

LMP SCHOOL SITE-SPECIFIC PROTECTION PLAN 2020-2021



School or District Site Name	
LITTLE MOUNTAIN PRESCHOOL	
School Type (select one)	
Traditional/Alternative Public School Char	rter School Private, Independent or Parochial
School Task Force Members and Positions (ie teachers,	custodians, secretaries, paras, parents, students, administration)
Denise Waite, Director Meghan Krempretz, teacher Leah Robbins, teacher James Waite, administration.	
Public Health Liaisons and Contact Information (Prin	nary and Secondary: Name, Email and Phone)
Matt Willis, MD MPH Marin County Health & Human Services 20 N. San Pedro Rd # 2028, San Rafael, CA 949 (415) 499-3030 hotline: (415) 473-7191	03
This COVID-19 School Site-Specific Protection Plan (S	iSSPP) was most recently updated on:
September 7, 2020	
Principal or Administrator	
Name:	Title:
Denise Waite	Director
Email:	Phone Numbers:
admisssions@littlemountainpreschool.org	415-488-8018 415-847-8064
Denise Waite	his SSSPP is posted on our school/district website, and
, certify that that the certify that the certific that t	
ignature:	Date:
Denise Waite Digitally signed by Denise Waite DN: cn-Denise Waite, o, ou, character of the photocome, c=US Date: 2020.09.07 17:32:15-07:00*	September 07, 2020



Specific Control Measures and Screenings

Please provide as much detail as possible for how you intend to implement each guideline. If you need additional space, please provide an attachment.

1 1.	All activities are consistent with and will adjust to changing applicable state and local Public Health Orders. A multi-disciplinary Task Force has been established to develop and support this School Site-Specific Protection Plan, who meet regularly to monitor and adjust the plan based on input from all stakeholders.			
1 2.	Health and safety practices and protocols are in place, including hand washing, appropriate face coverings, and access to essential protective equipment, and up to date student and staff attendance tracking.			
	Hand washing areas are available for both inside and outdoor areas. Hand sanitizer has been placed for adult use. Staff and children will be wearing masks or a combination face shield/masks. Spare masks also will be available.			
3 .	Training is provided to all staff, students and families reinforcing the importance of health and safety practices and protocols.			
	Parents are required to check their children for signs of infectious illness at home according to materials sent to them. Students who appear to be sick should not attend. Touchless thermometers will be used to take each child's temperature on arrival.			
√ 4.	A primary and secondary point of contact are established, identified, and trained at each school site to direct questions or concerns around practices, protocols, or potential exposure. These points of contact will also serve as a liaison to Public Health and contact information is identified in the School Site-Specific Protection Plan. (Points of Contact listed above).			



√ 5.	Plans are implemented for intensified cleaning and disinfecting, including training for staff and access to cleaning supplies and essential protective equipment, and regular disinfecting of frequently touched surfaces.
	All staff will implement regular cleaning and disinfecting procedures throughout the day. Staff are trained how to properly clean, sanitize and disinfect indoor and outdoor areas, and bathrooms pursuant to CDC and other recommendations. Janitorial cleaning is provided by the landlord and completed at the end of each school day. Inside area and outdoor structures are cleaned daily.
	Health screening for students and staff are conducted as advised and updated by Public Health. On July 23, 2020 the Centers for Disease Control and Prevention provided updated guidance on screening K-12 students emphasizing that parents and caregivers must monitor their children for signs of infectious illness every day at home, and universal symptom screening for K-12 students is not required. Staff should conduct daily health screening self assessment, which may be completed through an online survey. (Sample MCOE Staff Health Screening)
	Please see attachment A, COVID-19 DROP-OFF INTAKE QUESTIONS.
7.	Staff and students who are sick are expected to stay home and an isolation area is identified for students who begin to exhibit symptoms during the school day, until they can be picked up. Describe placement of designated isolation Area:
	Room on the east side of the classroom has been designated as an Isolation Area.
√ 8.	Schools and districts will cooperate with Public Health to support testing strategies to mitigate transmission of COVID-19, including testing for staff at the beginning of the school year, and then no less than once every two months. This may include testing of students with appropriate parental permissions obtained in advance. (Identify testing vendors, if applicable)
	Testing will comply with any applicable government regulations.
	Page.



Protocols, actions and template communications are in place for the following COVID-19 related scenarios (link: Marin County Public Health Protocols & Communication Templates for each scenario): a. A student or staff member either exhibits COVID-19 symptoms or has a temperature of 100.4 or above. b. A family member or someone in close contact with a student or staff member tests positive for COVID-19. c. A student or staff member tests positive for COVID-19. d. A student or staff member tests negative for COVID-19 after symptoms or confirmed close contact.				
Please see attachment B, Back-to-School-Planning-for-In-Person-Classes Checklist to Parents.				
Where practicable, physical distancing of six feet is maintained between adults and adults and students; four feet distance is permissible between students within a classroom or instructional area where requirements herein are in practice.				
For elementary schools, stable classroom cohorts (up to standard class size at each respective grade level) are maintained throughout each school day, and through each quarter or semester, with an assigned primary cohort teacher, and systems are in place to prevent the mixing of classroom cohorts.				
This school is a preschool with only one cohort of children, so no cohort mixing will occur. The size of the cohort will not exceed 15 children				
For middle and high schools, larger cohorts made up of students from more than one classroom may be arranged as long as accurate attendance data for students and adults is maintained on a daily basis while avoiding schoolwide mixing of students and staff.				



1 3.	Where practicable, desks are arranged facing forward to minimize face to face proximity between students.
	This school is a preschool with only one cohort of children. Children while indoors will have assigned spaces on the floor that are separated from each other.
1 4.	School staff are permitted to visit and instruct more than one classroom cohort, following physical distancing and face covering protocols, and must document/record visits to classrooms that are not identified as their primary classroom cohort.
	There is only one cohort at this school, so staff will be with only one cohort.
1 5.	Routes for entry and exit to the campus will be designated for each classroom cohort, using as many entrances/exits as feasible.
	There is only one cohort at this school, so all entrances and exits may be used depending on circumstances.
1 6.	Schedules for arrivals, recess and lunch will be strategically coordinated to prevent mixing of classroon cohorts.
	There is only one cohort at this school so there will be no cohort mixing. The children will arrive and depart at one time.



	This school is a preschool with only one cohort of children so there will be no congregate movement.
3.	Large gatherings (i.e., school assemblies) are currently prohibited. No large gatherings will occur. Only staff and children are allowed inside and in the outdoo area. No parents, visitors or the public will enter the school grounds.
:	The use of outdoor space for instructional purposes is maximized, shared, and coordinated to ensure students remain in their cohort. Efforts should also be made to maximize fresh air flow in classroom through existing ventilation systems and opening of windows and doors as much as possible. The inside classroom is well ventilated. The outdoor area will be utilized to the greatest
	extent possible, and will be the primary area for the children. Use of shared playground equipment will be limited in favor of physical activities that require less of
	with surfaces, and shared equipment will be cleaned between uses. Shared outdoor area equipment will be minimized. The outdoor area is mostly a natural are for play and exploration.



2 1.	Use of non-classroom space for instruction such as gymnasiums and multi-use rooms should be considered to support physical distancing with cleaning between uses.			
	The indoor area is large enough for physical distancing. The outdoor area is quite large and open. No use of other rooms is contemplated.			
2 22.	Meals will be served outside as much as possible or in classrooms instead of cafeterias or dining room with individually plated or bagged meals as much as practicable.			
	Children will bring designated and sealed snacks from home.			
2 3.	Routines and schedules will be developed to enable students and staff to regularly wash their hands at staggered intervals.			
	In additions to regular washing, the outdoor area is supplied with handwashing stations.			
2 4.	All staff as well as all students in grades 3 - 12 are required to wear face coverings while in the classroom and on campus unless there is a medical or behavioral contraindication. Students from grades TK - 2 are strongly encouraged to wear face coverings and should be supported and taught how to wear them properly.			
	Students will be wearing masks or a mask/face shield combination.			



√ 25.	Training will be provided for staff and students on proper use of face coverings which will include instruction to minimize touching of face coverings.
1 200	Sharing of supplies, manipulatives, toys, sports equipment, and other learning and recreational materials
V 20.	will be limited and each student will have separate individually labeled boxes or cubbies.
	All cubbies are individually labeled.
√ 27.	Sharing of electronic devices, clothing, books and other games or learning aids will be avoided as much a practicable.
	Sharing of non-electronic items will be minimized. No electronic devices are allowed on the premises.
2 8 .	Use of privacy boards or clear screens will be considered as much as practicable.



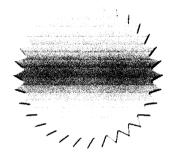
	ff and students will be allowed in the school. There should be no workers during the school day.
School Site-Specific P	rotection Plan outlining the above measures is completed, posted and
	rotection Plan outlining the above measures is completed, posted and dated as state and local Public Health guidance dictates.

**Attach any supporting documents or additional information for each Guideline to the back of the SSSPP.



School Site-Specific Protection Plan

Certificate of Completion



(enter School Site Name here)

LITTLE MOUNTAIN PRESCHOOL

has completed the School Site-Specific Protection Plan with current information related to COVID-19 Protocols and Procedures. The full SSSPP is available for viewing or download here:

(enter School Site or District website here) littlemountainpreschool.org

This certificate should be displayed in the site's main office and the full SSSPP should be available online at the above web address.



COVID-19 DROP-OFF/INTAKE QUESTIONS

(Inform teacher of any questions answered "Yes.")

1. Do you, your child, your family, your "pod" ("bubble"), others accompanying you today, or anyone you have recently been in contact with, have any of the following symptoms of COVID-19:

Fever (Above 100 F or 37.8 C)	Diarrhea"				
Purple fingers or toes	New onset of fatigue"				
Shortness of breath	New onset of mu	uscle pa	in"		
New cough or worsening cough	Runny nose				
Loss of Taste	Sore throat				
Loss of Smell	Headache.				
□ Yes □ No	□ Yes □] 1	No		
2. Has your child had any medications (e.g., ibuprofen/acetaminophen) in the past 72 hours that could potentially minimize or mask symptoms of illness? ☐ Yes ☐ No					
3. Have you or anyone in your household att	ended a large grou	n oathe	ring with	nin the t	nast
14 days without following CDC guidelines/best p:		П	Yes		No
11 days without following 610 guidelines, best p.	ractices.	_	103	_	1.10
4. Have you or anyone in your household havith a person with a confirmed case of COVID-1	`		ce conta	ct within	n 6 feet)
			Yes		No
5. Have you or anyone in your household flo	wn commercially i	n the la	ıst 14dav	s witho	ut.
following CDC guidelines/best practices?			Yes		No
6. Are you or anyone in your household waiting on the results of a lab test because you are concerned you/they may have been exposed, or have you or they been diagnosed with COVID-19? \[\sum \text{Yes} \sum \text{No} \]					
7. Have you or anyone in your household be	en exposed to CO	VI0-19	in the la	st 14 da	vs?
			Yes		No
Health Care workers should also answer question 8:					
8. While providing direct patient care, have you had close contact with a COVID-19 case in the last 14 days while you were unable to wear PPE?					
STRICT EXCLUSION of children or staff who have any of the following: Are sick with a fever/signs of fever - New onset of fatigue - Have a new cough or worsening cough New onset of muscle pain - Have purple fingers or toes – Diarrhea - Have shortness of breath - Loss of taste or smell - Two or more of the following symptoms: runny nose, headache, sore throat.					

Checklist: Planning for In-Person Classes

Actions to take and points to consider	Notes
Check in with your child each morning for signs of illness. If your child has a temperature of 100.4 degrees or higher, they should not go to school.	
Make sure your child does not have a sore throat or other signs of illness, like a cough, diarrhea, severe headache, vomiting, or body aches.	
If your child has had close contact to a COVID-19 case, they should not go to school. Follow guidance on what to do when someone has known exposure.	
	Name of school point person(s):
Identify your school point person(s) to contact if your child gets sick.	Contact information:
Be familiar with <u>local COVID-19 testing sites</u> in the event you or your child develops symptoms. These may include sites with free testing available.	My local testing options:
Make sure your child is up-to-date with all <u>recommended vaccines</u> , including for flu. All school-aged children should get an influenza flu vaccine every season, with <u>rare exceptions</u> . This is especially important this year because we do not yet know if being sick with COVID-19 at the same time as the flu will result in more severe illness.	Date of flu vaccination:
Review and practice proper <u>hand washing techniques</u> at home, especially before and after eating, sneezing, coughing, and adjusting a face cover. <u>Make hand washing fun</u> and explain to your child why it's important.	
Be familiar with how your school will make water available during the day. Consider packing a water bottle.	
Develop daily routines before and after school—for example, things to pack for school in the morning (like hand sanitizer and an additional (back up) cloth face covering) and things to do when you return home (like washing hands immediately and washing worn cloth face coverings).	



cdc.gov/coronavirus

ATTACHMENT B

<u>Talk</u> to your child about precautions to take at school. Children may be advised to:	
Wash and sanitize their hands more often.	
Keep physical distance from other students.	
Wear a cloth face covering.	
 Avoid sharing objects with other students, including water bottles, devices, writing instruments, and books. 	
 Use hand sanitizer (that contains at least 60% alcohol.) Make sure you're using a safe product. FDA <u>recalled products</u> that contain toxic methanol. Monitor how they feel and tell an adult if they are not feeling well. 	
Develop a plan as a family to protect household members who are <u>at increased risk for severe illness</u> .	
Make sure your information is current at school, including emergency contacts and individuals authorized to pick up your child(ren) from school. If that list includes anyone who is at increased risk for severe illness from COVID-19, consider identifying an alternate person.	
Be familiar with your school's plan for how they will communicate with families when a positive case or exposure to someone with COVID-19 is identified and ensure student privacy is upheld.	
Plan for possible school closures or periods of quarantine. If transmission is increasing in your community or if multiple children or staff test positive for COVID-19, the school building might close. Similarly, if a close contact of your child (within or outside of school) tests positive for COVID-19, your child may need to stay home for a 2-week quarantine period. You may need to consider the feasibility of teleworking, taking leave from work, or identifying someone who can supervise your child in the event of school building closures or quarantine.	
 Plan for transportation: If your child rides a bus, plan for your child to wear a cloth face covering on the bus and talk to your child about the importance of following bus rules and any spaced seating rules. If carpooling, plan on every child in the carpool and the driver wearing cloth face coverings for the entire trip. If your school uses the cohort model, consider finding families within your child's group/cohort at school to be part of the carpool. 	
If your child has an Individualized Education Program (IEP) or 504 Plan or receives other learning support (e.g., tutoring), ask your school how these services will continue.	
If your child receives speech, occupational or physical therapy or other related services from the school, ask your school how these services will continue.	
 If your child receives mental health or behavioral services (e.g., social skills training, counseling), ask your school how these services will continue.	

If your school uses a cohorting model, consider limiting your child's in- person out-of-school interactions to children in the same cohort or to activities where physical distancing can be maintained.	
Reinforce the concept of physical distancing with your child.	
Talk to your school administrators and teachers about their plans for physical education and physical activity (e.g., recess).	
Safer options include being outdoors when possible, reducing the number of people in an indoor space, and encouraging students to stay at least 6 ft apart.	
Ask how your school plans to help ensure that students are following practices to reduce the spread of COVID-19.	

Cloth Face Coverings

If your school is requiring or encouraging cloth face coverings

ons to take and points to consider	Notes
Have multiple cloth face coverings, so you can wash them daily and have back-ups ready. Choose cloth face coverings that	
 Fit snugly but comfortably against the side of the face 	
 Completely cover the nose and mouth 	
 Are secured with ties or ear loops 	
 Include multiple layers of fabric 	
 Allow for breathing without restriction 	
 Can be washed and machine dried without damage or change to shape 	
Label your child's cloth face coverings clearly in a permanent marker so that they are not confused with those of other children.	
Practice with your child putting on and taking off cloth face coverings without touching the cloth.	
Explain the importance of wearing a cloth face covering and how it protects other people from getting sick.	
Consider talking to your child about other people who may not be able to wear cloth face coverings for medical reasons (e.g., asthma).	
As a family, model wearing cloth face coverings, especially when you are in situations where physical distancing is difficult to maintain or impossible.	
If you have a young child, help build their comfort wearing a cloth face covering and become comfortable seeing others in face covers.	
 Praise your child for wearing a cloth face covering correctly. 	
 Put a cloth face covering on stuffed animals. 	
 Draw a cloth face covering on a favorite book character. 	
 Show images of other children wearing cloth face coverings. 	
 Allow your child to choose their cloth face covering that meets any dress requirements your school may have. 	
 Suggestions from the <u>American Academy of Pediatrics</u> 	

Consider providing your child with a container (e.g., labeled resealable bag) to bring to school to store their cloth face coverings when not wearing it (e.g., when eating).

Mental Health & Social-Emotional Wellbeing Considerations

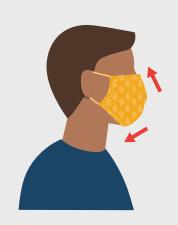
Actions to take and points to consider	Notes
Talk with your child about how school will look different (e.g., desks far apart from each other, teachers maintaining physical distance, possibility of staying in the classroom for lunch).	
Talk with your child about how school is going and about interactions with classmates and teachers. Find out how your child is feeling and communicate that what they may be feeling is normal.	
Anticipate behavior changes in your child. Watch for changes like excessive crying or irritation, excessive worry or sadness, unhealthy eating or sleeping habits, difficulty concentrating, which may be signs of your child struggling with stress and anxiety .	
Try to attend school activities and meetings. Schools may offer more of these virtually. As a parent, staying informed and connected may reduce your feelings of anxiety and provide a way for you to express any concerns you may have about your child's school.	
Ask your school about any plans to reduce potential stigma related to having or being suspected of having COVID-19.	
Check if your school has any systems in place to identify and provide mental health services to students in need of support. If so, identify a point of contact for these services at your school.	Name of school point person: Contact information:
Check if your school has a plan to help students adjust to being back in school. Students might need help adjusting to how COVID-19 has disrupted their daily life. Support may include school counseling and psychological services (including grief counseling), social-emotional learning (SEL)-focused programs and curricula, and peer/social support groups.	
Check if your school will provide training for students in mindfulness, incorporating SEL into classroom curriculum (either virtually or in-person), or support a child's ability to cope with stress and anxiety. If not, consider asking about ways to add this to your child's at-home learning.	
You can be a role model for your child by practicing self-care: Take breaks Get plenty of sleep Exercise Eat well	
Stay socially connected	

How to wear cloth face coverings

WEAR YOUR FACE COVERING CORRECTLY

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- · Make sure you can breathe easily









WEAR A FACE COVERING TO PROTECT OTHERS

- Wear a face covering that covers your nose and mouth to help protect others in case you're infected with COVID-19 but don't have symptoms
- Wear a face covering in public settings when around people who don't live in your household, especially when it may be difficult for you to stay six feet apart
- Wear a face covering correctly for maximum protection
- Don't put the face covering around your neck or up on your forehead
- Don't touch the face covering, and, if you do, wash your hands or use hand sanitizer to disinfect