

ASPEN LEAF PRESCHOOL ILLNESS AND COVID POLICIES

ILLNESS POLICY

Children will be screened at drop-off for general health and the below symptoms. If a child is exhibiting symptoms, we may require the child be taken home. The decision to send a child home due to illness often requires the exercise of judgment on the part of Aspen Leaf Preschool and is in the full discretion of Aspen Leaf Preschool. If we observe that your child is showing symptoms of illness while in our care, we may isolate him/her so as not to spread the illness to other children and will notify you immediately and require your child be taken home. If you cannot be reached, we may contact your emergency contact. For the health of all children in our care, we require that a child remain at home until he/she is symptom free for at least 24 hours.

COVID symptoms. According to public health agencies, the following are signs or symptoms of COVID:

- Fever (a temperature over 98.6°F under the arm, over 99.5°F orally, or over 100.4°F rectally)
- Fatigue
- Headache
- Myalgia
- Cough
- Nasal congestion or runny nose
- Loss of taste or smell
- Sore throat
- Shortness of breath or difficulty breathing
- Abdominal pain
- Diarrhea
- Nausea or vomiting
- Poor appetite or poor feeding

If your child **or any individual in your household** is experiencing COVID symptoms, your child must be kept home at least until the individual obtains a negative COVID test. If you have multiple children attending Aspen Leaf, all children will need to be taken home if one exhibits any COVID symptom. **The symptomatic child may return to school after one of the following occur:**

- The child has been symptom-free for at least 24 hours **and** your child obtains a negative COVID test;
or
- Your child has been kept at home for 10 days **and** has been symptom-free for at least 24 hours.

Once the symptomatic child obtains a negative COVID test, any non-symptomatic siblings may immediately return. For purposes of a negative COVID test, Aspen Leaf Preschool accepts the results of all FDA-approved rapid and take-home tests.

Non-COVID symptoms.

- Conjunctivitis (pink eye) or “cold in the eye”
- Mouth sores
- Unusual rash
- Infected skin patches
- Yellowish skin or eyes
- Grey or white stool
- Heavy green or yellow nasal discharge
- Head lice
- Contagious illness of any sort that results in child being too ill to participate in daily activities.

If your child is showing any of these symptoms before coming to preschool, please keep him or her home until symptom free for at least 24 hours.

COVID INFORMATION

Reducing risk vs. “keeping people safe.” When discussing measures and policies to protect against COVID, many people, businesses, public officials, and schools talk about what they’re doing to “keep people safe.” We believe use of the phrase is potentially misleading, for if transmission occurs at a business, does that mean the business was operating in an “unsafe” way? Not necessarily. We believe it is both more accurate and more helpful to talk candidly and realistically about “reducing risks” by:

- (1) Identifying the **risks** present at any given business;
- (2) Determining which risks can be eliminated or reduced and implementing measures doing so; and
- (3) Being open and transparent about the remaining risks.

Broadly speaking, the risk of transmission at any given place (business, school, etc.) is based on the following factors and the interplay among them:

- (1) The number of people each person comes into contact with;
- (2) The length of time two or more people must interact;
- (3) The proximity at which those people interact;
- (4) Whether the interactions occur indoors or outdoors, and if indoors, the ventilation available.

Risks we can reduce. The risk factor we are able to meaningfully reduce is the first—the number of people each person comes into contact with. By requiring curbside drop-off and pick-up and siloing each class of children as much as possible (see *below*), we are able to cut by more than half the number of unique individuals who enter the preschool on any given day and significantly reduce the number of unique interactions between children and staff of different classrooms.

Risks we cannot reduce. Families needing preschool or child care typically need at least four, eight, or more hours of care. We therefore cannot meaningfully reduce the length of time the children and teachers at the preschool interact. (After all, 15 minutes of preschool is of no use to anyone.)

We also cannot meaningfully change the proximity at which children interact with each other and their teachers. State and federal guidance issued to schools and child care centers recommends keeping all children spaced 6-feet apart at all times, with individual activities or boxes of toys. While such measures could potentially be implemented on a single given day, the measures are simply impossible and impractical to enforce for an extended period of time and would likely cause significant harm to the social and emotional development of preschool-age children. Infants must be held. Children must play side-by-side and face-to-face. Positive discipline requires a teacher to be close to a child (or multiple children) and to speak at their level.

Aspen Leaf students have always spent significant time outdoors, but also must spend significant time indoors, including for naptime. To improve ventilation, even during naptime when windows are closed and curtained, all classrooms have been equipped with air purifiers that cycle the air and are capable of filtering particles smaller than the novel coronavirus (see *below*).

COVID POLICIES

The primary aim of our policies and protocols is to **prevent the virus from entering the preschool in the first place**. We have expanded our general illness policy (see above). We are also relying on you to minimize your own risk of exposure, to closely monitor your children and household members, and to be honest and transparent with us regarding any possible exposure.

Health screening and social distancing at drop-off and pick-up. At drop-off, a teacher will do a visual health check and take the child's temperature with a touchless thermometer. The teacher may also ask about household members and any recent travel or possible exposures. Families are asked to stay socially distant at drop-off and pick-up.

100% adult vaccination. All teachers and staff employed at Aspen Leaf Preschool are vaccinated. All adults who enter the preschool (e.g., a child's ABA or occupational therapist) must provide proof of vaccination before being allowed to enter.

Air purifiers. Each class has been equipped with a HEPA filter capable of filtering particles down to 0.1 microns in size (the coronavirus particle is approximately 0.125 microns in size) and cycling the air in the classroom approximately 3-4 times per hour.

Enhanced cleaning and disinfecting. To reduce the risk of fomite transmission (transmission of the virus through contact with a contaminated surface), the teachers regularly clean all items that are handled (toys, art supplies, etc.), and clean and disinfect surfaces and high-contact objects such as door handles with commercial disinfectant.

Masks. We require adults (teachers or staff and parents/guardians) to wear masks at drop-off and pick-up. We require teachers and staff to wear masks when entering any classroom or space that is not their primary classroom.

We do not require children to wear masks. First, children cannot wear masks during naptime due to the obvious suffocation hazard, or during meals, so that is approximately 3 hours during which all children in a class cannot wear masks, but are breathing and eating together in an enclosed space. In light of that, requiring masks for children at other times of the day is akin to attempting to dam a 10-foot wide river with an 8-foot wide dam. Moreover, the practical difficulties of keeping masks on preschool-age children would render such a policy ineffective and potentially counterproductive.

We give our teachers discretion to wear a mask or not when in their classroom, interacting with their class. According to public health guidance, standard cloth masks are intended primarily as source control, not as personal protective equipment (i.e., meant to prevent the wearer, if infected, from disseminating infected droplets, not to shield an uninfected wearer from infection). Moreover, the CDC and health officials have advised that prolonged exposure to and interaction in close proximity with an infected person can eliminate the efficacy of masks, even where the parties are wearing masks. The CDC specifically advises any person who has spent more than fifteen minutes being less than six feet from a person who is positive for COVID to self-quarantine, even if both people were wearing masks. Our preschool teachers are spending approximately eight hours, mostly indoors, in close proximity to around ten students who, as set forth above, are not wearing masks. According to relevant studies and public health guidance, such duration and proximity effectively eliminates the efficacy of a mask in that situation.

Moreover, given that the risk of COVID will not be eliminated for months or potentially years, to require teachers to wear masks at all times would have significant harmful effects on the children. Studies have shown that children under six do not recognize whole faces, but recognize faces by component (e.g., they specifically remember the bushy eyebrows or the narrow nose). During these early years, children's brains are developing their facial recognition abilities. Children also depend on facial expressions to understand and interpret emotion, and specifically rely on seeing mouths to develop their own verbal skills. Such social and emotional development would be severely stunted if faces they routinely see are constantly masked.

For these reasons—the apparent absence of any health benefit due to the length of time teachers spend with their students and the proximity at which they must interact; taken together with the clear, known deleterious effects requires masks for teachers would have on infants, toddlers, and preschool-age children—we give our teachers discretion about wearing a mask while in their primary classroom.

What we will do if someone at the preschool tests positive for COVID. If any student or teacher at the preschool tests positive for COVID-19, we will inform all families immediately. We will close immediately and the preschool or only the affected classroom may remain closed for 10-14 days due to the incubation period for COVID. Per licensing guidelines, we will notify the San Diego Health & Human Services Agency. We will follow whatever guidance/instructions are issued to us by the health agency and immediately pass those instructions on to you.

If a child is exposed to COVID. If a student comes into contact with a person who has tested positive for COVID-19, the student must self-quarantine for 14 days. If no symptoms develop after that period, the student may return to school. We may require your child to obtain a negative COVID-19 test before returning.

Closures. We will close the preschool if ordered to do so by a relevant authority (city, county, or state) or if a child or teacher tests positive for COVID as set forth above. Absent those circumstances, we will endeavor to remain open by strictly enforcing our general illness policy and the COVID-specific policies outlined above.