



5650 Shoup Ave, Woodland Hills, CA 91367 Tel: (818) 883-7241, Facility #197407949, Tax Id #251910052

Dear Creative Children Preschool Parents,

I hope this letter finds you all well and safe. At Creative Children our primary concern is the health and safety of our children, families and staff. We have been working hard to better prepare ourselves with the knowledge and physical things to help us prepare for our reopening.

During this time of closure all classrooms were deep cleaned and sanitized and all of the carpets were cleaned. However, no list of restrictions, guidelines or practices will remove 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection.

The staff has been trained on the new policies and procedures.

Temperatures will be taken as you and your child enter the preschool. Anyone with a temperature of 100.3° or above (or exhibiting any other signs of illness) will not be allowed to enter the preschool. A child who is ill may not return to the preschool for 72 hours. Parents may be asked simple questions regarding their child's health.

Parents must wear masks and limit the number of people coming in to drop off/pick up your child to one adult.

Parents will not be able to enter the classrooms.

Sign-in/out sheets will be available outside.

Classrooms will have their doors open for air circulation (weather permitting).

Children will wash their hands before entering their classroom in the morning.

Children will be washing their hands many times during the day.

We will limit the items used by the children and will be rotating them. All items will be sanitized.

We will limit the number of teachers going in and out of the classrooms.

We will limit the number of children outside at one time.

We will encourage social distancing and try our best, but children may interact with other children.

No toys may be brought from home until further notice.

All children must provide a flat sheet for nap time. We will no longer be able to provide a sheet if one is forgotten.

Nap time children will be spread apart. We will arrange the head of each child alternating in opposite directions to facilitate social distancing.

Sanitizing of classrooms, rest rooms, play yards, toys and door handles will happen throughout the day.

Staff will wear masks and we require the children to wear a mask and also send an extra pair of masks in a Ziplock bag.

Please see attached policies and procedures to be signed, dated, and emailed back to the school before the school opens.

Stay safe and be well.

Thank you.

Reena Narayan,
Director



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COVID-19 PUBLIC HEALTH EMERGENCY PROGRAM ATTENDANCE ACKNOWLEDGMENT AND DISCLOSURE

Child's Name: _____ DOB: _____

Screening & Visitor Policies

Please read and initial each statement below.

_____ I understand that during this COVID-19 Public Health Emergency, I will NOT be permitted to enter the CCPK campus beyond the designated drop-off and pick-up area. I understand that this procedure change is for the safety of all persons present on the school campus and to limit to the extent possible everyone's risk of exposure. I understand that it is my responsibility to inform anyone dropping off/picking up my child of the school procedures.

_____ I understand that if I come on the CCPK campus, I must sanitize my hands before entering, have my temperature checked, and wear a mask. While on campus, I must practice social distancing and remain 6ft from all other people, except for my own child. I will wait 6ft away if another parent is dropping off/picking up, and I will exit campus immediately after picking up my child (children may not stay on campus to play after pick up).

_____ I understand that my child will be required to wash their hands using CDC recommended hand washing procedures throughout the day using running water and rubbing with soap for at least 20 seconds.

_____ I understand that to enter the CCPK campus, my child, myself, and my family must be free from COVID-19 symptoms. On behalf of my child, myself, and my family members, I agree to undergo a health screening (temperature check and screen for symptoms) at the entrance to the school each morning prior to entering the CCPK campus. I understand that any individuals that exhibit symptoms will not be allowed to enter the CCPK campus. If my child exhibits any of the following symptoms at school, my child will be taken to the office immediately and MUST be picked up within 30 minutes of being notified. *While we understand that many of these symptoms can also be related to non-COVID-19 related issues, we must proceed with an abundance of caution during this Public Health Emergency. These symptoms typically appear 2-7 days after being infected so please take them seriously. Your child will need to be symptom-free without any medications for 72 hours before returning to the school campus.*

Symptoms include:

- fever of 100.3°F or higher
- shortness of breath
- dry cough
- chills
- loss of taste or smell
- sore throat
- muscle aches

_____ I agree to check my child's temperature prior to coming to school daily. If my child's temperature is 100.3°F or higher, I will notify the CCPK and keep my child home until they have been fever-free for 72 hours.



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COVID-19 PUBLIC HEALTH EMERGENCY

PROGRAM ATTENDANCE ACKNOWLEDGMENT AND DISCLOSURE (cont.)

Class Family Group Policies

Please read and initial each statement below.

_____ **I understand that I am joining a CCPK Class Family Group and my actions affect everyone else in the group.** I will comply with any and all state, county, or local safe-at-home orders, and will limit my child’s direct contact to persons living outside of my current household. If we do go out of the home, we will follow all recommendations from the CDC that limits my child’s risk for exposure, including wearing a mask (if at all possible) in all public areas and remaining 6ft from all other people.

_____ I will make my best effort to get all members of my family tested for COVID-19 prior to returning to school. Los Angeles offers free drive-through testing: <https://covid19.lacounty.gov/testing/>.

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

_____ I understand and agree that my child will be signed in and out electronically each day at the designated area by an adult (18 years or older).

_____ I understand that while present on the CCPK campus each day my child will be in contact with children, families and other employees who are also at risk of community exposure. I understand that no list of restrictions, guidelines or practices will remove 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection. I understand that I play a critical role in keeping everyone in the school safe and reducing the risk of exposure by following the practices outlined herein.

_____ I understand due to the nature of COVID-19, infection does occur even if the utmost care and safety is exercised. Nevertheless, on behalf of my child, my family and myself, I hereby expressly waive, release, and forever discharge the CCPK and its employees, coaches, instructors, and other staff members/school-assigned helpers from any and all liability, claim, loss, damage, cost, or expense arising from, or attributable in any way to, any act or omission on the part of the CCPK or CCPK personnel as it relates to COVID-19.

By signing below, I certify that I have read, understand, and agree to comply with the provisions listed herein. I acknowledge that my child's enrollment may be suspended or terminated if it is determined that my actions, or lack of action, unnecessarily exposes CCPK staff, students, or their family members to COVID-19.

<i>Parent/Gaurdian (1) Name (Print)</i>	<i>Signature</i>	<i>Date</i>
<i>Parent/Gaurdian (2) Name (Print)</i>	<i>Signature</i>	<i>Date</i>