

Austin Montessori School

Operating Plan Summer 2020

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Overview

After considerable planning and deliberation, Austin Montessori School has decided to reopen our campuses on June 4, 2020, for all-day, all-year students, and as previously scheduled, on June 8, for summer camp students. Reopening AMS campuses entails some increased risk of contracting the COVID-19 virus for all concerned because attending school involves daily human contact among children and staff, who will then be in contact with others in their own homes. Our decision to reopen our campuses recognizes that (1) for AMS families and staff, that risk is balanced against the educational, social, economic and other costs of remaining closed, (2) our school must reopen with many new health and safety protocols to do everything we can to responsibly mitigate that risk to the extent possible, and (3) each family and staff member must decide how to balance those risks, and whether to return to campus.

Our classroom environments are designed to harness the developmental forces of each plane of a child's development for the child's own optimal self-construction through experiential interactions with the environment. Our ability to guide that development is diminished in the absence of a face-to-face learning environment. By reopening our campuses we are aiming to fulfill the mission of Austin Montessori School, which is to guide the intellectual and character development of each child along a path towards his full and unknown potential, in ways that honor the complementary needs of the individual and the group.

This document explains the policies and procedures we are employing to mitigate COVID-related risks at school. That approach is built around intensive new health monitoring and screening procedures, as well as new classroom/school day procedures designed to reduce the number of contacts during the school day and limit the group size and interactions. These procedures will not require young children to wear masks in the classroom (though guides will wear masks most of the time) or to observe the social distancing rules expected of older children and adults. We do not believe it is possible to enforce those restrictions with our younger children. Nevertheless, we believe reopening with these new protocols represents an important first step in responsibly living with this virus.

In sum, AMS has concluded that reopening our campuses under these conditions is in the best interest of the community and that each AMS family will make its own decision about the balance of risk, and what is best for their children. The information in this document will provide clarity around the practices and procedures AMS has established to minimize exposure to our community but in no way warrants that COVID-19 or other communicable disease infection will not occur through participation in our programs.

All Day / All Year Program Summary

June 4, 2020 - July 31, 2020

Hours

Program Hours: 8:00 am - 3:15pm

Arrival: 8:00 - 8:15 am

Departure: 3:00 - 3:15 pm

Locations and Staffing

Cypress Cottage

- Location 1 - Cypress Cottage, 5010 Sunset Trail, Extension 16
 - Elizabeth Suggs (G), Cristina Cortina
- Location 2 - Redbud Cottage, 5014 Sunset Trail, Extension 18
 - Angela Eagle (G), Amanda Herrera

Magnolia Cottage

- Location 1 - Magnolia Cottage, 5012 Sunset Trail, Extension 17
 - Amelia Combes (G), Jessica Kago
- Location 2 - Laurel Cottage, 5016 Sunset Trail, Extension 19
 - Danielle Kimball (G), Acacia Covington

Pomegranate Cottage

- 6817 Great Northern Blvd, 512-450-1940
 - Jessenia Giron (G), Charity Stukenborg

Parent Contact/Communication

Email and phone

Each guide has a school email address for parent communications. Guides will respond to emails within 24 hours during the week. Guides do not respond to phone messages during the day.

Time-sensitive contact with guides can be facilitated by calling the main office and/or emailing info@austinmontessori.org

Conferences

Conferences will be held by the guide via zoom as needed or as requested by the guide or parent.

Observations

Due to restrictions in place to mitigate the spread of COVID-19, regular parent observations are suspended.

Parent Gatherings

Parent gatherings will occur via zoom and will be communicated to families at least 1 week in advance.

Children's Meals

Snack

Our daily snack consists of fresh and organic fruit and vegetables, fresh-baked bread, and an assortment of nuts. Snacks will be prepared and served by the adult during scheduled snack time for each community. Family style snack offerings have been suspended.

Lunch

All of the children enjoy their lunch in our environment. At arrival, each child brings their lunch box and places it on the shelf as part of his arrival routine. For more information regarding lunch policies please refer to AMS Food and Nutrition Policies, AMS Community Handbook.

Arrival and Departure

Our existing assisted arrival and departure procedures, with added procedures for [health screening](#) and [hand hygiene](#), meet the [state guidelines](#) for social distancing and limited contact.

Assisted Arrival

- Assisted Arrival for all Children's House Communities will be from 8:00 to 8:15 am
- Walk-up arrivals cannot be facilitated during this time.
- Parents must wear a face mask during assisted arrival.
- The same parent or designated person should drop off the child each day.
- Each child must have had a [Health Screening](#) completed and logged by parent prior to arrival that morning.
- Lunch box/bag items go on the floorboard of the car below the seat.
- Drive your vehicle parallel to the curb, pulling in as close as you can get.
- Stop at the designated arrival/departure area for your community.
- Staff will walk to your car to greet your child. We ask that your child remain seated with his seatbelt on.
- A staff member will take your child's temperature using a contactless thermometer prior to your child leaving the vehicle.
 - If your child has a temperature of over 99.6, the staff member will verify the temperature with another thermometer.
 - A child with a temperature of over 99.6°F will not be admitted.
- Your child will be invited to unbuckle the seat belt or be assisted as needed.
- As soon as your car door closes and your child is safely away from the car, you may pull up to await your turn to enter traffic and proceed toward Jones Road.
- Staff members will clean hands after each child's arrival

Late arrival - Late arrival must be scheduled in advance with the main office. Please follow this procedure:

- Contact the Main Office and indicate the exact time of your child's late arrival.
- Office Staff will notify the classroom community to make arrangements for receiving the child at the pre-arranged late arrival time.
- At the pre-arranged late arrival time, please pull up to the curb and wait.
- Classroom assistant will observe the arrival area at the pre-arranged late arrival time and proceed to assist the child with arrival following the regular arrival procedures.

Assisted Departure

- Assisted Departure for all Children's House Communities will be from 3:00 to 3:20 pm
- Walk-up departures cannot be facilitated during this time.
- Parents must wear a face mask during assisted departure.
- Please pull up and park at the designated arrival/departure location for your community.
- Wait in your car and your child will be walked to you and helped inside the car.
- Once your child is in the car, pull up to the driveway to finalize buckling your child in their car seat.

Early Departure - Early departure must be scheduled in advance with the guide and the main office. Please follow this procedure:

- Notify your guide via email that you will need to pick your child up early.
- Contact the Main Office and indicate the exact time of your child's early departure.
- Office Staff will notify the classroom community to make arrangements for assisting the child with departure at the pre-arranged early departure time.
- At the pre-arranged early departure time, please pull up to the curb and wait.
- Classroom assistant will observe the departure area at the pre-arranged early departure time and proceed to assist the child with departure following the regular departure procedures.

Summer Camp Program Summary

June 8, 2020 - July 31, 2020

Hours

Program Hours: 8:00 am - 3:15pm

Arrival: 8:00 - 8:15 am

Departure: 3:00 - 3:15 pm

Locations and Staffing

Group 1 - Clubhouse, 5006 Sunset Trail

Group 2 - Heartsong, 5008 Sunset Trail

Staff: Juliana Levy, Susan Sloane, Emily Curry, Mireille Bond, Kati Mellor

Specific Program details, including groups, staffing, and topics will be emailed to campers upon final confirmation of enrollment.

Additional Policies and Procedures to Mitigate Spread of COVID-19

[Face Coverings](#)

[Health Screening](#)

[COVID-19 Symptoms at School - Children](#)

[COVID-19 Symptoms at School - Staff](#)

[COVID-19 Exposure - Staff and Children](#)

[Positive Case of COVID-19 in the Classroom Community - Children or Staff](#)

[Contact Tracing](#)

[Communication](#)

[Monitoring Absenteeism](#)

[Physical Distancing Strategies](#)

[Healthy Hand Hygiene](#)

[Cleaning and Disinfecting](#)

General Preparedness and Planning

Austin Montessori School has and will continue to collaborate, share information, and review plans with local health officials to help protect the whole school community. School plans are designed to complement other community mitigation strategies to protect high-risk populations and the healthcare system, and minimize disruption to teaching and learning.

This document was compiled using the COVID-19 guidelines and recommendations for schools and childcare programs published by the CDC, State of Texas, and the City of Austin. AMS operating procedures meet or exceed the minimum standards of care and will be updated as new information or additional guidelines are made available.

[State of Texas Minimum Standard Health Protocols - 5/18/2020](#)

[CDC Guidance for Child Care Programs that Remain Open](#)

[CDC Guidance for Schools and Child Care](#)

[CDC Considerations for Schools](#)

Training

Staff must be familiar with and receive ongoing training regarding State, CDC and City of Austin recommendations and requirements.

[State of Texas Minimum Standard Health Protocols - 5/18/2020](#)

[CDC Guidance for Child Care Programs that Remain Open](#)

[CDC Guidance for Schools and Child Care](#)

Training Sessions for Summer 2020 will cover all topics in this document. All Summer staff must take the following training online:

[Special Considerations for Infection Control during COVID-19](#)

[Providing High Quality Experiences during COVID-19 for Emergency Child Care Settings](#)

Face Coverings

Face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Face coverings are not surgical masks, respirators, or other medical personal protective equipment. Please note that due to the nature of some of the presentations given in our early childhood programs, face coverings may be removed for part or all of the presentation.

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>

Staff

Staff will be required to wear face coverings at the following times:

- Assisted arrival and departure
- When performing health screening of staff and children
- When working in the classroom except during presentations that require clear articulation and visibility of mouth such as:
 - Language exercises and presentations
- When assisting an ill child or staff member

Children

Children in our programs are not required to wear face coverings.

Parents and guests

Parents and guests are required to wear a face-covering at the following times:

- Assisted arrival and departure
- When on-campus

Health Screening

Daily employee and child health screenings are important to help reduce the transmission of COVID-19 at school.

This section covers the following Health Screening Topics:

- **Health and Temperature Screening Protocol**
- **Staff Self-Screening Prior to Arrival at School**
- **Staff Screening at School**
- **Parent Screening of Child Prior to Arrival at School**
- **Staff Screening of Child at School**

Health and Temperature Screening Protocol

All children and staff who meet any of the criteria below will be denied entry:

- Temperature over 99.6°F (Note: while state guidelines specify 100.4°F or above, staff will follow the 99.6°F temperature threshold set by the [City of Austin Health Authority](#)). Ask if medications were used to lower an individual's temperature.
- Any of the following symptoms if the symptom is of greater intensity or frequency than what is normally experienced:
 - Cough
 - Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Muscle pain
 - Headache
 - Sore throat
 - Loss of taste or smell
 - Diarrhea
- In the previous 14 days has had contact with someone with a confirmed diagnosis of COVID-19;
- Is under investigation for COVID-19; or
- In the previous 14 days, has traveled to another state or another country. A negative COVID-19 test result taken at day 7 will allow re-entry into the program.

Staff Self-Screening Prior to Arrival at School

Staff members will conduct self-screening prior to arrival at school. If a staff member self-identifies as having symptoms listed in the screening criteria above, she/he will contact the designated administrator, not come into work, and follow the procedures in the section: [COVID-19 Symptoms at School - Staff](#).

Staff Screening at School

A designated Administrative Staff Member will conduct and record Staff Health Screening for each staff member upon arrival at school.

Parent Screening of Child Prior to Morning Arrival

Parents are encouraged to be on the alert for signs of illness in their children and to keep them home when they are sick. Parents are required to conduct the pre-screening each day at home. Parents who have not completed pre-screening prior to arrival must complete it prior to the child entering the program.

Staff Screening of Child at School

- Upon arrival, a staff member will take your child's temperature using a contactless thermometer.
 - If the child has a temperature of over 99.6°F, the staff member will verify the temperature with another thermometer.
 - A child with a temperature of over 99.6°F will not be admitted.
- Staff will conduct and log the temperature checks of each child and adult in the community three times each day. (At arrival, before lunch, prior to departure)
- Staff will make a visual inspection of the child for signs of illness which could include flushed cheeks, rapid breathing, or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness. If the child exhibits any of these symptoms at arrival or at any point during the day, the child will be isolated and parents will be required to pick up their child.

COVID-19 Symptoms and COVID-19 Cases in School

This section provides details and procedures for the COVID-19 Symptom, Exposure, and Diagnosis within the school community:

- **COVID-19 Symptoms at School - Children**
- **COVID-19 Symptoms at School - Staff**
- **COVID-19 Exposure - Staff and Children**
- **Positive Case of COVID-19 in the Classroom Community - Children or Staff**

COVID-19 Symptoms at School - Children

If COVID-19 symptoms begin while at school, the child must be sent home as soon as possible. Sick children will be kept separate from well children and staff contact will be limited as much as reasonably possible, while ensuring the safety and supervision of the child until they leave.

- Classroom staff will follow these isolation procedures:
 - Classroom staff will offer the child a disposable face mask but will not require the child to wear it.
 - Classroom staff will take the child to the Isolation location in the main office:
 - Isolation location #1: Main office, front office
 - Isolation location #2: Main office, middle office or back office
 - The classroom staff will inform the office staff of symptoms exhibited.
 - Office staff will contact parents to come to school to pick up the child.
 - The office staff will supervise the child until the parent arrives.
 - Once a parent has left with the ill child, the isolation room is cleaned and sanitized by office staff.

- Materials, toys, and furniture touched by the child who is sent home will be thoroughly cleaned and disinfected.
- Families are encouraged to coordinate decision-making around the child's care with the family health care provider if there are specific health concerns, chronic disease, or complex social or emotional dynamics in the home.
- In the case of a child who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the child is assumed to have COVID-19, and cannot return to the community until the individual has met the criteria for return under [Children or Staff with Positive Case of COVID-19](#)
- A child who has exhibited symptoms that could be COVID-19 can return to school if the parent has obtained a medical professional's note clearing the individual for return based on a negative COVID19 test and an alternative diagnosis.

COVID-19 Symptoms at School - Staff

Staff is encouraged to monitor their health and required to perform daily health screenings for symptoms of COVID-19. Staff is encouraged to stay home if they are exhibiting symptoms of COVID-19 and to contact their healthcare provider.

- Staff exhibiting new or worsening symptoms of possible COVID-19 at school should:
 - Put on a disposable face covering
 - Leave the classroom
 - Complete the [Texas Health Trace COVID-19 Self Checker](#)
 - Obtain a COVID-19 test - [Test Collection Sites](#)
 - Follow the recommendations of their healthcare provider
- In the case of a staff member who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has met the return criteria for [Children or Staff with Positive Case of COVID-19](#)
- If the staff member has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for the return based on a negative nucleic acid COVID19 test and an alternative diagnosis.

COVID-19 Exposure - Staff and Children

If a staff member or child has been identified as close contact to someone outside the classroom community who is diagnosed with COVID-19, that staff member or child will be required to self-quarantine for 14 days per the CDC guidelines. Close contact means being closer than 6 feet apart for more than 15 minutes the person was infectious.

Positive Case of COVID-19 in the Classroom Community - Children or Staff

If COVID-19 is confirmed in a child or staff member in a classroom community, all persons regularly in that community will be required to self-quarantine for 14 days per the CDC guidelines. The following actions will be taken by school administration:

- Contact Child Care Licensing to report the presence of COVID-19 our school
- Notify the Texas Department of State Health Services
- Notify staff and parents/caregivers that a member of the classroom community has been diagnosed with COVID-19. Confidentiality will be maintained.
- Notify the school community that a child in the school (not their community) has been diagnosed with COVID-19. Confidentiality will be maintained.
- Close the specific classroom community for 14 days to allow self-quarantine for all children and staff in the classroom community who have been in close contact with the person diagnosed with COVID-19 (per CDC guidelines) *
- Complete disinfecting procedures

*Decisions about extending closure will be made in consultation with the Texas State Department of Health.

Children or Staff with Positive Case of COVID-19, who have exhibited symptoms and who have stayed home (home isolated) can return to school/work when the following criteria are met: (<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.htm>)

- At least 3 days (72 hours) have passed since recovery (resolution of fever without the use of fever-reducing medications); and
- The child or staff member has improvement in respiratory symptoms (e.g., cough, shortness of breath); and
- At least 10 days have passed since symptoms first appeared, or Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥ 24 hours apart (total of two negative specimens)

Quarantine and Isolation - Definitions

From the CDC:

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine-isolation.html>

Quarantine

Quarantine is used to keep someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus without feeling symptoms. People in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health department.

Isolation

Isolation is used to separate people infected with the virus (those who are sick with COVID-19 and those with no symptoms) from people who are not infected. People who are in isolation should stay home until it's safe for them to be around others. In the home, anyone sick or infected should separate themselves from others by staying in a specific "sick room" or area and using a separate bathroom (if available).

Contact Tracing

Contact tracing is a strategy used to determine the source of an infection and how it is spreading. Finding people who are close contacts to a person who has tested positive for COVID-19, and therefore at higher risk of becoming infected themselves, can help prevent further spread of the virus. Those contacts might include family members, co-workers or health care providers.

School staff has been asked to keep a daily list of people they are in close contact with and sign up at [Texas Health Trace](#) if they have been in close contact with someone in the Classroom Community that has tested positive for COVID-19 OR if the staff member is diagnosed with COVID-19.

Communication

Austin Montessori School will communicate:

- With families, if their child has been in close contact with someone at school who has then tested positive for COVID-19.
- With staff, if they have been in close contact with someone at school who has tested positive for COVID-19.
- With the entire school community if a classroom community has been closed temporarily due to COVID-19 exposure.

Monitoring Absenteeism

Austin Montessori School administrative staff will monitor absenteeism among children and staff using Transparent Classroom. Any unusual patterns will be considered when evaluating the need for temporary or long-term building or campus closure. Decisions about extending closure will be made in consultation with the Texas State Department of Health.

Procedure for Recording Community Attendance

-Assistant records attendance in Transparent Classroom, verifying and updating the health screening log for the community. Include the reason for absence; contact a parent if the child is not present.

Physical Distancing Strategies

Austin Montessori School does not expect that young children will distance themselves from other children or adults while at school. Young children learn by engaging with their environment, which includes the other people in it. However, Austin Montessori School will employ the following strategies for limiting the spread of COVID-19 in our communities:

- Communities will consist of stable groups of no more than 10 children. Stable means that the same 10 or fewer children and their consistent caregiver(s) are in the same group each day.
- Children shall not change from one group to another during the day.
- Groups shall not mix with each other.
- The guide and assistant will remain with a single group each day. In the case of illness, a designated substitute for the group will assist with caregiving.
- Each child will have a designated work table and floor space so that children can be spaced as far from each other as possible while engaged in activities at school.
- The physical distance between children will be increased in daily work locations, group gatherings, meals, and snacks.
- At nap time, children's naptime mats will be spaced out as much as possible, with alternating head to toe arrangements to reduce the distance between children.

Healthy Hand Hygiene

Washing hands can keep you healthy and prevent the spread of infections from one person to the next. All children and staff will engage in hand hygiene at the following times:

- Arrival to the classroom and after breaks
- Before and after each work choice
- Before and after eating or handling food
- After using the toilet or helping a child use the bathroom
- After coming in contact with bodily fluid
- After playing outdoors or in sand
- After handling garbage
- Before touching your eyes, nose, or mouth because that's how germs enter our bodies.

Follow Five Steps to Wash Your Hands the Right Way

(<https://www.cdc.gov/handwashing/when-how-handwashing.html>)

Follow these five steps every time.

1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. Scrub your hands for at least 20 seconds.
4. Rinse your hands well under clean, running water.
5. Dry your hands using a clean towel or air dry them.

After assisting children with handwashing, staff should also wash their own hands.

Use Hand Sanitizer for Adults When You Can't Use Soap and Water

Washing hands with soap and water is the best way to get rid of germs in most situations. If soap and water are not readily available, you can use an alcohol-based hand sanitizer that contains at least 60% alcohol. Sanitizers can quickly reduce the number of germs on hands in many situations.

How to use hand sanitizer

1. Apply the gel product to the palm of one hand (read the label to learn the correct amount).
2. Rub your hands together.
3. Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This should take around 20 seconds.

Cleaning and Disinfecting

Austin Montessori School follows the national standards for cleaning, sanitizing and disinfection of educational facilities for children provided by [Caring for Our Children \(CFOC\)](#)

Austin Montessori School follows this [Cleaning and Sanitization Practice](#) and has a detailed plan for each community, including staff responsibilities, in the Cleaning and Sanitization binder.

These efforts include the following:

- Staff will routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially materials, as detailed in the Cleaning and Sanitization binder.
- All bathrooms will be cleaned and disinfected regularly throughout the day, at a minimum bathrooms should be cleaned and disinfected three times per day.
- Electrostatic Spraying Technology will be used to disinfect and sanitize our environments at the end of each day. The electrostatic charge ensures that even the hard to reach places are coated evenly and effectively.

Clean and Sanitize Materials

- Materials that cannot be cleaned and sanitized will not be used.
- Materials will be cleaned and sanitized between each use by the assistant.
- Materials that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions will be set aside until they are cleaned by hand by a person wearing gloves. These materials will be sanitized prior to use by the next person.
- Machine washable cloth materials will be used by one individual at a time and will be laundered before being used by another child.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered high risk for transmission and do not need additional cleaning or disinfection procedures.

Clean and Disinfect Bedding

Each child's bedding is kept separate and stored in individually labeled bins. Cots and mats are labeled for each child. Bedding is cleaned at least weekly.

Cleaning and Disinfecting Procedures if an infected person (staff or child) has been in a school building:

Close off areas used by the individuals with COVID-19 and wait 24 hours before beginning cleaning and disinfection to minimize the potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area.

Staff will clean and disinfect all areas used by the ill persons, focusing especially on frequently touched surfaces. Staff must follow [CDC's guidelines for cleaning and disinfecting](#)

Cleaning and Disinfecting Products

Austin Montessori School uses disinfecting products that are EPA-approved for use against the virus that causes COVID-19.

https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/ReOpening_America_Cleaning_Disinfection_Decision_Tool.pdf

https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/Reopening_America_Guidance.pdf

Food Preparation and Serving

Austin Montessori School will not serve family-style snacks or meals. Each child will bring their own lunch from home.

Individual snacks prepared for the children will be prepared by an adult in the campus commercial kitchen following food service guidelines.

Staff will ensure children wash hands prior to and immediately after eating

Staff must wash their hands before assisting children and after helping children to eat.

Food serving and preparation equipment, including those items used in individual practical life lessons for children, must be washed and then sanitized in the campus sanitizing dishwasher between uses.

Vulnerable / High-Risk Groups

Based on currently available information and clinical expertise, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19. To protect those at higher risk, it's important that everyone practices healthy hygiene behaviors.