

Dear Families,

We are working hard to get our schools ready for your return! We would like to share with you our guidelines for reopening during Illinois' Phase 3. The policies and procedures were carefully made and are based on three organizations (The CDC, IDPH and DCFS) guidelines that are required to safely reopen. Please note these may be updated as recommendations change and as we move into Illinois' Phase 4. To ensure the safety of our staff, your child(ren) and yourselves, we urge you strongly to read the policies and procedures thoroughly. When your child returns you will also need to sign verification that you were provided these policies and procedures.

Due to Covid-19 our April Re-Registration was delayed and will now be at time of each students return. Included in this communication is an updated Re-Registration Fee Sheet. For the month of June, we are cutting re-registration in half for families. Re-Registration paperwork and fees will be due the week of your child(ren)'s return. Please see the fee sheet for further information.

When restarting please be sure to let us know at least 24 hours in advance (survey responses have been noted). If your plans change, please let us know as soon as possible. We will only be opening a limited number of rooms and expand as enrollment increases. However, please note we are following the limit set by the state of 10 children per room with no combining (Eight for infants).

Your first day back, please remember to bring your child the following items **LABELED** with your child's name:

- Bedding in a reusable bag (no plastic grocery bags)
- Extra clothes
- "Inside" shoes (required everyday, if forgotten children's shoes will be required to be sprayed).
- A mask or face shield for those over 2 years old, with a labeled baggie to place the mask in during meals/nap. Younger children will be strongly urged to keep their mask/shield on during the day but not forced. School Age children will be required to wear the provided face covering.
- Diapers & Wipes
- Bottles for infants
- Breastmilk, formula or baby food, if you provide your own
- Any allergy substitutes you normally provide
- A note to the teacher with any information you would like them to know about your child

If you have any questions, please call us by phone in an effort to support social distancing and to not cause delays in drop off and pick-up for other families.

Thank you,

Penny Lane Schools



**COVID-19 Plan & Procedures**  
**ADDENDUM to Risk Management Plan, Employee Manual and Parent Handbook**  
**June 2020**

**SCREENING & HYGEINE PROCEDURES:**

**STAFF:**

1. Staff must wear a mask or face shield at all times once in the building. They can only be removed during meals or outside.
2. Immediately upon arrival staff should go to the office to have their temperature checked. If above 100 degrees, you will be sent home. (If you have a fever, you will not be able to return until you have been fever-free for 72 hours without fever reducing medication. You will also be encouraged to get a COVID-19 test.)
3. If their temperature is acceptable, staff may then clock in. They must use hand sanitizer before clocking in or out. Staff will then again use hand sanitizer after using the time clock. Staff must immediately wash their hands when entering their classroom. Staff are to continue to follow handwashing procedures for themselves and the children in their classroom.
4. Any adult must change into shoes that are solely used for inside their classroom before entering. Outside shoes are not permitted in the classrooms.
5. Staff are to only enter the classroom they are assigned to for the day. Do not visit other staff in hallways or other areas. If you need to communicate with someone outside your classroom, please call them.
6. Staff should maintain a 6-foot social distance whenever possible from other adults in and out of the classroom.
7. "Ways to Protect Yourself from Coronavirus" will be posted in the front office.

8. Staff having any of the following symptoms should NOT report to work or leave work immediately if they have any of these symptoms:

- |                              |                          |
|------------------------------|--------------------------|
| *Fever (100 degrees or more) | * Dry Cough              |
| *Shortness of Breath         | * Loss of Smell or Taste |
| *Body Aches                  | * Headache               |

9. Additional staff is available for staff members who become or call in sick.

10. Staff must continue to wash hands before meals, upon entering after going outside and help in assisting children in the restroom and at other DCFS recommended times.

11. Staff cannot combine rooms inside or outside at any time.

12. Floating staff are permitted to be assigned to 2 classrooms when needed, however they must change their apron and wash their hands before switching to the other room.

13. Staff will not be allowed to have other outside employment in a high-risk environment such as a medical facility or nursing home.

#### **CLASSROOM:**

1. All cribs and cots will be spaced out at least 6 feet apart, placing children head to toe to further reduce viral spread.

2. After nap all cot sheets, crib sheets, and blankets are to be immediately placed in the child's take-home bag.

3. All toys that cannot be cleaned and sanitized such as stuffed animals will be removed. Children's books, like other paper-based materials are not considered a high risk.

4. All toys that are put into a child's mouth (all age groups) are to be put in a tub to be disinfected daily.

5. Meals are to be plated – not served family style. Children are NOT TO help set up for meals/ snack. Even with low numbers of children, staff should use multiple tables for meals and snacks to implement social distancing whenever possible.

6. There are to be no large group times on the carpet. Circle time should be conducted in small groups with the children well spaced out.

7. Teachers may not visit other classrooms or teachers.

8. Frequently touched surfaces are to be disinfected 3 times throughout the day. Examples: walls, tables, shelves, sinks, toilets, trash cans, doorknobs, etc. Staff will do this mid-morning and mid-day and afternoon. The night cleaning crew will disinfect after hours. Staff working during naptime should disinfect after all children are napping.

9. Children are to be monitored at least 3 times a day for fever and other signs of COVID-19. Disinfectant bottles are kept full. Staff should make a visual inspection of the child for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness. At arrival, before nap, after nap and any other time there is a concern.
10. If a child has COVID-19 symptoms, they are to be immediately taken out of the classroom and isolated in the designated isolation room. Parents are to be called and the Director will request that the child be kept home until they have been 72 hours fever free without fever reducing medication. Staff are to disinfect all frequently touched items/areas in the classroom and areas touched in the isolation room when used. Staff should wear a mask while with an isolated child and wash their hands after the child is picked up. Staff shall also change their apron before returning to their assigned area.
11. Face shields will be made available to all staff. Face Shields should be labeled with the staff members name, sanitized at the end of your shift and left at the school for your next shift. Staff may wear a mask if they would prefer. Cloth masks should be taken home each night and washed before re-wearing to work.
12. Children over Two years old whose parents have provided a mask (labeled with the child's name), will be encouraged to wear their mask throughout the day. Families should provide a labeled baggie to place the mask in during meals, napping and outside time.
13. 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 children: Child-care providers can protect themselves by wearing a apron or an over-large button-down, long sleeved shirt and by wearing long hair up off the collar in a ponytail or other updo.
  - Child-care providers should wash their hands, neck, and anywhere touched by a child's secretions.
  - Child-care providers should change the child's clothes if secretions are on the child's clothes. They should change the apron or 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 in the child-care center or home-based child-care.
  - Child-care providers 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 will be sent home at the end of the day.
14. All staff shall follow the provided training on proper disinfecting and ways to protect themselves against Coronavirus and COVID-19 signs to watch out for in themselves and the children in their classroom.

## **CENTER:**

1. There are to be NO outside non-essential visitors until further notice.
2. All family events, in -person parent/teacher conferences, field trips and swimming have been cancelled until further notice. All Parent Conferences/Meeting shall be conducted by phone or zoom.
3. No more than ten (10) children can be in a classroom at the same time (Eight for infants). The same teachers are to remain in the classroom throughout the day. No classrooms will combine during any part of the day.
4. All communal spaces are limited to one person at a time (lounge, bathroom, copier, etc). Please disinfect any area you need before use.
5. The Front Office and Directors office are also not to be "visited". If needed please call the front office or Director with any questions.
6. The playground is to be used by only one group at a time. Equipment shall be sanitized with bleach and water solution by the classroom at the end of their allotted time so it is ready for the next group.
7. Hand sanitizer will be brought during outside play when there is no access to a sink for handwashing.
8. No water fountains are to be used.
9. Due to the requirement for special PPE with the use of nebulizers, Penny Lane is unable to administer any medication using a nebulizer. Symptoms of asthma and COVID-19 may overlap, including cough and shortness of breath. Therefore, students experiencing acute asthma attacks should not be attending school without approval by a healthcare provider; if an asthma attack starts at school, a student may need a bronchodilator treatment before being sent home or before an ambulance arrives. The American Lung Association's Model Policy for School Districts: recommends using inhalers with disposable spacers/mouthpieces. During this COVID-19 pandemic, asthma treatments using inhalers with spacers (with or without face mask, according to each student's individualized treatment plan) are preferred over nebulizer treatments whenever possible.
10. There will be no parent tours conducted. Parents will be referred to our website to view the center and may schedule an appointment to complete registration.

## **Parent Arrival and Departure**

- Every individual Kindergarten and up must be wearing a mask or face shield. Younger children over 2 are encouraged to wear a mask/face shield as tolerated.
- Families dropping off should stand on the social distancing marks provided outside the front door. If you are the first in line, please call the center to alert us of your presence.

Families picking up should call the center when they arrive to drop off or pick up their child(ren) and then take a place in line outside the front door on the social distancing marks provided. One family will be permitted in the building to drop off or pick up at a time. We will either call you in or bring your child out.

- Infant car seats and strollers may be used.
- A hand hygiene station is to be set up at the entrance of the facility for parents to use that parents can clean their hands upon entrance. Parents are not to go past the front desk.
  - Staff will greet children/parents in the foyer as they arrive.
  - A handheld forehead thermometer will be used to take both parent and child's temperature.
  - Staff will sign all children in and out.
  - Any questions for the center should be made by phone.
- Children must have another pair of shoes each day for inside the classroom (you may leave a pair at the school). If you do not have another pair of shoes you will need to sanitize your child's shoes outside the front door. Staff will remove arrival shoes outside the classroom and staff will put on their school shoes on in the classroom. Please have all shoes labeled.
- Ideally, the same parent or designated person should drop off and pick up the child every day. If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children, because they are more at risk for severe illness from COVID-19. Only one parent or guardian is permitted with their child(ren).
- Bedding will be sent home daily. Parents should wash blankets daily and return the following day. Cots will be disinfected each day before use.
- Parents are encouraged to spray shoes, backpacks and other items brought with disinfectant each night.
- Parents should contact the center and report any absences and all symptoms of their child.

### **Screening of Children and Parents Upon Arrival**

- In order to protect staff while conducting temperature screenings, all screeners will wear a face shield or mask, gloves and use a handheld thermometer to reduce close contact. Screeners will disinfect door handles and other touched surfaces between arrivals and departures. Gloves shall be changed if any personal contact was made before moving on to the next child's screening. Parents should be prepared to allow an extra 10 minutes for arrival and departure.
- Persons who have a fever of 100<sup>0</sup> or above or other signs of illness are not admitted to the facility. Parents are encouraged to be on the alert for signs of illness in their children and to keep them home when they are sick. All children and parents are screened for temperatures upon arrival. All children with a temperature of 100 or higher will not be allowed to stay. If the parent has a temperature of 100 or higher their child will not be allowed to stay. Staff will document all temperatures on a temperature log.
- Make a visual inspection of the child for signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness.
- After screening, children are taken to the hall restroom to have their hands washed.

- Children are then taken to their classroom by staff where their outside shoes are left in the hallway and the child with their belongings (including a labeled baggie if they have a mask and a change of shoes) is handed over to the classroom.

### **Parent Precautionary Protocols:**

A child's household must remain out of the center if any member of the household has (or has been in close contact with anyone who has:

- (a) A confirmed case of COVID-19; or
- (b) Traveled: internationally; domestically, from an area which is experiencing Widespread community transmission of COVID-19 or from any area which is the subject of similar travel restrictions under applicable state and local guidance. 14 days after the last potential exposure, your household may return provided these three things have happened:
  - (a) At least 7 days have passed since any household member first experienced symptoms; and
  - (b) Symptoms have improved for any household member that experienced symptoms (for example, cough or shortness of breath has improved); and (c) The household has been fever-free for at least 72 hours without the use of fever reducing medicines.
  - (c) Depending on the circumstance's administration may require the parent to obtain medical clearance before return to the center will be allowed.

**HOUSEHOLD MEMBERS:** include individuals who may not live in the household but may be staying there or are otherwise present in the household on a regular basis (e.g. nannies, caregivers, home health workers, contractors, etc.) and includes anyone with pick up or drop off privileges at the center.

**CLOSE CONTACT:** is defined by the CDC as (1) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time and can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case, or (2) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

Considerations when assessing close contact include the duration of exposure and the clinical symptoms of the person with COVID-19.

**FOR MEDICAL PROFESSIONALS:** If contact occurs while wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), that contact will NOT be considered close contact for purposes of this policy.

Consistent with our COVID-19 Policy, the household will be required to remain out of the center for 14 days unless medical clearance is provided by a physician indicating that the presenting symptoms are associated with a known non-COVID-19 illness. The physician's note must not be from a family member.

Exclusion from the center is sometimes necessary to reduce the transmission of illness. For the child's comfort, and to reduce the risk of contagion, parents will be asked to pick up their child within 1 hour of notification. Until then, the child will be kept comfortable in an isolated area and will continue to be observed for symptoms.

**PHASE TWO: (If a child or staff member is Identified with COVID-19 Symptoms )**

**All previous screening & hygiene procedures will be continued.**

If a sick child or staff member has been isolated due to displaying COVID19 symptoms, staff are to clean and disinfect surfaces in the isolation room and the child's classroom after the sick child has gone home. Other areas used by the sick staff such as offices, bathrooms and common areas should also be disinfected.

All parents of children experiencing COVID19 symptoms (and staff) will be requested to contact their local health professional for further guidance. During this time, the classroom and staff who had been exposed to the possibly ill person are to be excluded from care/work. If the COVID19 test comes back negative, then the classroom and staff can return. If not, all children and staff are to be sent home to isolate for 14 days before returning. All staff will be paid their regular salary during June if they are sent home to self-quarantine for this 14-day period.

**Communication with local Health Department**

Administration will communicate any COVID19 suspected cases with the Cook County Health Department and receive additional guidance and support. The Health Department will communicate further to parents through contact tracing if additional identification measures are needed. Depending upon children absences/staff able to work, classrooms may close, or hours may be affected.

**PHASE 3: CLOSURE (Active case in the center)**

If there is an active case of COVID-19 at our facility, we may close for a length of time to be determined in partnership with our local health department.

DCFS, IDPH, NAEYC and parents affected will be notified.

**COMMUNICATION METHODS:**

Center/Staff - all staff will receive communication via email. Parents will receive communication via email.

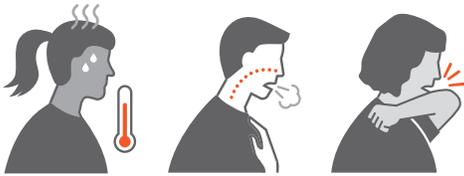
# WE'RE PROTECTING OUR FAMILIES FROM COVID-19



## In response to Public Health direction, we:

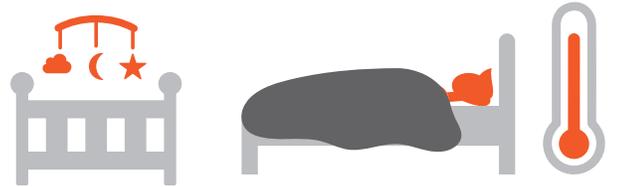
- ✓ Screen children, *families and staff*, daily for any of these symptoms:

fever OR shortness of breath OR cough Other symptoms:



- chills
- muscle pain
- sore throat
- loss of taste or smell

- ✓ Ensure sick caregivers and children stay home.



- ✓ Ensure that children and caregivers frequently wash their hands.



- ✓ Clean and sanitize surfaces frequently.



## Please help in protecting our community:

- Check your child's temperature daily.
- Keep children home if they are sick.



- Do not enter the child care if you are sick.

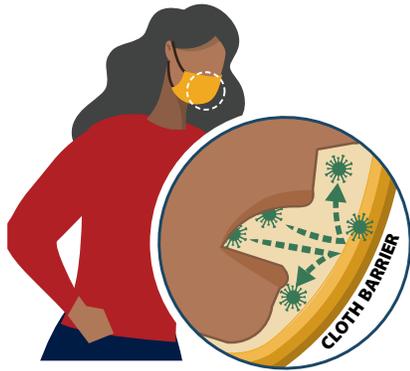


# How to Safely Wear and Take Off a Cloth Face Covering

Accessible: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

## WEAR YOUR FACE COVERING CORRECTLY

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily
- Do not place a mask on a child younger than 2

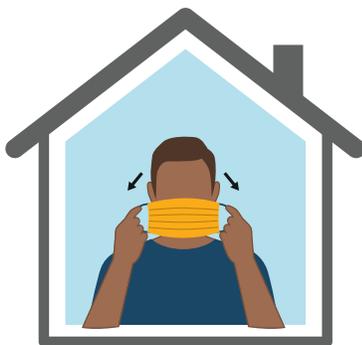


## USE THE FACE COVERING TO PROTECT OTHERS

- Wear a face covering to protect others in case you're infected but don't have symptoms
- Keep the covering on your face the entire time you're in public
- Don't put the covering around your neck or up on your forehead
- Don't touch the face covering, and, if you do, clean your hands

## FOLLOW EVERYDAY HEALTH HABITS

- Stay at least 6 feet away from others
- Avoid contact with people who are sick
- Wash your hands often, with soap and water, for at least 20 seconds each time
- Use hand sanitizer if soap and water are not available



## TAKE OFF YOUR CLOTH FACE COVERING CAREFULLY, WHEN YOU'RE HOME

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place covering in the washing machine
- Wash your hands with soap and water



**Cloth face coverings are not surgical masks or N-95 respirators, both of which should be saved for health care workers and other medical first responders.**

For instructions on making a cloth face covering, see:

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



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

# How to Wash Cloth Face Coverings

Cloth face coverings are an additional step to help slow the spread of COVID-19 when combined with [every day preventive actions](#) and [social distancing](#) in public settings.

Cloth face coverings should be washed after each use. It is important to always [remove face coverings correctly](#) and [wash your hands](#) after handling or touching a used face covering.

## How to Clean

### Washing Machine

- You can include your face covering with your regular laundry.
- Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering.

### Washing by Hand

- Prepare a bleach solution by mixing:
  - 5 tablespoons (1/3rd cup) household bleach per gallon of room temperature water or
  - 4 teaspoons household bleach per quart of room temperature water
- Check the label to see if your bleach is intended for disinfection. Some bleach products, such as those designed for safe use on colored clothing, may not be suitable for disinfection. Ensure the bleach product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
- Soak the face covering in the bleach solution for 5 minutes.
- Rinse thoroughly with cool or room temperature water.

### **Make sure to completely dry cloth face covering after washing.**

#### How to Dry

##### Dryer

- Use the highest heat setting and leave in the dryer until completely dry

##### Air Dry

- Lay flat and allow to completely dry. If possible, place the cloth face covering in direct sunlight.

# Handwashing and Hand Sanitizer Use

## at Home, at Play, and Out and About



Germs are everywhere! They can get onto hands and items we touch during daily activities and make you sick. Cleaning hands at key times with soap and water or hand sanitizer is one of the most important steps you can take to avoid getting sick and spreading germs to those around you.

There are important differences between washing hands with soap and water and cleaning them with hand sanitizer. For example, alcohol-based hand sanitizers don't kill ALL types of germs, such as a stomach bug called norovirus, some parasites, and *Clostridium difficile*, which causes severe diarrhea. Hand sanitizers also may not remove harmful chemicals, such as pesticides and heavy metals like lead. Handwashing reduces the amounts of all types of germs, pesticides, and metals on hands. Knowing when to clean your hands and which method to use will give you the best chance of preventing sickness.

### When should I use?

#### Soap and Water

- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone who is sick
- Before and after treating a cut or wound
- After using the bathroom, changing diapers, or cleaning up a child who has used the bathroom
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal food or treats, animal cages, or animal waste
- After touching garbage
- If your hands are visibly dirty or greasy

#### Alcohol-Based Hand Sanitizer

- Before and after visiting a friend or a loved one in a hospital or nursing home, unless the person is sick with *Clostridium difficile* (if so, use soap and water to wash hands).
- If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol, and wash with soap and water as soon as you can.

\* Do **NOT** use hand sanitizer if your hands are visibly dirty or greasy: for example, after gardening, playing outdoors, or after fishing or camping (unless a handwashing station is not available). Wash your hands with soap and water instead.



## How should I use?

### Soap and Water

- **Wet** your hands with clean running water (warm or cold) and apply soap.
- **Lather** your hands by rubbing them together with the soap.
- **Scrub** all surfaces of your hands, including the palms, backs, fingers, between your fingers, and under your nails. Keep scrubbing for 20 seconds. Need a timer? Hum the “Happy Birthday” song twice.
- **Rinse** your hands under clean, running water.
- **Dry** your hands using a clean towel or air dry them.

### Alcohol-Based Hand Sanitizer

Use an alcohol-based hand sanitizer that contains at least 60% alcohol. Supervise young children when they use hand sanitizer to prevent swallowing alcohol, especially in schools and childcare facilities.

- **Apply.** Put enough product on hands to cover all surfaces.
- **Rub** hands together, until hands feel dry. This should take around 20 seconds.

**Note:** Do not rinse or wipe off the hand sanitizer before it’s dry; it may not work as well against germs.



For more information, visit the CDC handwashing website, [www.cdc.gov/handwashing](http://www.cdc.gov/handwashing).

# Routine Disinfection of Surfaces in CHILDCARE ENVIRONMENTS



## 1 WIPE UP SURFACES

Only use hot water & bleach if fabric laundering directions permit

Use a new cloth or paper towel for each surface.

## 2 CLEAN UP SURFACES

## 3 DISINFECT SURFACES

2 1/2 TBSP CHLORINE BLEACH\* + 1 GALLON WATER

\*Approximately 6%

CHLORINE TEST STRIP

500 ppm	600 ppm	700 ppm	800 ppm
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2 MIN

## 4 WASH YOUR HANDS

20 SEC

Disinfecting products must be EPA-registered. Always read and follow manufacturer's directions.

Scientific experts from the U.S. Centers for Disease Control and Prevention and the U.S. Food and Drug Administration helped to develop this poster.

Posters are available for download at [www.waterandhealth.org/resources/posters](http://www.waterandhealth.org/resources/posters)

