

SELA Early Global Health and Safety Policies

School Year 2023-2024

Please know that all of SELA' Health Policies and Procedures, strictly and consistently adhere to laws, mandates, regulations, standards, resolutions, and guidelines set forth by the Massachusetts Department of Public Health (MDPH) and our governing body the Massachusetts Department of Early Education and Care (EEC). These departments serve as the foundation for all of our school's policies, practices, and procedures. Due to the ever-evolving guidance's given by the health and educational organizations as they relate to COVID-19, SELA reserves the right to revise these policies as needed for the overall health and safety of our SELA community.

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1. STUDENT HEALTH RECORDS

Mandatory Student Health Records must be submitted *prior* to a student's first day of school and are required to be updated annually.

- **Student Physical Exam:** Dated within a year's time of the present date. Must be signed by the physician (electronic signature acceptable).
- **Student Immunization Records:** Current and up to date immunizations, including a lead screening must be listed.
- Student Asthma/Allergy Action Plan (if needed): Any student who is identified as having a Life-Threatening Medical Condition that requires them to have emergency medications at the school are required to have an Action Plan and Medication Consent Form to be on file **See Action Plans for more details*.

2. ADDITIONAL PERMISSIONS

At the start of each school year, SELA provides a google form to enrolled families to obtain permission and parental consent or denial for a variety of student health and wellness topics. This form is tailored for the specific program/season/current public health concerns (if applicable) but typically contains the following information:

- ▶ Hand Sanitizer Consent (ages 2 and above)
- Alternate Snack/Food Options Consent
- Sunscreen Consent
- Acknowledgement of Food Safety Policy
- Acknowledgement of Peanut/Tree Nut Free School Policy

This form is required to be completed prior to your child's first day of school.

3. FOOD SAFETY POLICY

For the safety of your child while they are here at SELA, we will not be able to serve the following high-risk choking hazard foods to your child if they are sent in their lunch and are not properly prepared and cut safely. You will be notified and given the option to bring in an alternate item, or you can choose for your child to receive an alternate snack option we provide. For infants and toddlers, food should be cut into ¹/₄ inch sized cubed pieces and/or short, thin

strips, for preschool aged children food should be cut in ½ inch size cubed pieces and/or halved lengthwise. Tubular shaped foods (example cheese sticks) should <u>not</u> be cut into round pieces but instead into short thin strips.

Please safely prepare the following high-risk foods before sending in to school with your child:

- Whole Grapes (and similar sized whole uncut food items, for example cherry tomatoes, large blueberries)
- Hot dogs, cheese sticks (and similar round tubular shaped foods, for example baby <u>carrots</u>)
- Meat on a bone
- Large chunks of hard fruits or vegetables
- Large chunks of cheese or meat

Please know that while your child may eat these foods fine at home without any difficulty, eating in school is a different environment with distractions, talking, etc. and it places the child at a higher risk of choking on one of these high-risk foods. SELA has implemented this policy for your child's safety.

Procedure - First Offense (unsafe food item sent in)

- 1. If feasible, SELA teacher will wear gloves and will cut the food into smaller sizes based upon the above guidelines.
- 2. Teacher will send a message on Brightwheel to inform the family, and to ask the food to be prepared safely at home next time before sending to school.

Procedure - Second Offense (unsafe food item sent in)

- 1. Food will be placed back into the lunch container.
- 2. Parent or guardian will be contacted and asked to either:
 - a. Choose from an available alternative snack provided by SELA
 - b. Bring and alternative food item to the school
 - c. Come to the school and cut the food.

<u>4. SUNSCREEN CONSENT</u>

Students aged 6 months and up may have sunscreen applied at school with parent/guardian consent on file. Parent/Guardian must send in sunscreen for their child to be kept at the school. **Consent is obtained via additional permissions and/or enrollment.*

- Sunscreen should be clearly labeled with child's full name and must be within the expiration date listed on the sunscreen.
- Sunscreen will be kept inside student's classroom, out of reach from students.
- With gloved hands, teachers will assist students with application of sunscreen as needed. * *Teacher's gloves will be changed after each student*.
- Sunscreen will not be shared among other students.
- Sunscreen will be applied prior to outdoor activities and will be reapplied as needed.
- Older children, preschool and above, will be encourage to assist with sunscreen application of themselves to foster learning and independence.
- If a child does not have sunscreen at school, they will be kept under shaded areas and not allowed to play in direct sunlight.

5. WEATHER POLICY

Students will be brought outdoors to play whenever possible. In the event of inclement weather, students will have opportunities for physical exercise and gross motor activity inside the school gymnasium. Each classroom is provided with a childcare weather watch chart which details safe temperatures in which children should go outside to play, for what length of time, and what, if any, precautions should be taken. SELA teachers will ensure that students are dressed in the appropriate outer wear for the weather prior to going outside **provided by parents/guardians*, and that students have access to fresh drinking water in hot weather **provided by parents/guardians*.

SELA families are asked to ensure that their student is sent to school with the appropriate outer wear for the season. This includes hats, gloves, jackets, snow pants and insulated boots in the winter and hats, short sleeves, and water in the summer.

6. COMMUNAL MEDICATION CONSENT FORM

The Communal Medication Consent form is designed to give permission for SELA staff to administer to your child common, over-the-counter medications while at school from a communal source (supplied by and kept at SELA – used by all). This includes Children's Ibuprophen,

Children's Acetaminophen, Children's Benadryl, Bacitracin to wounds, Vaseline/Aquaphor to broken skin, etc. This form must be signed by the doctor and the parent to be valid and is required to be updated annually. This form covers only those common, over-the-counter medications listed on the form. In the event your child spikes a fever while at school, if SELA does not have this signed form on file for your child, we are unable to administer any medication to your child to help to bring the fever down. Similarly, if your child has broken skin SELA is unable to apply any Bacitracin, Vaseline or Aquaphor without this form on file.

In the absence of this form, SELA is only able to apply diaper cream, Aquaphor and Vaseline to intact (not broken) skin. SELA encourages all families to have their pediatrician sign this form to have on file.

Only the School Nurse and/or designated staff members who have completed the 5 rights of medication administration course and who currently possess a current CPR and First Aid certification may administer medications to a student. Universal precautions will be always upheld. Whenever possible School Nurse will administer medications.

Early Global Parent/Guardians can choose which medications/treatments they consent their child to have. Parents may also choose to "opt out" of their child having any communal medication while at school.

Please note, without this form on file, SELA is unable to administer **any** communal medication to your child while in school, even with parental request. In the event your child has a fever, and you request SELA to administer a dose of Tylenol or Motrin while awaiting pickup, without a signed communal medication consent form on file SELA will be unable to administer any medication to your child.

OVER THE COUNTER MEDICATIONS

- Acetaminophen/Children's Tylenol liquid (Headache, toothache, general pain, and discomfort as requested by parent, fever >100.4 degrees F. Dose will be weight appropriate.
- Ibuprofen/Children's Advil liquid (Headache, toothache, general pain, and discomfort as requested by parent, fever >100.4 degrees F. Dose will be weight appropriate. Infants under 6 months will not receive Ibuprofen.

• Benadryl liquid (Mild allergic reactions, hives, rash). Dose will be weight appropriate. ADDITIONAL TREATMENTS

- Hibaclens (Cleaning wounds and abrasions)
- Caladryl Lotion (itching, rashes, insect bites, poison ivy)
- Antibiotic Ointment (wounds and abrasions)

- Petroleum Jelly/Vaseline (Dry lips or skin)
- Sterile Eye Drops (Irritated or itchy eyes)
- Sterile Isotonic Eye Wash Solution (Eye irritation or foreign bodies)
- Diaper cream of parent's choice (to be applied for diaper rash w/broken skin) to be sent in by parents.

7. PRESCRIPTION and NON-PRESCRIPTION MEDICATION CONSENT

<u>FORM (606 CMR)</u>(*Required for <u>all prescription medications</u> and all over-thecounter medications, except those listed on the Communal Medication Consent* form when not used on a routine basis)

Any medication and/or treatment, prescription, non-prescription and/or over the counter (OTC) that is to be administered or performed for a student while in school must be accompanied with a valid Medication Consent Form (606 CMR). This includes prescription diaper creams and any lotion/creams that have any type of added medication, even if it is over the counter.

- Medication Consent Form must be completed fully and signed by parent/guardian and physician to be valid.
- Medication must be labeled with student's full name, be in its original container and be within the expiration date listed on the container.
- Parent/Guardian is to notify school nurse or director of the detail regarding why the medication is needed.
- The School Nurse will coordinate the date and time that the parent/guardian will "hand off" the medication to a member of administration.
- Medication should be brought in a clear zip lock bag with student's name on it
- Medication will be kept in Health Clinic in a locked container.

8. MEDICATION ADMINISTRATION DURING SCHOOL HOURS

Whenever possible, SELA requests that all medication be administered at home. When this is not possible or feasible, the following procedure will be followed:

1. Medication will be provided directly to the school nurse or member of administration by the family. Please do not send medication to school in your child's lunch box or bag.

2. Medication will contain a valid, signed doctors order and medication consent form. For medications lasting 10 days or less, the prescription label can serve as the doctor's order. **Medication consent form signed by the parent or guardian will still be required*.

- 3. Medication must have a clear, valid prescription label and be in its original container.
- 4. Medication must not be expired.
- 5. Student medication will be kept in a locked container inside the health office.

6. School Nurse, Director or appointed staff member trained in the 5 rights of medication administration and certified in CPR and First Aid will administer the medication to the student at the designated appropriate times. Whenever possible the school nurse will administer all medications.

7. Please note that SELA is never allowed to give the first dose of a medication to a student that they have never taken before.

9. ALLERGY/ASTHMA ACTION PLANS

Allergy and Asthma Action Plan Packets will be provided during the admission process if a parent/guardian states that their child has a life-threatening allergy that requires emergency medications or asthma requiring a rescue inhaler at school. This packet will provide detailed instructions as to what forms are required to be completed and signed. It also details how to send in your child's medication to the school safely.

- Allergy/Asthma Actions Plan will dictate what medications a student will need in the event of a medical emergency. The indications for, signs and symptoms along with physician and parental/guardian consent are obtained via this form.
- Physician may use own Allergy/Asthma Action Form
- If there is any discrepancies parent will be notified as soon as possible to enable them to contact their doctor to clarify.
- During this time, the student cannot attend school until the discrepancy is made clear.
- Medications listed on the Action Plan must *each* be written on their own separate Medication Consent Form. They <u>may not</u> all be written on one form.
- Emergency Medication (Epi-Pens, Inhalers) must be delivered to SELA in their original prescription box with the child's name on the prescription. Additionally:
 - Medications must not be expired

- Epi-Pens MUST be in the two-pack they came in in the original prescription box.
- Benadryl and other over-the-counter medication must be in a new, sealed package and the child's name must be written on the box.
- Students will be unable to attend school until all of the above documents are received by the school.
- Action plans and medication consent forms are valid for 1 year from the date signed.
- Parents/guardians will be notified at least 1 month prior to SELA needing new action plans/consent forms and/or emergency medication expiring.

10. PEANUT TREE NUT FREE

Peanut and Tree-Nuts are not permitted inside the building for any reason. If a food item is suspected and/or confirmed to be peanut or tree nut based or <u>made in a facility that</u> <u>manufacturers peanut/tree nut products</u>, it will be immediately removed and placed in a safe place away from students.

NO:

- Food items listed as containing peanuts or tree nuts
- Food items listed as "may contain traces of peanuts or tree nuts"
- Food items listed as "made or manufactured in a facility that processes peanuts or tree nuts".

In the event a student is found to have a prohibited food item containing or possibly containing traces of peanuts and tree nuts the food item will be removed from the classroom and returned to the child's lunch box at the end of the day to be enjoyed at home. If the child has consent on file (obtained via additional permissions), an alternate snack will be offered, and the child's parent or guardian will be emailed to update. If the child does not have consent on file for an alternate food item, the child's parent or guardian will be called and asked to provide consent and/or bring an alternate food item to the school.

***Sun butter** – if you are sending a lunch item to school for your child made with Sun butter or other approved nut-free alternative, please send a message on Brightwheel to your child's teacher to avoid any confusion during mealtime.

11. IHCP (INDIVIDUAL HEALTH CARE PLAN)

An IHCP (Individual Health Care Plan) form is a document created by the doctor, parent/guardian, and Nurse/Director to assist in caring for any child with a chronic or acute medical condition, need or injury while at the program. This includes but is not limited to:

- Acute fractures recovering in a cast
- Seizure disorders
- Urinary or bowel disorders/conditions
- Swallowing disorders/conditions
- Concussion recovering
- ➢ Immunocompromised
- \blacktriangleright And more.

If you are unsure if your child's condition warrants an IHCP form, please contact our Early Global Nurse or Early Global Director for more help in navigating your child's medical needs while at the program.

12. INJURY AND INCIDENT REPORTS

All incidents/injuries will be assessed, treated, and documented. An administrative staff member and/or teacher will notify the students parent/guardian via email/Brightwheel, phone or in person depending on the situation and injury.

- All minor injuries will be communicated to the parent/guardian via Brightwheel. The teacher will communicate this as an "incident". <u>This includes any student inflicted bites and scratches.</u>
- Injuries to the <u>head or face</u> that <u>cause swelling</u>, <u>bruising</u>, <u>cuts/abrasion</u> <u>or significant bleeding</u> and/or more large/significant injuries and/or injuries requiring outside medical treatment will be communicated to the parent/guardian via telephone by the Nurse or Director. An Injury Report form will be completed by the Nurse or Director and sent home to the parent to review and sign within 24 hours of the injury.
- If an injury is minor and <u>does not require first aid</u> (i.e., the application of ice to reduce swelling and/or the cleansing of a wound/bandage applied) the family will be notified either through a message through Brightwheel, email or in person at pick up

depending upon the time/circumstance. Similarly, if a child's injury is an accidental self-inflicted injury (example: child's accidentally scratches themselves) an incident report will not be completed, but the parent/guardian will be notified and asked to trim the child's nails to prevent further injury to themselves.

13. COMMUNICABLE DISEASE POLICY AND EXCLUSION FROM SCHOOL

Listed below are some common childhood illnesses and SELA policy for exclusion and return to school. For questions regarding an illness that is not listed below, please contact the school nurse for further guidance. *Refer to COVID-19 policy for details specific to COVID policy.

Upper Respiratory Illness (cold, croup, RSV, Flu)

Student must remain at home until symptoms have improved, the child has been fever-free for 24-hours without the use of fever reducing medication, the child is eating, drinking, sleeping and able to participate in the school day activities.

Fever (100.4 degrees F and above)

Student must remain at home until they have been 24-hours fever free without the use of fever reducing medication.

Any student presenting with a fever of 100.4 degrees or higher and/or appears feverish/has chills while at the program will have parent/guardian contacted and the child will be sent home.

Vomiting

Student must remain at home until 24-hours have passed since the last vomiting episode. Student should be able to hold down food and liquids. Any student who vomits 1 time while at the program will have parent/guardian contacted and the child will be sent home. **Please note this does not include vomiting from a known cause, such as acid reflux. Documentation must be on file with SELA to inform of underlying conditions which may predispose a child to vomiting.*

Diarrhea

Student must remain at home until 24-hours have passed since the last episode of diarrhea.

Any student who has 3 or more loose, watery stools while at the program will have parent/guardian contacted and the child will be sent home.

Any student who has 1 or more episodes of loose, watery stool that contains blood or mucous, is accompanied by abdominal pain, fever, nausea and/or vomiting, or cannot be contained in a diaper and/or causes the child to be incontinent will have parent/guardian contacted and the child will be sent home.

Conjunctivitis (Pinkeye)

Student must remain at home until they have been on antibiotics for 24-hours. If the child's pediatrician determines that the child does not have bacterial conjunctivitis and antibiotics are not prescribed, a doctor's note stating as such will be required for a child to return to school.

Any student who presents during the school day with symptoms of conjunctivitis such as yellow or green drainage from the eye, crusting of the eyelids, redness to the sclera (whites) of the eyes, swelling and/or pain to the eye will have parent or guardian contacted and the child will be sent home. The child will need to be seen by his or her doctor and if the doctor determines the child does not have bacterial conjunctivitis, the child may return with a physicians note. If the physician prescribes antibiotics, the child must stay home until 24-hours have passed while on the antibiotics.

Skin Infection, Staph Infection, Impetigo

Student must remain home until they have been on antibiotics for 24-hours.

Any open areas and or lesions must be dried or scabbed over. Band aids may not be used to cover weeping and/or open lesions.

Strep-Throat

Student must remain at home until they have been on antibiotics for 24-hours.

Any student presenting at school with symptoms of strep throat will have parent/guardian contacted and the child will be sent home. SELA will ask for a doctors note for your child to return to school if the nurse determines your child is experiencing symptoms of strep throat. If your child tests positive for strep throat, they may return to school once they have been on antibiotics for 24-hours and have been fever free for 24-hours without the use of fever reducing medication. Common symptoms of strep throat infection in children: fever, sore throat, headache, vomiting. Your child may experience any one or a combination of these symptoms, with fever and sore throat being the most common.

Coxsackievirus (Hand, Foot, and Mouth)

Student must remain at home until they have been fever free for 24-hours without the use of fever reducing medications. **In addition to being fever free, the child must not have any blisters or open areas on the face or hands. All areas on the face or hands must be dried up and scabbed over.** Band-aids may not be used to cover areas on the hands and face. If the child still has areas/blisters on the arms, torso, buttocks, legs, or feet the child may attend school <u>if</u> they are able to remain dressed in clothing covering the affected areas mentioned above. Please send in a change of clothes with your child to ensure we are able to keep the areas covered in the event the child needs to change his/her clothing. Infants and young toddlers experiencing excessive drooling that have lesions in the mouth or throat should remain at home until the areas are healed

Lice

If a student is suspected to have lice while in school, the student will be discreetly referred to the school nurse for further assessment. Student may return to school after the following has occurred:

- 1. Parent/Guardian submits in writing that lice and nits were properly removed.
- 2. Upon arrival back to school, the nurse will recheck students prior to students returning to the classroom.

Notification to SELA Families of the Presence of a Communicable Disease or Illness

In the event a communicable disease or illness is identified in your child's classroom by the presence of <u>two or more cases of a specific illness within 14 days</u>, an email will be sent to the affected classroom(s) to notify families of the presence of an illness within the classroom, along with information regarding the specific illness and any signs or symptoms to watch for. In the case of certain communicable diseases requiring such, the Hingham Board of Health and the Mass. Dept of Health will be notified. For 2023-2024 SELA will include COVID-19 in the protocol and will begin notifying families only when there have been two or more confirmed cases inside your child's classroom within any 14-day period.

Care of Mildly Ill Children

A child who is not feeling well while in school will be brought to the office and will be allowed to rest and remain as comfortable as possible. Parent(s) will be contacted to pick the child up. In the event we are unable to reach either parent or guardian, the child's emergency contact(s) will be contacted. We ask that children are picked up within 30 minutes of being notified. If the parent or guardian is unable to pick the child up from school within 30 minutes, SELA will request an alternative approved emergency contact come to the school to pick up the child. The child will be kept safe and comfortable in the office until the parent or guardian arrives.

14. EMERGENCY RESPONSE POLICIES

All SELA staff undergo annual training for responding to emergencies within the school. In the event a situation arises in which a child requires immediate medical attention, 911 will be called to request an

ambulance. The staff member contacting 911 will provide the dispatcher with the address of the school, the nature of the emergency, and the location within the school of the emergency. The staff member will remain on the phone with the 911 operator until emergency help arrives. A second staff member will stand guard at the front door of the building to guide the emergency responders to the site of the emergency. While emergency services are being notified, all staff trained in CPR and First Aid will respond to the site of the emergency care as well as delegating additional roles to nearby staff. The other nearby students will be taken by a teacher or qualified staff member to a separate area of the building and will be supervised. An administrator, familiar with the child, will accompany the child to the child's parent(s) or legal guardian(s) and inform them of the nature of the emergency and asked to meet the ambulance at South Shore Hospital. The administrator accompanying the child to the hospital will remain with the child until the child's parent or guardian has arrived.

Field Trip and Emergency Procedures:

Parents/Guardians will be notified in advance of a field trip and a first aid and emergency medical care, and consent form will be provided with the permission form. This form, along with a first aid kit, a list of students with allergies or asthma and any emergency medication will be brought on the field trip. Teachers will have a cellular device and an administrator will be on site.

School Visitors

All exterior doors leading directly into the school are kept locked at all times aside from times of pick-up and dismissal. Visitors arriving to the school are required to show identification before entering into the building. Visitors are required to wear a visitor pass at all times while inside the building. SELA families are asked to never hold the door for a visitor entering after you and/or open a door for a visitor.

Fire Safety

Fire extinguishers are placed strategically throughout the school and all SELA staff are trained in their use. Fire extinguishers are serviced and inspected annually.

Routine Fire Drills are practiced monthly throughout the school year.

Evacuation maps are posted in every classroom, office, and common area within the school.

Smoke alarms and carbon monoxide detectors are placed throughout the school and are checked routinely.

Lockdown Procedure

In the event SELA is notified or becomes aware of violence in or around the school and/or an intruder a school-wide lockdown procedure will be initiated. Inside the classroom:

Classroom doors will be closed and secured, shades/blinds will be drawn closed, lights will be turned off and students will be brought to an area of the classroom out of sight of windows and doors and will wait quietly with the classroom teacher. SELA classrooms are equipped with enhanced security procedures for securing the classroom.

Teachers will wait with students and maintain lockdown procedure until further directions are given from administration and/or law enforcement.

During an active school-wide lockdown, no visitors will be allowed into the school.

Alternate Shelter

In the event of an evacuation to an alternate shelter, teachers will walk students to the Bridges of Epoch nursing facility located next door to SELA. Parents or Guardians will be contacted and instructed to pick up their student at this location.

Practice Drills

During the year, SELA will practice various emergency drills with the students in an age-appropriate manner. This includes practicing exiting the building during a fire and locking down inside the classroom. These drills are always conducted in a way to foster learning through repetition. Students will be supported at all times by teachers during drills and at no time will tactics be used to instill any sense of fear.

15. INFECTION CONTROL AND CLEANING POLICIES

SELA employees a full-time housekeeper for the Early Global program. The housekeeper works throughout the day to keep the school clean and sanitary. This is accomplished

through routine cleaning and disinfecting of classrooms, playground and gym equipment, toys, bathrooms, and common areas throughout the day.

Classrooms are equipped with the appropriate cleaning supplies, including soap and water, paper towels, and a non-bleach-based hospital grade disinfectant. Classroom teachers are required to clean and disinfect or sanitize their classroom throughout the school day. Toys mouthed by infants and toddlers are removed from the classroom after each use and are cleaned and sanitized before use by another child.

All classrooms undergo a deep cleaning and disinfection at the end of each school day once the students have gone home. In times of illness, classrooms are cleaned more frequently during the day by both the classroom teacher and EGE Housekeeper, focusing on high touch areas, bathrooms/sinks, tables/chairs, and toys.

Each classroom is equipped with an air purifier.

Teachers will assist students with hand washing with soap and water throughout the school day. *Upon arrival, after using the bathroom and/or having diaper changed, before and after eating, after contact with any bodily fluids, after returning from the park or gym, before going home, and any other times as deemed necessary by the classroom teacher. The school nurse will visit each classroom in the beginning of the year to observe and model handwashing for the children and teachers. SELA asks that parents and guardians continue these important handwashing practices at home as well to decrease the spread of germs and illness within the school.

SELA staff are also required to wash their hands upon arrival at school each morning and throughout the school day. *Upon arrival, after changing a diaper and/or assisting a child with toileting procedures, before and after eating, after contact with any bodily fluids, after returning from the park or gym, after providing any first aid, and any other times as deemed necessary throughout the day.

Hand Sanitizer containing at least 60% alcohol is available to SELA staff and students over age 2 with parental consent. Hand sanitizer will only be used when handwashing is not readily available or accessible and never as a replacement for handwashing.

15. COVID-19 POLICY

Due to the ever-evolving nature of the COVID-19 virus and changes to public health requirements, SELA reserves the right to amend our COVID-19 policy at any time. Families will be notified of any changes to our COVID-19 Policy.

COVID-19 Symptoms

Due to the ever-evolving nature of COVID-19 variants and respective symptoms, SELA asks that you monitor your child's health and test your child for COVID if he/she is experiencing symptoms of respiratory illness. If you are unsure if your child's symptoms warrant a COVID-19 test, please visit the CDC website for the latest list of symptoms and/or contact your child's pediatrician for advice.

COVID-19 Positive

If your child tests positive for COVID-19, they must stay home and isolate for 5 days, with the day of the positive test and/or start of symptoms as day 0. Your child may return to school on or after day 6 with proof of a negative test. We ask for proof of a negative test because young children are unable to mask consistently and correctly when around others. If your child does not produce a negative test, they can return after 10 full days of isolation, returning on day 11.

Exposure to COVID-19

- Monitor your child for symptoms
- Attend school as normal
- ▶ Isolate and test if symptoms develop. Repeat test in 48 hours if symptoms persist.
- ➤ Masking is recommended but not required.

Parents wishing for their child to wear a mask must notify SELA and provide consent. SELA is only able to offer a mask to a child aged 2 and older with parental consent.

Submitting an at-home antigen test to SELA

- Write your child's first and last name and the date the test was administered on the test or a piece of paper if unable to write on the test.
- Take a picture ensure adequate lighting and no background distractions or blurriness.
- Email the photo to your child's School Nurse