

FISHTOWN MONTESSORI COVID-19 POLICIES VERSION 12.31.2021

This COVID-19 Health and Safety Plan will serve as guidance for the child care activities at Fishtown Montessori ("FM") which has been based on the [Responding to Covid-19 in Pennsylvania](#) guidance as well as the [Schools and Early Childhood Education Guidance](#) from the City of Philadelphia. Any policies, procedures or protocol in this COVID Policy will supersede the corresponding items in the FM Handbook. In this COVID policy, we have attempted to include all areas of our operations affected by changes with regard to COVID-19.

Given the dynamic nature of the pandemic, this COVID Policy and the plan set out incorporates enough flexibility to adapt to changing conditions. This is a dynamic document that will change as new guidance emerges and is shared through our regulatory or governmental agencies. Any changes to this COVID Policy will be shared with all families and staff via email. It is the role of the parents to ensure that Fishtown Montessori has updated contact information, giving us the ability to rapidly communicate information.

If there are any cases of COVID-19 in the wider community, there are no strategies that can completely eliminate transmission risk within a child care population. The goal is to use guidance from professionals and experts to keep the risk of transmission as low as possible while continuing child care activities as safely as possible. We encourage parents to talk to their children's healthcare providers about their individual risk factors for COVID-19 and the risks of attending a childcare facility.

The best way to prevent the spread of COVID-19 at Fishtown Montessori is to prevent it from getting into Fishtown Montessori. This will be improved by the joint effort of parents, staff, and children. There are instances when quarantine or isolation is required. This is a partnership, we rely on parents to keep their child home and visit the doctor or test when symptoms are present, and to comply with the policies and procedures in this document.

We wish to extend gratitude toward the following organizations whose research and/or guidance this plan is based on:

- American Academy of Pediatrics
- American Montessori Society
- American Society of Heating, Refrigerating and Air-Conditioning Engineers
- Centers for Disease Control and Prevention
- Children's Hospital of Philadelphia Policy Lab
- City of Philadelphia's Guidelines for Childcare and Early Learning Centers During the COVID-19 Pandemic
- Department of Human Services of Pennsylvania, Office of Child Development and Early Learning
- Philadelphia Department of Public Health
- Public Health Management Corporation
- Safety Center of America

ARRIVAL AND DEPARTURE PROCEDURES

In order to provide a secure setting for the children and staff at Fishtown Montessori, we are requesting that all family members maintain a minimum of six feet distance from other families while waiting to drop their child off. Child health screenings will take place on an individual basis in the vestibule. Parents should expect arrival and departure routines to take longer especially during peak times.

We will be utilizing a staggered drop-off schedule with primary students entering from 8:30 - 8:45 and toddler students entering from 8:45 - 9:00 each day.

In order to provide for a smooth arrival and departure, we are asking families to follow these steps:

Prior to Leaving Your Home Screen Children for Symptoms of COVID-19:

The best way to prevent the spread of COVID-19 at Fishtown Montessori is to prevent it from getting into Fishtown Montessori. Staff are asked to screen themselves and parents are asked to screen their child before leaving the house for fever, symptoms, and any visual indication of ill health. A daily screening checklist will be administered to staff and children and asked of parents/ caregivers upon arrival. Children and staff will also be monitored throughout the day. Please do your part by conducting a temperature check and screening your child for the following symptoms:

1. All parents should conduct an assessment on their child by answering the following questions **prior to leaving your home**:. These same questions will be asked upon arrival to the school via Procure and are also asked of any staff member upon arrival.
 - a. Does your child have at least **one** of the following symptoms?
 - new or persistent cough; shortness of breath; new loss of sense of smell; new loss of sense of taste.
 - b. Does your child have at least **two** of the following symptoms?
 - fever (≥ 100.4 degrees Fahrenheit); chills; muscle pain or body aches; sore throat; nausea or vomiting; diarrhea; fatigue; congestion or runny nose.
 - c. Make a visual inspection of the child for signs of illness. Does your child have flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness? Is the child experiencing coughing or shortness of breath?
 - d. Have you, your child, or any member of your household who has not been fully vaccinated, had potential exposure with a person with COVID-19 in the past 14 days?
 - e. Is anyone in your household experiencing any covid-like symptoms such as one of the following symptoms: new or persistent cough; shortness of breath; new loss of sense of smell; new loss of sense of taste and/or two of the following symptoms: fever (≥ 100.4 degrees Fahrenheit); chills; muscle pain; headache, sore throat; nausea or vomiting; diarrhea; fatigue; congestion or runny nose?
2. If the answer to any of the above is yes, the child is not permitted to attend group care and should not be dropped off to attend FM. Parents must keep their child home and contact the director and their healthcare provider for further instructions.

Procure Check In:

1. Check your child in on your personal cell phone using the [Procure Connect](#) App as you are approaching the building.
 - a. This app enables parents to sign-in on your phone once you have come within 100 meters of our building.
 - b. Answer the parent questions. If you can answer yes to any of the questions regarding fever, symptoms, visual inspection, or exposure, do not proceed with drop-off.
 - c. Inform the director if the individual dropping off is unable to check in via procure.

Arrival Procedure:

1. Please limit the drop off to a single adult and only children who are enrolled in our program when possible. Ideally the same parent or designated person should drop off and pick up the child every day. If possible, individuals with serious underlying medical conditions should not pick up children because they are more at risk.
2. All parents and children two years of age and older must follow the current guidance of the City of Philadelphia regarding mask-wearing during drop-off and pick-up.
3. Staggered drop-off times will be practiced.
 - a. Primary students will arrive between 8:30 - 8:45
 - b. Toddlers will arrive between 8:45 and 9:00.
4. During school-day arrival, parent and child(ren) will form a line and wait at least six feet from other families as you approach Fishtown Montessori.
5. When a family's turn has arrived, a staff member will be present to confirm that you completed the pre-screening questions, ask what the answers to the screening questions are, and to do a visual and temperature check of arriving children with a non-contact thermometer.
6. Parents are asked to check their child out on their personal cell phone or communicate to the staff member to enter their four-digit code on the tablet for them.
7. Personal strollers or car seats are not permitted to be stored in the building until further notice.
8. Once checked in and screened, children will use hand sanitizer and be escorted to their classroom with their belongings by a staff member.
9. Parents are asked to keep a 6 foot distance from others during drop off and pick up.
 - a. Refrain from congregating near the front of FM, exit the area after drop-off or pick-up.

If you arrive and do not immediately see a staff member, please sanitize your hands and ring the doorbell to alert the staff of your arrival.

Upon Arrival Children Should:

1. enter the vestibule.
2. have their temperature and any symptoms checked by the staff member.
3. enter the building and go to their cubby.
4. remove their mask from home and place it in the side pocket of their school bag.

5. use hand sanitizer on their hands.
6. unwrap child-sized disposable mask and place it on their face securely
7. hang up their outerwear and tote bag, place lunch in their cubby.
8. take off their outdoor shoes and put on their indoor shoes.
9. wash hands.
10. join their classmates for their work period..

School Day Departure:

1. School-day pick-up will occur between 3:00 and 3:15 each day.
2. Parents should line up at the front of FM at least 6 feet from other families.
3. A staff member will be in the vestibule waiting for parents to arrive. When they see the child's parent, they will go get the child and will escort the child safely to their parent.
4. Parents are asked to check their child out on using the Procure Connect App on their personal cell phone or communicate to the staff member to enter their four-digit code on the tablet for them.

PM Care Departure:

1. PM Care pickup will occur between 3:15 and 6:00 each day.
2. When picking up during PM Care, parents should schedule a time to pick up their child by calling or texting the FM mobile phone at 267-608-0836 fifteen minutes prior to their arrival.
3. The parent should ring the doorbell to alert staff of their arrival.
4. The staff will respond and bring the child(ren), with their belongings outside for dismissal.

HEALTH POLICIES

Plan for When Someone Becomes Sick:

- If children develop symptoms, they should be brought to a designated isolation room while waiting to be picked up. The staff member waiting with the child should wear a mask and also gloves if holding the child.
- A letter or email will be given to caregivers explaining why the child is being dismissed and criteria for returning to Fishtown Montessori.

Exposure to a Person with COVID-19

The guidance for quarantine and isolation below is designed for any individuals who are not fully vaccinated. People are considered fully vaccinated 2 weeks after their second dose in a 2-dose series, like the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, like Johnson & Johnson's Janssen vaccine.

Fully vaccinated people with no COVID-like symptoms do not need to quarantine or be tested following an exposure to someone with suspected or confirmed COVID-19, as their risk of infection is low. Fully vaccinated people who do not quarantine should still monitor for symptoms of COVID-19 for 14 days following an exposure. If they experience symptoms, they should isolate themselves from others, be clinically evaluated for COVID-19, including SARS-CoV-2 testing, if indicated, and inform their health care provider of their vaccination status at the time of presentation to care. For more information for persons fully vaccinated visit the CDC website <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html> Additional options for ending quarantine can be found in [2021-PAHAN-559](#)

Criteria for Exclusion*:

Children or facility persons must stay home and follow isolation and/or quarantine protocol immediately after:

1. experiencing covid-like symptoms or a covid-like illness at any time.
2. if a member of the household is experiencing covid-like symptoms.
3. if a member of the household is scheduled for or awaiting results of a covid test due to exposure or symptoms.
4. they have been exposed or potentially exposed to a person who has tested positive with covid-19 including but not limited to their own household members.

*Families are required to notify the Head of School in writing if any of the above criteria for exclusion are met.

Calculating Isolation and Quarantine Period:

If isolation or quarantine is needed, use this [Calculating Isolation and Quarantine Period](#) document to determine the length of time needed to stay at home and confirm your calculations with the Head of School. Note that children who are in the same household as another person who is positive are considered not able to separate

and should follow guidance titled, "What if I cannot separate from someone with covid-19?"

CDC recommends the most protective quarantine period as 14 days; however, quarantine can be shortened to 10 days. Quarantine can be further shortened to 7 days with a negative test after day 5. Quarantines and pauses of 7 and 10 days are contingent upon 100% mask usage except during distanced meals. Activities where masks cannot be worn, such as playing certain instruments, must be paused for the full 14 days. Symptom monitoring must continue for the entire 14 days regardless of vaccination status. Children who are known by staff to regularly refuse mask wearing, and children not old enough to wear a mask may not shorten quarantine to 10 or 7 days.

Criteria for All Children and Facility Persons Returning to Fishtown Montessori After Exclusion:

- Symptomatic child/facility persons who are not tested: exclude for 10 days from symptom onset AND at least 24 hours after fever resolution (if present) without the use of fever reducing medication AND improved respiratory symptoms.
 - Quarantine may be shortened to 7 days if you test negative for COVID-19. The test should be done no more than 48 hours before you plan to leave quarantine as required by [Calculating Isolation and Quarantine Period](#).
- Symptomatic child/facility persons determined by a health care provider to have an illness other than COVID-19: exclude until without a fever for 24 hours (if fever present) without the use of fever reducing medication and symptoms improving.
- Symptomatic child/facility persons who test negative: exclude until without a fever for 24 hours (if fever present) without the use of fever reducing medication AND improved respiratory symptoms.
- If any member of the household has covid-like symptoms, has been exposed to covid, and/or is awaiting covid test results whether symptomatic or asymptomatic: every other household member is considered exposed and must quarantine based on the Calculating Isolation and Quarantine Period document.
 - If the original household member who had covid-like symptoms tests negative for covid-19 AND the child or facility person also tests negative AND no other household members exhibit covid-like symptoms, the child or facility person will be permitted to return.
- If a child or facility person tests positive: A symptom-based strategy (i.e., time-since-illness-onset and time-since-recovery strategy) is the only recommended strategy in discontinuing at home isolation. A test-based strategy is no longer recommended to determine when to discontinue home isolation, except in certain circumstances as determined by a healthcare provider.
 - Symptom-Based Strategy: Individuals with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:
 - At least 1 day (24 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications and improvement in symptoms; and,
 - At least 10 days have passed *AFTER symptoms first appeared*.
- If a child or facility person tests positive positive for COVID-19 and has previously tested positive for COVID-19:
 - If the two test dates are greater than 90 days apart, the second test is considered a new case, and you should isolate.
 - If the test dates are between 45 and 90 days, you do not need to isolate but you should monitor your symptoms. If you develop symptoms, you should be evaluated by a medical provider.
 - If the two test dates within 45 days apart, the second positive test likely represents the shedding of bits of the virus, but you are not likely infectious. You do not need to isolate.
- For Persons Who Tested Positive for COVID-19 but have NOT had COVID-19 Symptoms in Home Isolation:
 - Persons with laboratory-confirmed COVID-19 who have not had any symptoms and were directed to care for themselves at home may discontinue isolation after no less than 10 days have passed since the date of their first positive COVID-19 diagnostic test, provided no symptoms have developed during that 10-day period.

Criteria for Returning to Fishtown Montessori After Illness:

If a child or staff member in a classroom has COVID- like illness they can return to FM if:

1. initial COVID-19 testing is negative, and the individual meets FM's normal criteria for return after an illness.

OR

2. a clinician has evaluated the child and documented and has provided a written alternative diagnosis.

OR

3. for children who were not tested for COVID, they can return to FM if all of the following are true:
 - a. At least 10 days since the onset of symptoms **AND**
 - b. until fever free off anti-fever medications for 3 days **AND**
 - c. symptoms are improving.

Note: repeat COVID testing should not be required to return to FM.

If a child or staff member has a confirmed diagnosis of COVID-19:

1. Fishtown Montessori will close for a period of 48 hours following the confirmed positive COVID-19 case so that FM can be cleaned and disinfected properly.
2. Administrators will call the Philadelphia Department of Public Health and report a confirmed case of COVID-19
 - a. The name, birth date, address and phone number of the covid case will be shared with regulatory officials.
3. All children and staff must quarantine at home for 10 days.
 - a. Anyone who develops symptoms during that time should contact their healthcare provider to request testing.
 - b. It is requested that in this case that parents voluntarily report positive test results to the Head of School in writing.
4. Children or staff with a confirmed case of COVID-19 must follow criteria for return to FM as determined by the Philadelphia Department of Public Health or other applicable regulatory agencies. The most protective recommended quarantine period remains 14 days post exposure.

SOCIAL DISTANCING

Promote Social Distancing: It will not be possible to prevent children and infants from coming in close contact with one another and their teachers. Instead, the goal is to create cohorts of children and staff to limit the number of people in close contact in order to lower the risk of transmission.

- As much as possible, the same teachers will be with the same children each day, limiting cross-exposure between groups.
- Staff breaks and lunch hours for staff will be staggered when possible in order to minimize interactions.
- Employees should maintain distance and avoid eating near or across from each other.
- All nonessential visitors and volunteers will be restricted.
- Only staff and children will be permitted through the first set of doors, parents and other nonessential visitors will not be permitted to enter the building.
- All special events such as group orientations, group holiday events, and special performances are cancelled until further notice.
- All field trips are cancelled.
- When taking walks or playing outdoors, choosing space that is not occupied by children other than those who attend Fishtown Montessori will be prioritized.
- Children will not be permitted to use playground equipment at the local park until further notice.
- Each child will have their own personal supply of items such as crayons, markers, colored pencils, eraser, pencil sharpener, scissors, school glue, glue stick, hole puncher, etc. This personal supply should not be used by anyone other than your child.

Social Distancing During Nap Time

- Children will not wear face masks during nap time as this is not advisable or recommended for safety reasons.
- At nap time the children's cots will be spaced out as much as possible and children will be arranged head to toe in order to reduce the potential for viral spread.
- Ventilation measures will be used including the use of open windows and fans to promote fresh air circulation when practical.

PERSONAL HYGIENE

Hand Hygiene: Hand hygiene will be performed by washing hands with soap and water for at least 20 seconds or using

hand sanitizer if hand washing is not available. Hand hygiene should be practiced at the following times:

- Upon entry to FM (use sanitizer, switch to indoor shoes, then wash hands)
- Before and after eating or assisting children with meals and bottles
- Before and after preparing food, bottles, and drinks
- Before and after breaks
- Before and after medication administration
- Before and after diapering
- Before and after helping a child with toileting or in the bathroom
- After using the toilet
- After coughing, sneezing, or blowing their nose
- After playing outdoors
- After coming in contact with bodily fluids
- After handling garbage
- Before leaving FM

Handwashing Procedure: Follow these five steps every time.

1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. Push LED timer.
3. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
4. Scrub your hands for at least 20 seconds, stopping when the LED timer light turns red.
5. Rinse your hands well under clean, running water.
6. Dry your hands using a clean towel or air dry them.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

Universal Face Covering: With exception of children younger than 2 years old, all persons in a childcare facility are required to wear a face covering. Masking continues to be required in all Early Childhood Education Centers in Philadelphia.

- New three-ply child-sized masks will be provided to every child upon entry each day. A replacement will be provided if or when this mask becomes soiled. A \$20 per month fee will be charged per child to cover the costs of child masks.
- Masks from home are not permitted to be worn in the building because their effectiveness and cleanliness are impossible to confirm. The child's mask will be placed in their school bag so they have it for when they leave the building.
- Children two years old and older are required to wear a face covering indoors.
- If a child is outdoors and able to consistently maintain a social distance of at least 6 feet from individuals who are not part of their household, they do not need to wear a face covering.
- If a staff member is unable to place a face covering safely on the child's face, they should not do so.
- If a child 2 years old or older is unable to remove a face covering without assistance, the child is not required to wear one.
- The Department of Health recognizes that getting younger children to be comfortable wearing face coverings and to keep them on may create some difficulties. Under these circumstances, parents, guardians, licensed child care providers in community-based and school settings or responsible persons may consider prioritizing the wearing of face coverings to times when it is difficult for the child to maintain a social distance of at least 6 feet from others who are not a part of their household (e.g., during carpool drop off or pick up, or when standing in line at FM). Ensuring proper face covering size and fit and providing children with frequent reminders and education on the importance and proper wearing of cloth face coverings may help address these issues.
- Individuals who cannot wear a mask due to a medical condition, including those with respiratory issues that impede breathing are not required to wear a face mask.
- All staff must wear face coverings at all times during child care operations except while eating or if outdoors during break time and unless a medical reason prevents the staff from wearing a face covering as provided in Section 3 of the Order.
- Staff are asked to refrain from eating while in the presence of children.
- Staff are asked to wear a three-ply individually wrapped adult-sized disposable mask provided by Fishtown Montessori rather than a mask from home or a face shield.
 - In the event that viewing the mouth is an important part of a lesson (such as the slow and intentional

articulation of sounds during phoneme segmentation) face shields may be worn during that lesson.

- If using a disposable mask, a new mask should be used each day.
- Parents, guardians, and/or caregivers are required to wear masks at pick-up and drop-off.

Masks Should Not be Placed on:

- Babies and children younger than 2 years old.
- Anyone who has trouble breathing or is unconscious.
- Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance.
- Children during naptime.

Other PPE

- Toddler staff will wear gowns/smock/scrub jackets over their clothing. If contaminated by a bodily fluid, the staff member will change their gowns/smock/scrub jacket. Gowns/smock/scrub jackets will be laundered if soiled and on a daily basis.
- Staff should wear gloves when diapering.
- Staff should wear gloves when preparing or serving food or bottles.

CLEANING, DISINFECTION AND VENTILATION EFFORTS

Intensify Cleaning and Disinfection Efforts: Although transmission from a contaminated environment is an uncommon mode of transmission, sites should continue to maintain a cleaning schedule. Clean and disinfect frequently touched surfaces within the school and school buses regularly. This includes tables, desktops, chairs, doorknobs/handles, light switches, remote controls, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.

- Items that are difficult to clean, sanitize or disinfect should be reduced or eliminated such as stuffed animals, shared pillows, etc.
- All toys or works that need to be cleaned should be set aside in a container marked "soiled toys". Wash toys that have not been mouthed with soapy water and air dry before the next use.
- All works should be wiped clean with a sanitizing cleaner and sprayed or wiped with a disinfectant or run through the disinfecting dishwasher on a daily basis.
- Any food prep work will be used by only one child before being disinfected for the next child. Staff will use a clean pair of gloves when handling food.
- Clean and disinfect frequently touched surfaces at least daily. This includes tables, chairs, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, strollers, and sinks.
- Wipe off playground equipment between usage by different classrooms or cohorts of children.
- Keep each child's bedding separate. Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. Cots and mats should be labeled for each child. Bedding that touches a child's skin should be cleaned weekly.
- We use a disinfecting product that is EPA-approved for use against emerging pathogens such as COVID-19. All cleaning products are securely stored out of the reach of children.
- Toys that children 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. Fishtown Montessori is professionally cleaned and disinfected every evening after children are in care.

Air Quality and Ventilation

- Windows will remain open to promote fresh air circulation whenever practical.
- Fans will be used to draw fresh air in and blow air out, promoting circulation of fresh air in the building whenever practical.
- Ceiling fans will be used to promote air circulation and diffusion of particles, and to reduce air stagnation.
- Ionizers will not be used because ionization of the air aggravates respiratory conditions such as asthma.
- Restroom exhaust fans will operate at full capacity while the center is occupied.

Food Safety Procedures:

- Staff members will use a gloved hand to plate each child's snack to serve it. Self-serve snacks will be discontinued until further notice.
- Children should not serve food.
- Sinks used for food preparation should not be used for any other purposes.
- Staff should ensure children wash hands prior to and immediately after eating.
- Staff and children should wash their hands before and after preparing food.
- Staff should wash their hands before and after helping children to eat.

- Staff should wear gloves while preparing food/ bottles and feeding children or giving them bottles.
- If place settings are used, staff should put a place setting on each table for children rather than having children get their own fork, spoon, knife, plate, napkin, or cup.
- Staff should pour water for each child rather than having them share a pitcher.
- The snack table should be cleaned by an adult before and after each use.
- Lunch tables should be cleaned and disinfected before and after eating lunch.
- Children will continue to eat lunch that is brought from home each day.
- Children are not permitted to share food or beverages.

CHILDREN WITH DISABILITIES OR SPECIAL NEEDS:

Provide accommodations, modifications, and assistance for children with disabilities and special needs. Your child care program should remain accessible for children with disabilities. CDC guidance says:

- Physical distancing can be difficult for young children with disabilities.
- Wearing a face covering may be difficult for young children with certain disabilities (for example, visual or hearing impairments) or for those with sensory, cognitive, or behavioral issues. See below for face covering requirements.
- If interacting with people who rely on reading lips, consider wearing a clear mask or a cloth face covering with a clear panel.
- Many children require assistance or visual and verbal reminders to cover their mouth and nose with a tissue when they cough or sneeze, throw tissues in the trash, and wash their hands.
- Cleaning and disinfecting procedures might negatively affect children with sensory or respiratory issues. Avoid overuse, use safer products, and clean and disinfect when these children are not nearby, if possible.
- Behavioral techniques (such as modeling and reinforcing desired behaviors and using picture schedules, timers, and visual cues for positive reinforcement) can help all children adjust to changes in routines and take preventive actions but may be especially beneficial for some children with disabilities.
- If outside program services are necessary in the facility, see guidance below for Direct Service Providers.

Direct Service Providers:

- Direct Service Providers (DSPs) include direct support professionals, paraprofessionals, therapists, early intervention specialists, and others. DSPs should be allowed into your facility to provide important services to children, and there are several steps you can take to make sure they do so as safely as possible.
- Follow standard screening procedures to admitted DSPs. If DSPs provide services in other programs or facilities, ask specifically whether any of the other places have had positive COVID-19 cases.
- If space allows, limit the interaction of the DSP to only the child(ren) they need to see and utilize face covering wearing and physical distancing as much as feasible.
- When developing cohorts, it is important to consider services for children with disabilities, so that they may receive services within the cohort if feasible.
- CDC has developed guidance for DSPs. Child care providers should review the DSP guidance and ensure that DSPs that need to enter your child care program facility are aware of those preventive actions, which include:
- DSPs should wash their hands with soap and water when entering and leaving any child care program, when adjusting or putting on or off face coverings, and before putting on and after taking off disposable gloves. If soap and water are not readily available, they should use a hand sanitizer that contains at least 60% alcohol.
- DSPs should launder work uniforms or clothes after each use with the warmest appropriate water setting for the items and dry items completely.
- When working with or having direct physical contact with young children, DSPs can consider protecting themselves by wearing an oversized, button-down, long sleeved shirt and changing it when traveling between child care programs.

PARENT & FAMILY EFFORTS

Health and safety starts at home. We rely on the efforts of all our community members to support this COVID-19 plan.

- Parents must maintain social distancing of six feet from others every time you drop off or pick up your child.
- Parents and children must wear a mask every time you drop off or pick up your child.
- Provide your child with a ziplock or other designated bag to place their mask from home in once they arrive at FM and change into their FM-supplied disposable mask.
- Label all of your child's belongings so that they do not get misplaced or mistaken for another child's belongings.
- Do a symptom check as indicated above, including temperature check prior to leaving the house each day
- Refrain from giving your child fever reducing medicine before drop-off at FM

- Limit drop off and pick up to one parent or guardian when possible
- Parents are encouraged to have the same parent or caregiver pickup or drop off daily when possible
- Launder the nap mats when soiled or every weekend at minimum
- Launder school bags when soiled or every weekend at minimum
- Launder lunch bags when soiled or every weekend at minimum
- Launder outerwear when soiled or every weekend at minimum
- Parents and guardians should refrain from entering the Fishtown Montessori building unless specifically invited to do so
- Create a plan: Personal strollers or car seats are not permitted in the building until further notice.
- Support the health and safety of all our community members by complying with these COVID-19 policies.

DEFINITIONS

Cleaning: removal, usually with detergent and water or enzyme cleaner and water, of adherent visible soil, blood, protein substances, microorganisms and other debris from the surfaces, crevices, serrations, joints, and lumens of instruments, devices, and equipment by a manual or mechanical process that prepares the items for safe handling and/or further decontamination.

Cohort: a group or class of children and their teachers. In our center, classes A, B and C are individual cohorts.

COVID-19: COVID-19 is a contagious disease caused by a new strain of coronavirus. 'CO' stands for corona, 'VI' for virus, and 'D' for disease. Formerly, this disease was referred to as '2019 novel coronavirus' or '2019-nCoV.' or may also be referred to simply as coronavirus.

Covid-Like Symptoms: Someone who has covid-like symptoms exhibits at least one of the following symptoms: new or persistent cough; shortness of breath; new loss of sense of smell; new loss of sense of taste AND/OR at least two of the following symptoms: fever (≥ 100.4 degrees Fahrenheit); chills; muscle pain or body aches; sore throat; nausea or vomiting; diarrhea; fatigue; congestion or runny nose.

Disinfectant: usually a chemical agent (but sometimes a physical agent) that destroys disease-causing pathogens or other harmful microorganisms but might not kill bacterial spores. It refers to substances applied to inanimate objects. EPA groups disinfectants by product label claims of "limited," "general," or "hospital" disinfection.

Disinfection: Thermal or chemical destruction of pathogenic and other types of microorganisms. Disinfection is less lethal than sterilization because it destroys most recognized pathogenic microorganisms but not necessarily all microbial forms (e.g., bacterial spores).

Exclusion: Staying home and not being able to return until certain criteria are met.

Exposure is defined as being within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24 hour period. It also means coming into direct contact with droplets from a COVID-19 positive individual. Persons who test positive are considered infectious 48 hours before the onset of symptoms. Persons testing positive but do not have symptoms are considered infectious 2 days after exposure (if known) or starting 2 days before test date (if exposure is unknown). Persons with COVID-19 are considered infectious from 2 days before onset of symptom until the end of isolation.

Facility Person: Any adult employee, (aka "staff member") or volunteer who has a complete employee or volunteer file in place, and has undergone all applicable training and clearances as required by 55 PA Code Chapter § 3270.

Face Covering: "Face covering" means a covering of the nose and mouth that is secured to the head with ties, straps, or loops over the ears or is wrapped around the lower face. A "face covering" can be made of a variety of synthetic or natural fabrics, including cotton, silk, or linen, and, for the purposes of the order, can include a plastic face shield that covers the nose and mouth. "Face coverings" may be factory-made, sewn by hand, or improvised from household items, including but not limited to, scarves, bandanas, t-shirts, sweatshirts, or towels. While procedural and surgical masks intended for health care providers and first responders, such as N95 respirators, would meet these requirements, these specialized masks should be reserved for appropriate occupational and health care settings.

Isolation: Isolation refers to separating someone with confirmed or suspected COVID-19 infection to prevent their contact

with others to reduce the risk of transmission.

Outbreak of COVID-19: An outbreak is defined as a single positive COVID-19 case.

Potential Exposure: A potential exposure means being in a household or having close contact within 6 feet of an individual with a confirmed or suspected COVID-19 case for at least 15 minutes during the case's infectious period.

Quarantine: Quarantine refers to the practice of separating individuals who have had close contact with someone with COVID-19 to determine whether they develop symptoms or test positive for the disease.

Sanitizer: Agent that reduces the number of bacterial contaminants to safe levels as judged by public health requirements. Commonly used with substances applied to inanimate objects. According to the protocol for the official sanitizer test, a sanitizer is a chemical that kills 99.999% of the specific test bacteria in 30 seconds under the conditions of the test.

Symptoms of COVID-19 aka COVID-like symptoms: People with COVID-19 have had a wide range of symptoms reported. Symptoms may appear 2-14 days after exposure to the virus.

- At least one of these symptoms: new or persistent cough; shortness of breath; new loss of sense of smell; new loss of sense of taste
OR
- At least two of these symptoms: fever (≥ 100.4 degrees Fahrenheit); chills; muscle pain or body aches; headache, sore throat; nausea or vomiting; diarrhea; fatigue; congestion or runny nose

Virucide: An agent that kills viruses to make them noninfective.