepared in the facility. Bottles, bottle caps, nipples, and other equipment used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water.

## Administration, Offices

- Hand washing for at least 20 seconds or hand sanitizing if handwashing isn't available with at least 60% alcohol needs to be done throughout the work day; each time you get up from your desk before returning to your desk or if someone visits your space after sneezing, coughing, or blowing your nose.

## Transportation

- Individuals being transported for SCL care, field trips, etc should ride with other staff and participants who are part of their typical group, avoid mixing groups for travel
- Driver should open windows for maximum ventilation whenever possible
- Driver and passengers must wear a mask while in the vehicle.
- Driver should provide and encourage use to hand sanitizer before entering and when exiting the bud.
- Passengers should be spread out, with at least one empty seat between them when possible.
- After returning from a trip, the driver must Clean and disinfect frequently touched surfaces including but not limited to seat belts, door handles, steering wheel.
  - If surfaces are visibly dirty, clean them using a detergent or soap and water before you disinfect them.
    - Use products that are EPA-Registered, diluted household bleach solutions, or alcohol solutions with at least 70% alcohol, appropriate for surface disinfection.

## Cleaning and Disinfecting

### Clean

- Wear disposable gloves to clean and disinfect.
- Clean surfaces using soap and water, then use disinfectant.
- Cleaning with soap and water reduces number of germs, dirt and impurities on the surface. Disinfecting kills germs on surfaces.
- Clean and disinfect frequently touched surfaces (e.g., door handles, sink handles, drinking fountains, grab bars, hand railings, bathroom stalls, tables) at least daily or between each use as much as possible.

### Disinfect

- Recommend use of EPA-registered household disinfectant.
- Follow the instructions on the label to ensure safe and effective use of the product.  
Many products recommend:
  - Keeping surface wet for a period of time (see product label).
  - Precautions such as wearing gloves and making sure you have good ventilation during use of the product.
- Diluted household bleach solutions may also be used if appropriate for the surface.
  - Check the label to see if your bleach is intended for disinfection, and ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
  - Unexpired household bleach will be effective against coronaviruses when properly diluted.

- Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.
- Leave solution on the surface for at least 1 minute.

**To make a bleach solution, mix:**

- 5 tablespoons (1/3rd cup) bleach per gallon of water  
OR
- 4 teaspoons bleach per quart of water

- Bleach solutions will be effective for disinfection up to 24 hours.
- Alcohol solutions with at least 70% alcohol may also be used.

## **Soft surfaces**

For soft surfaces such as carpeted floor, rugs, and drapes

- Clean the surface using soap and water or with cleaners appropriate for use on these surfaces.
- Launder items (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely. OR
- Disinfect with an EPA-registered household disinfectant. [These disinfectants](#) meet EPA's criteria for use against COVID-19.
- [Vacuum as usual.](#)

## **Electronics**

For electronics, such as tablets, touch screens, keyboards, remote controls, and ATM machines

- Consider putting a wipeable cover on electronics.
- Follow manufacturer's instruction for cleaning and disinfecting.
  - If no guidance, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.

## **Laundry**

For clothing, towels, linens and other items

- Bedding and other materials should be washed daily.
- Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
- Wear disposable gloves when handling dirty laundry from a person who is sick.
- Dirty laundry from a person who is sick can be washed with other people's items.
- Do not shake dirty laundry.
- Clean and disinfect clothes hampers according to guidance above for surfaces.
- Remove gloves, and wash hands right away.

## **Social Distancing**

Hand in Hand will make the following accommodations to abide by the recommended 6-ft. distancing when possible.

1. Stagger use and restrict the number of people allowed in communal spaces at one time to ensure everyone can stay at least 6 feet apart.

2. Space seating at least 6 feet apart when feasible. Seating should be facing the same way and staggered to the extent possible, so children are not sitting immediately in front of each other.
  - a. DHS no longer recommends limiting rooms to 10 individuals or less per room. Instead, room capacity should be based on the ability to physically distance within the room.
3. If feasible, provide physical guides, such as tape on floors or sidewalks and signs on walls to ensure that individuals remain at least 6 feet apart in lines and at other times.
4. Ensure that children and staff groupings are as static as possible by having the same group of children stay with the same staff as much as possible. Limit mixing between groups if possible.
5. Ask that staff practice social distancing outside of work (remaining out of congregate settings, avoiding mass gatherings, and maintaining approximately 6 feet of distance from others when possible).
6. Limit deliveries and visits from outside vendors. If possible, have them deliver after business hours or leave deliveries outside of the facility.
7. Employees may limit meetings and conferences as they see fit and it's a reasonable request. If a meeting or conference can be done remotely and/or electronically, that is the preferred option.

### Pick up and Drop off Procedures

1. Effective 10/21 parents will be allowed in the building to pick up and drop off children.
2. A Hand in Hand team member will screen the child including a temperature check and screening questions (located at the front entry for your convenience).
3. All adults must wear a mask in the building
4. Parents should limit the number of different individuals doing pick up and drop off to reduce exposure as much as possible
5. Parents and staff will work together to reduce congestion as much as possible by waiting to enter a room or moving along

### Changing Clothes

When assisting a child in changing their clothes staff members must wear gloves and a mask.

### Diapering

When [diapering](#) a child, a staff must wear a mask, [wash their hands](#) and wash the child's hands before beginning, and wear gloves. Follow safe diaper changing procedures.

Procedures should be posted in all diaper changing areas. Steps include:

1. Prepare (includes putting on gloves)
2. Clean the child
3. Remove trash (soiled diaper and wipes)
4. Replace diaper
5. Wash child's hands
6. Clean up diapering station
7. Wash hands

After diapering, wash your hands (even if you were wearing gloves) and disinfect the diapering area with a fragrance-free bleach that is EPA-registered as a sanitizing or disinfecting solution. If other products are used for sanitizing or disinfecting, they should also be fragrance-free and EPA-registered. If the surface is dirty, it should be cleaned with detergent or soap and water prior to disinfection.

If reusable cloth diapers are used, they should not be rinsed or cleaned in the facility. The soiled cloth diaper and its contents (without emptying or rinsing) should be placed in a plastic bag or into a plastic-lined, hands-free covered diaper pail to give to parents/guardians or laundry service.

## Water Play

Engaging in water play is possible but must have many accommodations including:

1. If water play requires a change of clothes, staff must be able to wear gloves and a mask to assist the child.
2. No more than one child may change with one staff member at a time, changing gloves between each child
3. No shared water tables may be used, individual water containers are possible
4. Sprinklers may be used if the participants remain 6' apart, avoiding lines and close proximity

## Preparing to Re-open

Prior to re-opening the center, Hand in Hand will complete the following deep cleaning tasks:

1. If the closure is related to a confirmed case of COVID-19: close off areas used by the infected persons and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.
2. Clean and disinfect all areas (e.g., offices, bathrooms, and common areas) focusing especially on frequently touched surfaces.
  - a. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
  - b. For disinfection, use an EPA-registered disinfectant or a bleach mixture.
  - c. Please see the IDPH Environmental Cleaning Guidance at <https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus/Prevention>



**Patients with COVID-19 have experienced mild to severe respiratory illness.**

**Symptoms\* can include**

**FEVER**



**COUGH**



**\*Symptoms may appear 2-14 days after exposure.**

**SHORTNESS OF BREATH**



**Seek medical advice if you develop symptoms, and have been in close contact with a person known to have COVID-19 or if you live in or have recently been in an area with ongoing spread of COVID-19.**



CS-315252-A 03/03/2020

For more information: [www.cdc.gov/COVID19-symptoms](https://www.cdc.gov/COVID19-symptoms)





Hands  
that look  
clean can still  
have icky  
germs!

# Wash YOUR Hands!



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

This material was developed by CDC. The Life is Better with Clean Hands campaign is made possible by a partnership between the CDC Foundation, GOJO, and Staples. HHS/CDC does not endorse commercial products, services, or companies.

# EMPLOYEE RIGHTS

## PAID SICK LEAVE AND EXPANDED FAMILY AND MEDICAL LEAVE UNDER THE FAMILIES FIRST CORONAVIRUS RESPONSE ACT

The Families First Coronavirus Response Act (FFCRA or Act) requires certain employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from April 1, 2020 through December 31, 2020.

### ► PAID LEAVE ENTITLEMENTS

Generally, employers covered under the Act must provide employees:

Up to two weeks (80 hours, or a part-time employee's two-week equivalent) of paid sick leave based on the higher of their regular rate of pay, or the applicable state or Federal minimum wage, paid at:

- 100% for qualifying reasons #1-3 below, up to \$511 daily and \$5,110 total;
- $\frac{2}{3}$  for qualifying reasons #4 and 6 below, up to \$200 daily and \$2,000 total; and
- Up to 12 weeks of paid sick leave and expanded family and medical leave paid at  $\frac{2}{3}$  for qualifying reason #5 below for up to \$200 daily and \$12,000 total.

A part-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

### ► ELIGIBLE EMPLOYEES

In general, employees of private sector employers with fewer than 500 employees, and certain public sector employers, are eligible for up to two weeks of fully or partially paid sick leave for COVID-19 related reasons (see below). *Employees who have been employed for at least 30 days prior to their leave request may be eligible for up to an additional 10 weeks of partially paid expanded family and medical leave for reason #5 below.*

### ► QUALIFYING REASONS FOR LEAVE RELATED TO COVID-19

An employee is entitled to take leave related to COVID-19 if the employee is unable to work, including unable to telework, because the employee:

- |   |   |
|---|---|
| <ol style="list-style-type: none"><li>1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;</li><li>2. has been advised by a health care provider to self-quarantine related to COVID-19;</li><li>3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;</li><li>4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2);</li></ol> | <ol style="list-style-type: none"><li>5. is caring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons; or</li><li>6. is experiencing any other substantially-similar condition specified by the U.S. Department of Health and Human Services.</li></ol> |
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### ► ENFORCEMENT

The U.S. Department of Labor's Wage and Hour Division (WHD) has the authority to investigate and enforce compliance with the FFCRA. Employers may not discharge, discipline, or otherwise discriminate against any employee who lawfully takes paid sick leave or expanded family and medical leave under the FFCRA, files a complaint, or institutes a proceeding under or related to this Act. Employers in violation of the provisions of the FFCRA will be subject to penalties and enforcement by WHD.



WAGE AND HOUR DIVISION  
UNITED STATES DEPARTMENT OF LABOR

For additional information  
or to file a complaint:  
**1-866-487-9243**  
TTY: 1-877-889-5627  
[dol.gov/agencies/whd](https://dol.gov/agencies/whd)



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I certify that I have read, understand, and agree to comply with the provisions listed herein. I have also received copies of the Child Care Guidance from DHS and cleaning protocol from the CDC.

I acknowledge that failure to act in accordance with the provisions listed herein, or with any other policy or procedure outlined by Hand in Hand will result in disciplinary action up to and including termination.

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Employee Name

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Employee Signature

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Date

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Management Team Witness

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Date