

COVID-19 SAFETY PLANNING PROTOCOL FOR LICENSED CHILD CARE FACILITIES

This guidance is designed to help providers and early childhood professionals maintain health and safety standards, in response to the Novel Coronavirus 2019 (COVID-19). Having a response plan with complete steps can make a real difference in ensuring health and safety during a pandemic. To meet this need, all licensed child care facilities are encouraged to have a current safety plan to include the following information. Please utilize the *Health and Safety Required Practices and Guidance for New Mexico Childcare Centers and Early Childhood Professionals*, located on <https://newmexicokids.org> as a guide for completing your safety plan.

***Please note Department of Health (DOH) mandates a safety plan in response to a confirmed COVID-19 case at your facility.**

1. **Facility Information and Contact Numbers:** Create a list of contact numbers that include your regional area's DOH office, county emergency manager, early childhood lead, regulatory staff, and the New Mexico Coronavirus hotline.
2. **Entry Plan:** This plan should provide information on arrival, departure, and daily health checks. Plan needs to include:
 - Minimizing the risk of cross contamination at clock in/out stations.
 - Daily health screening protocols
 - Temperature checks
 - Usage of Personal Protective Equipment (PPE)
 - Observation for signs and symptoms of COVID-19
3. **Preventative Plan:** This plan should provide information on preventative measures, to reduce the risk of spreading or exposure of COVID-19. Plan needs to include:
 - Frequency, duration, and techniques for proper hand washing and teaching
 - Proper usage and storage of face coverings
 - Include cleaning and sanitizing with increased frequency and disinfecting high touched areas throughout the day
 - How, when, and why Personal Protective Equipment should be used and disposed
 - Education provided to children on how germs are spread and how to minimize their risk
4. **Physical Distancing:** This plan should provide information on measures to take to adhere to social distancing requirements while maintaining social connections. This plan needs to include:
 - Maintaining proper space distancing amongst each other
 - Limit group size and observe ratios inside or outside at all times
 - Meal time settings and practices

5. **Suspected/Confirmed COVID-19 Cases:** This plan should provide information on steps to take when signs or symptoms of COVID-19 are observed or notification of a positive COVID-19 test is received. This plan should include:
- Who, how, and when to notify
 - Additional steps to take for deep cleaning and sanitizing
 - Changes to business, such as closures, hours, and protocol for returning to facility

For more information on COVID-19, please visit:

- Centers for Disease Control (CDC): <https://www.cdc.gov>
- NM Department of Health (NMDOH): <https://cv.nmhealth.org/>
- Early Childhood Services: <https://newmexicokids.org>

LA ESPERANZA CHILD DEVELOPMENT CENTER LLC COVID-19 SAFETY PLAN

NAME OF FACILITY: **La Esperanza Child Development Center, LLC**

FACILITY ADDRESS:

5740 Night Whisper Rd NW Suite 200, Albuquerque, NM 87114
 NUMBER STREET CITY STATE ZIP

FACILITY PHONE NUMBER: **(505) 896-6764**

FACILITY ADDRESS:

1721 Wellspring Ave SE, Rio Rancho, NM 87124
 NUMBER STREET CITY STATE ZIP

FACILITY PHONE NUMBER: **(505) 891-2755**



CONTACT NAMES

TELEPHONE NUMBERS

Local Department of Health (DOH) North Valley and Sandoval clinics	North Valley: (505) 222-0361 Sandoval: (505) 867-2291
NM Coronavirus Health Hotline	1 (855) 600-3453
NM Coronavirus Information Hotline	1 (833) 551-0518
ECS Regulatory Staff: Lucille Mizner & Kia Kennedy	(505) 841-4829
County Emergency Manager: Bernalillo: Mike Martindale <mmartindal@bernco.gov> Sandoval: Seth A. Muller <smuller@sandovalcountynm.gov>	Bernalillo: (505) 468-1494 Sandoval: use email
Early Childhood Lead: Ruth Porta	(505) 217-4197

Key Hygiene Practices

1. Wash your hands often with soap and water for at least 20 seconds.
2. Use hand sanitizer that contains at least 60 percent alcohol.
3. Avoid touching your eyes, nose and mouth.
4. Wear cloth face coverings (please see “Face Coverings” section below for important exceptions).
5. Cover your cough or sneeze with a tissue, throw the tissue in the trash, and wash hands thoroughly.
6. Maintain a 6 ft physical distance.
7. Use of humidifier in each classroom.

I. Entry Plan: This plan provides information on arrival, departure, and daily health checks.

A. Arrival Procedures

Arrival Procedures

1. Only staff and children are allowed inside the premises. Visitors and volunteers are banned.
2. Parents hand off children to staff at the entrance door of the center.
3. We have a specific person to walk children to their classroom, this person wears PPE and maintains a 6 ft distance from children that can walk on their own (mostly 2 years and older).
4. If parents are ill, the child are not admitted to the program and will return home with the parent.
5. During drop-off and pick-up times parents need to maintain a 6 feet physical distance from other people and avoid congregating outside or in front of the facility.
6. Front office staff will manually sign-in children in our admin system Procure.
7. Upon entrance to the center staff and children must remove their street shoes and wear shoes designated to the center.
8. Upon entrance to the center, staff must use hand sanitizer before and after signing in and out at the ADP time clock. Then wash hands with soap and water.
9. Upon entrance to their classrooms, children must wash hands with soap and water.
10. Nothing allowed from home other than extra clothing, bedding, diapers, wipes, and water bottle (no toys, bag packs, etc.). Water bottle and face mask must be taken home every day to be properly washed, bring it back next day filled with water.
 - Person Responsible in the ABQ Center:
 - Walking children: Classroom Teacher
 - Sign-in and out: Olga Vandyke and Alejandra Nevarez
 - Person Responsible in the Rio Rancho Center:
 - Walking children: Zoila Hall
 - Sign-in and out: Adriana Cota and Erika Rascon

B. Health Screenings

Health Screening At Entry

1. We take temperatures with a no-contact thermometer and check symptoms for staff, children and parents/guardians upon entry each day and during pick up. Staff taking temperatures and receiving/handling children must wear a combination of a face shield, a N95 mask, a gown and gloves. Temperature is taking outside at the main entrance door under the porch.
2. Any staff member or child or parent guardian with a temperature of 99.1 F or higher, cough, or shortness of breath will be excluded from La Esperanza facilities until they are fever free for 24 hours without the help of medicine.
3. We are asking parents if medications were used to lower the child's temperature or their own temperature, if a household member has travel out of state and if there are any household

members with COVID-19.

4. Staff taking temperature will switch gloves only if staff touches a person. Staff will disinfect no-contact thermometer after the end of the drop-off time (9:30 am) or when staff touches an individual with the thermometer.
 - Person Responsible at the ABQ Center: Ariela Villaescusa
 - Person Responsible at the RR Center: Anahi Gonzalez

C. Daily Health Checks

Daily Health Checks

1. Every day, the teacher in each classroom conducts a health check of each child. This health check is done after the child enters the child care facility and whenever a change in the child's behavior or appearance is noted.
2. The teacher will gain information necessary to complete the daily health check by:
 - Visual body scan of child (check for cuts, blisters, scrapes, rash).
 - Checking ears, nose and mouth (mucus, blood, discharge, blisters)
 - Changing Infant diapers upon arrival, check for rashes.
 - by querying the parent/guardian, and, where applicable,
 - by conversation with the child.
3. Daily health checks seek to identify potential concerns about a child's health including recent illness or injury in the child and the family. Health checks may serve to reduce the transmission of infectious diseases in child care settings by identifying children who should be excluded.
 - Person Responsible: Classroom Teachers

D. Departure Procedures

1. Only staff and children are allowed inside the premises. Visitors and volunteers are banned.
2. Children must remove their childcare shoes and store them in their cubbies with teacher's help.
3. Teacher help child to collect belongings to send home (water bottle, face covering, etc)
4. We have a specific person to walk children from their classrooms to the entrance of the premises, this person wears PPE and maintains a 6 ft distance from children that can walk on their own (mostly 2 years and older).
5. Staff hand off children to families at the premises entrance door.
6. Upon departure we take temperatures of the children, parents, and staff. Any staff member or child or parent guardian with a temperature of 99.1 F or higher will be excluded from La Esperanza's facilities until they are fever free for 24 hours without the help of medicine.
7. If parents are ill, the child are not admitted to the program next day.
8. During drop-off and pick-up times parents need to maintain a 6 feet physical distance from other people and avoid congregating outside or in front of the facility.
9. Front office staff will manually sign-out children in our system Procure.
 - Person Responsible in the ABQ Center:

- Walking children: Classroom Teacher
- Sign-in and out: Olga Vandyke and Alejandra Nevarez
- Person Responsible in the Rio Rancho Center:
 - Walking children: Zoila Hall
 - Sign-in and out: Adriana Cota and Erika Rascon

II. Preventative Plan: This plan provides information on preventative measures, to reduce the risk of spreading & exposure of COVID-19.

A. Hand Washing

1. We practice frequent hand washing with soap and water for at least 20 seconds, and require handwashing upon arriving at the center, when entering the classroom, before meals or snacks, after outside time, before and after diapering, after going to the bathroom, and prior to leaving for home. Constant hand washings were part of our procedures pre COVID-19.
2. Teachers help young children to ensure they are washing their hands effectively. If soap and water are not readily available, using an alcohol-based hand sanitizer with at least 60% alcohol. Supervise children when they use hand sanitizer to prevent ingestion.
3. After assisting children with handwashing, staff also wash their hands.
4. We placed [posters](#) describing handwashing steps near sinks.
5. We advise children, families, and staff to avoid touching their eyes, nose and mouth with unwashed hands.

Additional key times to clean hands include:

1. After blowing one's nose, coughing, or sneezing
2. Before eating or preparing food
3. After contact with animals or pets
4. Before and after providing routine care for another person who needs assistance (e.g., a child)
5. After handling trash
6. After cleaning

B. Face Coverings

Cloth face masks are recommended for everyone in La Esperanza that is three years of age or older. This includes all staff as well as families dropping off and picking up children at the front entrance door. Masks fully cover the nose and mouth without gaps and stay in place without needing adjustments.

Teachers with direct contact with children wear a face shield, cloth face mask and a gown.

Exceptions: Cloth face masks should *not* be placed on children under 3 years of age. In addition, masks should not be placed on anyone who has trouble breathing or is unconscious, incapacitated or otherwise unable to remove the cover without assistance.

Notes: Children between the ages of 3 and 5 must be supervised if they are wearing a mask.

Teachers use their best judgment on when to remove a mask if it is creating discomfort or resulting in a child touching their face frequently. If a child cannot remove the mask on their own, without assistance, even if they are over the age of 3, they should not wear a mask. As always, teachers are aware of choking risks due to masks with ties.

Cloth face coverings should:

1. fit snugly but comfortably against the side of the face
2. be secured with ties or ear loops
3. include multiple layers of fabric
4. allow for breathing without restriction
5. be able to be laundered and machine dried without damage or change to shape

Suggestions to help children become more comfortable with wearing a mask:

1. Show children pictures of other children wearing masks
2. Draw a mask on a favorite book character
3. Discuss how masks help keep everyone healthy

Create and wear masks by following CDC guidance: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Additional information about face coverings:

1. Cloth masks do not provide adequate protection for others if a person has symptoms compatible with COVID-19. Ill children and staff members must stay home. Face shields and face coverings (ideally surgical, otherwise cloth) must be worn by staff at La Esperanza.
2. Be careful not to touch your eyes, nose, or mouth while putting on, wearing, or taking off cloth masks.
3. Wash your hands thoroughly before putting on the mask and after removing it.
4. Masks should be washed after each day of use and anytime they become soiled. It's a good idea to have more than one mask or face covering available to allow time for washing and drying after each use.
5. Wearing cloth masks does not replace the need to continue frequent hand washing, avoiding touching the face, and practicing physical distancing.
6. Cloth face masks are to be removed completely during outside time, snack and meal times. We do not allow children to wear masks around their necks, as that may contaminate their hands and face while they eat.
7. Masks are removed during nap time.
8. When a mask is removed, it is stored in a paper bag with the child's name on it.

C. Cleaning & Sanitizing

1. We increased the frequency to clean toys (at the end of the day or after contamination), equipment, and surfaces, especially doorknobs, check-in counters, and restrooms.
2. We disinfect surfaces and objects that are touched often, including bathrooms, water coolers,

- desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, phones and toys.
3. We use alcohol wipes to clean keyboards and electronics and wash hands after use.
 4. To minimize the potential for the spread of germs, we temporarily removed toys that are not easily cleanable (such as stuffed animals and pillows) and rotate the toys that are in use at any one time so that they can be adequately cleaned and sanitized at the end of the day using the three step procedure: wash with soap, rinse with water, and sanitize.
 5. Teachers are trained to use disinfectants in a safe and effective manner and to clean up potentially infectious materials and body fluid spills – blood, vomit, feces, and urine. Surfaces must be thoroughly cleaned to remove all organic matter before a disinfectant is applied.
 6. Disinfection of outside playgrounds is not necessary or recommended except for cleaning up blood, urine, feces, or vomit.
 7. We adjusted the HVAC system to allow for more fresh air to enter the program space.
 8. We discontinued toothbrushing in our classrooms.
 9. At the end of the day, the premises, furniture and toys are disinfected with a hospital graded electrostatic disinfectant sprayer.
 10. At the end of the day, a cleaning company comes to clean and disinfect floors and restrooms. This has been done for the last 3 years.
 11. In the context of infection control, “deep” cleaning means cleaning surfaces with soap and water and then appropriately using disinfectants on high-touch surfaces. It is especially important to use proper gloves and personal protective equipment (PPE), good ventilation, and thoroughly air out the facility before children and other staff return. (Please see below for more on PPE.)

D. Personal Protective Equipment (PPE)

We required all our staff with a direct contact with families or children to wear: a face shield, face covering and a gown.

Only staff taking temperatures must wear a face shield, N95 mask, a gown and gloves. At the end of the day staff is responsible to properly sanitize their own PPE.

E. Guidelines for talking to children about health and safety

We teach children everyday actions to reduce the spread of germs.

1. Remind children to stay away from people who are coughing, sneezing or otherwise sick.
2. Discuss any new actions that may be taken to help protect children and school staff (e.g., increased handwashing, cancellation of events or activities).
3. Teach them to wash their hands with soap and water for at least 20 seconds, especially after blowing their nose, coughing, or sneezing; before and after going to the bathroom; and before eating or preparing food. Get children into a handwashing habit.
4. If soap and water are not available, teach them to use hand sanitizer. Supervise young children when they use hand sanitizer to prevent them from swallowing alcohol.

Remain calm and reassuring.

1. Remember that children will react to both what you say and how you say it. They will pick up cues from the conversations you have with them and with others.

Make yourself available to listen and to talk.

1. Make time to talk. Be sure children know they can come to you when they have questions.

Avoid language that might blame others and lead to stigma.

1. Remember that viruses can make anyone sick, regardless of a person's race or ethnicity. Avoid making assumptions about who might have COVID-19.

Pay attention to what children see or hear on television, radio, or online.

1. Consider reducing the amount of screen time focused on COVID-19. Too much information on one topic can lead to anxiety.

Provide information that is honest and accurate.

1. Give children information that is truthful and appropriate for their age and development.
2. Talk to children about how some stories on COVID-19 on the Internet and social media may be based on rumors and inaccurate information.

III. Physical Distancing: This plan provides information on measures to take to adhere to social distancing requirements while maintaining social connections.

A. Distancing space

1. Infant teachers avoid getting close to babies' and toddlers' faces when holding them.
2. We do our best to incorporate physical distancing within groups – for nap time, center play and table work.
3. We do not mix or combine groups. We maintain the same groups during the day and from day to day.
4. Outside time is taken by classroom. We use staggered shifts.
5. We incorporate additional outside time.
6. We increased the distance between children during table work. And minimize the time children stand in line.
7. We plan activities that do not require close physical contact between children. We temporarily discontinue the use of water or sand/sensory tables.
8. We limit item sharing. If items are being shared, we remind children not to touch their faces and wash their hands after using these items.
9. Each child has his/her own art material (scissors, crayons, pencils, etc) in a ziplock bag to avoid sharing.

B. Group size and ratios

- Infants: Group of 8 children with a 1:4 teacher to child ratio
- Toddlers and Twos: Group of 12 with a 1:6 teacher to child ratio
- Preschool: Group of 16 with a 1:10 teacher to child ratio
- PreK: Group of 10 or 20 with a 1:10 teacher to child ratio

C. Meals

- Meals and snacks are provided in the classroom.
- We eliminated family-style meals; teachers handle utensils and serve food to reduce the spread of germs.

IV. **Suspected/Confirmed COVID-19 Cases: This plan provides information on steps to take when signs or symptoms of COVID-19 are observed or notification of a positive COVID test is received.**

A. Notification

Staff or children with fever (99.1 F or higher), cough, or shortness of breath or at least two of the following symptoms:

- a. fever
- b. chills
- c. repeated shaking with chills
- d. muscle pain
- e. headache
- f. sore throat
- g. new loss of taste of smell
- h. diarrhea

are excluded from La Esperanza's facilities until diagnosis (doctor's note stating that they are healthy to comeback to childcare).

- Children with household members who are known to have COVID-19 (or who have come into contact with a positive case) are excluded from child care facilities for a minimum of 14 days. This period of time may be prolonged if the child develops symptoms.
- If a child or staff member develops symptoms of COVID-19 (fever of 100.4 F or higher, cough or shortness of breath) while at the facility, we immediately separate the person from the well people until the ill person can leave the facility. Staff or child's parent or guardian will call the DOH Coronavirus Hotline at 1-855-600- 3453.
- If symptoms persist or worsen, staff or child's parents will call a health care provider for further guidance. We will advise the employee or child's parent or caregiver to inform the facility immediately if the person is diagnosed with COVID-19.
- If a child or employee tests positive for COVID-19, we will contact an NMDOH epidemiologist at (505) 827-0006. (This line is open 24 hours per day, 7 days per week, 365 days per year.) A NMDOH epidemiologist will identify the close contacts who will need to quarantine. It is likely that members of the infected person's group would be considered close contacts.
- If we have a confirmed case a child or staff of COVID-19, we will follow the recommendation from the NMDOH epidemiologist and most likely La Esperanza will be closed temporarily. We will immediately air out the facility for 24 hours and then follow the

guidance below on **Recommendations For Cleaning Staff If You Have A Person Who Is Sick At Your Facility** and **Cleaning and Disinfecting Surfaces If You Have A Person Who is Sick At Your Facility**. The duration of closure will depend on multiple factors, including the guidance for the NMDOH epidemiologist, the most up- to-date information about COVID-19 and the specific cases in the impacted community.

- Symptom-free children and staff must not attend or work at another facility; doing so could expose others.
- Staff who refuse to be tested will be excluded from the facility for 14 days. Families of enrolled children who refuse testing for their children will also be excluded from the program for 14 days.
- We will notify families when a family member, a child or staff test positive for COVID-19 as well as the action plan to test given to us by the NMDOH.

B. Deep Cleaning & Disinfecting

Cleaning and Disinfecting Surfaces If You Have A Person Who is Sick (COVID-19) At La Esperanza

1. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
2. For sanitation and disinfection, we use an EPA-registered commercial disinfectants provided by Shamrocks Cleaning Supply
3. Diluted household bleach solutions can be used if appropriate for the surface. We follow manufacturer's instructions for application and proper ventilation. We check to ensure the product is not past its expiration date. We never mix household bleach with ammonia or any other cleanser.
4. For soft (porous) surfaces such as carpeted floor, rugs, and drapes, we remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces.
5. If the items can be laundered, we launder items in accordance with the manufacturer's instructions. Use the warmest appropriate water setting for the items and then dry items completely.
6. We use products with the EPA-approved emerging viral pathogens icon that are suitable for porous surfaces

Recommendations For Cleaning Staff If We Have A Person Who Is Sick At Your Facility

1. Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.
2. Gloves and gowns should be compatible with the disinfectant products being used.
3. Additional Personal Protective Equipment (PPE) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.

4. Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to clean hands after removing gloves.
5. Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves are removed.
6. Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.
7. Cleaning staff and others should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
8. Follow normal preventive actions while at work and home, including cleaning hands and avoiding touching eyes, nose, or mouth with unwashed hands.

C. Changes in business operations

La Esperanza temporarily hours of operations are from 7:30 am to 5:30 pm to accommodate our children's schedules according to our staff schedules to comply with the no-combining groups guideline.

As Director/Owner of this facility, I have ensured that all staff and families have had the opportunity to read and receive this plan and will post this in my facility for future reference.

Sincerely,

Ruth Porta
Administrator