

COVID-19 Guidance for DREAM Sites (as of 8/6/21)

In efforts to assist both DREAM locations with procedures for all daily operations, DREAM has updated guidance regarding the best practices that will continue to ensure the safety of both children and staff while supporting a strong in-person learning environment. These practices are in accordance with the 2021-2022 COVID-19 Guidance for Schools which derives from strategic planning and communication between the Department of Human Services (DHS), the Arkansas Department of Education (ADE), the Division of Elementary and Secondary Education (DESE), Division of Childcare and Early Childhood Education (DCCECE), and the Arkansas Department of Health (ADH).

Because we serve children under the age of 12 who are not eligible for vaccination at this time or are not yet fully vaccinated, this guidance emphasizes implementing layered prevention strategies to protect people who are not fully vaccinated, including children, teachers, staff, and other members of their households, especially in areas where community transmission is elevated. We advise our sites to continue practicing preventative measures such as appropriate masking, physical distancing, screening, testing, ventilation, handwashing and respiratory etiquette, staying home when sick and getting tested, contact tracing in combination with quarantine and isolation, and cleaning and disinfection.

Continued Practices to Mitigate the Likelihood of COVID-19 Spread Inside the Sites

Vaccinations

COVID-19 vaccines are the most effective strategy to protect people from getting sick and to reduce the risk of people spreading COVID-19. All DREAM employees at all sites are encouraged to get vaccinated. Fully-vaccinated staff do not need to quarantine if deemed close contacts, unless they have/develop symptoms.

Any staff who has received their vaccination will need to submit a copy of proof of their COVID-19 vaccination to keep as record in their file.

Masks/Face Coverings

As updated on July 9, 2021, CDC guidance states, "consistent and correct mask use by people who are not fully vaccinated is especially important indoors and in crowded settings." Although masks or other face coverings can no longer be mandated in Arkansas public schools, as prohibited by Act 1002 of 2021, DREAM is a private-owned establishment and reserves the right to require anyone entering all sites to wear masks regardless of their vaccination status. In accordance with CDC recommendations, the following regarding the wearing of masks at DREAM locations is as follows:

- **Indoors-** Mask use is required for all staff including children enrolled in the center school-age and older (children ages 3-5 years may also be required to wear masks), site staff, and anyone entering a site. Children under 2 years of age should not wear a mask.
- **Outdoors-** In general, people do not need to wear masks when outdoors. However, particularly in areas of substantial to high transmission, we recommend that everyone wear a mask in crowded outdoor settings or during activities that involve sustained close contact with other people (i.e. field trips, activities/games with close contact). Children and staff required to wear masks may remove their masks during normal outdoor play.

Individuals exposed to a confirmed case of COVID-19 will not need to be quarantined if they have no symptoms and both the infected and exposed individual consistently and correctly were wearing a mask.

Because children under the age of 12 cannot be vaccinated against COVID-19 at this time, consistent and correct mask usage is required while indoors at DREAM sites.

Physical Distancing

In order to facilitate in-person learning 5 days a week, DREAM locations will continue to implement practices that promote physical distancing between individuals and groups of individuals. Although 6 feet is the standard, the inability or impracticality to have physical distance does not prevent a site from having in-person learning. Based on studies from the 2020-2021 school year, the CDC recommends maintaining:

- at least 3 feet of physical distance between children within classrooms, and
- at least 6 feet between children and adults, and between adults who are not fully vaccinated.

Both of these recommendations should be combined with indoor mask wearing by to reduce transmission risk.

Hand Washing/Cleaning

All sites should continue to have hand sanitizer and/or hand washing stations with soap and water at entrances. They should also attempt to provide hand sanitizer and/or hand washing stations with soap and water in every classroom. Children, teachers, staff, and visitors should be encouraged to sanitize and/or wash hands frequently.

Ventilation/Air Circulation

Evidence suggests that improved air circulation is beneficial in reducing the spread of COVID-19. Whenever possible, all sites should open windows or otherwise work to improve air flow by allowing outside air to circulate in the building, and thereby lower the concentration of viral particles. The CDC has provided guidance on increasing ventilation to prevent COVID-19 spread. DREAM Management is in the process of strategic planning to upgrade ventilation and/or purchase devices for each site that help with ventilation and air quality. If you already have an air purifier in your classroom, please use it.

Screening

All sites must screen all individuals who enter facilities and use screening questions approved by the ADH. The value of screening is that it keeps children and staff with symptoms out of school and limits exposure. Screening consists of making sure a person doesn't have a fever, as well as having him or her answer questions about symptoms and exposures. All sites will ask screening questions to all staff and adults entering the building and the parent/guardian/guest of children entering the building will be asked screening questions as well. Additionally, anyone entering the building must have their temperature checked and logged/documented properly upon entry. Individuals with symptoms of COVID-19, and those needing to be excluded, do not enter the facility.

Daily Health Check

All staff, visitors, families, children and their household members must conduct a check before coming into the center. Should you or any household member have any of the following COVID-19-like symptoms during the preceding 72 hours, we ask you to remain out of the center and notify the center.

- Cough
- Sore Throat
- Muscle Aches
- Difficulty Breathing
- New Loss of Taste or Smell
- Fever at or above the threshold temperature of 100.4° F (or would have, but for the use of fever-reducers).

All staff, families, children and their household members must submit to a temperature check upon arrival at each site and must provide complete and accurate responses to the Daily Health Check. Anyone refusing to comply will not be permitted entry. The Daily Health Check questions and the temperature threshold may be updated from time to time. All symptomatic individuals, including any immune individuals, must remain out of the center, unless cleared to return.

Food Service and Meals/Snacks

Given the very low risk of transmission from surfaces and shared objects, there is no need to limit food service approaches to single use items and packaged meals. All sites will practice procedures that maximize physical distance as much as possible when children are transitioning to an area for meals/snacks (if outside of the classroom) and while eating (especially indoors).

Using additional spaces outside of the classroom for mealtime/snack time seating not limited to, but including outdoor seating, can help facilitate distance.

Transportation

1. All vehicles used for transporting children during the current pandemic should be sanitized prior to transporting children and sanitized between each transportation time.
2. Due to the tight quarters, and enclosed spaces on buses and vans, masks are required.
3. No eating/drinking (with the exception of water as needed) are permitted on vehicles used for transporting.
4. While transporting students, increase ventilation of outside air in vehicles as much as possible by opening or cracking windows if doing so does not pose a safety risk. Keeping windows open, even a few inches, improves air circulation.
5. ADH and ADE also recommend maintaining as much physical distance as possible between riders. In addition, keeping siblings/household members seated together is also a helpful strategy.

Site-Related Activities

All sites should be mindful of activities associated with daily operations that could create a higher risk for COVID-19 transmission and review ADH guidance for specific activity or event protocols. These may include, but are not limited to:

- Vocal and Instrumental music programs
- Theater Performances/Movie Theaters
- Athletic activities and sports-related activities (i.e. field day, water play on site, etc.)
- Back to school orientation and registrations (parent conferences, parent nights, etc.)
- Site events or co-curricular activities

All sites will consider guidance for each event and will follow established guidelines and communicate to children and families procedures that promote safety and continuity of operations. Various guidelines can be accessed at COVID-19 Arkansas Department of Health.

Responding to Positive COVID-19 Cases in a Site

Point of Contact and Reporting of Positive Cases

All Site Directors will instruct all classroom staff to assign permanent seating (including circle time), cots, cubbies or storage areas, and any dedicated areas to all children. Each Site Director will assist all classroom teachers with creating a chart (i.e. diagram, list, etc.) to identify each assigned area that should include the students first and last name and titled with the name(s) of the staff assigned to that classroom, the name of the classroom, and the date the chart was submitted for the purposes of Contact Tracing. Any assignment changes (i.e. if a child is moved to another seat or is no longer enrolled) should be updated and a revised chart including the revision date should be included immediately. **All students in your classroom must be assigned a permanent seat and cot by the first day of school.**

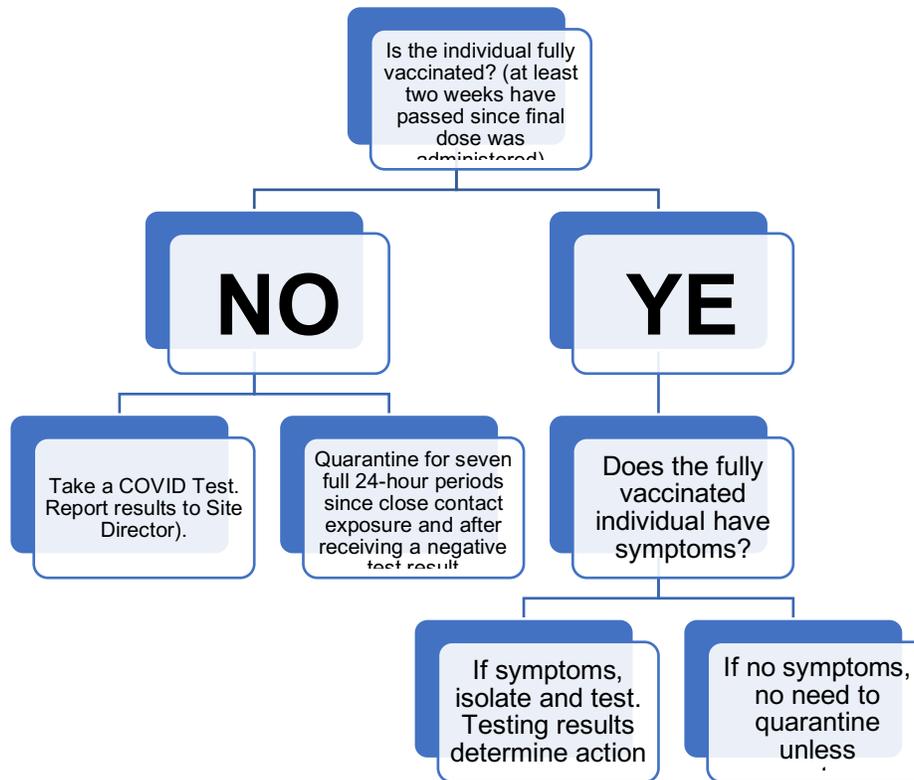
The Site Director will assist the teacher in initiating the contact tracing process when positive cases are reported at a site and begin with the classroom where the positive case(s) was reported. Site Directors will notify upper Management of positive cases as they occur.

If an individual who has been in a site has tested positive for COVID-19, Site Directors are required to follow the established reporting processes and requirements for contact tracing, isolation, and quarantine. There are some conditions that could exempt an exposed individual / close contact to the quarantine/isolation requirements that are discussed below. Site Directors can help verify the status of a potential close contact to help determine responses.

Close Contact Determination and Responses

The CDC defines a close contact as an individual confirmed to have been within six feet for 15 cumulative minutes or longer within a 24-hour period during the infectious period of a person who has tested positive for COVID-19.

1. Individuals who have previously tested positive for COVID-19 and recovered and who are subsequently exposed to someone with COVID-19 within three months of their original diagnosis do not have to stay at home or get tested again, as long as they do not develop new symptoms. Individuals who develop symptoms again within three months of their first instance of COVID-19 should see their physician as they may need to be tested again if there is no other cause identified for their symptoms.
2. Individuals exposed to a confirmed case of COVID-19 will not need to be quarantined if they have no symptoms and both the infected and exposed individual consistently and correctly were wearing a mask.
3. Individuals who are fully vaccinated may not have to quarantine. To help determine whether a fully vaccinated individual should quarantine if they have been exposed to someone who has tested positive for COVID-19, refer to the following chart:



Site Directors should review with the teacher the process for identifying close contacts and the process for communicating with parents and staff whether an individual will need to stay home and/or be tested.

Quarantine of those exposed to someone with COVID-19

As of December 2, 2020, the CDC amended its guidance to allow two shorter options for the quarantine period. Based on current CDC guidance, the quarantine period for all DREAM Academy employees and children can end for individuals experiencing no symptoms according to the following guidelines:

1. After seven full 24-hour periods since close contact exposure and after receiving a negative test result (sample taken no earlier than five 24-hour periods after exposure).

Individuals returning to school/work should regularly **monitor** themselves for symptoms to ensure they remain symptom-free and take appropriate precautions (e.g., consistent mask usage) for the duration of the 14-day incubation period.

Isolation of those with COVID-19

The person who tests positive for COVID-19 is still required to isolate at home for 10 days from the onset of symptoms or, if asymptomatic, 10 days from the positive test date. A person who is immunosuppressed or was hospitalized may need a longer isolation period (as directed by a physician and will need to submit it in writing). Based on increasing numbers of positive cases,

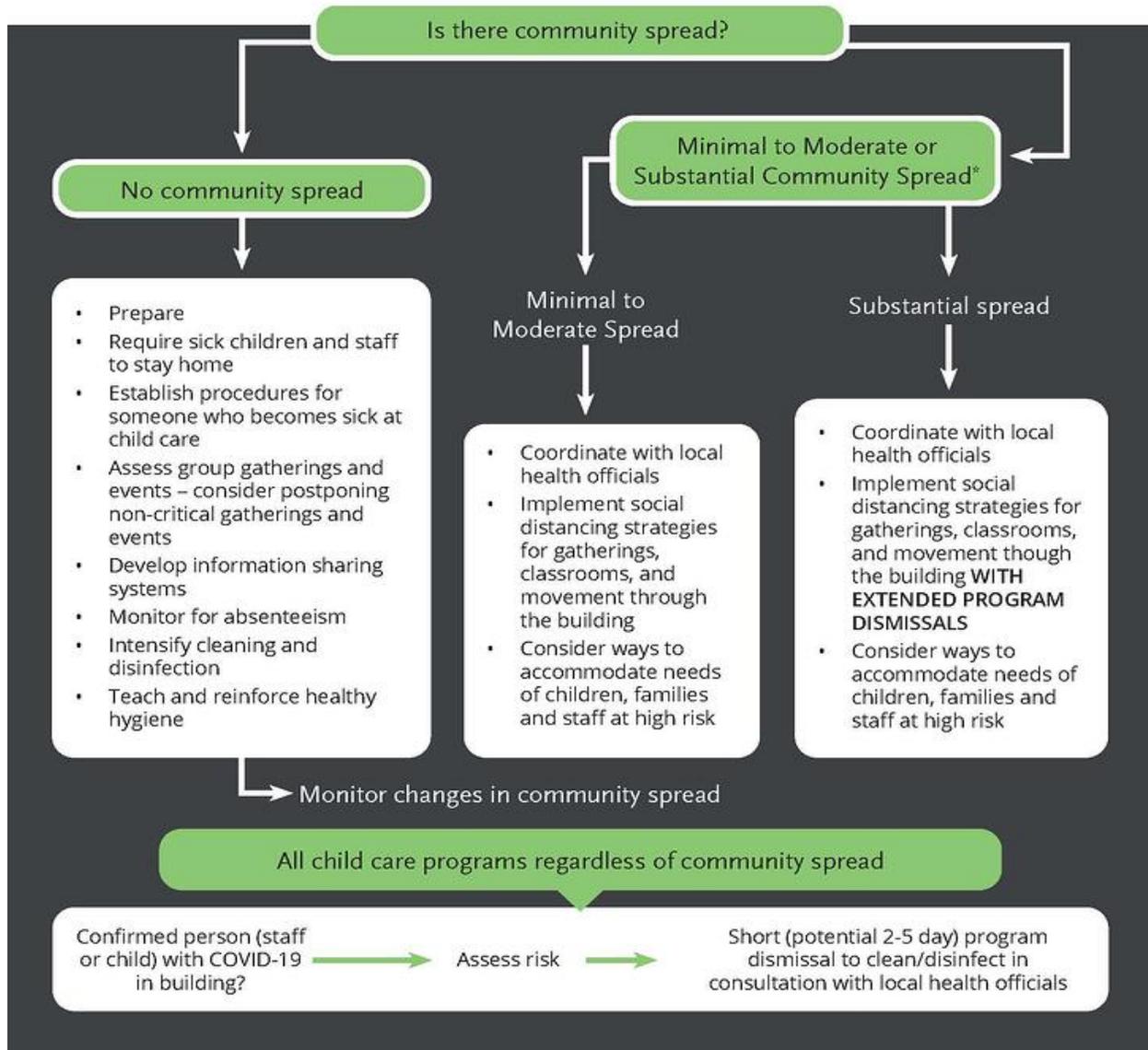
sites should expect interruptions to the daily operations and plan for contingencies. Upper management will work closely with Site Directors to monitor situations on a case-by-case basis. Children and staff should stay home when sick. Staff, children, and families should feel confident that they can remain connected to their site even when they are not able to attend in person due to COVID-19 isolation or quarantine requirements.

Determining whether to stay open or close in response to COVID-19 at a specific site

DREAM understands that this is an uncertain time as we make difficult decisions around what's best for the business, community, and families we serve. The safety and well-being of staff, family members, and children is of utmost importance. Ultimately, DREAM will strongly consider following in accordance with our local school districts or our state if they have taken action to close K-12 schools, bearing in mind the exception that we are a program that serves essential and emergency personnel. Meeting the childcare needs of families who play an important public health role (hospital personnel, first responders) has become a priority in our nation as the number of COVID-19 cases grows, and we are a traditional childcare program that is able to adjust programming to accommodate this need. Below you will find a decision tree that we've adapted from the CDC's guidelines for K-12 schools. Upper Management will use these questions to help determine whether to stay open or close in response to the Coronavirus (COVID-19) pandemic.

CONSIDERATIONS FOR CHILD CARE CLOSURE DUE TO COVID-19

The following has been adapted for child care providers from CDC Guidelines. Last updated 11/10/2020



Understanding that each community is different, contact your CCR&R or visit www.childcareaware.org to learn more about your options.

*Minimal to moderate spread is widespread and/or sustained transmission with high likelihood or confirmed exposure within communal settings. Substantial community spread is large scale community transmission, with health care staffing significantly impacted, and multiple cases within communal settings.



Public Health Considerations

The COVID-19 Delta variant is now the predominant COVID-19 strain in Arkansas. The Delta variant is two-to-three times more transmissible, which means that an infected person can spread COVID-19 to twice as many people as observed earlier in the pandemic. The COVID-19 Delta variant appears to cause more severe disease and a greater likelihood of hospitalization in unvaccinated young people than we observed earlier in the pandemic. While adolescents over 12 years of age and adults can be protected from the Delta variant by the COVID-19 vaccines, children under 12 remain at high risk. Children represent an increasing proportion of new COVID-19 cases, including hospitalizations and severe disease.

Guidance will be updated as needed if additional or new guidance is made available by the CDC. DREAM will continue to monitor conditions and work with our governing bodies to respond accordingly.