

Health

EssentialsSM

Program Guide

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I. INTRODUCTION

Welcome to the Kiddie Academy *Health EssentialsSM Guide*.

These procedures were compiled by our internal curriculum, safety and operations teams in conjunction with guidelines from the Centers for Disease Control and Prevention (CDC). Health Essentials was initially developed as a comprehensive guide for Kiddie Academy owners and staff, however this version has been created for the benefit of those outside the Kiddie Academy community. This guide is meant to give child care providers and parents the knowledge and tools they need to conduct their daily procedures with health being top of mind.

Since the outbreak of COVID-19 began in the United States, the Kiddie Academy community has responded with unbreakable resolve in the wake of the crisis. Many Kiddie Academy Franchisees offered their services to the men and women of our nation's essential workforce and first responders. Child care remained an essential service throughout the crisis and the valuable teachers and educators across our system stepped up to the challenge admirably. The "essential" nature of Early Childhood Education has always been a cornerstone to Kiddie Academy's philosophy—starting at the heart of our business; the Life Essentials® Curriculum.

Kiddie Academy has maintained strict health and safety guidelines through our Guide to Daily Procedures. However, as a result of COVID-19, the topic of health precautions is increasingly important in the Early Childhood Education industry. This guide introduces a new and advanced perspective on health and safety along with tools, references and materials at your disposal. Your goal will be to uphold the highest level of cleanliness and health precautions for proper child care delivery.

We thank our Kiddie Academy family for their continued support and assistance in implementing these precautions developed for the safety of the families they serve, staff in their classroom and children in their care. And we thank you for considering how you can better serve your own families, staff and children.

II. EXECUTIVE SUMMARY

Health Essentials is a set of standard operating procedures that, when implemented properly, can help mitigate the spread of infectious pathogens within a child care or home setting. This guide will begin by outlining the Four Principles of *Health Essentials* followed by in-depth details of each principle along with implementation strategies. Proper implementation of all four principles is critical to ensure the health and safety of the children in your care.

Notable Changes to Daily Procedures include:

- Educating all staff on prevention of infectious disease spread
- Use of facemasks by all staff is highly advised
- Temperature monitoring at drop-off
- Teachers escorting of children to and from their classrooms
- Heightened cleaning procedures
- Suspension of family-style dining and sensory play
- Focus on individual learning: Increased number of learning centers in order to avoid large groups
- Symptom monitoring and strict enforcement of sickness policy

Successful implementation will require you and your entire team's dedication to the recommendations below. We have organized the resources for you in order to facilitate easy implementation.

III. THE FOUR PRINCIPLES OF *HEALTH ESSENTIALS*

Below you will find a brief summary of each principle:

- a. **Wellness Education** – *Education is the first step to prevent the spread of pathogens.*

Kiddie Academy has identified several methods to extend training on the proven methods to limit the spread of diseases to teachers and staff nationwide. These trainings come at little to no cost and can be completed online. The purpose of training is to give yourself and your team a foundation of knowledge when it comes to health and safety. Children also must be aware of the changes and why their daily activities may be altered. Their participation is key in preventing spread.

- b. **Healthy Environment** – *Enhanced cleaning and disinfecting.*

Cleanliness is one of the best ways to prevent the spread of germs – it also provides peace of mind for parents and staff. This principle discusses the advanced procedures and guidelines to ensuring a safe environment for children to learn and play.

- c. **Enhanced Hygiene** – *Implementation of enhanced handwashing and other personal cleanliness procedures.*

A simple combination of soap and water is the best prevention to combat infection and the spread of germs. This principle outlines hygienic procedures as recommended by the CDC. Enhanced hygiene applies to both children and staff.

- d. **Symptom Monitoring** – *Keeping a watchful eye for illness throughout the day.*

Once your preventative measures have been put in place, everyone in your care should remain vigilant in observing and isolating symptomatic children from others.

WELLNESS EDUCATION

This principle is divided into two sections: education of staff and education of children. By imparting this understanding to all teachers and children, you will achieve better participation in cleanliness procedures.

Educating Staff

All staff should undergo specific training in order to have a greater understanding of pathogens and how they spread in a classroom setting.

Here are some suggested trainings for yourself and your staff:

- [Universal Precautions Training](#): This comprehensive training through the University of Iowa is free of cost and available online 24/7.
- [Willow Communication Strategies Universal Precautions](#): This training covers bloodborne pathogens, universal precautions, transmission-based precautions, hand hygiene and minimizing exposure. This course has a \$25 cost.
- [Bloodborne Pathogens Certification Course](#) (National CPR Foundation)

How to Properly Use Facemasks/Cloth Face Coverings (for Staff)

- Fit snugly but comfortably against the side of the face.
- Be secured with ties or ear loops.
- Include multiple layers of fabric.
- Allow for breathing without restriction.
- Be able to be laundered and machine dried without damage or change to shape.
- **Cloth face coverings should not be placed on young children under age two, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.**
- Do not use a facemask meant for a healthcare worker.

Other Best Practices

- Continue to keep about 6 feet between yourself and others, if possible. The cloth face cover is not a substitute for social distancing.

- If using handmade coverings, consider using bright colors and child-friendly designs.
- Consider a demonstration to the children so they won't be afraid.
- At the end of your shift, remove and discard/laundry PPE before leaving.
- Keep in mind that the face cover is meant to protect other people in case you are unknowingly infected.

Educating Children

Children should be reassured that changes in their daily routine such as keeping distance from others is only temporary and done as a precaution. If teachers are using facemasks, allow children time to adjust and calmly explain their use.

Classroom Guidelines for COVID-19

- Follow state-mandated group sizes and keep children in their designated classrooms. Child care providers should contact your state licensing agency for assistance.
- Consider opening more learning centers with smaller group sizes.
 - Learning centers can be added outside.
 - Number of learning centers correspond to the number of children in the room. For example, if there are six children in a room, open six learning centers.
- Avoid combining classrooms.
- Avoid games that require holding hands, touching, etc.
 - Social distance activities include: Drawing, painting, performing skits, reading a story, obstacle courses, races, etc.
- Utilize tape to mark the floor for social distancing. Indicate where children should line up, stand, etc.
- To limit the amount of interpersonal contact between large numbers of people, reduce floaters and classroom teacher changes.
- One child in the bathroom at a time, if possible.
- No use of water fountains.
- Do not share supplies across different classrooms.
- Family-style dining is suspended.

- In its place, teachers can serve portions in smaller groups. Split up tables and limit the number of chairs per table.
- Sensory learning should be suspended – no sensory tables, no playdough or other softer toys that harbor germs and are challenging to disinfect.

Nap Time

- Increase distance between cots to six feet, where possible.
 - If spacing is tight, remember to place children head-to-toe, or toe-to-toe if space permits.
- Label cots with children's names.
- Supply bedding if you have it and launder daily.

HEALTHY ENVIRONMENT

A routinely cleaned facility provides parents with the greatest comfort that their children are cared for and safe from unnecessary exposure to germs. Many of these recommendations match the current Health and Safety policy with a few distinct changes to address COVID-19. This section will also discuss several methods to avoid unnecessary exposure to pathogens.

Cleaning can be done at the beginning of a work shift, during naptime, while children are at the playground and at the end of the day.

The Right Cleaning Solution

The proper bleach mixture for combating COVID-19 is slightly stronger than normal:

- 5 Tablespoons (1/3 cup) of bleach per gallon of water or;
- 4 Teaspoons of bleach per quart of water

This bleach/water solution loses its potency over a 24-hour period. Therefore, the solution must be mixed each day.

Contaminated areas require a stronger solution of ½ cup bleach to 1-gallon water when disinfecting areas exposed to vomit or feces.

Warning: All spray bottles used for classroom sanitation must be labeled with the contents of the bottle. All cleaning supplies are to be kept in the locked utility closet. Cleaning supply bottles are always to be kept out of reach of children.

General Cleaning Frequency

High touch surfaces and toys are to be disinfected with a standard bleach solution. The bleach solution should be made daily and kept in appropriately labeled spray bottles, out of reach of children. Do not store bleach in the classroom. You may consider having one staff member act as a full-time Cleaning Specialist as cleanliness is now a major aspect of your business offering.

Bleach solution is used for disinfecting:

Item/Area	Cleaning Frequency
Eating tables and highchairs	Before and after use and at the end of the day
Kitchen countertops	Throughout the day and at the end of the day
Changing tables	After each use and at the end of the day
Bathrooms	Throughout the day and at the end of the day
Sinks, toilets and water fountains	Throughout the day and at the end of the day
Cots	Throughout the day
Infant toys	After each use and all toys at the end of the day
Toddler toys	Throughout the day and all toys at the end of each day
Preschool toys	Throughout the day and all toys at the end of the day
Classroom tables and chairs	Throughout the day and again at the end of the day
Playground equipment	After each playground session
Low shelves, doorknobs, other surfaces frequently touched by children	Disinfect frequently throughout the day
Hardwood/laminate floors	Mopped with disinfectant-grade water/bleach mixture upon closing of the room each day
Carpets	Vacuumed daily/Shampoo several times a year

Disinfecting Hard Surfaces

1. Wear disposable gloves for cleaning and use disposable paper towels throughout the process.
2. Clean the soiled surface with soap and water.
3. Disinfect with the recommended bleach solution (If a mop is used, rinse in bleach solution when finished).
4. A 'set time' of at least 90 seconds is required for the solution to take full effect in killing bacteria and viruses.
5. Dispose of the gloves in a covered, plastic-lined waste container.
6. Wash hands thoroughly.

Cleaning Manipulatives

- Items brought from home such as stuffed animals, soft items, blankets, etc. temporarily are not allowed during the outbreak.
- All toys should be disinfected several times daily. Any toy that becomes soiled by bodily fluid should be removed immediately and placed in a designated 'dirty toy bin' to be disinfected.
- Manipulatives should be rotated throughout the day to allow for disinfecting, however, do not rotate toys across multiple children prior to cleaning.
- Mouthed toys are removed immediately upon the child losing interest in the toy and placed in the dirty toy bin to be disinfected.
- Any soft toys that remain in the classroom should be laundered daily.

Cleaning Playground Equipment

Check your playground equipment provider's recommendations for disinfecting guidelines. The solution should be rinsed and dried after cleaning. Do not mix other cleaners with the bleach solution.

Laundering Soft Items

Viruses can potentially live on soft items for a few hours to even a few days. Extra precautions should be taken.

- Bedding should be laundered daily:

- Academies that provide laundering services can do so daily.
- Alternatively, parents should take sheets/blankets home each day to be laundered.
- Soft items that cannot be laundered daily should be removed from the classroom during an outbreak.

Professional Cleaning

Professionally clean your entire facility multiple times per week along with standard staff cleaning procedures throughout the day. Cleaning five nights per week (Mon-Fri) is advisable for the foreseeable future.

Avoiding Exposure

- It is strongly advised that all staff wear facemasks while in the classroom. Consider using face shields instead of masks for infant teachers. Please be sure to observe any local rules or regulations that require masks to be worn.
- Delivery persons should drop deliveries in the vestibule to be brought in later.
- Limit outside visitors/vendors.
- A daily reminder to keep children home if he/she is not feeling well should appear as a note at the top of daily reports.
- Outside items such as sippy cups, toys and stuffed animals may not be brought from home.

ENHANCED HYGENE

Handwashing is the gold standard of illness prevention. Increasing the frequency and quality (length) of handwashing techniques will greatly reduce the chance of disease spread.

Proper Handwashing:

For handwashing to be effective, the children and staff must follow all steps below. Young children often skip steps, so it is critical that handwashing be a supervised activity and children are constantly walked through all eight steps. In order to allow soap to properly remove germs, bacteria and viruses, hands should be washed for at least 20 seconds.

- Step 1: Wet hands with warm water
- Step 2: Apply soap
- Step 3: Rub hands together for 20 seconds
- Step 4: Wash under fingernails
- Step 5: Rinse hands
- Step 6: Dry hands with paper towel
- Step 7: Use paper towel to turn off faucet
- Step 8: Dispose of paper towel after use

The following are handwashing trigger points for children and staff:

Children

- Immediately upon arrival
- When re-entering the classroom after exiting
- When hands are visibly dirty
- Before eating
- After using the bathroom
- After returning from the playground

Staff

- Immediately after arriving
- When re-entering after leaving temporarily
- When re-entering the classroom after exiting
- When hands are visibly dirty
- Before eating
- Before, during and after preparing food
- Before and after treating a cut or wound
- After using the bathroom
- After handling trash
- After cleaning the classroom

Staff should wear gloves when doing any of the following:

- Serving food
- Changing diapers
- Assisting children in the bathroom
- Wiping noses

Diaper Changing

The following diaper-changing procedure should always be followed, and is critically important to follow during outbreaks, as many germs and diseases are carried in fecal matter.

Diapering Procedure



1

GET ORGANIZED

Wash your hands.

Gather what you need:

- ✓ non-absorbent, disposable paper (recommended) or pad
- ✓ fresh diaper
- ✓ clean clothes (if necessary)
- ✓ plastic bag for soiled items
- ✓ disposable wipes
- ✓ gloves (recommended)
- ✓ diaper cream, removed from container and placed on a disposable tissue

Put on disposable gloves.



2

CARRY CHILD TO DIAPERING AREA

Avoid contact with clothing soiled with urine or stool (germs).

- Gently place child on diapering surface.

Always keep a hand on the child.

- Remove child's clothes, shoes and socks as needed.
- Place soiled clothes in plastic bag. Close securely for sending home. Do not rinse.



3

CLEAN THE CHILD

- Remove stool and urine from front to back.
- Use fresh wipe or dampened paper towel with each front to back cleaning.
- Place soiled wipe or paper towel in plastic-lined, hands-free, covered trash receptacle.



4

REMOVE SOILED DIAPER

IMMEDIATELY put disposable diaper in a plastic-lined, hands-free, covered trash receptacle.

Put soiled reusable diaper and/or soiled clothes in a plastic bag, close securely, for sending home. Do not rinse.

Remove gloves.

Dispose of immediately.

Clean your hands with a disposable wipe.

Clean the child's hands with a fresh disposable wipe.

If disposable paper is used, fold from the feet over any spills under the child.



5

PUT A CLEAN DIAPER ON THE CHILD

- Slide fresh diaper under child.
- Use tissue to apply needed diapering cream. Discard tissue in plastic-lined, hands-free, covered trash receptacle.
- Adjust and fasten diaper.
- Finish clothing child.



6

WASH CHILD'S HANDS

Take child to the sink. Hold child and wash child's hands with soap and water.

If child can stand, wash your hands in the adult hand washing sink and then assist child as necessary to wash their hands in the child handwashing sink.

If you are unable to hold the child for handwashing and the child cannot stand at the sink, use commercial disposable wipe to clean child's hands: between fingers, and both sides to the wrist. OR use the three paper towel method: the first clamp and soapy for washing, the second clamp for rinsing and the third to dry hands.

Return child to supervised area.



7

CLEAN, RINSE, SANITIZE DIAPERING AREA

- If paper liner is used, dispose of paper liner in a plastic-lined, hands-free, covered trash receptacle.
- Spray and wipe **entire** diapering area with detergent solution.
- Rinse with water.
- Spray **entire** diapering area with sanitizing solution.

If a pad is used: spray both sides of the pad and the changing table surface with detergent solution. Rinse with water. Spray both sides of the pad and the changing table surface with sanitizing solution.

Let sanitizing solution sit for 2 minutes. Air-dry or wipe dry.



8

WASH YOUR HANDS

- Put cleaning and sanitizing solutions away.
- Wash your hands.

Record diaper change, diaper's contents, and any problems in daily log.

North Carolina Child Care Health & Safety Resource Center • 1.800.367.2229 • www.healthyschoolcare.org • The development, translation, and testing of the Diapering Procedure Poster are supported by funding from the Child Care and Development Fund Block Grant of the Child Care Bureau, Administration on Children and Families, USHHS, through a contract between the NC Division of Child Development, NCDHHS, and the Department of Maternal and Child Health, School of Public Health, The University of North Carolina at Chapel Hill.

SYMPTOM MONITORING

Observing signs of illness and taking the appropriate action is critical. This requires dedication from you, your staff and parents. This principle can be broken down into two categories: Admittance Procedures and Monitoring Procedures.

Admittance Procedures:

Admittance during an outbreak requires a two-person team. Position one staff member in PPE in your vestibule or outside during drop-off times to institute precautionary symptom checking before admittance into the lobby of the Academy. The PPE should include a facemask, latex gloves, goggles/face shield (optional), and a touchless thermometer. No child should be admitted if they have a fever or any common infectious-disease symptoms. A second staff member will remain in the lobby to escort fever-free children to their respective classrooms.

Prior to arrival, parents should notify you if their children or anyone else in the household is ill. Instituting a staggered drop-off can eliminate overcrowding and increase social distancing. This can be done in 10-minute intervals with two to three families arriving every 10 minutes*. Alternatively, you may request that parents wait in their vehicle until you are ready for them to enter.

**Document sharing platforms such as Google Sheets can help facilitate sign up for drop-off times. The image below provides an example template for a simple drop off sheet. Three parents may arrive every ten minutes and must wait for the previous family to complete their drop-off before entry.*

Drop-Off Times	Slot 1 (Name)	Slot 2 (Name)	Slot 3 (Name)
6:30-6:40			
6:40-6:50			
6:50-7:00			
7:00-7:10			
7:10-7:20			
7:20-7:30			
7:30-7:40			
7:40-7:50			
7:50-8:00			
8:00-8:10			
8:10-8:20			
8:20-8:30			
8:30-8:40			
8:40-8:50			
8:50-9:00			

Here are the stages of admittance:

1. Upon arrival, make a visual inspection of child – look for flushed cheeks, rapid breathing, difficulty breathing, fatigue or extreme fussiness. Other, less serious, symptoms can include a runny nose and watery eyes.
2. Check temperature of child using the touchless thermometer: Children with a temperature of 100.4 degrees F (38.0 degrees C) or higher should **not** be admitted into the Academy. Children may not return to care for a period of 48-72 hours after the fever has dissipated. *
3. Record the child’s name, drop-off time and temperature.
4. Children with a temperature lower than 100.4 degrees F and no symptoms can be escorted by a second staff member to their classroom.
5. Sanitize the thermometer with an alcohol-based wipe.

**The state of New Jersey requires that staff ask families if the child has taken any temperature-controlling medication (Tylenol, Motrin, etc.) and if anyone in the household is not feeling well. This may be a best practice nationwide.*

Monitoring Procedures:

- All staff must stay vigilant during the day to look for potential symptoms exhibited by children in their care.
- Children with even mild symptoms should have their temperature checked and isolated from others.
- If a child is sick, contact the parent/guardian to have them picked up as soon as possible. Common symptoms of infectious disease can include flushed cheeks, cough, sneezing, fussiness, fatigue, breathing difficulties and high temperature.
- When a child is picked up due to the child showing symptoms of illness, consider whether or not the parent/guardian should fill out your standard illness report upon arrival.
- Children must have temperature of less than 100.4 degrees F for 48-72 hours before returning to their classroom.

VI. IMPORTANT WARNINGS

- Children under the age of 2 should not wear a face covering. We do not currently recommend using face covering for any children. However, this remains at your or the parent's discretion or as required by state licensing authorities.
- Keep bleach and bleach solutions out of children's reach.
- Swallowing alcohol-based hand sanitizers can cause alcohol poisoning. Do not place dispensers in classrooms, keep them at least 5 feet from the ground and out of children's reach. Hand sanitizer use is permitted for adults only.
- Harsh cleaning chemicals such as pure bleach should only be used after-hours.
- Do not physically force children to socially distance from one another.

VII. ADDITIONAL RESOURCES

The resources below are hyperlinked for easy access:

COVID-19 Related Resources:

- [CDC Child Care Guidelines](#)
- [Making A Difference During COVID-19](#)

While the Health EssentialsSM Guide is intended to meet or exceed all applicable requirements, please be aware that local, state or federal governmental authorities or health officials may recommend or require different or additional health and safety precautions. In the event that the requirements of such authorities or health officials conflict with or exceed the recommendations in the Health EssentialsSM Guide, you should always observe the guidance and precautions issued by those authorities or health officials.