



Palo Alto Community Child Care

2021-2022 Participation Agreement and COVID-19 Acknowledgement, Disclosure, and Release

Please note that the COVID-19 pandemic is a fluid situation, and any changes will be communicated to you in a timely manner via email.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social/physical distancing and have, in many locations, prohibited the congregation of groups of people.

Our programs have put in place preventative measures to reduce the spread of COVID-19; however, Palo Alto Community Child Care (PACCC) cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, despite our best efforts, attending our programs could increase your risk and your child(ren)'s risk of contracting COVID-19.

For both parents/guardians: Please read and initial each statement below.

- 1) _____ I understand that during this COVID-19 Public Health Emergency I will NOT be permitted to enter the PACCC facility my child attends beyond the designated drop-off and pick-up area, except to inspect the facility during the facility's normal operating hours or at any time my child is receiving care in the facility. I understand that this procedure is for the safety of all persons present in the school and to limit, to the extent possible, everyone's risk of exposure. I understand that it is my responsibility to inform any Emergency Contact persons of the information contained herein.
- 2) _____ I understand that if there is an emergency requiring me to enter the facility beyond the designated drop-off and pick-up area I MUST wash my hands or use hand sanitizer with 60% alcohol before entering and wear an approved face covering. While at PACCC, I will adhere to the physical distancing requirement and remain 6 feet from all other people, except for my own child.
- 3) _____ I understand that my child(ren) and I will adhere to the 6 feet of physical distancing requirement and that all children over the age of 2 are required to wear an approved face covering/masks. Adults (parents/guardians) are also required to wear face coverings/masks during drop off and pick up times. All staff in the program will be wearing face coverings.
- 4) _____ I understand that to enter the facility my child must be free from all illness and any COVID-19 symptoms. I also understand that **PACCC is required to send my child home if they look ill when they arrive, even if I state that my child has no symptoms. PACCC will look at my child for signs of illness like cough, fatigue, extreme fussiness or irritability, or difficulty breathing.**

If my child has one or more siblings in the program, they also need to be sent home. If my child is sent home, my family will receive follow up information from PACCC about when my child can return to the program. In most circumstances, this will be after 10 days, provided that symptoms are improving and my child does not have a fever for at least 24 hours without the use of fever reducing medications.

- 5) _____ I agree to complete the **Daily Health Screening** procedures and form that PACCC has in place prior to my child coming to PACCC and understand that these procedures and form may also be subject to change as public health orders or information change. Also, I understand that my child's temperature will be taken daily upon arrival and possibly during the day if my child has symptoms or does not feel well.
- 6) _____ I understand if, during the school day, any of the symptoms from the health screen appear my child will be separated from the rest of the children and staff at the site and taken to a temporary sick area. I will be contacted, and my child **MUST** be picked up from the school immediately after being notified.
- 7) _____ While PACCC understands that many of the symptoms listed on the health screen form can also be related to non-COVID-19 related issues, we must proceed with an abundance of caution during this Public Health Emergency.
- 8) _____ I will immediately notify my center director if I or my child have tested positive for COVID-19, or if I become aware of any person with whom my child or I have had close contact, and has tested positive, is presumed positive for COVID-19, or is advised to self-isolate or quarantine.
- 9) _____ As stated above, PACCC will inform parents/guardians when their child may return. Re-entry will be based upon each child's health circumstances.
- 10) _____ I understand that if my child is exhibiting any combination of COVID-19 symptoms that cannot be explained by another reason, **I must keep my child home and I must seek medical care for my child**. PACCC will take direction from my child's doctor about when my child can return to child care. If I refuse to have my child tested for COVID-19, PACCC must follow the COVID-19 exposure protocol and may need to close the program for the required amount of time.
- 11) _____ 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. PACCC will also provide access for children to use a hand sanitizer that has at least 60% alcohol.
- 12) _____ I understand that outside of care, in order to control my child's exposure in the community, I will comply with any and all state, county or local stay-at-home orders and will limit my child's contact with others outside of my household according to the guidelines. I will follow any recommendations from the CDC that limits my child's risk for exposure, including wearing a mask in all public areas and remaining 6 feet from all other people.

- 13) _____ My child and I will abide by all physical distancing and exposure limitation practices required by current California executive orders and Santa Clara County Public Health orders and will abide by all practices recommended by the CDC to limit the spread of and exposure to COVID-19.
- 14) _____ I understand that while present in the program each day, my child will be in contact with children, families, and other staff who are also at risk of community exposure. I understand that no list of restrictions, guidelines, or practices will mitigate 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection. I understand that I play a crucial role in keeping everyone in the facility safe and reducing the risk of exposure by following the practices outlined herein.
- 15) _____ I understand that traveling across county lines *may* increase the risk of exposure to COVID-19; and as such, our commitment to the PACCC program is that we will also limit travel as much as possible. I will adhere to any County or State restrictions in place, including quarantining after travel.

I, _____ certify that I have read, understand, and agree to comply with the provisions listed herein. I acknowledge that failure to act in accordance with the provisions listed herein, or with any other policy or procedure outlined by Palo Alto Community Child Care may result in termination of program services. I acknowledge that my child's participation in PACCC's program may be terminated if it is determined that my actions or lack of action unnecessarily exposes another employee, child, or their family members to COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending PACCC. I further agree to the COVID-19 procedures outlined above and understand that, despite these safety measures, my child may be exposed to COVID-19/Coronavirus at PACCC. I release Palo Alto Community Child Care, its Governing Board, its employees, and other participating families of all responsibility and liability should my child or any household member become ill or be diagnosed with COVID-19/Coronavirus.

Both parent signatures are required for households with two parents.

Child's Full Name (PRINT CLEARLY)

Date

Parent/Guardian's Full Name (PRINT CLEARLY)

Parent/Guardian's Signature

Parent/Guardian's Full Name (PRINT CLEARLY)

Parent/Guardian's Signature