

CORONAVIRUS, COVID-19 Emergency Preparedness Plan

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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 **October 7, 2020**. Because we are in an unprecedented time and information is changing by the hour, 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. Please note that there is likely to be additional legislation at both the state and federal level that could offer additional benefits to employees. If and/or when those pass and become law, then information will be communicated as soon as possible.

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.

Essential Employees

Essential employees are required to be available at all hours and days as needed including outside of normal operating business hours for any potential changes in the plan as well as any potential disruptions in business. Any essential business functions such as payroll may still need to be completed even in the event of business disruptions or closures. Essential employees include: CEO, Director of Waiver Care and Program Development, Director of Licensed Care, and the Director of Development and Marketing. Essential employees must be available in the event of closures or disruptions and will have job responsibilities to maintain required or requested business functions. Any responsibilities will be described in communication at a later date, should it be necessary.

Media

Should the media reach out to any one of our programs, please direct all calls or contacts to Director of Development and Communication, who will coordinate response with CEO.

Director of Development and Communication is required to monitor social media sites for comments and/or questions and then be able to respond quickly and appropriately. Please remember to keep all confidential information as that.

Any communication that is delivered to the community must first be approved by the CEO.

Unemployment and FFCRA

Unemployment insurance provides benefits to eligible workers who are unemployed through no fault of their own and meet other eligibility requirements. Times such as temporary shutdowns and/or layoffs generally meet those requirements. If an employee simply cannot come to work due to illness but the business is open, then the employee is not eligible for unemployment.

Both Iowa and the federal guidelines for unemployment have been updated when unemployment needs are required due to COVID-19.

Employees should visit the state’s unemployment website for more information.

Some of our positions are considered as essential and stipulate that work is to continue even during a stay-at-home statewide policy. All employees are expected to continue working unless they are unable due to preplanned time off, illness related to COVID-19 (either symptoms or a pending test), other illness not related to COVID-19, caring for a child/children who does not have child care or school due to COVID-19, caring for a child/children with COVID-19 symptoms or a diagnosed and/or pending case, an authorized quarantine by a healthcare professional, or a potential Americans with Disability and/or FMLA need.

As of April 1, 2020, The Families First Coronavirus Response Act (FFCRA) takes effect. The FFCRA provides employees with Emergency Paid Sick Leave and Emergency Paid Family and Medical Leave for those affected by the COVID-19 pandemic, from April 1, 2020 through December 31, 2020.

Information for employees on FFCRA will be posted in conspicuous locations at Hand in Hand.

Two Types of Leave Covered Under FFCRA:

Emergency Paid Sick Leave (ESL)

Emergency paid sick leave will be available for an employee who is unable to work or work remotely because:

1. The employee is subject to a federal, state, or local quarantine or isolation order related to COVID-19;
2. The employee has been advised by a health care provider to self-quarantine because of COVID-19;
3. The employee is experiencing symptoms of COVID-19 and is seeking a medical diagnosis;
4. The employee is caring for an individual subject (or advised) to quarantine or isolation;
5. The employee is caring for a son or daughter whose school or place of care is closed, or participant provider is unavailable, due to COVID-19 precautions; or
6. The employee is experiencing substantially similar conditions as specified by the Secretary of Health and Human Services, in consultation with the Secretaries of Labor and Treasury.

Eligibility for ESL

All employees, regardless of their tenure with the organization, with full-time or part-time status are eligible to receive this benefit.

Paid Benefits for ESL

Eligible employees will receive up to two weeks of paid sick leave.

- Full-time employees: 80 hours at their regular rate of pay, subject to caps and reasons noted below.
- Part-time employees: the number of hours that the employee works, on average, over a two week period, subject to caps and reasons noted below.

Payments are capped at \$511 a day (\$5,110 in total) for an employee's own illness or quarantine (reasons 1, 2 and 3 above).

Payments are capped at two-thirds of their pay at \$200 a day (\$2,000 in total) for employees who are caring for an individual affected by COVID-19 and those whose participants' schools have closed (reasons 4, 5 and 6 above).

Return to Work Following E-Sick

Employees are required to follow guidelines established by the Centers for Disease Control and Prevention as it relates to ceasing home isolation practices.

Emergency Family Medical Leave Act (EFMLA) Expansion

Employees will be entitled to take up to 12 weeks of job-protected leave if an employee is unable to work (or remote work) due to caring for the employee's son or daughter (who is under 18) because the participant's school or place of care has been closed or his or her participant care provider is unavailable due to the public health emergency.

Eligibility for EFMLA

Under this policy, full-time and part-time employees who have been on Hand in Hand's payroll for 30 days, prior to taking the leave, are eligible for leave.

Paid Benefits for EFMLA

The EFMLA provides for a combination of unpaid and paid leave.

The first 10 days of EFMLA may be unpaid. An employee may choose to take any existing pay benefit (i.e. PTO, vacation, sick pay) during the 10-day unpaid period, or the 10 days may be paid under emergency paid sick leave, if taken for a qualifying reason.

After ten days of unpaid leave, employees are entitled to 10 weeks of job-protected leave of two-thirds their usual pay. Part-time employees are entitled to be paid two-thirds of their usual pay based on the average number of hours worked for the six months prior to taking the leave.

The cap of the paid leave entitlement for employees is \$200 per day (\$10,000 in the aggregate).

Notifying Hand in Hand of the Need for Leave for either ESL or EFMLA

Employees should request their need for emergency paid leave as soon as possible, by notifying their immediate manager or human resources. If an employee is incapacitated, the employee's representative should give verbal notice as soon as possible. Calling in "sick" does not qualify as adequate notice. An employee must provide sufficient information regarding the reason for an absence so Hand in Hand can know that protection and benefits may exist under this policy.

The Employee Request for Emergency FMLA must be completed and sent to Director of Licensed Care.

Insurance Benefit Continuation During FFCRA Leave

Coverage under group health insurance will continue while on leave, but employees must continue to pay their portion of the premium. Payment arrangements will be discussed with individuals upon their request for leave.

Rights Upon Return from FFCRA Leave

An employee who takes leave under this policy may be reinstated to the same job or an equivalent position upon completion of the leave. If an individual has exhausted all leave under this policy and is still unable to return to work, the situation will be reviewed on a case-by-case basis to determine what rights and protections might exist.

The law provides that an employee has no greater rights upon a return from leave than the individual would have had if s/he had continued to work. Therefore, an employee may be affected by a layoff, reorganization, furlough, change in job duties or other change in employment if the action would have occurred had the employee remained actively at work.

Certification for FFCRA Leave

Employees are required to complete the created Absence Notification Form in order to take advantage of the above outlined programs.

Return the completed form to Director of Licensed Care.

The Department of Labor who oversees the paid leave laws requires documentation along with the requests. Details regarding documentation are found on the request form.

Remote or Alternate Work Schedules

The determination to work remotely or on an alternate schedule will be made on a case-by-case basis. The Chief Executive Officer will unilaterally make decisions regarding remote or alternate schedule work. The option to do so cannot interrupt business operations, be contractually-compliant, must have the ability and resources to work from home or on the alternate schedule, and must be within grant/contractual guidelines. This type of accommodation will not be considered a leave of absence and will be considered working time.

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 10.7.20.

Any individual experiencing symptoms of COVID as defined by the CDC should contact their healthcare provider to pursue testing. All symptomatic individuals must self-isolate until after all three of the following have happened (known as the 10/3 rule).

1. They have had no fever for at least 72 hours (that is three full days of no fever without the use of medicine that reduces fevers) **AND**
2. Their other symptoms have improved (for example, when your cough or shortness of breath has improved) **AND**
3. At least 10 days have passed since their symptoms first appeared

If an individual experiences symptoms of COVID and tests negative and they have not had contact with an individual with COVID, they may return to Hand in hand 24 hours after symptoms resolve. The individual must provide a return to work/care note from their physician.

If an individual experiences symptoms of COVID and tests negative but has had contact with an individual with COVID, they must self- quarantine until 14 days after their last exposure to the confirmed case.

If an individual tests positive for COVID-19 but DID NOT experience symptoms, they 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.

If a participant or staff member begins exhibiting symptoms while at the building, they will be sent home immediately following the outlined protocol.

If a Hand in Hand site has participants with siblings in their care and one is showing symptoms, then all will be sent home.

Staff should stay home if someone in their home is ill. Children should also stay home if their parent or another household member is ill.

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

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.

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.

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 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.**

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.

Access to the building is limited to **essential staff and participants until further notice**. Caregivers will not be allowed to access the building at this time. See pick up and drop off details for more information.

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

Hand in Hand will post the “Stop and Read” sign at every door where a customer, parent, family member, vendor, etc. may enter.

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

All staff and participants age 6 and up are required to wear masks. Children ages 2-5 are encouraged but not required to wear masks. People who have trouble breathing and people unable to remove the mask without assistance should not wear cloth face coverings and will not be required to. A face shield is not considered a mask. Hand in Hand will provide masks upon request.

- Masks should NEVER be put on babies and participants under age two because of the danger of suffocation.
- Individuals need to wash their own mask at home after every use.
- 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

- 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. Upon arrival, parents will call Hand in Hand to notify the staff they have arrived. During typical pick up and drop off times a staff member will remain near the front door to monitor traffic.
2. Parents should assist a participant out of the vehicle to avoid additional exposure of the staff by leaning into the vehicle. Participants will be admitted inside one at a time, parents should not allow their participant to enter the building independently. Parents will not be allowed to enter the building.
3. Standing at least 6 feet away, staff will perform a temperature and health screening for all participants [as outlined in the access section of the manual](#).
4. A hand hygiene station will be set up at the entrance of the facility, so that participants can clean their hands before they enter. Hand in Hand will provide hand sanitizer with at least 60% alcohol at entry. Hand sanitizer will be kept out of participants' reach and supervise use.
5. Ideally, the same parent or designated person should drop off and pick up the participant every day.

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>



Stop and

Read

For the safety of our staff and participants Hand in Hand is closed to all non-essential staff and visitors.

Only participants and staff who are scheduled to work will be allowed in the building.

All individuals seeking access to the building must consent to a health and temperature screening.

**ALL STAFF AND VENDORS MUST WEAR A FACE MASK.
ALL PARTICIPANTS ARE ENCOURAGED TO WEAR A FACE MASK.**

If you need assistance, please call

563-332-8010



Stop and

Read

For the safety of our staff **no shared personal food**, including condiments such as coffee creamer, **is allowed in the refrigerator at this time.**

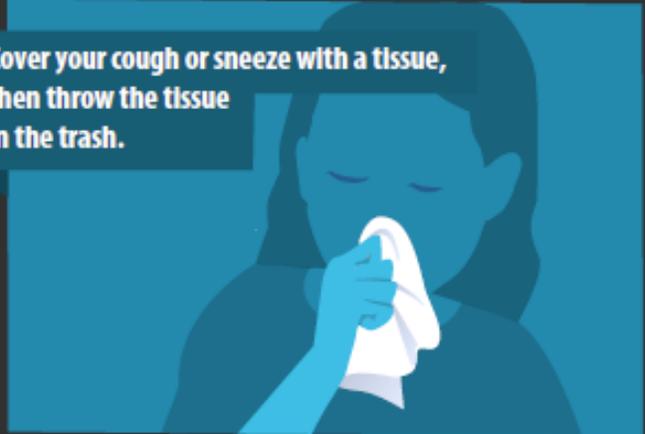
STOP THE SPREAD OF GERMS

Help prevent the spread of respiratory diseases like COVID-19.

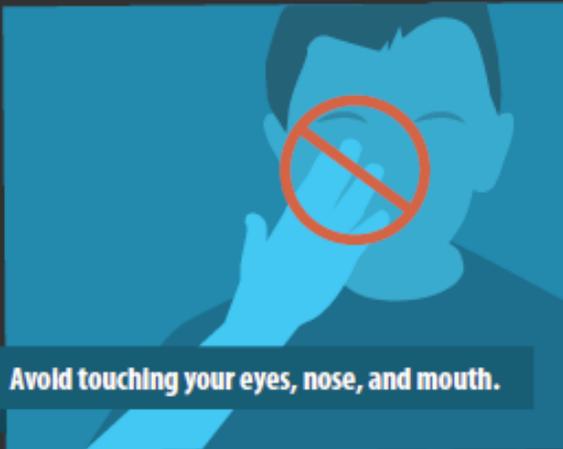
Avoid close contact with people who are sick.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash.



Avoid touching your eyes, nose, and mouth.



Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.



Wash your hands often with soap and water for at least 20 seconds.



For more information: www.cdc.gov/COVID19

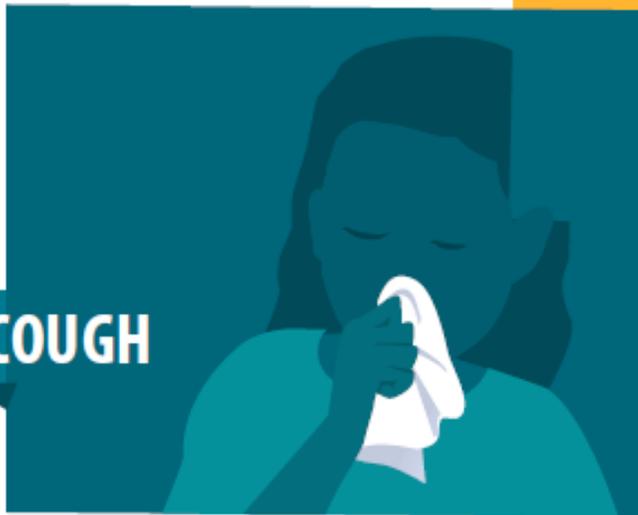
Patients with COVID-19 have experienced mild to severe respiratory illness.

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.



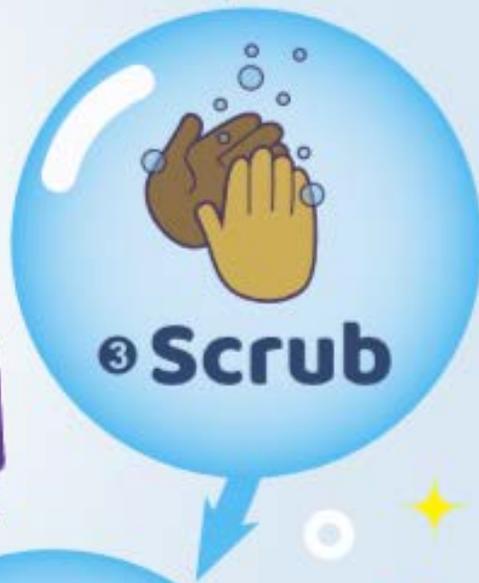
CS315252A 03/03/2020

For more information: 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">1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;2. has been advised by a health care provider to self-quarantine related to COVID-19;3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2); | <ol style="list-style-type: none">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; or6. is experiencing any other substantially-similar condition specified by the U.S. Department of Health and Human Services. |
|---|---|

▶ 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



WH1422 REV 03/20

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.

Employee Name

Employee Signature

Date

Management Team Witness

Date