

Culpeper Baptist Child Development Center Mitigation Strategy

Culpeper Baptist CDC reserves the right to adjust these strategies as deemed necessary based on updated pandemic information or guidance.

Education and childcare providers are being asked to make unprecedented decisions requiring a careful balance between children's physical safety and their social/emotional well-being. Below you will find our strategy for mitigating spread throughout our center; we feel that it is the best option for our children here at Culpeper Baptist CDC. If you have any questions or concerns about this plan, feel free to contact Erica Weaver, Early Childhood Coordinator, at earlyed@culpeperbaptist.org or Nicole Way, Elementary Coordinator, at cdcelementary@culpeperbaptist.org.

Drop-Off / Pick-Up Procedures:

- Current CDC entrances are equipped with signs to enforce social distancing and hand sanitizing stations; all parents are required to wear masks regardless of vaccination status. Staff are required to wear masks while inside the center regardless of vaccination status.
- As often as staffing allows, check in and out for elementary families will be upstairs to divide the population.
- All families are being asked to stop at a main entrance and wait for a staff member to perform health screenings and take each child to his/her classroom; this allows us to limit foot traffic through the building.
- Children are required to either use hand sanitizer or wash their hands at the entrance of the building before joining a classroom.
- COVID-19 related questions will be asked at the door to assess individual family circumstances. See below.

Health Screenings:

- All children will have their temperatures checked before being allowed to move to their classrooms. If a child has a temperature of over 99.5 degrees, we will check for other symptoms and potentially ask the family to wait in a vacant room for fifteen minutes for us to check the child's temperature a second time to determine if the child needs to return home. If a temperature of 99.5-99.9 exists and other symptoms are present, CDC staff may ask for a child not to attend. Children with temperatures over 100 degrees will always be asked to leave the center.
- Siblings will only be sent home if the ill child has multiple symptoms (along with 100 degrees or higher temperature).
- Parents are asked not to give their children fever reducing medications until after the center has the opportunity to check the child's temperature. For example, if a parent wanted to give a fever-reducing medication for the purposes of reducing pain (i.e. Tylenol for teething, a confirmed ear infection, or a headache), the parent may bring said medication to the center to administer at drop-off after the child's temperature is confirmed.
- Children running fevers must stay home for 24 hours after the fever breaks (without fever reducing medication). The only exception is if the child receives a note from a doctor stating that the child's fever is caused by a condition that is not contagious.
- Children who have been in close contact with any person who has tested positive for COVID-19 will be asked to self-isolate/quarantine until the Department of Health has deemed the child safe to return to the center.
- All families will be asked to answer the following questions at drop-off:
 - Have you given your child/children any fever reducing medications in the last four - six hours?

- Are there any household members with any symptoms of COVID-19?
- Are there any household members or contacts of your child who have tested positive for COVID-19?
- Are you or a contact of your child/children planning to be tested for COVID-19 today or are actively waiting for results of a test?
- Is there anyone in your household that is currently quarantining due to infection or exposure of COVID-19?
- If your family would need to answer yes to any of these questions, please keep your children home and call the center so that we can continue our mitigation protocols.

Stable Classrooms:

- Our primary method of limiting spread after a child enters our center is to limit the number of other children and/or adults he/she comes in contact with. This is achieved by maintaining stable class groupings and limiting the interactions between students and switching of staff members among these groupings.
- Classrooms are grouped into stable groupings by age and program. Same aged classrooms sometimes share an opening and closing room along with shared outside playground times but are separated in different areas of the spaces. This way for example, if a child in our four year old Turtle classroom is exposed to COVID-19, the Llama classroom that shares an opening and closing space with them should not be deemed close contacts because of the intentional spacing in the classroom/playground areas.
- Students are not required to wear a mask while inside the center.
- Although meeting ratios and licensing requirements must be a top priority, there will be a limitation placed on staff sharing as much as is feasibly possible.

Increased Cleaning Procedures:

- In response to COVID-19, our cleaning company has increased our end of day cleaning procedure in every classroom and common area in the building. Our center is fully sanitized when staff and children arrive in the mornings.
- Teachers sanitize their rooms every day, taking extra time to wipe down tables, chairs, and other commonly touched classroom items.
 - Gloves must be used when cleaning
 - Cleaning solution should be left on the surface for 2 minutes prior to wiping off.
- Hard toys are being sanitized at the end of the day with disinfectant or by being run through our industrial dishwasher.
- Whenever feasible, children are assigned materials that are specifically theirs to be used in the classroom to limit the sharing of classroom supplies (i.e. playdough, kinetic sand, art supplies, pencils, etc.).
- Throughout the day, children wash their hands when entering the building, entering classrooms, before and after snacks or meals, after going to the bathroom, after coughing or sneezing, and after putting fingers near the eyes, mouth, or nose.

Outside Time:

- Stable groupings established in classrooms are maintained when using playground spaces. No groups mix together on the playground.
- Staff are being encouraged to find additional ways to incorporate outside time into their daily routines, such as taking nature walks around the building, using the blacktop for arts and craft activities, or sitting in the courtyard for a specific lesson or activity.

Communication with Department of Health:

- We have been keeping in close contact with the Department of Health (DOH) regarding COVID positive cases in close proximity to our center. The DOH has guided us along the way in how to handle each individual case.
- If we are alerted by the DOH or one of our center staff/family members that there is a positive case at our center, phone calls will be made to everyone who was a direct contact of the positive individual. Classrooms of positive individuals will be closed for the duration recommended by the DOH, and affected families will be asked to quarantine in accordance with DOH guidance. Contacts of all who are required to quarantine will be alerted via email that they are now “contacts of a contact”. Center-wide announcements will be made accordingly.
- If we are alerted by the DOH or one of our center staff/family members that someone at our center has been in contact with someone who has tested positive for COVID-19, we will alert all affected individuals that they are now considered “contacts of a contact” via email memo.
- The person’s child who was a contact immediately quarantines until it is safe for them to return. Again, we are in frequent contact with DOH and they will advise us for when it is safe for the person(s) to return. The DOH has a policy and plan in place for us if we would have a positive case within our parent or child population.

We will continue to update our mitigation strategy accordingly as new information is provided on the spread of COVID-19. Your child’s well-being is our top priority, and we believe that this plan allows us to best care for his/her physical, emotional, and social well-being. Do not hesitate to contact us with questions or concerns.