

**Bright Beginnings Education Center, Inc.
Bright Beginnings Child Care, Inc.**

Pandemic Health & Safety Plan

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Introduction

Bright Beginnings has a plan in place to protect staff, children, and families from the spread of COVID-19. This pandemic is an evolving situation that requires many different responses as new information becomes available.

This Health and Safety Plan will help to prevent the transmission of COVID-19 within our childcare and school communities and facilities. It also provides information and protocols to react quickly should a case be identified. The guidance includes a plan for the continuity of teaching and learning if there is community spread of COVID-19.

Our program, working together with local health departments, have an important role in slowing the spread of diseases to help ensure students have safe and healthy learning environments. In the table below, we have identified individuals who will serve as Pandemic Team Members.

| Individual(s) | Stakeholder Group Represented | Pandemic Team Roles and Responsibilities (Options Above) |
|------------------------|--------------------------------------|---|
| MARY FASICK | Managing Director | Pandemic Coordinator (Plan Development/Crisis response) |
| JESSICA HANKINS | Executive Director | Plan Development/Crisis Response Team |
| JENNIFER BUCK | Education Director | Plan Development/Crisis Response Team |
| PAMELA WOOD | Director | Plan Development/Crisis Response Team |
| MARIA LEMUS | Director | Plan Development/Crisis Response Team |
| TAYLOR FASICK | School Nurse | Plan Development/Crisis Response Team |
| SHANNON OWENS | Teacher | Plan Development |
| ARACELI LOPEZ | Assistant Teacher | Plan Development |

The pandemic coordinator and team will be responsible for facilitating the local planning process, monitoring implementation of our local Health and Safety Plan, and continuing to monitor local health data to assess implications for school operations and potential adjustments to the Health and Safety Plan throughout the school year which include the following:

- Strategies to reduce the spread of a wide variety of infectious diseases (e.g., seasonal influenza). This includes strategies for social distancing and school dismissal that may be used to stop or slow the spread of infectious disease.
- Strategies for continuing education, meal programs, and other related services in the event of school dismissal.
- Ensuring that the plan emphasizes everyday preventive actions for children and staff.

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Sanitizing Prior to Opening

Our programs have conducted a deep-cleaning and sanitization of all facilities following the guidelines of the CDC and local Health Department. Our cleaning supplies meet or exceed OSHA and CDC requirements. Deep-cleaning and sanitation procedures along with the increased/additional cleaning of high touch points and bathrooms will be implemented in accordance with facility usage and will occur daily.

Staff have completed training relative to COVID-19, mitigating infection and proper cleaning procedures. Teachers and staff will review the updated Health and Safety Plan and be informed about daily disinfection procedures.

Social Distancing Plans and Procedures

Drop Off and Pick Up Procedures:

- Families will be greeted at their CAR DOOR where a staff member will greet the child(ren). Parents and other family members will not be allowed inside the childcare program. Prior to parents leaving the site, a trained staff member will take the temperature of their child(ren) and ask parents the following questions:
 - Do you live with anyone or have you had close contact with anyone who has been diagnosed with COVID-19 within the past 14 days?
 - Do you or anyone in your household have a fever, cough and/or shortness of breath?
 - Do you or your child(ren) have any other signs of communicable illness such as a cold or flu?
- Children and staff will be required to wash their hands immediately upon entering the building and hourly throughout the day. When children are received for drop-off, they will be escorted into the nearest bathroom where their hands will be washed prior to being brought to their classroom/childcare area.
- Upon parents' arrival to pick up their child, a staff member will bring the child out to parents. Doing so will limit direct contact and help us to maintain social distancing.
- When you arrive for work, please see the director who will complete this Daily Health Check with you.
- STAFF DAILY HEALTH CHECK Handout

Social Distancing in Classroom and Common Spaces

To achieve adequate distancing and limit contact, it may be necessary to adjust attendance schedules and/or class times. Parents will be notified if any changes need to occur. When there is a need to be seated at a table, students will be arranged to allow for maximum distancing as is feasible and appropriate.

Children will be divided into small groups. Each group will stay together with the same staff members throughout the day and not mingle with other groups, including during time spent outdoors. Each group will meet in a separate area.

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Spending time outdoors will be a priority. Groups will spend as much of their time outside as is feasible for the planned activities and as is appropriate for the weather. During time spent indoors, activities will be arranged throughout the room to allow for as much distancing as possible.

Limiting Interactions Between Groups

Children will be divided into small groups. Each group will stay together with the same staff members throughout the day and not mingle with other groups, including during time spent outdoors.

Restricting Spaces

Children will eat lunch and breakfast in their classrooms rather than mixing in the cafeteria. It is not possible to suspend use of common areas, we will limit the extent to which children mix with each other, and particularly with children from other classes (e.g., stagger lunch by class, segregate lunch and recess area by class.

To the extent possible, we will avoid taking multiple classes to bathrooms at once (e.g., avoid having all classes use the bathroom right after lunch or recess). We will stagger playground use rather than allowing multiple classes to play together, and limit other activities where multiple classes interact.

Outdoor Activities, Playground

- Playgrounds/gym will be free of additional toys and sporting equipment
- No more than two classes at a time on the recess yard
- Conduct outdoor activities that promote more social distancing.
- Sanitization of equipment per CDC guidelines between classes
- Monitor number of classes on the playground or in the gym with defined scheduled times with time to sanitize the space between.
- Classes to bring own and nonshared sporting equipment or disinfected between use.
- Sanitization of equipment per CDC guidelines between classes.

Limiting Outside Visitors

- No program tours will be given while children are present. Policies and procedures for evening tours will follow all Pandemic Health & Safety Guidelines as applicable.
- All extra activities and events such as field trips, assemblies, special events, and school-wide parent meetings are postponed until further notice.
- Volunteers for classroom activities are postponed until further notice.

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Face Coverings

Updated as of July 6, 2020: The Pennsylvania Office of Child Development and Early Learning (OCDEL) provided additional direction on face coverings for children following the order Governor Wolf issued. **All children ages two and up will need to wear a face covering while attending our school-age, preschool, and childcare programs unless one of the exceptions below applies:**

- If a child is outdoors and able to consistently maintain a social distance of at least six feet from individuals who are not a part of their household
- If a parent or guardian has been unable to place a face covering safely on the child's face
- If a child is unable to remove a face mask without assistance

Face masks can be removed during mealtimes and napping, as the children will be socially distanced.

We know it can be difficult for children, especially those who are younger, to understand why they need to wear a face covering and often to keep a face covering on. We will encourage children to keep masks on as much as possible. In our childcare and school-age programs, we will be discussing the need to wear face coverings with all the children.

- Below are some suggestions for how to encourage your child to wear a face covering:
- Give your children matching masks for their favorite doll or stuffed animal to wear
- Have your children decorate their own masks so they are personalized and more fun
- Make sure you model wearing a face mask so your children understand how important it is
- Practice wearing a face covering at home with your children

Staff are required to wear cloth face coverings. Staff will wear gloves when there is a possibility that bodily fluid may be transferred. Substitute teachers will receive training regarding the Health and Safety Plan. Behavior Supports will be provided to students as they transition to the in-person program.

- If children have medical plans as part of their IEP, the medical plans will be implemented in addition to social distancing, frequent hand washing and disinfecting surfaces.
- CDC procedures for children who are at high risk will be followed.
- Additional safety measures will be put in place if there is a possibility of bodily fluids being transmitted including the availability to use face shields, gloves and gowns.

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Handwashing

Healthy Hand Hygiene Behavior: All children, staff, and volunteers must 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 children
- Before and after administering medication or medical ointment
- Before and after diapering
- After using the toilet or helping a child 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. If hands are not visibly dirty, alcohol-based hand sanitizers with at least 60% alcohol can be used if soap and water are not readily available.
- Supervise children when they use hand sanitizer to prevent ingestion.
- Assisting children with handwashing, including infants.
- Staff must also wash their hands after assisting.

On-going Sanitation Plans

Environment:

- Staff will disinfect high-touch surfaces, such as door handles, light switches, faucets, toys and games that children play with. SEE CHECKLIST TO BE COMPLETED.
- We will perform an enhanced deep cleaning every night in all areas, on all touched surfaces. SEE CHECKLIST TO BE COMPLETED.
- Staff will have access to anti-bacterial hand sanitizers and disposable gloves and use them as needed.
- Staff will wash/scrub their hands and children's hands a minimum of hourly (noted by the CDC as the most effective preventive measure).
- All bedding, blankets, and change of clothes will remain onsite and be laundered by our staff.
- Children's items must remain onsite. No items will be permitted to go back and forth daily.

Cleaning and Sanitizing Toys:

- Toys that cannot be cleaned and sanitized will not be used.
- 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. Clean with water and detergent,

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rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.

- Toys will not be shared with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- 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 Child:

It is important to comfort crying, sad, and/or anxious young children and they often need to be held. To the extent possible, when washing, feeding, or holding young children:

- Staff will protect themselves by wearing our staff uniform and by wearing long hair up of the collar in a ponytail or other updo.
- Staff will wash their hands, neck, and anywhere touched by a child's secretions.
- Staff will change the child's clothes if secretions are on the child's clothes. They should change their uniform, 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 preschoolers should have multiple changes of clothes on hand in the center.
- Staff must 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.

Meal Preparation & Service:

- All surfaces will be disinfected before meal preparation and feedings using CDC- or EPA-approved products.
- All staff will wash hands before and after meal preparation and feeding.
- Each child's meal will be plated and served by staff, instead of served family-style.
- Children will not share eating utensils.
- Staff will not combine groups or classrooms of children during meals or snack time.
- Staff will allow for a minimum of 3 feet of space between children during mealtimes (6 feet is preferred).

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- Staff will guide and direct children to wash hands before each meal or snack.

Safely Transporting Students

Bus drivers will assess their temperature taken prior to the first run and are required to wear a mask as staff and/or students embark and disembark the bus. There will be hand sanitizer on the bus and the bus will be disinfected between runs.

Children will sit one to a seat every other row. Aides will be required to wear a mask and other PPE (as needed) and will be seated in the row between students. Training will be provided for all staff on the health and safety procedures outlined in the plan the week before the program begins. The training will take place via zoom and be recorded for anyone who is unable to attend at the scheduled time.

Prior to students boarding the bus and before parents leave the bus stop, a trained staff member will take the temperature of their child(ren) and ask parents the following questions:

- Do you live with anyone or have you had close contact with anyone who has been diagnosed with COVID-19 within the past 14 days?
- Do you or anyone in your household have a fever, cough and/or shortness of breath?
- Do you or your child(ren) have any other signs of communicable illness such as a cold or flu?

Bus children and staff will be required to wash their hands immediately upon entering the building and hourly throughout the day. Bus children will be escorted into the nearest bathroom where their hands will be washed prior to being brought to their classroom/childcare area.

Monitoring

Monitoring and Isolating Sick Children

All children and staff will have their temperature taken when entering the building. If there is an elevated temperature, the individual will be sent to the nurse or center director for further evaluation.

Individuals with a fever of over 100.4 will be sent home by the program's nurse or director. The parent will be asked to contact the child's physician and Chester County Health Department to determine if further assessment is warranted. If there are no other symptoms in addition to the fever and no additional medical interventions are needed, the student can return when at least 3 days (72 hours) has passed *since recovery is defined* as resolution of fever without the use of fever-reducing medications.

We will follow the state's guidance on protocol for when a student contracts COVID-19 and will use the most current date as reference.

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For COVID-19 cases:

- If the child is in care when the test results are confirmed positive, the child must be isolated until the appropriate party arrives to pick them up.
- Follow the “Discontinuing at home isolation” guidance below for timelines on returning to the childcare setting.
- If a facility person or child tests positive for COVID-19, areas used by the person who tested positive must be closed for a period of 24 hours following the confirmed positive COVID-19 case of child or facility person in attendance so that the facility can be cleaned and disinfected properly. Close contacts as defined below, must self-quarantine.
- If a facility person or child becomes ill with COVID-19 like symptoms as defined above, close off areas used by the person who is sick and clean and disinfected properly.
 - The individual should be evaluated by their healthcare provider immediately.
 - If the individual tests positive upon further evaluation by a healthcare provider, follow guidance under Exposure to a person who tests positive for COVID-19.
- The operator shall inform parents of enrolled children when there is a suspected outbreak of a communicable disease or an outbreak of an unusual illness that represents a public health emergency in the opinion of the Department of Health as per 55 Pa. Code §3270.136(b), §3280.136(b), and §3290.136(b). An outbreak is defined as a single positive COVID-19 case.
- The facility must report positive COVID-19 cases to the Department of Health (DOH) as per 55 Pa. Code §3270.136, §3280.136(d), and §3290.136(d),
- The facility will inform facility persons of positive COVID-19 cases within the facility.

Exposure to a person who tests positive for COVID-19:

Exposure is defined as being within six feet of the individual who tests positive for COVID-19 for a period of 15 minutes or more. 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 who do not have symptoms are considered infectious 2 days after exposure (if known) or starting 2 days before test date (if exposure is unknown).

If a facility person, household member, or a child is exposed to an individual who tests positive for COVID-19:

- They shall self-quarantine for a period of 14 days based on the CDC guidance.
- If a child becomes ill at the facility, the operator shall notify the child’s parent as soon as possible.

The operator shall inform parents of enrolled children when there is a suspected outbreak of a communicable disease or an outbreak of an unusual illness that represents a public health emergency in the opinion of the Department of Health as per 55 Pa. Code §3270.136(b), §3280.136(b), and §3290.136(b).

The facility will inform facility persons of possible exposure to a positive COVID-19 case.

Return to Care

Children and facility persons identified as ill on screening or who are sent home for being symptomatic

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Children or facility persons who meet criteria for illness on screening or who become ill while at the facility and are sent home should be referred to their healthcare provider for evaluation.

For facility persons and children, who are not currently a close contact or quarantined, presenting with symptoms that may be associated with COVID-19 may return to a facility when:

- Symptomatic child/facility persons who is 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.
- 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 with test negative: exclude until without a fever for 24 hours (if fever present) without the use of fever reducing medication AND improved respiratory symptoms.

Discontinuing at home isolation:

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.

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.

Administrators and nurses will be trained on the implementation of the protocols. [Child](#)

Health:

- Staff will receive education on COVID-19 symptoms as well as preventive measures. Handout provided.
- Children who start to experience symptoms of respiratory illness, including a fever of >100.4 while at childcare, will be isolated from other children until they can be picked up.
- Until further notice, all program field trips will be suspended.

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Cleaning and disinfecting facility if someone is sick:

- Close off areas used by the person who is sick.
- Open outside doors and windows to increase air circulation in the area.
- Wait 24 hours before you clean or disinfect. If 24 hours is not feasible, wait if possible.
- Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, etc.
- We will vacuum the space as needed.
- We will consider temporarily turning off room fans and the central HVAC system that services the room or space, so that particles that escape from vacuuming will not circulate throughout the facility.
- Once area has been appropriately disinfected, it can be opened for use.
- Workers without close contact with the person who is sick can return to work immediately after disinfection.
- If more than 7 days since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.
- Continue routine cleaning and disinfection. This includes everyday practices that businesses and communities normally use to maintain a healthy environment.

Protection of Students, Staff, and Family Members

Students who are at higher risk for severe illness will have option to participate in distance learning until able to return safely to school setting. If appropriate/applicable, attempts will also be made to instruct these high-risk students in smaller groups to provide less of chance for exposure.

As appropriate and applicable, the Director will work with any staff members at higher risk for severe illness to make needed accommodations. Accommodations made to protect students and staff at higher risk for severe illness such as:

Student:

- Option for continued distance learning until student is able to return to school building
- Instruct in smaller groups to decrease exposure risk.
- Movement will be limited in and out of classrooms with students and/or staff at higher risk for severe illness.

Staff:

- Staff at higher risk will remain within same location/classroom and with same people as much as possible.
- Depending on staff role and risk level, accommodations may be made to work in isolated area of the school building and/or remote working.

Any staff member or student who is in a high-risk population for Covid-19 is encouraged to discuss any additional protective measures they may require with the Director.

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Teaching staff in a protected group will be given the opportunity to wear additional PPE.

Training Staff on the Health and Safety Plan

All staff members will be trained on social distancing and safety protocols in place. This training will be provided via online training prior to the return of staff and children to our programs. Preparedness to implement will be monitored via a post-training quiz and observation of implementation.

Staff Health & Wellness:

- Staff will receive additional training on infection control and workplace disinfection. Handout provided.
- Staff will not share their phone, devices or meal or utensils with one another or children.
- All cell phones must remain in staff lockers.
- Staff will check their temperature at the beginning of each shift and notify their supervisor if >100.4 as well as self-monitor for signs and symptoms of any COVID-19

| Training Topic | Lead Person and Position | Session Format |
|--|---------------------------------|-------------------------------|
| Understanding COVID-19 and SARS-CoV-2. How to Stay Safe. | Nurse | Webinar |
| Pandemic Health & Safety Plan | Director | Webinar |
| Workplace Protocols in place to Prevent or Reduce Exposure. | Director | Webinar/ In-person |
| Safely Cleaning and Disinfecting at Work | Director | Webinar/ In-person |
| PPE. Putting on and taking Off a Mask | Nurse | Webinar/ In-person |
| How to Isolate Individuals Suspected/Confirmed COVID-19 | Nurse | In-person |
| Procedures for Pathogens Exposure | Nurse | Webinar |

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Responding to Pandemic

Implementing Remote Learning

All instructional and non-instructional staff will undergo continuous professional development to ensure all students have access to quality learning opportunities whether in the physical building or through distance learning for preschool children. All staff will be trained to provide in-person and distance instruction to preschool children; support staff will remain with smaller groups whenever possible.

Communicating Guidelines

Families will be notified of staff or child illness through the School Procure (Messaging) system. This system calls, emails and texts information to parents/guardians in English or Spanish language. Information will also be posted on the website and social media outlets.

Directors will support their childcare and school-age community by sharing resources with children (if resources are age-appropriate), their families, and staff. We will coordinate with local health officials to determine what type of information might be best to share with our childcare and school-age community. We will share the following fact sheets and information sources:

- Information about COVID-19 available through state and local external icon health departments
- General CDC fact sheets to help staff and students' families understand COVID-19 and the steps they can take to protect themselves:
 - *What you need to know about coronavirus disease 2019 (COVID-19)pdf icon*
 - *What to do if you are sick with coronavirus disease 2019 (COVID-19)*
 - *Stop the spread of germs – help prevent the spread of respiratory viruses like COVID-19pdf icon*
- CDC Information on COVID-19 and children
- CDC information for staff, students, and their families who have recently traveled back to the United States from areas where CDC has identified community spread of coronavirus:
 - A list of countries where community spread of COVID-19 is occurring can be found on the CDC webpage: *Coronavirus Disease 2019 Information for Travel*

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- For questions about students who plan to travel, or have recently traveled, to areas with community spread of COVID-19, refer to CDC's [FAQ for travelers](#).

Infectious Disease Plan

- 1) Methods to Prevent the Spreading of an Acute Respiratory Illness
 - a. Staff will be reminded to adhere to CDC prevention practices for cough and sneeze etiquette and hand hygiene. Appropriate supplies will be available in the workplace, including hand soap and alcohol-based hand sanitizer (60-95% alcohol).
 - b. Staff will clean high-touch surfaces four times daily with a disinfectant.
 - c. Staff are expected to stay home and contact their physician if they suspect they have been infected with the infectious disease.
 - d. Staff should not return to work until they no longer require medication to manage their fever and cough.
 - e. Staff who are well but who have a sick family member at home with the infectious disease should notify their supervisor and refer to CDC guidance for how to conduct a risk assessment of their potential exposure.
 - f. When there is a spread of infectious disease and staff need to care for a friend or family member that does not reside at their home, staff may use their sick or annual leave for their absence.
 - g. Prior to making any travel arrangements, staff should consult with their manager to determine if travel should be delayed.

- 2) Preparing for an Outbreak:
 - a. Directors will maintain a staff team list with contact numbers.
 - b. Directors will be aware of the critical functions within their area and identify essential duty staff to support those tasks in the event of an outbreak. In all instances, there will be a person identified as a back-up in the event the essential duty staff/point of contact is not available. Our staff will cross-trained to perform essential functions so the workplace can maintain its operations even when key staff are not present.
 - c. Essential duty staff are those who have been pre-identified to perform the critical functions during an infectious disease event. Those staff will be notified of their responsibility and will ensure they have the proper equipment in place to follow through on those activities as required.
 - d. Staff that come down with symptoms while at work should notify their supervisor immediately and prepare to leave the workplace. If necessary, staff should take measures to avoid coming in contact with other staff and children.
 - e. If an employee is confirmed to have the infectious disease, managers should inform fellow staff of their possible exposure to the infectious disease in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).

- 3) When an outbreak occurs:
 - a. Bright Beginnings will follow emergency guidelines as announced by the CDC. If those guidelines are announced after business hours, and include the need to close the office, management will inform members of their team and activate the

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phone tree to ensure staff is notified. The main office phone line will be updated on the office closure status.

- b. Staff that have provided their cell phone number will receive a text alert notifying them of the closure status and other relevant updates.
 - c. If the facility is open but the schools your children attend are closed, and you are not able to locate back-up childcare, you should advise your Director.
- 4) Returning to the facility:
- a. Once the closure is lifted, staff will be informed by their managers and are expected to return to work as normally scheduled.