



Columbia Gorge Education Service District

Early Learning

Department Handbook
and
COVID-19 Procedures



Table of Contents

Standards of Conduct.....	3
COVID-19 Basics	3
Reducing the Risk of Exposure	4
Cleaning, Sanitizing and Disinfecting	4
Supporting Transitions between Groups.....	4
Maintaining a Healthy Play Area.....	5
Face Coverings	5
Disposable Gloves	6
Hand Washing & Hand Sanitizer	6
Ratios	7
Stable Classes.....	8
Snacks.....	8
Limited Entry.....	8
Support for High Risk Children.....	8
Daily Arrivals and Departures	9
Classroom Parent Drop Off/Pick Up	9
Bus Transportation Parent Drop Off/Pick Up	10
Daily Health Screenings and Attendance.....	10
Health Screening for Staff.....	10
Health Screening for Children.....	10
Attendance.....	11
Exclusion	11
Children Experiencing or Exposed to Symptoms.....	11
Sick Child Area.....	12
Confirmed Cases of COVID-19 Within the Facility	12
Supporting Parents during Exclusion	12
Working with Families	13
Compliance	13

Standards of Conduct

The Early Learning department is committed to conducting business with integrity, in accordance with the highest ethical standards and in compliance with all applicable laws, rules, regulations and CGESD policies. All employees are expected to conduct themselves in a manner that honors this commitment.

In the course of your work, you may have access to confidential information regarding children and their families that we serve. Employees with access to such confidential information are responsible for its security and non-disclosure of confidential information.

COVID-19 Basics

Novel coronavirus, known as COVID-19, is a virus strain that has only spread in people since late 2019. Health experts continue to learn about the virus and how the virus spreads. The primary ways in which it is spread from an infected person to others is through the air by coughing and sneezing, close personal contact, such as touching or shaking hands, and touching an object or surface with the virus on it, then touching your mouth, nose, or eyes.

People who have been diagnosed with COVID-19 have reported symptoms that may appear in as few as 2 days or as long as 14 days after exposure to the virus. Primary reported symptoms have included cough, difficult or labored breathing or temperature of 100.4 or higher.

Columbia Gorge Education Service District (CGESD), following Governor Brown's Order, requires that employees receive their Covid - 19 vaccination (August 2021).

For all workers, regardless of specific exposure risks, as much as possible we are required to:

- Maintain social distancing at work, to the extent possible. Limit close contact with others as much as possible and maintain more than six feet of separation.
- Practice good respiratory etiquette, including covering coughs and sneezes.
- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol. Always wash hands that are visibly soiled.
- When in public and at work, wear a face mask.
- Avoid touching eyes, nose, or mouth with unwashed hands. Avoid touching or adjusting mask.
- Clean and disinfect surfaces, particularly high contact areas frequently.
- Avoid close contact with people who are sick. If you come into contact with people who are presumed or confirmed to have COVID-19, monitor yourself as you are vaccinated you are not required to quarantine. If symptoms appear, notify your healthcare provider or the

LPHA to receive your Covid test. If positive, follow directives of the medical professionals and notify your supervisor.

- Do not come into work if you are experiencing symptoms of COVID-19, including frequent cough, sneezing, fever, or difficulty breathing. Seek medical advice and/or testing. Stay home until you are symptom-free for 10 days (without cough- or fever-controlling medications).

Reducing the Risk of Exposure

COVID-19 has not only changed our way of life locally, but also across the nation and around the world. As Early Learning Programs provide essential early childhood education services to children and families, we are committed to ensuring our environments meet the very highest standards of safety.

Itinerant staff will follow safety and health protocols and procedures of preschool facility, and or home care facility that you are entering in addition to CGESDs Early Learning procedures. If deemed unsafe please speak with your supervisor, we will reassess service plans to support children served at that facility and or in that program. At this time, we will continue to offer services outside, in designated rooms at the 10th Street site and/or in designated rooms at the Dry Hollow Office.

Cleaning, Sanitizing, & Disinfecting

As local, state and federal-level regulations and recommendations have changed, SKP has adjusted our own policies and procedures to match these regulations and keep children, families and staff members healthy and safe.

[Cleaning, Sanitizing and Disinfecting Schedule](#) will be followed for routine cleaning. This list that describes what to sanitize and disinfect and when to do it are based on the Oregon regulations as well as Head Start Performance Standards. These procedures apply to a broad range of items, equipment and structures. This cleaning schedule will be the go-to reference for maintaining sanitation at SKP following Head Start Procedures. A copy of it will be available in every classroom for you to refer to.

Staff will initial the [Cleaning Log](#) daily for documentation of completion.

Classroom items brought to outdoor areas may return to indoor areas with the same stable group and be washed according to their regular schedule. Unclean play items that are normally stored outdoors are to remain outdoors and will be cleaned and sanitized after each use or stored in a restricted area to await cleaning and disinfection (as this presents a risk of unintentional sharing without sanitization, a sign is recommended to clearly indicate where unclean items are being stored).

For centers with possible public access of play areas during closure hours, it is strongly recommended that the disinfecting occur in the morning prior to opening.

Supporting Transitions between Groups

Cleaning and sanitizing play areas and toys multiple times a day is a big undertaking. To simplify transitions between groups during operating hours, we are implementing these strategies:

- Limit the equipment and play items offered for each group of children, while taking care to offer enough items to minimize sharing between children. For example, instead of offering large blocks, balls, and hula hoops, offer just balls and large blocks for a play session, and aim to have each child use a separate hula hoop if possible.
- Follow Head Start procedures for classroom staff to communicate what items were touched and played with to the person who cleans and sanitizes in between groups. A checklist of items and areas or a laminated picture of the playground that is marked with an eraser marker are two suggestions.
- Remove or block off items or areas that are time-consuming or difficult to clean. Bring items that are easier to clean, such as dolls and other toys, to replace removed activities if needed.
- Have a designated area for items that need to be cleaned.

Maintaining a Healthy Play Area Environment

Apart from routine cleaning and sanitizing of play areas, there are other practices that can help reduce the risk of transmission of disease and exposure to bacteria.

- Children will wash their hands or use hand sanitizer before they enter a play area..
- As in the classroom, staff will disinfect any areas contaminated by bodily fluids immediately. SKP has cleaning and sanitizing supplies on hand outside whenever children are present, taking care to keep them stored away from where children could knock them over or access them.
- Toys that come into contact with children's mouths should be removed directly after use. Keep bins for collecting dirty toys outside, and ensure they are kept away from children.
- Playground areas will be sanitized for children following each use with the Electrostatic Sprayer.

Face Coverings

SKP follows the local facial covering recommendations/requirements. CGESD will provide SKP staff with masks, face shields and scrubs. Currently face shields are not suitable as face coverings unless it is for a short period of time when working with children who need to see a therapist's mouth.

The procedure for putting on a face mask: first wash your hands, then put on the face mask. Avoid touching the mask at all after putting it on. When removing the mask, remove it by touching only the straps. After removing the mask, wash your hands. Disposable masks should be changed after lunch, throwing the old mask away and putting on a fresh mask, with clean hands.

Cloth-based face coverings are also acceptable. If you are using a cloth face covering, wash your cloth face covering after each use. Have a bag or bin to keep cloth face coverings in until they can be laundered with detergent and hot water and dried on a hot cycle. If you must readjust your cloth face covering while wearing it, wash your hands immediately after putting it back on and avoid touching your face. Discard cloth face coverings that no longer cover the nose and mouth, have stretched out or damaged ties or straps, cannot stay on the face, or have holes or tears in the fabric.

The purpose of the mask is to limit the spread of the virus. Use of masks limit the water droplets expelled from the mouth or nose of the wearer. Research currently suggests that wearing masks helps prevent people from spreading the virus.

While children are recommended to wear face coverings, they will not be required to at CGESD programs.

Disposable Gloves

The general wearing of disposable gloves during the day is not recommended. Gloves should only be worn for the duration of specific tasks, disposing of gloves at the completion of the specific task.

Use disposable gloves for any form of sanitizing or disinfecting to protect your hands from chemicals. As always, gloves should be used when performing daily health checks, changing diapers, cleaning up blood, handling dirty laundry and cleaning other potentially infectious material such as vomit and diarrhea. Best practice is that if you're cleaning anything or changing a diaper, remember to have gloves on.

Remove gloves safely every time.

Start by rolling the first glove off the hand, turning it inside out in the process. While holding the now empty glove in the gloved hand, grasp the empty glove in the palm of the gloved hand and roll down the glove from the second hand, only touching the inside of the glove, rolling the

glove inside out. Touching only the inside of the glove – now outside – throw the gloves away. Immediately wash your hands.

Hand Washing & Hand Sanitizer

Handwashing is a practice which is very important for both staff and children.

Regular and proper hand washing can prevent many illnesses and diseases including the common cold, the flu, norovirus, rotavirus, pink eye, diarrhea, Hepatitis A, salmonella, E. coli, and even meningitis. It can also prevent spreading COVID-19.

The US Center for Disease Control tells us that hand washing is the single most important means of preventing the spread of most infection. By washing our hands, we can prevent both direct and indirect transmission of disease.

Wash your hands with soap and water for at least 20 seconds. Take care to scrub your palms, the backs of your hands, your thumbs, your wrists and in and around your fingernails.

Except for diapering or when eating, preparing, or serving food, hand-sanitizing products with 60-95% alcohol content may be used as an alternative method to handwashing when soap and water are not readily available. You can tell if the sanitizer contains at least 60% alcohol by looking at the product label. Hand sanitizer must be stored out of reach of children when not in use. Washing hands with soap and water is the best way to get rid of germs in most situations.

Staff and all adults in the program need to wash their hands:

- Before any food related activity
- Before and after giving any medications
- Before and after assisting a sick or injured person
- Before and after changing a diaper or helping a child use the toilet
- After arrival at the center
- After using the restroom
- After each entry into the classroom
- After cleaning up bodily fluids

Children in the program need to wash their hands:

- After playing outside
- After arrival at the preschool
- After each entry to the classroom
- After using the toilet or having their diaper changed
- After touching bodily fluids
- Before and after eating
- Before and after sensory play with water, sand, painting and play dough
- After using bottle or cup if the child feeds them self

Ratios

Social and physical distancing requires the intentional creation of physical space between individuals. It will be challenging to maintain social distancing in group settings with preschoolers, but emergency guidelines help with this by changing class size limits for preschool classes. CGESD will follow state guidance for class sizes, recommended to have 35 square feet per individual.

Stable Classes

Children must be maintained in “stable” groups. Children assigned to one class at the beginning of the program should stay with the same group of children throughout the day and the duration of the program unless a permanent reassignment to another class is made. Classes may not be collapsed into each other even when ratios are maintained. Teaching staff who are assigned to a class should also stay with the same class each day and efforts should be made to provide the same floater staff for the same stable group each day, to the extent possible.

These stable child groups should use the same physical space each day.

Additionally, stable groups may only use any shared spaces one group at a time. The most commonly shared spaces include outdoor play areas, indoor gyms or recreation spaces, and bathrooms, if not accessible to only one class space. Sharing of shared spaces needs to be planned for, considering the spaces available and needed. Sanitization practices must be implemented for shared spaces in between uses by any members of different groups.

Snacks

Under emergency guidelines, family style snacks are suspended. Social distancing should be maintained to the extent possible. In addition, contact with food and serving should be minimized. Following snack times, follow regular cleaning protocols and use an EPA-registered disinfectant that is active against COVID-19.

Limited Entry

As part of the strategy to limit the spread of COVID-19, entry to the preschools will be limited. This will apply to non-essential visitors, volunteers, and parents who normally have open invitations to visit their children’s classrooms. For as long as it is required by state guidelines, preschools will not be open to these visits. It is important that this information is shared with families as early as possible and supported in on-going practice until such restrictions can be lifted.

Signs will be posted at the entry of the preschools that reinforce for families and other potential visitors – including any delivery services – that only essential personnel will be admitted into the center.

Support for High Risk Children

If a child has a higher risk of severe illness, request that the family consult with their medical provider about the child returning to child care to ensure that the proper supports are in place for that child including modifications of a care plan, putting a care plan in place or other necessary actions. Remember to discourage parents from sending their child when they are sick.

Daily Arrivals and Departures

Ideally, the same parent or designated person will drop off and pick up the child every day. If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children, due to risk for severe illness from COVID-19.

Classroom Parent Drop Off/Pick Up

We will set up a location outside the preschool for families to drop off and pick up children, encouraging 6 feet of physical distancing between families and ensuring necessary sign-in and screenings are conducted. We may stagger arrival and drop-off times and put in place other protocols to limit contact between families and with staff.

Follow the plan for receiving the flow of families; encourage families to move through in one continuous direction that supports social distancing. Consider using signs and markers to guide people, such as using tape or sidewalk chalk to mark where families and staff members should stand. Consider posting signs to help people know the procedures and where to go.

If a child is transported in their car seats. Store car seat out of children's reach.

Hand hygiene stations should be set up at the entrance of the classroom, so that children can clean their hands before they enter. If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol. Keep hand sanitizer out of children's reach and supervise use. All children's hands need to be washed once they have entered the classroom.

Staff members will bring children into the building and take them to their classes. At the end of the session, staff will bring children from their classrooms when parents are present to pick them up. Staff will sign out the child, on behalf of the adult picking them up by:

- Having staff members greet families outside as they arrive
- Verifying ID to ensure adult is authorized to pick up the child
- Writing the name of the adult picking the child up - if out of the normal
- Placing the staff's initials at the end of the row of the *Daily Attendance Log*

Only CGESD staff will be allowed to enter building and retrieve the child from classroom.

Bus Transportation Parent Drop Off/Pick Up

We have created a plan for receiving the flow of families; aim to encourage families to move through one continuous direction that support physical distancing.

Busses are to not make on-street stops. Bus stops must have room for the bus to pull off the road and room for staff to provide health checks outside of the bus. Have staff members greet families outside of the bus as families arrive. Limit direct contact with parents as much as possible. Practice 6 feet of physical distancing at all times.

Children will have assigned seats that are the same for pick up and drop off. When placing children in bus seats; consider factors such as children from same families, children who share housing, and children from same classrooms.

Plan how children will be unloaded/loaded according to classrooms and following assigned seats. Designate adequate staff members to walk children to their classroom, and walk children back to the bus at the end of the day. Practice 3 feet for children and 6 feet of physical distancing for adults at all times. Have children wash their hands as soon as they get to their classroom and before they get on the bus.

To keep minimal contact with items that come from home and to prevent the spread of the virus, children's toys or backpacks will not be allowed on busses.

At the end of each bus run the bus will be cleaned and disinfected including all car seats and seat belts prior to the next route loading. Chlorine and ammonia-based cleaners are not to be used on buses. Drivers and passengers should wear masks and maintain physical distancing whenever possible. No one who is ill should be on the vehicle until their health status can be determined.

Daily Health Screenings and Attendance

Health Screening for Staff

Staff is required to take temperatures daily (either at the center or at home before leaving for work) and answer the questions below:

- Do you have a cough?
- Are you having any shortness of breath?
- Is there anyone in the household with a fever over 100.4° F, a cough or shortness of breath?

Staff with a temperature at or above 100.4° F or if they answer yes to any of the screener questions will be asked to go home. Staff need to confirm that they have not used any fever-controlling meds to lower their temperature. If the staff does not have a temperature or any

symptoms they are cleared to enter the center. They will document their arrival and departure time from the center on the *Daily Attendance Log* and initial that they do not have any symptoms under the Health Check Completed column.

Health Screening for Children

All children will be screened before entering the classroom or onto a bus. Gloves and masks are required for staff completing the health screening. If you use disposable or non-contact (temporal) thermometers and did not have physical contact with the child, you do not need to change gloves before the next check. If you use non-contact thermometers, clean them with a paper towel sprayed with sanitizer between each child. Reuse the same paper towel as long as it remains wet.

The health screening will include taking the child's temperature and asking the following questions:

- Does your child have a cough?
- Is your child having any shortness of breath?
- Is there anyone in the household with a fever over 100.4° F, a cough or shortness of breath?

Children with a temperature at or above 100.4° F or if they answer yes to any of the screener questions will not be allowed to stay. Parents need to confirm that they have not used any fever-controlling meds to lower their child's temperature. If child does not have a temperature or any symptoms they are cleared to enter the center.

Attendance

Staff will sign in the child, on behalf of the adult dropping them off by:

- Writing down the time they arrived on the [Daily Attendance Log](#)
- Staff who completed the daily health check will initial in the health check completed column
- Child will then be taken to their classroom

If a child has symptoms from the health screening, please do the following:

- Place an E (Excluded) on the *Daily Attendance Log* under the In Column
- Write the name of the adult who brought the child (for contact tracing purposes, if needed later)
- Follow CGESD exclusion policy for COVID-19 and,
- Explain to the adult why the child is being excluded and under what conditions they can return: negative Covid test result, symptom free for 10 days, release from doctor.

Exclusion

Parents are encouraged to have more than one person on their permission to release with updated phone numbers so they can be readily contacted if a child needs to be sent home.

Children Experiencing or Exposed to Symptoms

If a child develops a cough, fever, or shortness of breath, isolate them away from others immediately, and send them home as soon as possible. If a child has recently had a fever or cough, encourage families to seek testing for COVID-19. Also, let the family know that the child cannot attend the center until they have been symptom-free for 72 hours after the fever or cough resolved.

Exclude children and staff who have had contact with people exhibiting symptoms of COVID-19 or who have a presumptive case of COVID-19. Encourage these staff and families to be monitored carefully for symptoms. Individuals exposed to a known case need to quarantine for a minimum of 14 days after their last date of exposure. The ill family or household member should be strongly encouraged to seek testing.

*If a sick child fits other exclusion criteria, other than fever, cough or shortness of breath, please follow CGESD current exclusion practices.

Sick Child Area

Each site has a designated Sick Child Area/Isolation Room where they can separate a child from others. While waiting for parents to pick up a sick child, caregivers should stay with the child in a room isolated from others. All Staff members assigned to the sick child area must wear masks or a face shield and gloves while taking care of a sick child. If the child has fever, cough, or shortness of breath, the caregiver should remain as far away as safely possible from the child (preferably at least 6 feet), while remaining in the same room.

Staff, who are at a higher risk of getting COVID-19, for example, those over 65 or with underlying health conditions, should not staff the sick child area.

After each use, the sick child area should be cleaned and sanitized/disinfected following current protocols.

Confirmed Cases of COVID-19 within the Facility

If anyone who has entered the facility, including household members within a family child care facility, is diagnosed with COVID-19, report to your Supervisor who will communicate with the Superintendent and consult with the North Central Public Health Department. Communication, in coordination with the local public health department, will then be followed with those individuals who are at risk due to exposure.

CGESD will report to the NCPHD *ANY cluster of illness, not just COVID-19 among the facility's staff or attendees.*

Supporting Parents during Exclusion

EI ECSE staff will continue to work with parents to ensure they have access to medical care.

Refer families to their medical provider for COVID-19 tests if their children has a fever, cough, or dyspnea (difficult or labored breathing). After the exclusion of a child, their Home School Liaison and or EI ECSE should follow up on a regular basis to monitor the health of the child as well as to support the return of the child to the center once they no longer fit the exclusion criteria.

Working with Families

Working with families continues to be a key part of CGESD Early Learning's approach and services. While conditions dictate that CGESD Early Learning should be open only to currently enrolled children and essential staff, parent entry to buildings is greatly restricted. While these restrictions are in place, it will be particularly important to use available means to create and maintain supportive relationships with families.

Initial conversations with families should include a discussion about changes to services and safety practices that CGESD Early Learning has implemented prior to enrollment.

Prior to intake, take time to make sure that parents understand what steps the program is taking to protect their children. Share prepared information and familiarize families with what to expect on the first day of center drop-off or bus pick-up.

When masked, maintaining social distance to the extent possible, and greeting families in person, it is important to remember that masks and distance can make it hard to express welcome and support. Pay close attention to body language, using "open" posture and gestures. Speak slowly and as clearly as possible to be understood clearly.

It continues to be important to connect with families to assess needs, set goals, make referrals, follow-up on child progress, and more. Arrange with families for the best means of communication while social distancing is required. Use phones, email, text, video conference or other tools to stay connected.

Compliance

The Director of Human Resources has been designated to coordinate compliance with these legal requirements, including Title VI, Title VII, Title IX and other civil rights or discrimination issues, the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973, and may be contacted for additional information and/or compliance issues.

Compliance Officer for Title VI, Title VII, Title IX and other civil rights or discrimination issues and Health Insurance Portability and Accountability Act (HIPAA)	Robert Dais – Director of Human Resources Columbia Gorge Education Service District 400 East Scenic Drive #20 The Dalles, Oregon (541) 296-2965
Compliance Officer for the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973	Robert Dais – Director of Human Resources Columbia Gorge Education Service District 400 East Scenic Drive #20 The Dalles, Oregon (541) 296-2965

Resources

Centers for Disease Control and Prevention

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

Oregon Department of Education

https://www.oregon.gov/ode/students-and-family/SpecialEducation/Documents/Emergency%20Child%20Care%20Guidance.pdf?utm_medium=email&utm_source=govdelivery

https://oregonearlylearning.com/wp-content/uploads/2020/03/Guidance-for-Child-Care-and-Emergency-Child-Care-COVID_May.14.20.pdf

APPENDIX A

Columbia Gorge ESD- Sunshine Kids Preschool- Follow Head Start or North Wasco County School District playground protocol. Appendix B/2 is required only if no other protocol is in place on a playground at the time of uses.

PLAYGROUND EQUIPMENT DISINFECTION/CLEANING STANDARD OPERATING PROCEDURES

Department	Head Start, Crown 3 Cleaning, SKP Staff
SOP or Method	Standard Operating Procedure
Category	Disinfection/Cleaning
Version	1 July 2020

#.1	This Standard Operating Procedure (SOP) covers the method for disinfecting/cleaning outside playground equipment.
Description	This SOP is generic and should be adapted, as appropriate, to take account of the specific risks associated with the work to be performed as well as local regulations and guidelines.

#.2

Health and Safety



- Have you read the risk assessments for the task to be performed?
- Have you been trained for the task to be performed?
- Do you have the correct Personal Protective Equipment [PPE] for the task to be performed?
- Do you have the correct equipment to carry out the task?
- Is it safe to carry out the task?

If the answer to any of the above questions is NO, then STOP and speak to your immediate supervisor.



Hazards associated with this activity:



- Hazardous materials including chemicals, bloodborne pathogens, mold, bacteria, dust etc.
- Manual handling (furniture and equipment etc.).
- Walking and working surfaces (slips, trips and falls).
- If moving or lifting items to clean behind and underneath them, remember to apply the correct manual handling techniques.

#.3

Before Starting

- Assess your planned work schedule.
- Check that the equipment and materials are safe to use before starting the task.
- When assembling equipment, for safety reasons check for damage, specifically checking that plugs and cables are intact, have no cuts or abrasions and are safe for use.
- Check all portable electrical equipment
- Staff must:
 - a. Familiarize themselves with all applicable SDS
 - b. Visually inspect the work area and ensure the area is safe. If there is a hazard and you are not able find a solution, inform your immediate supervisor before proceeding.
 - c. Put on (don)PPE that is required for the work to be performed.
 - d. Perform the '3 Checks for Safety'. Before starting a job, stop and think ...
 1. Do I know how to do the job?
 2. Do I have the right equipment?
 3. Is my environment safe?
 - e. Place all necessary signage.
 - f. Assure all required PPE and equipment is readily available.

- g. All staff are trained in use of products and equipment being used.
- h. Inform playground users/building administrator that the area will be closed until the disinfection process has been completed

#.4

Equipment and Materials



Note:

The following is the minimum required PPE. All SDS must be read and PPE requirements followed for each specific item.

Required PPE:

- Disposable moisture impervious non-latex gloves. Wear gloves when using cleaning chemicals or handling waste. Change gloves and wash hands with soap and water when transitioning from a soiled/dirty area to a clean area.
- Safety glasses/goggles if using spray disinfectant.
- Face mask when using the electrostatic disinfection system.

Equipment and materials:

- District approved disinfectant, preferably concentrated and/or ecologically certified, wherever available, diluted according to manufacturer’s instructions
- Wipers/cloths, disposable acceptable.
- Electrostatic disinfection system (if required)
- Appropriate signage.

Safety Data Sheets (SDS)

An SDS must be on file for all disinfectant chemicals used or handled. Copies of SDSs must be kept in an area readily accessible to all employees. Operations with remote work sites should keep applicable SDSs in each work area.

#.5

Procedure

Procedure:

1. Ensure the area is adequately ventilated (if appropriate).
2. Place a hazard warning sign at the playground area.
3. Move all non-fixed material (e.g., jackets, lunch pails, recreational toys, etc) .
4. Spray ALL touch points on the playground equipment:
 - Handrails
 - Slides
 - Climbing equipment and monkey bars
 - Swing-set seats and securing chains 5ft up from the seat.
 - All polls
 - Benches and chairs

- Exterior hand sanitizing stations closest to where students are exiting the building to enter the playground area.
5. Report any Blood Borne Pathogen (BBP) spills and clean/disinfect the area via BBP policy.
 6. Leave the hazard warning sign in place until the necessary dwell time is reached.
 7. Report any damaged equipment and Tag Out if unsafe.
 8. Ensure all disinfectants and equipment are stored safely and securely.
 9. PPE is cleaned and properly stored or disposed of.
 10. Remove, clean and store the hazard warning signs.
 11. Inform Supervisor that disinfection/cleaning has been completed.

#.6

The Final Check



Prior to re-opening area:

- Inspect the area carefully:
 - Ensure that all touch point areas were adequately disinfected.
 - Correct any deficiencies.
- Equipment is clean and safe to reuse.
- Waste and potentially contaminated materials are properly sorted, disposed of and stored correctly.
- Cleaning team equipment is switched off and unplugged.
- Inform building administrator that the area is complete and ready to use.

Appendix B

Columbia Gorge ESD

ROUTINE DISINFECTION FOR FREQUENTLY TOUCHED SURFACES

Department	CGESD
SOP or Method	Method
Category	Disinfection
Date	30 June 2020

#.1	<p>This Method describes the detailed preparation and use of the damp wiper cleaning solution, chemical selection and techniques to effectively clean and disinfect frequently touched surfaces.</p>
Description	<p>These standards apply to all procedures unless they conflict with the facility or local regulatory policies. In that case, the facility or regulatory policy takes precedence.</p> <p>This Method is generic and should be adapted, as appropriate, to take account of the specific risks associated with the work to be performed as well as local regulations and guidelines.</p>

#.2	<ul style="list-style-type: none">• Have you been trained for the task to be performed?• Do you have the correct Personal Protective Equipment [PPE] for the task to be performed?• Do you have the correct equipment to carry out the task?• Is it safe to carry out the task?
Health and Safety	<p>If the answer to any of the above questions is NO, then STOP and speak to your immediate supervisor.</p>
	 <p>Hazards associated with this activity:</p>     <ul style="list-style-type: none">• Hazardous materials including chemicals, blood borne pathogens, mold, bacteria, dust etc.• Manual handling (furniture and equipment etc.).• Walking and working surfaces (slips, trips and falls).• Infectious diseases and bodily fluids.

<p>#.3</p> <p>Before Starting</p>	<ul style="list-style-type: none"> ● Assess your planned work schedule. ● Visually inspect the environment and determine if additional items need to be included. ● Check the equipment and materials are safe to use before starting the task. ● When assembling equipment, for safety reasons check for damage, specifically checking that plugs and cables are intact, have no cuts or abrasions and are safe for use. ● Operatives must: <ul style="list-style-type: none"> ● Visually inspect the work area and ensure the area is safe. If there is a hazard and you are not able find a solution, inform your immediate supervisor before proceeding. ● Put on (don) PPE that is appropriate for the work to be performed. ● Perform the '3 Checks for Safety'. Before starting a job, stop and think ... <ul style="list-style-type: none"> ▪ 1. Do I know how to do the job? ▪ 2. Do I have the right equipment? ▪ 3. Is my environment safe?
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<p>#.4</p> <p>Equipment and Materials</p> 	<ul style="list-style-type: none"> ● PPE: Disposable, moisture impervious gloves, safety glasses, protective apron or clothing. ● District approved disinfectant, preferably concentrated and/or ecologically certified, wherever available, diluted according to manufacturer's instructions ● Wipers/cloths, disposable acceptable. ● Hazard warning signs.
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<p>#.5</p> <p>Procedure</p>	<p>Surfaces to disinfect daily:</p> <p>The following surfaces are example of surfaces that fit into this category:</p> <ul style="list-style-type: none"> ● Light switches ● Door knobs ● Keyboards / Mice ● Push plates (on doors) ● Telephones ● Furniture ● Faucets ● Dispensers ● Shower fixtures ● Toilet flushing handle ● Toilet seat ● Wall moldings ● Window sills ● Restroom handrails ● Hand sanitizers
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Procedure

1. Wear disposable, moisture impervious gloves and safety glasses whenever handling disinfectant/cleaning agents.
2. Place a hazard warning sign at the entrance to the room in such a way as to allow safe access to the room.
3. Move all light furniture and equipment except stationary items (if appropriate) to enable the task to be carried out. Seek assistance if larger items need to be moved.
4. Scrub the surface clean to remove visible soil. A surface must be free of visible soil before disinfection can occur. For soil embedded into a surface use an abrasive sided pad and plain water to remove the soil.
5. For petroleum-based soil use a degreaser.
6. If feasible, mist the area with disinfectant and allow to air dry.
7. If wiping is required, disinfect the surface using presaturated disinfecting wipes or spray disinfectant on the surface (if applicable).
8. After air drying per the disinfectant manufacturer's recommendations, surfaces may be dried using a dry clean wipe or paper towel if there is a risk of skin contact to the damp surface or if the surface is a highly reflective surface such as glass where streaking may be visible.
9. Leave the hazard warning sign in place until the floor is dry and the final check inspection is complete.
10. Remove, clean and store hazard warning signs.

#.6

The Final Check



- Ensure the disinfectants are stored safely and securely
- Inspect the area or room carefully:
 - Picture Perfect Room: all furniture and items need to be replaced correctly.
 - Correct any deficiencies.
- Equipment is clean and safe to reuse.
- PPE is cleaned and properly stored or disposed of.
- Report any damaged equipment and interiors, needed repairs or water leaks.
- Waste and potentially contaminated materials are properly sorted, disposed of and stored correctly.
- Cleaning equipment is switched off and unplugged.
- Complete any activity record sheets for the task and return them to your supervisor if required.
- Floors are free of spills and debris fluids.
- Dispensers are adequately filled.
- Ceilings, ledges, countertops, furniture, and cabinets are clean and free fluids.
- Waste receptacles are clean and free of all debris and contamination.
- Washbasins are clean and free of mineral build-up.
- Bathrooms are clean and free of dust, odors, and buildup.
- All other contact items have been disinfected.