



**Little Highlanders Learning Center & Kid's Kare  
Addendum to District's COVID-19 Preparedness &  
Response Plan**



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## I. INTRODUCTION

Howell Public Schools (“HPS” or “District”) has developed the Little Highlanders Learning Center (“LHLC”) & Kid’s Kare (“KK”) Addendum to District’s COVID-19 Preparedness & Response Plan based on [Michigan Licensing and Regulatory Affairs \(LARA\) "Guidelines for Safe Child Care Operations During COVID-19"](#). Families are encouraged to communicate regularly with staff regarding health concerns/conditions that may put their child at higher risk for complications if exposed to COVID-19, questions surrounding their child’s return to childcare in the event of illness, and any other items of concern.

The purpose of this plan is to address specific additional requirements child care programs must comply with, provide information to child care staff and parents of children enrolled in child care programming. For any issues not specifically addressed in this addendum, please refer to the District’s COVID-19 Preparedness & Response Plan.

## II. DEFINITIONS

For purposes of this LHLC & KK Addendum to the District’s COVID-19 Preparedness and Response Plan, the following definitions apply:

**A. Symptoms of COVID-19:** pursuant to [guidance from the CDC](#) and [guidance from the Livingston County Health Department](#), the symptoms of COVID-19 are:

- Fever (of 100.4° F or higher or feeling feverish) or chills
  - Fever is the key indicator of potential infection in young children. Cough and/or diarrhea in addition to fever is suggestive of coronavirus.
- Cough



- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- Loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

**B. Close contact:** an individual has had close contact with another when they were within approximately six feet of each other for a prolonged period of time. In [COVID-19 FAQ for Workplaces](#) (last ¶ of p 2), the Livingston County Health Department defines a "*prolonged period of time*" as more than 15 minutes.

### III. DAILY PROTOCOL FOR STAFF AND CHILDREN

#### A. Arrival Procedure

##### 1. For Staff

- a. Screening Form. Each day before work, staff are required to complete the Coronavirus Disease (COVID-19) Workplace Health Screening form online. This form screens for symptoms of COVID-19, recent international travel and recent exposure to others who have had a documented case of COVID-19. The form details CDC Guidance



regarding when to self-quarantine and when to seek medical care for diagnosis and treatment.

- b. Temperature Check. Upon arrival, childcare staff will have their temperatures checked. Any staff arriving with a temperature above 100.4 degrees or other symptoms will be sent home. Please review the District's COVID-19 Preparedness and Response Plan for details regarding return to work protocol
- c. Permission to Work. Staff who are permitted to work based upon their answers to the pre-arrival workplace screening form and their temperature check will wash their hands, and put on their face masks before engaging with other staff members or children.
- d. Personal Items. Staff members are asked to only bring into work necessary personal items. Additional items are to be left in their vehicles, desks or lockers until their break or lunch period. Staff are required to wash their hands before and after use of personal items such as phones, etc.

## **2. For Children**

- a. Procedure for Reporting Illness. Families should report possible illness if anyone in their household shows symptoms or has tested positive for COVID-19, including the child or family members if they or their children experience possible symptoms or have a positive COVID-19 test result. In the event of an illness, please contact Jenny Myers



(Program Director) at 517-548-6310. Please call the location of your child's childcare placement as soon as possible and plan to keep your child at home.

- b. Check-In Process. Upon the arrival of each child, staff will individually check in the child with parent(s). During this process, staff will:
  - (i) Utilize touchless thermometers to perform temperature checks on children. *If a child's temperature is above 100.4 degrees, the child will be excluded from care.*
  - (ii) Ask parents:
    - i. Has your child been in close contact with a person who has COVID-19? *(If yes, the family should self-quarantine for 14 days.)*
    - ii. Has your child felt unwell in the last 3 days? *(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, rash, nausea or vomiting, and/or diarrhea)*
- c. Visually check the child for signs of illness, including flushed cheeks, rapid or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.



- d. Document information regarding each child's temperature, answers to parent questions, and visual checks on a log as part of the arrival process.

**B. Monitoring of Children During Care**

1. As young children are not reliable reporters of their symptoms, asking children about coronavirus symptoms may not be useful. Instead, staff will monitor children during care regarding the appearance of symptoms of COVID-19 and will retake children's temperatures when children appear ill or "not themselves."
2. Children with a fever alone, or a fever with a cough and/or diarrhea will be isolated from the group and attended by staff while parents are contacted for prompt pick-up. The child's parents should contact their primary care physician/medical provider for further diagnosis and treatment.

**C. Isolation Process of Individuals Who Develop Symptoms During the Day**

1. Staff. Staff who develop symptoms of COVID-19 during the work day are to call their supervisor immediately. Staff should wash their hands, put their face shield on over their face mask and limit close interactions with children until they are relieved by another staff member. Once relieved are to go home or seek medical attention immediately.
2. Children. Children who develop symptoms of illness during care will be separated from their classes while they are awaiting a parent to pick them up.



Children will remain supervised until pick-up. The location of the isolation area will be determined at each center location and may change depending on the number of children exhibiting symptoms at one time.

#### **IV. SOCIAL DISTANCING AND MITIGATING MEASURES**

**A. Consistent Groups.** All classes will consist of the same children and staff. There will be no combining of classes. Whenever possible, the size of the classes will be small. In the case of an illness, a staff member from a classroom may be needed to fill in.

**B. Classroom Arrangement.**

1. Seating. Classrooms will arrange seating to six feet apart, if possible, and will limit the amount of children sitting together.
2. Sleeping. Cribs and nap mats will be six feet apart in head to toe positioning. Cribs and cots will be labeled for each child.

**C. Limiting of Use of Common Spaces.**

1. Playground Use. Each classroom will have a specific schedule regarding their use of the playground.
2. Gross Motor Room. The Gross Motor room will not be used. There is not enough time between classes to do a thorough cleaning.
3. Cafeteria. The cafeteria will not be used. All classes will eat in their own classrooms.





**D. Drop off and Pick Up Times.**

1. LHLC - To minimize the potential spread of COVID-19, parents will drop off and pick up in the vestibule of the Little Highlanders entrance and should remain 6 feet apart from others in line. Parents will not enter the main school building. Staff will screen each child for their temperature and will sign the child in and out daily.
2. Kid's Kare at Buildings - Classroom staff will meet children at the entry of the building to escort them to their classroom at morning drop off. In the afternoons, staff will meet the children outside the classroom door before entry.

**E. Visitors.** Non-essential visitors, volunteers, and activities including groups of children or adults are not allowed at the LHLC or KK locations. (Licensing consultants are considered essential visitors).

**F. Special Events/Field Trips.** No field trips or special events will be permitted that convene larger groups of children or families.

**G. Maintenance of Staffing Levels.** To ensure the proper ratio of staff to students, scheduling of staff will be adjusted to provide for on-call staff who are available to work in the event staff members are ill.

**V. HYGIENE, CLEANING AND DISINFECTION**



- A. Handwashing.** All staff and students will wash hands once entering the building. Staff will teach and encourage children to wash with soap and water for 20 seconds. Hand washing will take place after coughing, sneezing, blowing noses, using the restroom and before/after eating and/or preparing food.
- B. Hand sanitizer** will be available throughout the building. (Children will not have unsupervised access to hand sanitizer.)
- C. Tabletop cleaning.** Tabletops will be cleaned before and after use or eating. Teachers will use the three step cleaning process of soap, water and bleach solution. At the end of the day, the room and toys will be disinfected after the children have left the center.
- D. Items from home.** The number and type of items children are permitted to bring from home will be limited. Comfort items made of soft materials (ex. Blankets, stuffed animals) may be brought in but must be taken home nightly for washing.
- E. Ventilation system.** Ventilations systems in all District buildings have increased the circulation of outdoor air.
- F. Personal Protective Equipment.**

  - a. Masks.

    - i. Staff. Staff members are required to wear masks while at work. Reusable masks and a face shield will be provided. Disposable masks will be available for staff in the event their reusable mask is left at home. Plastic face shields are not a replacement for cloth face



coverings but may be used in addition to cloth coverings in a childcare setting. Staff members who are unable to medically tolerate wearing a mask or face shield must provide a doctor's note detailing this.

ii. Children.

**1. Kid's Kare.** Children **will** be required to wear masks. Children will not remain in consistent cohorts during Kid's Kare. This applies to both before and after school childcare programming. However, cloth face coverings should never be placed on the following:

- a. Children under age 2,
- b. Anyone who has trouble breathing,
- c. Anyone unable to remove the face covering without assistance,
- d. Children while they are sleeping, eating or drinking.
- e. During swimming or high intensity activities such as running if the activity causes difficulty breathing.

Parents will be required to submit doctor's notes regarding their child's inability to tolerate wearing a mask.

**2. LHLC.** Children **will** not be required to wear masks unless they are in common areas. However, the wearing of masks will be strongly encouraged. Classes of children will remain consistent with no overlap or mixing of cohorts. As stated above, cloth face coverings should never be placed on the following:



- a. Children under age 2,
- b. Anyone who has trouble breathing,
- c. Anyone unable to remove the face covering without assistance,
- d. Children while they are sleeping, eating or drinking.
- e. During swimming or high intensity activities such as running if the activity causes difficulty breathing.

Parents will be required to submit doctor's notes regarding their child's inability to tolerate wearing a mask.

- b. Gloves. Teachers will wear gloves when handling contaminants, changing diapers, handling food and cleaning surfaces. Staff members will wash their hands before putting on gloves and immediately again after gloves are removed and disposed of.
- c. Supplies. Childcare locations will be stocked with hand sanitizer, tissues, masks, disinfecting solution for the sanitizing of items in childcare rooms, and additional waste baskets. While children will be encouraged and assisted in good hygiene practices including washing hands regularly with soap and water, items such as hand sanitizer, and cleaning supplies will be kept away from students.

## VI. RESPONSE PLAN FOR POSSIBLE OR CONFIRMED CASES OF COVID-19

- A. **Notification Procedure**. If a staff member, child, family member of a child or staff member, or essential visitor becomes ill with COVID-19 symptoms, the Director of the Program will contact the Superintendent of the District or designee, the local health



department and the licensing consultant regarding next steps. Parents of children in the classroom or program will be notified if COVID-19 was present in the facility. However, specific information regarding the health information and name of the specific person will not be revealed.

**B. Determination to Close Classroom or Facility.**

1. If an individual in a classroom is identified with a positive test for COVID-19, the classroom should be closed, cleaned and everyone in that classroom should self-quarantine for 14 days. The Superintendent or designee, local public health department and licensing consultant will provide guidance regarding whether the entire facility must close. The Director of the Program will comply with local public health department requests to comply with contact tracing to limit the spread of the virus.