

Chesapeake Montessori School COVID-19 Mitigation Health Plans

I. Planning to Reopen

- A. COVID-19 team: Shanna Honan (point person), Betsy Gladen, Aeveen Branco, Susan Narducci
- B. Contact information and procedures for reaching the local health department.
Chesapeake Health Department
757-382-8600 Lisa Engle, MD
Emergency # after hours 757-382-6161
Communicable disease 757-382-8721
<https://www.vdh.virginia.gov/chesapeake/>
- C. Plan for health and absenteeism monitoring/approaches
 - i. Daily health checks
 - a) all wear masks at drop off (3 years and up)
 - b) children sent out of the car (3 years and up)
 - c) ask during drop off “have you or anyone in household tested positive for COVID-19 in the last 72 hours”
 - d) take temp upon arrival AND later during the school day (temp taken twice daily)
 - ii. Absenteeism
 - a) Send work home for children and zoom with them if necessary
 - b) use substitutes for sick teachers
 - leave given to take care of themselves or family members who are sick with COVID-19
 - jobs will be safe without retribution
 - iii. If there are any signs of symptoms or sickness IN HOUSEHOLD (students of staff), do not send to school/come to work
- D. Communications strategy
 - i. Orientation and training for staff and students specific to new COVID-19 mitigation strategies during mitigation meeting with all faculty and staff during teacher work week, date of Covid 19 meeting: August 19, 2020 at 9:00 am.
 - ii. Plans for communication with staff, parents, and students of new policies via emails (to include that parents should expect a letter in the mail) and snail mail
 - iii. Plans for how to communicate an outbreak or positive cases detected at the school. email and phone calls (if necessary)
- E. Participate in community response efforts by being the channel of info to parents about strategies in which to mitigate the spread of COVID-19
- F. Medical-grade PPE for staff - we do have medical grade masks and gloves in the event we need to respond to a sick student during school

II. Promoting Behaviors That Reduce Spread of COVID-19

- A. Hand hygiene From CDC website: Follow these five steps every time.
 - i. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
 - ii. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
 - iii. **Scrub** your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.

- iv. **Rinse** your hands well under clean, running water.
 - v. **Dry** your hands using a clean towel or air dry them.
- B. Respiratory etiquette from the CDC website: The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection.
- i. Cover your mouth and nose with a tissue when coughing or sneezing;
 - ii. Use in the nearest waste receptacle to dispose of the tissue after use;
 - iii. Perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub, or antiseptic handwash) after having contact with respiratory secretions and contaminated objects/materials.
- C. Use of cloth face coverings
- i. Masks will be worn by all children 3 years and older until they can physically distance 6 feet apart and if not separated by plexiglass separator
 - ii. Masks will be worn when enter building and cannot take off until they are settled in their assigned space
 - iii. Masks will be sent home to be laundered daily – disposable masks will be provided to children who do not come to school with a clean mask
- D. Staying home when sick - we have an addendum outlined in our parent handbook outlining the requirements to stay home when sick or family members sick with signs/symptoms of COVID-19
- E. Encouraging physical distancing –
- i. we encourage and work with children to understand that it is difficult but necessary for health and safety
 - ii. COVID-19 team also regularly monitors social distancing daily in the classrooms
- F. Maintain adequate supplies to promote healthy hygiene.
- i. Sanitizing products are provided by Cintas – paper towels, toilet paper, gloves, sanitizing and cleaning products, hand soap, hand sanitizing station at front of building
 - ii. Sufficient supplies of masks and gloves on hand, as well as isopropyl alcohol and other approved products listed on the EPA website
- G. Provide signs and messaging to promote healthy hygiene.
- i. Posted CDC posters and CDC handwashing protocol in bathrooms and at all sinks
 - ii. also actively teach children
- H. Promote physical distancing
- i. Layouts of classrooms and communal areas - All classroom will have modified layouts that will accommodate physical distancing and will allow for each child to have their own personal workspace within physical distancing parameters
 - ii. Strategies for snack/lunch (consistent with plans to optimize physical distancing) - Children will eat in their classrooms either at a social distance and/or using a plexiglass shield
- I. **Maintaining Healthy Environments**
- i. Daily health screening questions of staff and students.
 - a. COVID-19 Team will ask staff and parents upon arrival:
 1. “have you or anyone in household been exposed to anyone tested positive for COVID-19 in the last 72 hours”,
 2. “have you given your child anything to reduce or suppress fever this morning”,
 3. “are you experiencing:
 - a) Cough

- b) Shortness of breath or difficulty breathing
 - c) Fever (temperature of 100.4oF or greater)
 - d) Chills
 - e) Muscle pain
 - f) Sore throat
 - g) New loss of taste or smell”
- ii. Hygiene Practices
 - a. Sanitize all hard surfaces included light switches, doorknobs, all handles twice daily
 - b. Sanitize all furniture and all educational games/materials in the classroom at the end of the day
 - c. Schedules for increased cleaning, routine cleaning, and disinfection are kept daily
 - d. Cleaning products are locked inside individual classroom cabinets
 - e. Cintas Sanis cleaning refill station located in mechanical room
 - f. Additional hand sanitizer/handwashing stations
 - g. Hand sanitizing station at the front entrance, front desk, at each computer and in each classroom
 - h. Every classroom has 3-4 sinks available for handwashing (children enter and wash hands first)
 - i. routine cleaning protocol for cleaning surfaces, , do not share supplies,
- iii. Dedicated student supplies, computers, etc.).
 - a. children will be supplied with their own individual pencil bag/box to include all dedicated supplies needed
 - b. hand sanitizer next to computers and laptops to be used before and after use
 - c. Dedicated floor mats will be sent home weekly to be laundered
 - d. Face masks will be sent home daily to be laundered
- iv. Air Doctors and circulation of outdoor air as much as possible
 - a. Each classroom will be supplied with an Air Doctor to help circulate and clean the classroom air
 - b. All classrooms have windows that are open for ventilation daily
 - c. All vents have been cleaned and filters are changed frequently
- v. Drinking fountains
 - a. All have been covered; only refill stations are open for use

J. Maintaining Healthy Operations

- i. Protection for staff and children at higher risk for severe illness from COVID-19.
 - a. Within the context of the programs provided at CMS, we will do our best to accommodate staff and children at higher risk for severe illnesses.
 - b. Staff – beyond wearing masks, social distancing, cleaning, and sanitizing protocol, we can offer to let the staff member at risk stay or work from home if possible
 - c. Children - We have a plan in place for those students at higher risk to potentially offer an online program
- ii. Plans for gatherings, field trips and volunteer restrictions
 - a. For the foreseeable future, we will not go on fieldtrip or have any unnecessary people/volunteers in the building, including parents

- iii. Implement sick leave policies and practices that enable faculty, staff and students to stay home or self-isolate when they are sick or have been exposed.
- iv. If employee contracts COVID-19, they will have sick leave to take care of themselves or family members while sick with COVID-19 without being fired
- v. Train back-up staff to ensure continuity of operations.
- vi. Substitute pool will attend staff COVID-19 meeting during teacher work week

K. Protecting vulnerable individuals (e.g. 65+, underlying health conditions):

- i. Policy options to support those at higher risk for severe illness to limit their exposure risk (e.g. telework, modified job duties, virtual learning opportunities).
- ii. First ask if comfortable with performing duties, wearing mask, exposure to children
- iii. Within the context of the programs provided at CMS, we will do our best to accommodate staff and children at higher risk for severe illnesses.
- iv. Flexible sick leave policies and practices that enable faculty, staff and students to stay home or self-isolate when they are sick or have been exposed
- v. Policy for returning to work after COVID-19 illness
 - a. Any employee returning must have a COVID-19 diagnosis and permission to return to school form from doctor

L. Preparing for When Someone Gets Sick

- i. Separate and isolate those who present with symptoms.
- ii. The ill person will immediately put on a facemask/cloth face covering and will isolate from others
- iii. Person helping sick individual put on a mask and proper PPE
- iv. If a child, Office Administration (COVID-19 Team) will
 - a. put on masks and proper PPE
 - b. remove the child from room with mask on
 - c. immediately notify the parent to come and pick up their child
 - d. advise teachers to empty the classroom/affected of children
 - e. sanitize the room/affected area
- v. Ask the ill person who have they been in close contact with, if able.
- vi. Determine if the person needs medical care.
- vii. Call 911 and notify the operator that the person might have COVID-19 if the person is experiencing any medical emergency or emergency warning signs of COVID-19, including, but not limited to,
 - a. trouble breathing,
 - b. persistent pain or pressure in the chest,
 - c. new confusion or inability to arouse, or
 - d. bluish lips or face,
- viii. Facilitate safe transportation of those of who are sick to home or healthcare facility.
- ix. Most cases of COVID-19 are mild and do not require medical care. In these situations, the ill person can self-isolate at home. If the person is not severely ill, but medical care seems indicated, a healthcare facility OTHER THAN a hospital emergency room should be used (if possible) and contacted prior to arrival (ex. Patient First, PCP).
- x. Require individual to get tested for COVID-19
- xi. Quarantine for 14 days before returning
- xii. Implement cleansing and disinfection procedures of areas used by sick individuals.
- xiii. Person attending to sick individual is to go home, shower and change,
- xiv. Required to get a test
- xv. sanitize offices after child/individual has left the building

- xvi. If comes back positive, communicate with local health dept and parents and begin local procedures of recommendations from health department

M. Planning to close down if necessary, due to severe conditions.

- i. Conditions to trigger a reduction in in-person classes.
- ii. If we have a breakout in a classroom, that classroom will go to an online format for a 2-week period
- iii. Conditions will trigger complete school closure.
 - a. If we have a breakout in multiple classrooms, we will go to an online format for a 2-week period