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UNF COVID-19 Response

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8-17-2020

UNF Preschool Covid-19 Pandemic Policy and Attendance Acknowledgement and Disclosure

UNF Preschool

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UNF PRESCHOOL COVID-19 PANDEMIC POLICY AND ATTENDANCE ACKNOWLEDGMENT AND DISCLOSURE

Hello Families,

In order to reopen as safely as possible our program has established new policies and procedures. These policies are effective beginning on <u>17th of August 2020</u> and will be in place until further notice. Please read each item below, sign, and return to front office or email document to unfpreschool@unf.edu by your first day of attendance.

 I, ______, parent/guardian of ______ wish to

 begin attending on _______

 . Tuition will resume on your first day of attendance as identified

 above.

Please read each statement below and sign. Pursuant to the UNF Preschool's policies for enhanced health and safety precautions during the COVID-19 Pandemic:

• I understand that during this COVID-19 Public Health Emergency, I will NOT be permitted to enter the facility beyond the designated drop-off and pick-up areas located outside the classroom doors. First, I will wait for my child to be screened for signs of illness daily by UNF Preschool staff at the designated screening station and complete the health screen checklist for myself and my child(ren). Then, I will walk my child over to the classroom and wait outside the door until the teacher let's my child in. At pick up I will get the teacher's attention by knocking on the door and wait outside for my child.

• I will wait my turn to drop off/pick up my child(ren) and practice proper social distancing and wear a mask while on program premises. Only one guardian is permitted per family at drop off and pick up.

• Staff will sign my child in and out. I will sign the report at the end of the month.

• In compliance with CDC and Department of Children and Families recommendations, I understand that all staff and children will wear a mask/face covering while inside the building, when feasible*. I will also be required to wear a mask while on UNF Preschool premises. I understand that I will be required to provide a mask for my child.

• I understand that pursuant to the UNF Preschool's COVID-19 policy, that to enter upon the facility premises myself and my child(ren) must be free from COVID-19 symptoms. I will complete the required health screen checklists each day during drop off.

• If, during the day, any of the following symptoms appear my child will be separated from the rest of the people in the center. I will be contacted, and my child MUST be picked up from the facility within 1 hour of being notified.

Symptoms include,

- fever of 99.7 degrees Fahrenheit or higher with a non-contact thermometer or 100.4 degrees Fahrenheit or higher with a temporal thermometer, now or in the preceding 48 hours
- cough
- shortness of breath or difficulty breathing
- chills
- loss of taste or smell
- sore throat
- muscle aches
- diarrhea

• I understand that my child's temperature will be taken, and a health assessment completed before entering the center. My child may be denied entry if he/she presents any of the symptoms listed above.

• I understand that my child will be required to wash their hands using CDC recommended handwashing procedures throughout the day using running water and rubbing with soap for at least 20 seconds. Teachers will help children wash hands.

• I understand that outside of care, in order to control my child's exposure in the community, I will comply with any and all federal, state, county or local orders.

• I will immediately notify the center director if I become aware of any person with whom my child or I have had contact exhibits any of the symptoms listed above, is advised to self-isolate, quarantine, or has tested positive, or is presumed positive for COVID-19.

• I understand that while present in the facility each day my child will be in contact with children, families and other employees who are also at risk of community exposure. I understand that no list of restrictions, guidelines or practices will remove 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection.

• I understand that I play a crucial role in keeping everyone in the facility safe and reducing the risk of exposure by following the practices outlined herein.

• I will not bring unnecessary items into the program. This includes the storing of car seats and strollers.

• I will not enter the classrooms, except for preauthorized circumstances as defined by the program director.

• If I bring my child, it is because everyone in our home is healthy and symptom free, with no known exposure to COVID19.

• Fever reducers will not be given to my child on any day of attendance, regardless of reason for fever reducer.

• I will thoroughly wash or hand sanitize my and my child's hands before dropping off, prior to picking up, and as soon as we return home.

• I understand that water fountains will be turned off until further notice due to risk of cross contamination and that I will provide a disposable water bottle for my child(ren) with his/her name written on it.

• I understand that UNF Preschool will not be providing morning and afternoon snacks until further notice due to risk of cross contamination. I will provide a healthy snack for my child(ren) in a brown/ziplock bag with my child/ren's name and date written on it.

• I understand that in order to keep cross-contamination at a minimum, I will need to send my child/ren's lunch in a brown bag/or zip lock bag. I will make sure it is labeled with my child/ren's name and date written on it. I will also send disposable utensils for my child/ren to use for snack and lunch.

• I understand this situation is fluid and subject to change per federal, state and local authorities, as well as program needs.

• I understand failure to follow these new safety guidelines may result in my child not being able to attend UNF Preschool.

* We understand that children may not be able to wear a mask effectively. If we notice that children are not keeping masks on or are repeatedly touching their masks (thus rendering them ineffective), we will cease the use of masks with children.

I certify that I have read, understand, and agree to comply with the provisions listed above.

Child(ren) Name: D	Date of Birth(s):
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Parent/Guardian Name

Parent	Signature:	
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