

Westchester Community Opportunity Program (WestCOP) Re-opening Plan 2020-2021

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Mission Statement

At Westchester Community Opportunity Program Inc.(WestCOP) we are committed to provide a high quality early childhood program for infants, toddlers and preschool aged children in the communities we serve. The goal of our Early Childhood Education Program is to prepare our children for Kindergarten and beyond. We offer a research-based early childhood curriculum and assessment that focuses on school readiness skills and learning across all domains. We invite parents, guardians, grandparents, and other family members to take an active role in participating in their child's education, which we make possible in a variety of ways. Please contact the Director of your child's center if you are interested in becoming a parent volunteer, and/or becoming a member of the local parent policy council.

Overview

At WestCOP our primary commitment is to the children and families we serve. This Re-Opening Plan will define clear guidance for the reopening of our 20 Centers and aligns with the regulations developed in collaboration with Child Care Center Regulations from the NYS Office of Children and Family Services (OCFS), New York State Department of Health (NYSDOH) and guidance established by the New York State Education Department (NYSED).

Our priority must be keeping our entire learning community safe. When the 2020-2021 Program year begins, centers will look and appear different than previous years. Whether we enter remotely, or with in-person (100%) instruction, or as a hybrid model due to COVID-19, health and safety measures will continue to evolve.

The areas outlined in this plan represent the numerous considerations WestCOP will address to reopen centers safely and to sustain their safe operation. It is important to note that our plan retains a strong focus on instructional supports to aid children's educational needs and address learning loss. An emphasis on the social-emotional needs of our students is a priority and therefore have been addressed within our plan. As is our mission, we serve the needs of children and families comprehensively: supporting their access to nutrition, health, mental health, and access to social services remains our mission.

The health and safety of our students, our staff, and their families is our top priority. We have developed a plan that intends to ensure that students and employees feel comfortable and safe returning to our centers. Our reopening plan incorporates recommendations and guidance from the Centers for Disease Control and Prevention (CDC), the New York State Department of Health (NYSDOH), and the New York State Education Department (NYSED).

It is possible that we may need to alternate between in-person and remote learning throughout the year due to recommendations and guidance from our partnering agencies, and stay-at-home orders from the Governor. The level of infection, the spread of the virus and response to the disease in our community will be at the forefront of decision making as we move to open our Centers.

There is one WestCOP administrative Office which is responsible to supervise, monitor, and make modifications to the Plan, as deemed necessary in accordance with the Governor's Order, New York State Department of Health, and the New York State Education Department's Guidance. We also adhere to the Child Care Center Regulations from the NYS Office of Children and Family Services (OCFS)

Our Communication Goals

WestCOP's goals regarding communication are as follows:

- To encourage all children, families, staff, and visitors through verbal and written communication (e.g., signage) to adhere to NYSED, OCFS, CDC, and DOH guidance regarding the use of acceptable face coverings - a face mask covering the nose and mouth, when a social distance cannot be maintained.
- To provide information to families through a wide array of platforms including email, telephone calls, "One Call Now" messaging, text messaging, social media, and WestCOP website postings.
- To provide information on how families can access technology and receive technical support to assist with utilization and maintenance of equipment.

Guiding Principles

The development of this plan was guided by and grounded in the following guiding principles:

1. Safeguarding the health and safety of children and staff;
2. Providing the opportunity for all children to access education in the fall;
3. Monitoring centers and staff. When necessary, modifying schedules to appropriately contain COVID-19 spread;
4. Emphasizing equity, access, and support to the children and communities that are emerging from this historic disruption;
5. Fostering strong two-way communication with Families and Staff
6. Factoring into decision making the challenges to the physical safety, social emotional well-being, and the mental health needs of our children and families caused by Center closure.
7. It is essential to support diversity in our centers and school districts as we provide education

To help inform our reopening plan, WestCOP has sought feedback and input from stakeholders, including staff, parents/guardians, local health department officials, health care providers, and OCFS. This work will continue, as it is vital to the success of our partnerships. Engagement efforts included online surveys, virtual forums/meetings, and one-on-one conversations.

WestCOP is proposing three Models: Center Based/In person, Hybrid Model, and Virtual/Remote. All three models would allow us to maintain the high quality of instruction which we have always provided in our early childhood settings.

WestCOP In-Person/ Center Based Model

Drop Off and Pick Up Procedures:

- Children arrive with parents/guardians at staggered times.
- Sign-in stations will be placed outside, and WestCOP will provide disinfecting wipes for cleaning pens between each use and for hand sanitizing.
- Parents and staff must wear masks within the Center.
- Visitors are not allowed without and scheduled appointment time. (Related service providers from outside agencies will be allotted a specific time, and may only visit one child/ classroom in the Center per day; must follow CDC Guidelines and complete Staff/ Visitor Screening Form)
- Parents will have access to their children while at the Center, but parents must schedule an appointment and follow CDC and DOH Guidelines.

- WestCOP will post signs throughout the site, consistent with DOH COVID-19 signage, and also share any updates with families. Signage should be used to remind individuals to:
 - Cover their nose and mouth with a mask or cloth face-covering.
 - Properly store and when necessary, discard PPE.
 - Adhere to physical distancing instructions.
 - Report symptoms of or exposure to COVID-19, and how they should do so.
 - Follow hand hygiene, cleaning, and disinfection CDC/DOH guidelines.
 - Follow appropriate respiratory hygiene and cough etiquette.
- Toys from home will not be allowed at school.
- Personal belongings will not be shared.
- Children will depart on a staggered schedule

General Procedures Regarding Staff and Families:

- All staff, visitors, essential visitors, family members, volunteers who enter the program, must complete the **OCFS Form 6040 “Attestation”** on their initial visit (**SEE APPENDIX 1**)
- All employees must complete a daily **WestCOP Staff/Visitor Screening Form (SEE APPENDIX 2)** before their assigned work shift.
- All employees and visitors must sign **OCFS 6039 “Child Care Program Tracker” (SEE APPENDIX 3)**
- Employees and visitors must have their temperature taken before entering the program.
- Staff and visitors must wash their hands and put on a facemask or cloth face covering.
- Recommended when caring for young children:
 - Wear an over large button down, long sleeve shirt or smock and put long hair up off of the collar in a ponytail or other up-do.
 - Have multiple changes of clothes on hand for employees and children in the program.
- As per state guidelines, children over two years old use face masks when in the community. Children will be encouraged but not required to wear masks within the classroom.
- For those parents who desire for their children to wear a mask, a mask waiver will be filled out by the parents. The children will not wear masks when engaging in vigorous physical activity.
- Staff will review the **Parent Check-In Report (SEE APPENDIX 4)**

- Staff will make a visual inspection of the child for signs of illness, including flushed cheeks, rapid or difficulty breathing, fatigue or fussiness, document on **Daily Health Check Form (SEE APPENDIX 5)**.
- Students will have their temperature upon arrival at the Center and it will be recorded. Staff will use a clean pair of gloves for each child and the thermometer will be cleaned and sanitized between each check. A non-contact thermometer will be used when checking temperature.
 - Anyone who has a temperature of 100° F or has a positive response on the screening form must be reviewed by the Director or designee to determine if the person may enter the building
- Staff will ensure children's hands will be washed upon arrival.
- Social distancing between staff and children and between children will be maintained to the highest degree possible. As needed, environments will be re-arranged to maximize the ability for children and staff to socially distance. During Rest Time, children will remain 6 feet away from peers.
- All children will be treated equally during the screening process
- A child that arrives without a screening form completed by his or her parent/ guardian will not be singled out.
 - These children will be treated in a confidential manner and will have screening completed as quickly as possible.
- Emergency contact information must be updated.

Cleaning and Disinfecting Efforts:

- A cleaning and disinfecting schedule will be followed multiple times daily and documents on the **WestCOP Cleaning Company Log (SEE APPENDIX 6)**. Including; door knobs, light switches, sink handles, countertops, toilet seats, restrooms, tables, chairs, and playground structures.
- Reasonable measures have been put into place limiting the sharing of objects, such as electronic equipment, art materials, toys, as well as the touching of shared surfaces. Children will have individual art boxes, sensory materials, and sensory bins. Employees will wear gloves when in contact with shared objects or frequently touched surfaces.
- It is required that children and staff practice hand hygiene:
 - Upon arrival to the Center, entering the building, and each classroom.

- Between program activities
- After shared objects or surfaces (electronic devices, musical instruments, tools, toys, and table tops)
- After sneezing, wiping, blowing nose, or coughing into hands
- Coming in from outdoors
- After using the restroom
- After toileting/diapering
- Before and after eating
- Whenever they are dirty
- Before departing the last program activity.
- Hand hygiene stations will be provided and maintained on site, as follows:
 - For handwashing; soap, running warm water, and disposable paper towels.
 - For hand sanitizing: an alcohol-based hand sanitizer containing at least 60% alcohol for areas where handwashing facilities may not be available or practical.
 - Hand sanitizer will be made available throughout the common areas on site including entrances, exits, elevators, and reception areas but out of the reach of unsupervised children.
 - Signage is placed near hand sanitizer indicating visibly soiled hands should be washed with soap and water.
 - Some students and staff may be unable to use alcohol-based hand sanitizer for health reasons. They will be permitted to wash their hands with soap and water.
- Covered no touch, foot pedestal trash cans will be placed around the school as needed for the disposal of soiled items, including PPE.
- Toys that children have placed in their mouths must be set aside until they are cleaned according to OCFS Health Care Plan Appendix E/CDC DOH guidelines. Use **OCFS Form 6041 Cleaning And Disinfecting Log (SEE APPENDIX 7)**
- When a child is soiled with secretions, the child's clothing will be changed and the child will be cleaned as needed.
- When diapering/ providing assistance with toileting, wear gloves, wash hands (staff and children), and follow cleaning and disinfection steps between each child per CDC guidelines.

Classroom Physical/ Social Distancing Strategies:

- Classes should include the same group each day and the same staff should remain with the same group each day. Students and staff should not change groups or mix groups.
- A staffing plan should be maintained that does not require staff to “float” between different classrooms or groups of children, unless such rotation is necessary to safely supervise the children due to unforeseen circumstances (e.g. staff absence).
- Keeping siblings together is possible, within OCFS guidelines.
- Keep group sizes small. 10-15 students plus staff
- Arrange furniture to give children more space, reconfigure space to limit overall density of the room. Rooms will maintain capacity as allowed by OCFS however within the classroom subgroups will be a maximum of 15 children.
- Windows will be open for fresh air as much as possible.
- Limit the number of toys and materials available at one time. Remove all materials after a few hours for cleaning and replace with additional clean toys.
- Encourage independent play stations.
- Spend as much time outdoors as possible.
- Separate tables with seating at least six feet apart from other tables, as feasible. Stagger meal times to reduce congregation.
- At meal times, serve children with an individual plate rather than family style.
- Teachers and Assistant Teachers wear gloves when serving food.
- Children should not use serving utensils.
- Limit gatherings of employees (breaks, meetings) to the greatest extent possible.
- Reduce bi-directional foot traffic using tape or signs with arrows in narrow aisles, hallways or spaces. Separate staircases are designated up and down to limit passing in close quarters of staff and students. Post signage and distance markers denoting spaces of 6ft in commonly used areas and any area in which lines are commonly formed or people may congregate.

Procedures in the case of Suspected or Confirmed Cases:

- If a staff member becomes ill during the day he or she will immediately leave the Center. Staff must adhere to WestCOP COVID-19 policy.
- If a child becomes ill during the day, the child will be isolated, while maintaining supervision, in a separate room or space. The child will wear a mask if possible. A Health Specialist or Director is available to assess individuals as chronic conditions such as asthma and allergies or chronic

gastrointestinal conditions may present the same symptoms as COVID-19 but are neither contagious nor pose a public health threat. Proper PPE will be required anytime a staff-person may be in contact with a potential COVID-19 patient.

- The parent/guardian will be called to immediately pick up the ill child. A staff member must stay with the child, wearing a mask and PPE.
- Other considerations include:
 - Closing off areas used by a sick person and not using these areas until after cleaning and disinfection has occurred.
 - Opening outside doors and windows to increase air circulation in the area;
 - Waiting at least 24 hours before cleaning and disinfection. If waiting 24 hours is not feasible, wait as long as possible.
 - Clean and disinfect all areas used by the person suspected or confirmed to have COVID-19, such as offices, classrooms, bathrooms and common areas.
 - Once the area has been appropriately cleaned and disinfected it can be reopened for use.
 - Individuals without close or proximate contact with the person suspected or confirmed to have COVID-19 can return to the area and resume Center program activities immediately after cleaning and disinfection.

Protocols for a Reported Case of Covid-19 on a Center Bus

When a possible case of COVID-19 on a bus is reported, the Center Director will be notified, who will then notify the Director of Early Childhood. Steps will be implemented to contact parents of the children on that bus.

Bus will be taken out of service for 24 hours before the bus can be used again after a report of COVID-19. Bus will be disinfected following CDC guidelines.

Return to Center after Illness

Once a child or staff person is excluded from the Center, they may return if they satisfy the recommendations of the CDC and their return is coordinated with the local health department.

Currently, those guidelines are:

- 1. Untested:** Child or staff who have not received a test proving or disproving the presence of

COVID-19 but experience symptoms may return if the following three conditions are met:

- a. They have not had a fever for at least 72 hours (that is three full days of no fever without the use of medicine that reduces fevers); and
- b. Other symptoms have improved (for example, when your cough or shortness of breath have improved); and
- c. At least ten (10) calendar days have passed since your symptoms first appeared.

2. **Tested:** Child or staff who experienced symptoms and have been tested for COVID-19 may return to Center if the following three conditions are met:

- a. They no longer have a fever (without the use of medicine that reduces fever);
- b. Symptoms have improved (for example, when cough/shortness of breath have improved);
- c. Health provider approves their return to center program.

3. **Tested with no symptoms:** Child or staff who have not had symptoms but test positive for COVID-19 may return when they have gone ten (10) calendar days without symptoms and have been released by a healthcare provider.

A child may also return if they are approved to do so in writing by the child's pediatrician.

WestCOP will refer to DOH's "Interim Guidance for Public and Private Employees Returning to Work Following COVID-19 Infection or Exposure" regarding protocols and policies for staff seeking to return to work after a suspected or confirmed case of COVID-19 or after the staff member had close or proximate contact with a person with COVID-19.

- In the event that a parent/guardian of a child must isolate because they have tested positive for or exhibited symptoms of COVID-19, the parent/guardian must be advised that they cannot enter the Center for any reason, including picking up their child.
- If the parent/guardian who is a member of the same household as the child is exhibiting signs of COVID-19 or has been tested and is positive for the virus, utilize an emergency contact authorized by the parent to come pick up the child. As a "close contact," the child must not return to the Center for the duration of the quarantine.

Screening:

- A mandatory health screening assessment will be implemented (e.g. questionnaire, temperature check) for employees, visitors (e.g. therapists, vendors) and children.
- Screening asks about:
 - COVID-19 symptoms in the past 14 days
 - Positive COVID-19 test in the past 14 days
 - Close or proximate contact with confirmed or suspected COVID-19 cases in the past 14 days
 - Traveled internationally or from a state with widespread community transmission of COVID-19 per the New York State Travel Advisory in the past 14 days.
- Responses will be reviewed and documented daily.
- Immediately notify the state and local health department, WestCOP Health Coordinator, HR Director about any positive test result by an employee or child at their site.

Closure Considerations

When a person has been identified (confirmed) or suspected to be COVID-19 positive, the Center Director will coordinate with WestCOP Central Office in order to make a determination regarding the closure of a classroom or building.

WestCOP will implement as needed short-term closure procedures regardless of community spread if an infected person has been in a school building. If this happens, CDC recommends the following procedures:

- Closing off areas used by ill person(s) and locking off area(s), signage can also be used to ensure no one enters the area. If possible, wait 24 hours before you clean and disinfect. If it is not possible to wait 24 hours, wait as long as possible. Do not use the area(s) until cleaning and disinfection has taken place.
- Opening outside doors and windows to increase air circulation in the area.
- Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill person(s), focusing especially on frequently touched surfaces.
- Communicating as soon as possible with staff and families
- Should a classroom or Center need to be closed, develop a plan for continuity of education, medical and social services, and meal programs and establish alternate mechanisms for these to continue.

- WestCOP will adhere to DOH guidance/procedures for when someone tests positive.

Transportation:

- Some Centers provide transportation, which is provided by WestCOP or in some cases by the County. Parents can choose to drive in or walk with children
- Head Start Students will be provided with agency bussing with the following requirements.
 - All field trips are suspended until it is safe again.
 - Buses must be clean and sanitized before and after each pick up and drop off.
 - Drivers and Monitor must complete a daily **STAFF/VISITOR SCREENING FORM** before work shift
 - Monitors must collect the daily **PARENT CHECK IN REPORT**
 - Ensure children who are over the age of two and able to medically tolerate a face covering, are wearing face coverings.
 - Drivers and Monitor must wear a mask and gloves.
 - Gloves must be changed after assisting a child into their car seat or when physically assisting a child on the bus.
 - Programs should ensure that when children are boarding the vehicle, they are occupying seats from back to front, where feasible.
 - Space out children as much as possible in the bus
 - Keep Social Distance as much as possible when picking up and dropping off students (6 feet apart)
 - Programs should increase ventilation, when weather permits, within any vehicle (e.g. opening the top hatches of buses or opening windows) within the discretion of the driver
 - More than one bus run may be necessary.

Staff and Parent Communications:

- Staff and Parents can affirm they have reviewed and understand the Reopening Plan guidelines, and that they will implement them. Refer to **STAFF/VISITOR SCREENING FORM** and **PARENT CHECK IN REPORT/Parent Communication Reopening COVID Letter**.
- All employees/staff will be trained on applicable precautions/policies in the State's guidance either remotely or in person, using appropriate social distancing and requiring face coverings for all participants prior to reopening.

- Post signage inside and outside of the facility to remind individuals to adhere to proper hygiene, social distancing rules, appropriate use of PPE, and cleaning and disinfecting protocols.
- Conspicuously post completed summary safety plans on site.
- Designate a staff person to be responsible for responding to COVID-10 concerns. Employees and parents/guardians will know who this person is and how to contact them.

Social-Emotional Support for Children’s Return to The Program:

- All staff will be trained on how to identify and mitigate signs of COVID 19-related trauma, as is appropriate to the staff person’s role. A training on this topic is being provided to all staff as part of August, 2020 Preservice.
- It is important to comfort crying, sad, and/or anxious children in a manner consistent with their age and level of development.
- When changing, feeding, or holding very young children: Classroom staff can protect themselves by wearing an outer smock or shirt and by wearing long hair up. Hold a child face out if possible.
- Young children will want to be near other children. Setting up the environments with lots of independent activities can help. The set of Legos could be broken into three bins in different areas. Children will be moved away from each other when possible, without causing distress.
- Young children feel unsettled by changes in routine and will notice if people around them are worried and upset. Children who are exhibiting more challenging behavior more than usual, being defiant or acting out may actually be feeling anxious. Teachers will respond to outbursts in a calm, consistent, comforting way.
- Children’s responses to stressful events are unique and varied. Some children may be irritable or clingy, and some may regress, demand extra attention, or have difficulty with self-care, sleeping, and eating. New and challenging behaviors are natural responses, and adults can help by showing empathy and patience and by calmly setting limits when needed.
- Children may regress with toilet training. Be prepared for accidents and use pull- ups. Teachers will make sure there are lots of extra clothes.
- Keep children busy. When children are bored or idle their levels of worry and disruptive behaviors may increase. Children need ample time to engage in play and other learning experiences.

WestCOP Mental Health Specialists Support of Children and Families

- Educate staff, parents and children and provide for professional development opportunities, on mental health and wellness.
- Promote social emotional learning competency and build resilience
- Help ensure a positive, safe program environment
- Teach and reinforce positive behaviors and decision-making
- Encourage good physical health
- Help ensure access to community based mental health supports.

WestCOP Hybrid Model

Overview of Hybrid Model

- WestCOP Centers will offer a hybrid model for any student that has opted for this model.
- The children participating in virtual instruction will participate through Zoom or a similar platform in the large group, story time, math and literacy instruction, and music and movement activities with the class.
- All related services will be provided virtually or on-site according to the child's IFSP or IEP
- Weekly phone conferences with families will be conducted with the Teacher and/or other Specialists (Health, Mental Health, Developmental, Family Advocate) so that any questions or concerns can be addressed.
- Weekly activities will be sent home to the children including games, math manipulatives, open-ended materials, and books.

Hybrid Example:

- Based on New York State Guidelines if the daily infection rate's 14 day average reached 5% the Center would begin a hybrid model to reduce the number of children and staff in the Center building at one time.
- On the days that students will attend virtual class they will participate, through Zoom or a similar platform, in circle time, story time, literacy, and math activities. The students will have two opportunities to participate in synchronous class lessons with the Teacher and Assistant Teacher. They will also be provided with activities to complete at home including, open-ended materials, math manipulatives, and books.

- All efforts will be made for related services to be provided on the days students are in person.
- *In the example below, the Center’s children were divided into Cohort A and Cohort B. Cohort A attends at the Center in-person the first week, Monday and Tuesday; and on the second week attends at the Center in person Thursday and Friday. Cohort B is the opposite: the first week Cohort B attends at the Center in-person Thursday and Friday; and the second week attends at the Center in-person Monday and Tuesday. All students attend virtual learning on Wednesdays, in this example.*

(One example)

Monday	Tuesday	Wednesday	Thursday	Friday
Cohort A In-person	Cohort A In-person	Virtual Learning for all children	Cohort B In-person	Cohort B In-person
Cohort B Remote	Cohort B Remote		Cohort A Remote	Cohort A Remote

WestCOP Virtual/Remote Model

- Based on New York State Guidelines if the daily infection rate’s 14 day average reached 9% in a municipality in which the Center’s families live, the WestCOP Center will begin a school wide Virtual/Remote model.
- The children will participate through Zoom or a similar platform, in circle time, story time, literacy, and math activities with the class.
- The children will have daily opportunities to participate in live sessions with the Teacher and Assistant Teacher.
- In addition to live lessons, pre-recorded lessons in math and literacy, music and movement activities, Second Step Lessons, virtual field trips etc. will be provided weekly for children and families to participate in.
- Individual teaching sessions for a student to meet with the Teacher or Assistant Teacher will also be provided at a minimum of two times a week. This will allow for a more thorough approach to working toward individual learning goals.
- Related services will be provided as per the mandate of the child’s IFSP or IEP

- Weekly activities will be sent home to the student including learning games, math manipulatives, art project supplies, books, and open-ended materials
- Weekly phone conferences with families will be conducted with the Teacher and/or other Specialists (Health, Mental Health, Developmental, Family Advocate) so that any questions or concerns can be addressed.

During the 2019-2020 program year from March-June 2020, WestCOP conducted virtual/remote sessions in all Centers, in order to continue providing a continuity of learning. Our **Virtual/Remote Learning** as well as in our **Hybrid Model** will be sure to include the following attributes as noted in the NYS Reopening Guidance Document to effective learning and student outcomes:

- Create and foster culturally responsive
- Appropriate learning environments
- Child/Family empowerment
- Professional Development to provide guidance to remote learning, best practices, modeling, demonstration and team teaching
- Synchronous Learning Opportunities
- Asynchronous Learning Opportunities
- Embedded Professional Development
- Rigor Curriculums (Creative Curriculum, Second Step, Building Blocks and IMIL)
- Parent Workshops

We will continue to use the WestCOP website to maintain communication with our families and community stakeholders, including modifications or changes made to any of our instructional models.

Technology and Connectivity

Access to technology is essential for the successful roll-out of this plan. WestCOP has sought out grants for technology, in order to strive towards equitable access for staff and children. The team has initiated plans that are mindful of families' home access to reliable internet and devices.

1. All families were surveyed to assess the need for both high-speed internet and a device which would allow their child to participate in either a Hybrid or Virtual/Remote Model. WestCOP

will continue to assess the ongoing needs of our families for technology and connectivity (mainly in the form of surveys - electronically and when necessary in-person or via mail).

2. Conduct and/or maintain an inventory of equipment and other assets.
 - a. Identify which families, and staff have WestCOP assets in their possession.
3. Identify professional learning needs for Teachers and Teacher Assistants and continue to support their development of skills and pedagogy in a virtual learning environment.
4. Arrange a "Helpdesk" system for parents and Teachers to report technical issues that might be experienced during virtual/remote learning. Communicate protocols to these stakeholders to inform them in advance of how to gain assistance in such cases.

WestCOP will provide all children with access to learning materials and resources in multiple formats, wherever possible. Further, WestCOP will support teachers through professional development and coaching on pedagogical methods that enable students to participate in multiple ways, so that they can achieve educational goals in both the Hybrid and Virtual/Remote models through the use of both synchronous and asynchronous technologies. In the event families do not have sufficient access to devices and/or high-speed internet, WestCOP will provide the families with alternate methods to access materials and instruction (i.e. pick up materials at the Center).

Training and Professional Development

WestCOP will train all staff and families on new protocols and frequently communicate safety guidelines. Training on the precautions listed below will be conducted either remotely or in person. Social distancing and face coverings will be required for all participants if training is conducted in person. Training material is designed to be easy to understand and available in the appropriate language and literacy level for all workers.

At an age appropriate level, WestCOP will ensure all children understand how to follow new COVID-19 protocols safely and correctly, including but not limited to hand hygiene, proper face covering, wearing and social distancing. Guidance will also be provided in:

- Prevention of disease spreads by staying home when they are sick.
- Proper respiratory etiquette, including covering coughs and sneezes.
- Creating distance from themselves and peers

Training topics for all staff, substitutes and volunteers

- Proper hand washing: proper hand hygiene. Promote frequent and thorough hand washing by providing employees, and visitors with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% ethanol or 70% isopropyl alcohol. Provide training on proper handwashing and hand sanitizer use: <https://www.cdc.gov/handwashing/when-how-handwashing.html>
 - Proper cough and sneeze etiquette
 - Social Distancing: Provide training for staff on how to address close contact interactions with children as part of every day job tasks. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>
 - Operating procedures (various by building)
 - Entrance into the building
 - Cleaning procedures
 - Sick child pick up
 - Staff or children who are sick
 - Identifying symptoms when staff or children are suspected to be sick
<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>
 - Proper cleaning techniques
 - Cleaning and disinfecting
<https://www.cdc.gov/coronavirus/2019-ncov/community/clean-disinfect/index.html>
 - Personal Protective Equipment - PPE: Provide training for staff on wearing, putting on, removing and discarding PPE, including in the context of their current and potential duties <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Professional Development for Staff on Virtual Delivery of Instruction

In an effort to assure high-quality teaching and learning, a Continuity of Learning Plan is being developed for the 2020-21 program year. This document considers and plans for teaching and learning in-person, virtually/remotely, and through hybrid models of instruction. Our plan assures that instruction is aligned with the New York State Learning Standards, Head Start Program Performance Standards, and assures equity as well as quality for all children and families.

While WestCOP's educational staff are highly seasoned and skilled at delivering in-person instruction, the inception of remote instruction beginning in March, 2020 presented new challenges. Professional development in the area of virtual instruction began in April, 2020 and has continued. For the 2020-2021 year, Education Specialists, under the supervision of the Education and Professional Development Coordinator, this will continue. Some aspects of the training include:

- Working with parents to increase understanding of the value of virtual learning
- Designing a lesson plan which works over a virtual platform
- For infants and toddlers, providing an appropriate interactive group setting
- Teaching children in virtual sessions to maintain awareness of camera and microphone
- How to troubleshoot technology issues in sessions to maximize children's learning
- Increasing parental involvement in continuing the lesson at home, between virtual sessions

WestCOP utilizes a wide variety of professional development resources including from ECLKC (Early Childhood Learning and Knowledge Center), a resource from the Office of Head Start. Some of the specific resources disseminated to staff include:

1. **Social Distancing in Early Childhood Education: Feasible or Impossible** https://goto.webcasts.com/starthere.jsp?ei=1322240&tp_key=120a2ca7cd
2. **Caring for Children in Group Settings During COVID-19, A Follow-up Conversation** https://goto.webcasts.com/starthere.jsp?ei=1312141&tp_key=80ad8382b9
3. **A Guide to Nature Based Learning and Development** <https://eclkc.ohs.acf.hhs.gov/learning-environments/article/nature-based-learning-development>
4. **The Importance of Routines and Schedule** <https://eclkc.ohs.acf.hhs.gov/about-us/coronavirus/importance-schedules-routines>
5. **Understanding Stress and Resilience in Young Children** <https://eclkc.ohs.acf.hhs.gov/mental-health/article/understanding-stress-resilience-young-children-video-series>

Child Nutrition

WestCOP's Nutrition Coordinator oversees the menu planning and production of meals at WestCOP Centers. She is also the contact person to receive and respond to communications from families and to Center staff. Meals will continue to be available to all students, including those attending school in-

person and those learning remotely. For students onsite, meals will be provided while maintaining appropriate social distancing between students. Rather than family-style dining, all meals and snacks will arrive in the classroom pre-plated.

Grab and go hot and cold meal options will be developed to reduce the waiting time in meal distribution during virtual/remote or hybrid learning models.

If not feasible, meals may be served in alternate areas (e.g., classrooms) or in staggered meal periods to ensure social distancing and proper cleaning and disinfection between students. The timing and number of meal servings will be scheduled by each Center in conjunction with the Nutrition Coordinator.

In a Hybrid or Virtual/Remote Model, the same guidelines for children with allergies would be followed as would if the Center was fully open. Communication would continue between building level administration, nursing staff and the Food Service staff in each kitchen.

This Re-opening Plan and that of each WestCOP Center will be Available on the WestCOP website (www.westcop.org) effective September 1, 2020.

Appendix

Appendix 1 **OCFS Form 6040 “Attestation”**

Appendix 2 **WestCOP Staff/Visitor Screening Form**

Appendix 3 **OCFS 6039 Child Care Program Tracker**

Appendix 4 **Parent Check-In Report**

Appendix 5 **Daily Health Check Form**

Appendix 6 **WestCOP Cleaning Company Log**

Appendix 7 **OCFS Form Cleaning and Disinfecting Log**