

BASEC: Belmont After School Enrichment Collaborative Health Care Policy

Department of Early Education Care
102 CMR 7.00

Belmont Department of Public Health
105 CMR 430.000

Maynard Health Department
105 CMR 430.000

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PROGRAM INFORMATION

BASEC @ Burbank

266 School Street
Belmont, MA 02478
(781) 296-2471

BASEC @ Chenery

95 Washington Street
Belmont, MA 02478
(617) 484-8030

BASEC @ BMHS

221 Concord Ave
Belmont, MA 02478
(617) 431-6686

BASEC @ Green Meadow

5 Tiger Drive
Maynard, MA 01754
(978) 801-1334

BASEC @ Fowler

3 Tiger Drive
Maynard, MA 01754
(978) 801-1450

BASEC Vacation Programs

First Church
404 Concord Ave
Belmont, MA 02478
(781) 296-2471

Fowler School
3 Tiger Drive
Maynard, MA 01754
(978) 801-1334

ALL STAFF WILL BE CPR/1ST AID CERTIFIED

Directors

Executive Director: Andrew Mountford (Designated Supervisor)

Site Directors: Sarah Houtmeyers (Burbank—Designated Supervisor)
Amanda Burke (Chenery—Designated Supervisor)
Brandon Heisler (BHS—Designated Supervisor)
Michael Clark (Green Meadow & Fowler—Designated Supervisor)

Vacation Camp Director: Annie Gladfelter (Designated Supervisor)

Director of Student Programming: Ellen McEllin (Designated Supervisor)

Assistant Directors: Blake Stensland (Chenery—Designated Supervisor)
Clare McGladrigan (Green Meadow & Fowler—Designated Supervisor)
Beck Govoni (BMHS – Designated Supervisor)

Operations Director: Viviana Sanchez (Designated Supervisor)

Director of Impact: Annie Gladfelter (Designated Supervisor)

Aquatics Director: Alex DeMaris

Specialists:

Belmont

James Burke (Sports)
Felisia Sainz (Visual Arts)
Josh Camara (Sports)
Alex DeMaris (Sports)
Carter Eichenberg (Enrichment)
Ava Fleisher (STEM)
Trevor Donahue (STEM)
Nicholas Peladeau (Visual and Performing Arts)
Jessica Bianco (Kindergarten)
Ashley Smith (Operations)
Sydney Padgett (Environmental Science)
Erin Pelham (Student Engagement)

Maynard

Kayla Sylvia (Visual Arts)
Jess Haddad (Sports)
Peter Liffers (STEM)
Honor Williams (Family Engagement)
Fran Indelicato (Enrichment)

Anna Hellyar (Absence Management – All Sites)

Educators:

Burbank

Madeleine Speagle
Karen Shea
Jackie Hardy
Elaine Arvanitis
Vivian Chiang

Vicky O'Regan
Madeline Piela
Chenda Kaplan
Sam Taber

Caio Fernandes
Hacer Bilici
Brianna Normile
Vana Keledjian

Chenery

Jaime Chernoch
Brandon Fink
Kelly Qi
Catherine Scire
Ishita Shailesh
Isabella Tofani

Melissa Moran
Andrew McLean
Danya Mavor
Jairo Molina
Massimo Francucci

Georgia Bitsikis
Mica Rich
Gaelen McGrail
Emma Kuper
Kate Rubin

Green Meadow & Fowler

Lois Cohen
Margaret Gubala

Donna Goguen
Hanna Bacus

Betsy Poulson
Valerie Warren

BMHS

Savannah Alexander
Meghan Connors

Cameron Vanderwerf

Andrea Grant

Assistant Educators:

Burbank

Haylie, Tess, Merel, Eleanor, Mark

Chenery

Brendan

BMHS

Katrina, William, Tomas

Green Meadow and Fowler

Vacation Program Educators:

Belmont

All above Specialists and Educators

Aquatics Director: Alex DeMaris

Lifeguards:

Carter Eichenberg
Chenda Kaplan

Maddie Speagle

Assistant Lifeguards:

Ellie, Mitchell, Dhruva

Maynard

Kayla Sylvia

Jess Haddad

Donna Goguen

Betsy Poulson

Peter Liffers

Valerie Warren

Francine Indelicato

Hanna Bacus

Lois Cohen

Health Care Consultants:

BASEC @ Burbank, BASEC @ Chenery

BASEC @ Green Meadow & BASEC @ Fowler

Rebecca Berger

266 School St.

Belmont MA 02478

617-993-5500

BASEC Vacation Program

Aislyn Cangialose, PNP

West Cambridge Pediatric and Adolescent Medicine

575 Mount Auburn St.

Cambridge, MA 02138

617-547-1995

EMERGENCY PROCEDURES

Belmont Emergency Phone Numbers:

Police: 911 or (617) 484-1212
Fire/Ambulance: 911 or (617) 484-1300
Poison Prevention: (617) 232-2120 or 1-800-222-1222
Department of Children and Families: (617) 748-2000
DCF Child at Risk Hotline: (800) 792-5200

Maynard Emergency Phone Numbers:

Police: 911 or (978) 897-1011
Fire/Ambulance: 911 or (978) 897-1014
Poison Prevention: (800) 222-1222
Department of Children and Families: (617) 748-2000
DCF Child at Risk Hotline: (800) 792-5200

Belmont Emergency Hospital:

Children's Hospital
300 Longwood Ave.
Boston MA 02115
(617) 735-6611

Maynard Emergency Hospital:

Emerson Hospital
133 Old Rd. to Nine Acre Corner
Concord MA 01742
(978) 369-1400

Emergency Procedure:

First Aid/CPR Certified Teachers:

- Assess all injuries and administer First Aid/CPR as needed
- Call or direct other staff to call for emergency transportation, as needed (call 911)
- Call parent/guardians
- Direct BASEC teachers to manage care of other students
- Direct BASEC teachers to meet emergency transportation at BASEC program entrance
- Direct emergency responders to site at which care is required (stay on the phone with 911 – the 911 operator should be the first to hang up)

- Accompany, if necessary, student to Emergency Care Facility

Emergency Procedures If Parents Cannot Be Contacted:

- Call emergency contacts on the student's enrollment form
- Review enrollment form for other important information relevant to an emergency situation, such as allergies to medication or special medical services or contact information requests.
- Contact health consultant for assistance
- If ambulance service is necessary, the Site Director will determine who will accompany the student to an authorized medical facility in the ambulance and remain with the student until the parent/guardian or other authorized person arrives. If the Site Director is the person to accompany the student to the medical facility, the Director of Student Programming or Assistant Director will supervise the site. If Director of Student Programming or Assistant Director is not available, the succession order for managing site will be as follows:
 - Executive Director
 - Director of Impact
 - Operations Director
 - Operations Specialist
 - Family Engagement Specialist
- BASEC will send enrollment and medication information with the child who is transported to the Emergency Care Facility.

Emergency Procedures When Off the Premises:

- Teacher always carries first aid kit containing:
 - First Aid/Medical supplies and prescriptions with release forms
 - Phone number list including parent/guardian work numbers and emergency information
- Two teachers must be with any group off premises
- Follow emergency procedures described above

INJURY AND FIRST AID

Procedures for Utilizing First Aid Equipment:

- First Aid Kit / Manual Locations:
 - At each site's front desk area, located at each site's main space, is the site's first aid kit including PPE
- First Aid is administered by staff members with Red Cross first aid/CPR training; first aid supervision and kit maintenance is administered by Site Directors, Operations Director, Operations Specialists, and Family Engagement Specialists

First Aid Kit

First Aid kit contents:

- Eye wash
- Non-perfumed soap
- Ice packs, hot/cold compresses
- Disposable gloves
- Rolled bandages
- Assorted bandages
- Sterile gauze squares
- Adhesive tape
- Scissors
- Small splints
- CPR mouth barriers/1-way valve
- Tweezers
- Health Care Policy
- Triangular muslin bandages

COVID-19 or Other Infectious Disease PPE

- *Disposable gown*
- *Protective eyewear*
- *N95 Masks*
- *Non-latex sterile gloves*
- *Temporal thermometer*
- *Hand sanitizer*
- *Adult and child-sized disposable masks*

Plan for Injury Prevention and Management

- Monitoring environment; repair/removal of hazards
- Monthly checks of outlets, paints, stability of equipment, cleaning supplies, etc.
- Toxic substances (cleaning supplies, etc.) in kitchen closet and janitorial offices
 - No child access to kitchen closet or janitorial offices

Maintaining and Monitoring a Central Injury Log:

Incident/injury reports are kept in log at the front desk. Completed forms are copied; one copy stays in the log, one is put in the child's file, one copy is delivered to parents, one copy is for licensing official (if necessary—see below).

Injury and First Aid Reporting Procedures to Parents:

- Teachers report all incidents and accidents to the Site Director; Site Director or teacher fills out an injury report.
- Injury is documented within the hour of occurrence.
- Parents sign injury form within 24 hours of reported injury.
- One copy of report is given to parents, one copy of report is kept in student's file, and one copy of report is kept in central log.

EEC & Belmont/Maynard Health Department Reports:

- BASEC reports to the EEC and/or DPH within 5 business days of any and all serious injuries, in-patient hospitalizations, or death of a child while in the program.
- EEC and/or DPH must receive a copy of the incident report, the attending teacher's CPR and First Aid cards and an account of the situation.
- EEC reports must be logged using LEAD Portal (see Executive Director for more information).
- EEC: Allison Anthony (allison.m.anthony@state.ma.us) for Belmont; Marisol Webster (Marisol.s.webster@state.ma.us) for Maynard.
- Belmont DPH: wchin@belmont-ma.gov Maynard DPH: boh@townofmaynard.net

INFECTION CONTROL AND MONITORING

Teachers:

- Regular and thorough hand washing with soap and warm water before and after the following:
 - after bathroom use
- Gloves worn when administering first aid
- Barrier used when administering CPR

Children:

- Regular and thorough hand washing with soap and warm water before and after the following:
 - after bathroom use
 - before and after eating*

*Hand sanitizer will be available at all times to use when running water is not available

Reporting of Infectious Diseases

- BASEC shall report any case of communicable disease occurring in a camp immediately to the local Board of Health. The report will be made by the Executive Director or the Director of Impact. The report will include the name and home address of any individual known to have or suspected of having such disease. Until action on such a case has been taken by the camp health care consultant, strict isolation shall be maintained. 105 CMR 430.157
- The Director shall ensure that each suspected case of food poisoning or any unusual prevalence of any illness in which fever, rash, diarrhea, sore throat, vomiting, or jaundice is a prominent symptom is reported immediately to the local board of health and to the Massachusetts Department of Public Health, verbally or by telephone. 105 CMR 430.158

Disinfecting Procedures:

Bleach-solution is used for tables, sinks, toilets, play structures. Children are not to use bleach-solution at any time.

General Information

- Tables and high-touch surfaces washed/wiped down with bleach solution
- Carpets will be vacuumed and disinfected regularly
- School nurses and parents notify BASEC of any contagious condition or disease (flu, head lice, HFMD, etc.)
- Teachers are encouraged to receive a yearly flu shot and updated COVID booster unless advised otherwise by their health care providers

Blood Spill and Bodily Fluid Disposal:

Employees must use disposable gloves and paper products to clean spills. These items are placed in a separate plastic bag and disposed of in program trash containers (all bodily fluids are treated as infectious).

- **COVID-19 Modification:** *Teachers take appropriate caution and wear PPE as needed when dealing with large amounts of bodily fluid.*

Cleaning Procedures:Cleaning

Cleaning removes germs, dirt, and impurities from surfaces or objects. Cleaning works by using soap and water to physically remove germs from surfaces. This process doesn't necessarily kill germs but removes them and lowers risk of spreading infection.

What Gets Cleaned and How:

- Hands, any item that immediately appears dirty
- If an item has visible dirt/grime, it must be clean before sanitizing or disinfecting
- Clean using the proper soap and water. Surface cleaning requires disposable paper towels.

Sanitizing

Sanitizing lowers the number of germs on surfaces or objects to a safe level, as judged by public health standards or requirements. This process works by cleaning and then sanitizing surfaces or objects to lower the risk of spreading infection. Surfaces used for eating and objects intended for the mouth must be cleaned and then sanitized both before and after each use.

What Gets Sanitized and How

- Any cloth items should be sanitized using a high heat.
- Eating surfaces and utensils with a sanitizing agent and/or high heat.

Disinfecting

Disinfecting kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

What Gets Disinfected and How

- Surfaces must be cleaned first before disinfecting
- Use EPA-registered disinfecting wipes or spray for onsite disinfecting.*
*When disinfecting objects or surfaces, make sure children are not directly close to the process.

- Disinfecting procedures must be done after programming, and materials/equipment should be left to air dry afterwards rather than wiped down.
- Electronics should be cleaned and disinfected based on recommendations by the manufacturer.
- High touch surfaces like folding tables and mats should be frequently cleaned and disinfected.
- Gloves must be worn when using disinfectant.
- Items that need to be disinfected will be done before the arrival of students and at the end of the day once the children have left.
- Disinfecting of some items will also occur throughout the program day, and staff will take the proper precautions to avoid chemical exposure to students.

TOBACCO PROHIBITION

Smoking / Tobacco Use

Massachusetts' state law prohibits the use of any form of tobacco, including cigarettes, smokeless tobacco, and nicotine delivery devices like e-cigarettes, by staff, campers, or any person at the camp. Smoking is not permitted in any school building or on school property (playground, blacktop area, sidewalks, etc.) The use of tobacco is prohibited for any BASEC employee while on program grounds.

EVACUATION, RELOCATION, NATURAL DISASTERS

EVACUATION PLANS

A BASEC evacuation typically occurs when staff and students need to leave the building either for a drill or because of a crisis situation. In a standard fire drill, an outside evacuation may last only a few minutes; a true emergency may require moving to a further location for a longer period of time.

Fire evacuation drills are planned once monthly for BASEC after school and once weekly for BASEC vacation programs. Site Director documents date, time, duration of evacuation, route of exit, and staff in charge of effectively sweeping the facility for missing students.

In the event of a fire, natural disaster, or other situation (such as a chemical spill or bomb threat) requiring evacuation of the building, BASEC will utilize the following plan.

- Evacuation plans and evacuation routes are posted at each activity area;
- Copies of the daily master attendance lists are kept at the front desk;
- In case of a fire, a staff member will call 911 immediately and/or pull a firebox alarm lever;
- Operations/Family Engagement Specialist and/or Site Director check all BASEC bathrooms;
- Each BASEC teacher checks and clears the specific indoor location in which he/she/they is stationed for remaining students;
- BASEC teachers lead students to emergency exits and walk students safely to their sites designated safe area;
- Designated Front Desk staff member (Operations Director/Specialist, Family Engagement Specialist, designated Educator or Director) brings iPad that contains attendance list and student registrations (Rediker) outdoors;
- Site Director and/or Operations/Family Engagement Specialist brings “Emergency Attendance Books” and distributes them among teachers standing in the designated safe areas.
- Teachers conduct roll calls of their assigned students using “Emergency Attendance Books” and report any missing students to the Site Director or Operations/Family Engagement Specialist. (See below on roll call procedures.)
- The Site Director confirms student attendance is complete. If any student is not accounted for, the Site Director immediately notifies fire officials.
- Teachers are prepared to walk students to an alternate site if instructed by a fire official or Site Director.
- All students and teachers remain in designated safe areas until given the all clear from fire officials or until further instructions have been given by the fire official or Site Director.

- *Specific teachers will be identified in advance to assist students with disabilities
- **Specific teachers within each building will be designated in advance to check all restrooms and regular program areas.

Roll Call Procedures

Upon reaching the designated safe area, students line up in grade or alphabetical groups (as defined and organized at the specific site) with their assigned lead teachers. Using the list of students in the distributed “Emergency Attendance Books”, lead teachers take attendance. Lead teachers deliver updates to the Site Director by holding up either a green (all accounted for) card or red (student(s) missing) card. The Site Director then checks in directly for a more thorough assessment.

Unaccounted students are cross-referenced against the site's master attendance for absences or dismissals. Any add-a-day students are added to the appropriate “Emergency Attendance Books” for that day using a notes-system.

BASEC @ Burbank
Designated Safe Area:
 Far End of the Blacktop

BASEC @ Chenery
Designated Safe Area:
 Basketball Courts

BASEC @ BMHS
Designated Safe Area:
 Parking Lot

BASEC @ Green
Meadow Designated Safe Area:
 Grassy Area Near Playground

BASEC @ Fowler
Designated Safe Area:
 Baseball Field

BASEC Vacation Camp Designated Safe Areas:
 First Church: Parking Lot Near Powers Music School
 Fowler: Baseball field

If the evacuation of a school building occurs during non-program hours, BASEC teachers will evacuate the building by the closest exit. BASEC teachers will assist the Belmont Public Schools or Maynard Public Schools personnel in managing the school-day student evacuation. Once reaching a safe location outside the school, BASEC teachers should make themselves visible and/or assist in areas of obvious need.

Escape Routes

BASEC @ Burbank: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on both ground and first floor spaces. Upon leaving the building by the closest available exit, BASEC teachers will walk students

around the building to the blacktop/parking lot area for a roll call. BASEC teachers will communicate using hand radios.

BASEC @ Chenery: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on the ground floor. Upon leaving the building by the closest available exit, BASEC teachers will walk students around the building to the basketball courts area for a roll call. BASEC teachers will communicate using hand radios.

BASEC @ BMHS: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on the ground floor. Upon leaving the building by the closest available exit, teachers will walk students around the building to the parking lot area for a roll call. Teachers will communicate using hand radios.

BASEC @ Green Meadow: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on the ground floor. Upon leaving the building by the closest available exit, BASEC teachers will walk students around the building to the grassy area near the playground for a roll call. BASEC teachers will communicate using hand radios.

BASEC @ Fowler: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on the ground floor. Upon leaving the building by the closest available exit, BASEC teachers will walk students around the building to the field near the baseball field for a roll call. BASEC teachers will communicate using hand radios.

BASEC Vacation Program:

First Church: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on ground floor level. Upon leaving the building by the closest available exit, teachers will walk students around the building to the blacktop/parking lot safe area for a roll call. Teachers will communicate using hand radios.

BASEC @ Green Meadow: Escape routes are marked with exit signs throughout the building. Multiple exits are available for evacuation on the ground floor. Upon leaving the building by the closest available exit, BASEC teachers will walk students around the building to the grassy area near the playground for a roll call. BASEC teachers will communicate using hand radios.

DISASTER PLANS

BASEC @ Burbank

If the Mary Lee Burbank School is evacuated, students will be relocated to the Chenery Middle School, located at 95 Washington Street, Belmont. Students will walk to the Chenery, supervised by BASEC teachers. All parents of students who are enrolled in BASEC @ Burbank on that day will be contacted by an automated text message, phone call, and email using AP Notify. The Site Director or Operations Specialist will carry an emergency first aid travel bag, student medications, and attendance from the building to the Chenery. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using the after school program supplies of the BASEC @ Chenery and the emergency first aid travel bag and student medication supplies brought by Site Director or Operations Specialist.

BASEC @ Chenery

If the Chenery Middle School is evacuated, students will be relocated to Burbank Elementary, located at 266 School Street, Belmont. Students will walk to the Burbank supervised by BASEC teachers. All parents of students who are enrolled in BASEC @ Chenery on that day will be contacted by an automated text message, phone call, and email using AP Notify. The Operations Specialist or Site Director will carry an emergency first aid travel bag, student medications, and attendance from the building to the Burbank. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using the after school program supplies of the BASEC @ Burbank and the emergency first aid travel bag and student medication supplies brought by Operations Specialist or Site Director.

BASEC @ BMHS

If Belmont Middle and High School is evacuated, students will be relocated to the Burbank School, located at 266 School Street, Belmont. Students will walk to the Burbank, supervised by BASEC teachers. All parents of students who are enrolled in BASEC @ BMHS on that day will be contacted by an automated text message, phone call, and email using AP Notify. The Site Director will carry an emergency first aid travel bag, student medications, and attendance from the building to the Burbank. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using the after school program supplies of the BASEC @ Burbank and the emergency first aid travel bag and student medication supplies brought by the Site Director.

BASEC @ Green Meadow

If the Green Meadow Elementary School is evacuated, students will be relocated to the Fowler Middle School, located at 3 Tiger Drive, Maynard. Students will walk to the Fowler, supervised by BASEC teachers. All parents of students who are enrolled in BASEC @ Green Meadow on that day will be contacted by automated text message,

phone call, and email using AP Notify. The Family Engagement Specialist, Assistant Director, or Site Director will carry an emergency first aid travel bag, student medications, and attendance from the building to Fowler. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using the after school program supplies of the BASEC @ Fowler and the emergency first aid travel bag and student medication supplies brought by Family Engagement Specialist, Assistant Director, or Site Director.

BASEC @ Fowler

If the Fowler Middle School is evacuated, students will be relocated to the Green Meadow Elementary School, located at 5 Tiger Drive, Maynard. Students will walk to the Green Meadow, supervised by BASEC teachers. All parents of students who are enrolled in BASEC @ Fowler on that day will be contacted by automated text message, phone call, and email using AP Notify. The Family Engagement Specialist, Assistant Director, or Site Director will carry an emergency first aid travel bag, student medications, and attendance from the building to Green Meadow. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using the after school program supplies of the BASEC @ Green Meadow and the emergency first aid travel bag and student medication supplies brought by Family Engagement Specialist, Assistant Director, or Site Director.

BASEC Belmont Vacation Program

In the instance of a disaster within the camp building, teachers will ensure the safety of the students by transporting them to a predetermined safe place (Chenery Middle School for our First Church location.) All parents of students who are enrolled in BASEC Vacation Programs on that day will be contacted by automated text message, phone call, and email using AP Notify. There will also be a recorded message on the program's voicemail explaining the relocation. The Operations Specialist or Vacation Camp Director will carry an emergency first aid travel bag, student medications, and attendance from the building to the relocation site. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using program supplies in the front desk's travel "Activity Bag" and the emergency first aid travel bag and student medication supplies brought by the Operations Specialist or the Vacation Camp Director.

In the instance of a disaster outside of the building, teachers will escort students to the basement of First Church. The Operations Specialist will be responsible for bringing the attendance lists to groups, Vacation Camp Director will be responsible for performing a sweep/bathroom check, and the teachers will conduct headcount and roll call of their groups' students. The Vacation Camp Director will contact 911 immediately.

BASEC Vacation Camp @ Green Meadow

If the Green Meadow Elementary School is evacuated, students will be relocated to the Fowler Middle School, located at 3 Tiger Drive, Maynard. Students will walk to the Fowler, supervised by BASEC teachers. All parents of students who are enrolled in BASEC @ Green Meadow on that day will be contacted by automated text message, phone call, and email using AP Notify. The Family Engagement Specialist, Assistant Director, or Site Director will carry an emergency first aid travel bag, student medications, and attendance from the building to Fowler. Teachers will take attendance before and after transportation to the temporary location. Food, medication, first aid, and activity needs will be met using the after school program supplies of the BASEC @ Fowler and the emergency first aid travel bag and student medication supplies brought by Family Engagement Specialist, Assistant Director, or Site Director.

SHELTERING IN PLACE

Natural Disasters:

BASEC administrators monitor weather reports to assess whether outdoor activities and field trips that involve outdoor activity will be suspended. If lightning begins unexpectedly, all children involved in outdoor activities on the property will be brought inside immediately.

If a hurricane is predicted in advance and seems very probable, BASEC programs and camps will be suspended until the threat is over and parents will be notified. Program staff members will supervise any campers or students remaining at the facility. In the event that a hurricane arises unexpectedly, campers will be brought inside immediately and parents will be notified.

In the event of severe weather or an emergency creating a power outage, loss of heat or water, BASEC will utilize the following plans:

- The Belmont or Maynard Fire and Police Department will be notified by cell phone to alert them to children sheltering in the facility. Authorities will be alerted to any necessary factors, e.g. loss of heat.
- Non-refrigerated food supplies and bottled water kept for such emergencies will be utilized.
- Bathrooms can be used, but toilets cannot be flushed without electricity.
- Hand washing will take place utilizing hand-sanitizer.
- Flashlights are available in the office areas and adjacent to the first aid kits in sites (all sites utilize emergency lighting, so that the facilities are not completely dark.)
- Blankets and comfortable items are available for warmth if necessary.

- If necessary, students will be brought to an area away from windows. BASEC @ Burbank: gymnasium; BASEC @ Chenery: gymnasium; BASEC @ BMHS: inner-building area of Media Center; BASEC @ Green Meadow: gymnasium; BASEC @ Fowler: gymnasium; BASEC Vacation Program: basement areas.
- The Belmont or Maynard Fire Department will facilitate shutting off electricity, gas, and water service, if necessary.

LOCK-DOWN PROCEDURES

Under certain circumstances, lock-down may be the most appropriate response for protecting students. In our facilities, we seek lock-down shelter in the nearest possible classroom, close and lock the classroom door, turn out the lights and gather children away from doors and windows.

Depending on the unique situation, teachers may make a judgment call on escaping the facility. Factors considered are proximity of threat, number of teachers available, and possibility of escape. BASEC teachers review these options and procedures at BASEC orientations and staff meetings.

Any teacher can communicate the need for a lock-down over our radio communicators. Teachers in every area utilize hand radios for this emergency communication. Teachers are responsible for gathering students, leading them to safe areas and locking doors. Directors are responsible for notifying emergency responders. Directors will account for all students before, during, and after an emergency.

In an emergency, teachers first gain the attention of all students. During a lockdown, everyone should remain silent. Teachers should continue to reassure students.

BASEC Directors and teachers will use BASEC supplies (food, water, necessary medications, and first aid supplies) to ensure the immediate needs of students are met if the emergency extends for more than a few minutes.

In the event of a “lock-down”, BASEC will utilize the following sheltering in place plan at each of its site:

- Any BASEC teacher witnessing a threat is responsible for calling a lock-down or evacuation
- BASEC teachers will be notified using hand radios. BASEC does not use codes, but speaks plainly and directly, so that no misunderstandings occur.
- Children will be gathered in any classrooms being used. Doors will be locked. Lights will be turned off. Windows will be covered.
- Teachers will pull students in from the halls.

- Teachers will note students not present.
- Teachers will determine next steps “thinking on your feet”: e.g., move students immediately into kitchen, or along back wall, into community room, or outside.
- Teachers are responsible for locking doors, gathering children and/or leading children from the facility.
- Site Director is responsible for notifying 911 immediately.
- Parents are notified as soon as possible.
- Teachers will utilize packaged foods and bottled water to meet students’ needs.
- Teachers will utilize classroom games and activities to keep students engaged during the emergency.
- School custodians will shut off electricity, gas, and water service if necessary.

PLAN FOR MISSING CHILD

BASEC @ Burbank: The Site Director will designate a teacher to assist in the search for the missing child. All other teachers will continue supervision of all children. The first step is to contact the classroom teacher of the missing child, to determine if a different dismissal plan was followed. Next, teachers will start on the bottom floor, searching all spaces and calling for the student. Teachers will work their way up through the floors of the facility. Teachers will then move search to outdoor areas, searching the parking lot, playground and blacktop areas. Next, BASEC will notify parents and determine if a planned absence was not reported. If the child remains missing after these searches, Belmont police will be notified. All doors leading into the Burbank School are always locked; however, as always, BASEC teachers should always identify unknown persons coming into the facility and remain vigilant in the supervision of students.

BASEC @ Chenery: The Site Director will designate a teacher to assist in the search for the missing child. All other teachers will continue supervision of all children. The first step is making an announcement on the school's PA system, asking the missing student to immediately report to the cafeteria. Second, the parents/guardians of the student are contacted to check if an absence should have been reported and/or whether the child is safe at home or otherwise with the parent/guardian. Next, BASEC teachers will start on the bottom floor, searching all spaces and calling for the student. Teachers will work their way up through the floors of the facility. Teachers will then move search to outdoor areas, searching the parking lot, playground, sports fields and all outdoor spaces. If the child remains missing after these searches, Belmont police will be notified. The building is open to the public—as always, BASEC teachers should always identify unknown persons coming into the facility and remain vigilant in the supervision of students.

BASEC @ BMHS: The Site Director will designate a teacher to assist in the search for the missing child. All other teachers will continue supervision of all children. The first step is making an announcement on the school's PA system, asking the missing student to immediately report to the cafeteria. Second, the parents/guardians of the student are contacted to check if an absence should have been reported and/or whether the child is safe at home or otherwise with the parent/guardian. Next, BASEC teachers will start on the bottom floor, searching all spaces and calling for the student, starting with the area in front of the school where students wait for the afternoon bus. Teachers will work their way up through the floors of the facility. Teachers will then move search to outdoor areas, searching the parking lot, playground, sports fields and all outdoor spaces. If the child remains missing after these searches, Belmont police will be notified. The building is open to the public—as always, BASEC teachers should

always identify unknown persons coming into the facility and remain vigilant in the supervision of students.

BASEC @ Green Meadow: The Site Director will designate a teacher to assist in the search for the missing child. All other teachers will continue supervision of all children. Teachers will start in the place the child was last reported to be, searching all spaces and calling for the student. Teachers will work their way through the hallways of the facility. Teachers will then move search to outdoor areas, searching the parking lot, playground and courtyard areas. Next, the parents/guardians of the student are contacted to check if an absence should have been reported and/or whether the child is safe at home or otherwise with the parent/guardian. If the child remains missing after these searches, Maynard police will be notified. The building is open to the public—as always, BASEC teachers should always identify unknown persons coming into the facility and remain vigilant in the supervision of students.

BASEC @ Fowler: The Site Director will designate a teacher to assist in the search for the missing child. All other teachers will continue supervision of all children. Teachers will start on the bottom floor, searching all spaces and calling for the student. Teachers will work their way up through the floors of the facility. Teachers will then move search to outdoor areas, searching the parking lot, playground, sports fields, courtyard, and all outdoor spaces. Next, the parents/guardians of the student are contacted to check if an absence should have been reported and/or whether the child is safe at home or otherwise with the parent/guardian. If the child remains missing after these searches, Maynard police will be notified. The building is open to the public—as always, BASEC teachers should always identify unknown persons coming into the facility and remain vigilant in the supervision of students.

Vacation Camps: The Camp Director will designate a teacher to assist in the search for the missing child. All other teachers will continue supervision of all children. Teachers will start on the bottom floor, searching all spaces and calling for the student. Teachers will work their way up through the floors of the facility. Teachers will then move search to outdoor areas, searching the parking lot, playground and other outdoor spaces. Next, the parents/guardians of the student are contacted to check if an absence should have been reported and/or whether the child is safe at home or otherwise with the parent/guardian. If the child remains missing after these searches, Belmont or Maynard police will be notified. The building is open to the public—as always, BASEC teachers should always identify unknown persons coming into the facility and remain vigilant in the supervision of students.

CARE OF ILL CHILD

- Parent or guardian is called for immediate pick up when child has:
 - A temperature of 100.0 degrees or above
 - Evidence of infectious disease or condition
 - Vomiting and/or diarrhea
 - Extreme coughing
 - Symptoms requiring extended one-to-one care

Child will rest quietly in a comfortable space with a staff member until a parent/guardian or designated pick up person is available for pick up. Depending on circumstances, child may be encouraged to wear a mask to prevent the spread of any infectious illness.

- *Child may return to the program when they are both*
 - *Fever-free for 24 hours with improvement in symptoms; and*
 - *Eligible for return to school*

Exclusion Policy for Conditions Reportable to the Town Health Department

No child will attend BASEC without being fever-free for 24 hours.

- **COVID-19 Modification:** *Any child unwell with COVID-19 symptoms may not be eligible to attend in-person programming until they have met the standards outlined in Care of Ill Children as updated by the Health Department.*

Family Notification of Reportable Conditions

Parents/guardians will be notified of contagious and/or infectious conditions as outlined by the Town Health Department.

TRAFFIC CONTROL PLAN

Drop Off and Pick Up / Dismissal

Drop Off

BASEC **after school** programming commences with students transitioning directly from their school day classrooms. BASEC administrators and/or Family Engagement Specialists/Operations Specialists will check students into after school at this transition. **Please note** that it is extremely important to let us know if your child will be absent from programming. We manage this transition with an emphasis on expedient check-in and follow up with a multi-tiered search for students who do not check in as expected on their regularly scheduled days; therefore, having accurate communication about attendance is vitally important to our process and keeping all students safe.

BASEC **before school** programming commences with students being dropped off by parents during our before school hours, or otherwise following the specific drop-off transportation plan communicated on a specific student's enrollment form.

Before School (Burbank): Parents may pull into the sidewalk cut out at the end of the driveway, without blocking the sidewalk handicap cut out, so that their children can exit the car and enter the Burbank Elementary School where they will be met and signed in by a BASEC teacher. Parents may also park and walk their children into the building. Parents may only park in single parking spots, not in the double spots adjacent to the brick wall.

Before School (Green Meadow): All parents must park and walk their children to the front doors of Green Meadow Elementary where they will be signed in by a BASEC teacher. (Please note, Fowler students participating in before school will be walked over to the Fowler School by a BASEC teacher at the start of their school day.)

Vacation Camp @ First Church: Families will do rolling drop off. They will enter the parking lot and the rolling drop off line from Concord Ave. The cars of rolling drop off will be directed by a staff member responsible for directing parking lot traffic. Campers will exit the right side of their car onto the sidewalk. From here they will be met by an administrator who will check them in.

Vacation Camp @ Green Meadow: All families must park and walk their children to the front doors of Green Meadow Elementary where they will be signed in by a BASEC teacher.

Pick-Up

Children may be picked up by their parents or guardians, or by other authorized persons, at any time during the program day.

Designation of other individuals who are authorized to pick up students should be made in writing by a student's parents or guardians initially on our Enrollment Form (see Application Procedures, above), the access to which is delivered by an email including a link to the student's profile in our database prior to program matriculation.

Additional names of authorized persons may be provided, in writing, at any time, but must be submitted to a BASEC Director, Operations Director, Operations Specialist, or Family Engagement Specialist for processing compliant with the regulations that govern our licenses. Our duty of care requires us to strictly follow release plans made by parents/guardians and to not release children to any unauthorized persons. Older siblings must be at least 11 years of age to sign BASEC students out of our programs. For safety purposes, BASEC teachers will request and review identification from people unfamiliar to them who are sent to pick up children.

If there is anyone who is *specifically prohibited* from picking up your child from the program, including anyone designated pursuant to a 209A Commonwealth of Massachusetts Order (restraining order) or other court order, please notify the BASEC Site Director in writing, in advance.

A child may sign him/her/themselves out of the program and walk home on their own *only* if their transportation plan is properly documented in their enrollment form. Students must be at least nine-years-old to sign themselves out of BASEC programs. If you wish to allow your child to sign out and walk home on their own, please complete and sign all fields in the "Consent for Child to Leave the Program" section of the Enrollment Form. If you plan to update or change your walking plans or have any questions about this permission, please speak with a BASEC Site Director.

BASEC @ Burbank: Authorized pick-up persons should use the back door entrance (Door 10) across from the cafeteria to enter the Burbank on the ground floor. BASEC has a doorbell at this entrance to ring in case an administrator is not there to open the door. The BASEC sign-out desk is located in the cafeteria, which is on the right side of the hallway leading from the parking lot entrance. The sign-out desk is monitored and administered by a BASEC Director of Operations Specialist at all times.

BASEC @ Chenery: Authorized pick-up persons should use the right-side parking lot entrance that leads into the Chenery cafeteria. The BASEC sign-out desk is located in the back of the cafeteria, which can be seen upon entry. The sign-out desk is monitored and administered by a BASEC Director or Operations Specialist at all times.

BASEC @ BMHS: Authorized pick-up persons should use the main entrance that leads into BMHS. The BASEC sign-out desk is located in the Community Space room, which is in the second floor open library area. The sign-out desk is monitored and administered by the BASEC assistant director at all times.

BASEC @ Green Meadow: Authorized pick-up persons should pull into the parking lot and walk to front doors to meet the Family Engagement Specialist, Assistant Director, or Site Director.

BASEC @ Fowler: Authorized pick-up persons should pull into the parking lot at the rear of the Fowler School close to the cafeteria entrance. Enter the building at those doors to meet the Family Engagement Specialist, Assistant Director, or Site Director.

Vacation Camp @ First Church: Before 4:00 PM, authorized pick-up persons are to park and walk up to the administrative front desk. They are to identify themselves and state who they are picking up. The camper will be escorted to the pick-up person. Rolling pick up will occur from the hours of 4:00 PM - 5:00 PM. Cars will form similar to drop-off and administrators will call for campers and escort them to the right side of their vehicles.

Vacation Camp @ Green Meadow: Authorized pick-up persons should pull into the parking lot and walk to front doors to meet the administrative director who will call for the camper.

Late Drop Offs & Early Pickups

If dropping off or picking up outside the designated times, please use the contacts listed below to arrange for your student to be checked in or escorted outside for pick-up.

Burbank: Landline: 617-484-0692 Cell phone: 781-296-2471

Chenery: 617-484-8030

BMHS: (617) 431-6686

Green Meadow: (978) 801-1334

Fowler: (978) 801-1334

Vacation Camp @ First Church: (781) 296-2471

Vacation Camp @ Green Meadow: (978) 801-1334

Unrecognized Persons

BASEC sites maintain the protocol to question any unrecognized persons entering a program or camp property. We recommend politely engaging with, “How can I help you?” Any non-parent/guardian picking up a student must show identification and must be approved with BASEC prior to release of the student.

STORAGE & ADMINISTRATION OF MEDICATION

Medication prescribed for BASEC students and campers shall be kept in original containers bearing the pharmacy label showing:

- Date of filling
- Pharmacy name and address
- Filling pharmacist's initials
- Serial number of the prescription
- Name of the patient
- Name of the prescribing practitioner
- Name of the prescribed medication
- Directions for use and cautionary statements, if any, contained in such prescription or required by law
- If tablets or capsules, the number in the container

All over the counter medications for BASEC students and campers shall be kept in the original containers containing the original label, which shall include the directions for use.

All medications must be accompanied by a completed Medication Consent Form (part of a student's enrollment form).

All medication prescribed for BASEC students and campers shall be kept in a secure manner. These cabinets are kept locked except when opened to obtain medication by BASEC staff trained to administer medication. Medication requiring refrigeration shall be stored at temperatures of 36° – 46°F.

- At Burbank, these are located in a locked cabinet on the stage office.
- At Chenery, these are located in the locked cabinet in the cafeteria.
- At BMHS, these are located in the locked cabinet in the community space
- At Green Meadow, these are located in the locked cabinet in the cafeteria.
- At Fowler, these are located in the locked cabinet in the cafeteria.
- At First Church, these are located in a locked storage cabinet used exclusively for medication.

Medication shall only be administered by a BASEC health care supervisor or by a licensed health care professional authorized to administer prescription medications. All BASEC health care supervisors complete *Medication Administration* training.

When no longer needed, medications shall be returned to a parent or guardian.

Allergies and Other Medical Information

Yearly family information forms require that all allergy and special medical conditions be reported. A list of all known allergies and conditions is posted in the BASEC offices

and at the front desk areas of Burbank, Chenery, BMHS, Green Meadow, Fowler, and First Church by the phone and logged in the attendance book. See BASEC Allergy Protocol below.

PROTOCOLS FOR MANAGEMENT OF STUDENTS WITH LIFE THREATENING ALLERGIES (LTA)

Planning for the Individual Student with LTAs—Entry into BASEC

Prior to entry into BASEC programs (or, for a student who is already enrolled in programming, immediately after the diagnosis of a life-threatening allergic condition), the parent/guardian should meet with BASEC Directors to develop an Individual Health Care Plan (IHCP).

The parent/guardian should work with the student's health care provider and BASEC to create a strategy for management of a student's food allergy.

This preparation includes completing BASEC's Medication Consent and IHCP forms, which are included in each enrolling student's enrollment packet. The IHCP reflects and accompanies an allergy action plan created by a healthcare provider.

It is important for the individual creating the IHCP to include:

- A description of the LTA, including all known allergens
- Specific symptoms (if known) that the student will display if he/she comes in contact with the allergen. This should include a description of the student's past allergic reactions, including triggers and warning signs.
- The medical treatment necessary while at BASEC
- The potential side effects of treatment, and
- The potential consequences if treatment is not administered.

The Medication Consent form should be completed with information about the medication, as well as the plan for where it will be stored. BASEC provides space in all of its programs for quick and easy access to individual students' medications.

A BASEC student or camper prescribed an epinephrine auto-injector for a known allergy or pre-existing medical condition may self-administer and carry an epinephrine auto-injector with him/her/them at all times for the purposes of self-administration if:

1. The student/camper is capable of self-administration; and
2. The health care consultant and student's/camper's parent/guardian have given written approval.

Please note that allergy plans that include inhalers, Benadryl, or other antihistamines as medication options or first steps for symptoms related to food allergies may mask dangerous anaphylaxis signs when monitored without the assistance of medical personnel. BASEC will work with families who have these options listed in their allergy plans to have those plans re-written by the healthcare providers. If creating a new plan

is not possible, BASEC will work with the family on protective measures (that typically will include automatically calling to have a child picked up from the program) if/when circumstances require that these alternative medications are administered, so that the child can be properly monitored for signs of anaphylaxis.

Implementing IHCPs into BASEC Programming

When forms are complete, the family will schedule a meeting with the BASEC Director to review the IHCP and the Medication Consent form. It is very important that both parties have full understanding of the medical condition and the steps that BASEC will take to prevent exposure to LTA and the treatment steps required if accidental exposure occurs. Discussion about the student's emotional response to the condition is also a part of this conversation, so that BASEC can best provide for the student's social and emotional needs. As partners, the family and BASEC develop an age-appropriate plan.

The BASEC Director discusses the information on the IHCP with all BASEC teachers at staff meetings to ensure that all teachers supervising the individual student understand the plan.

BASEC reads food labels when purchasing snacks to avoid known allergens; however, there are times when students bring their own snacks and lunches from home to its programs.

Students use proper hand-washing and sanitizing techniques before and after eating. Sharing or trading food at BASEC is prohibited.

A bleach solution, required by the EEC and DPH, is used to clean tables before and after meals. BASEC teachers use extreme vigilance in keeping surfaces clear and free from allergens.

Response to Emergencies

All BASEC staff members are trained to use Epi-pens and have completed the Department of Early Education and Care's *Medication Administration*.

In the event of accidental exposure to an allergen or an anaphylaxis reaction, BASEC shall identify personnel who will:

- Remain with the student
- Assess the emergency at hand
- Notify the BASEC staff and Director of the emergency using our hand radios
- Refer to the student's IHCP
- Notify the emergency medical services
- Administer the epinephrine

- Notify the parent/guardians
- Attend to the student's classmates
- Manage crowd control
- Meet emergency medical responders at the program entrance
- Direct emergency medical responders to the site
- Accompany student to emergency care facility
- Assist in the student's re-entry into the program.

Returning to BASEC Programming after a Reaction

Students who have experienced an allergic reaction at BASEC need special consideration upon their return to the program. The approach taken by BASEC is dependent upon the severity of the reaction, the student's age and whether his/her classmates witnessed it. A mild reaction may need little or no intervention other than speaking with the student and parents and re-examining the IHCP.

In the event of a moderate to severe reaction, the following actions should be taken:

- Obtain as much accurate information as possible about the allergic reaction
- Identify those involved in the medical intervention and witnesses
- Meet with adults to discuss facts and dispel rumors
- Explanations to other students should be age appropriate
- Amend the students IHCP, if necessary.

VACATION PROGRAMS PLANS

Plan for Arrival of Un-Enrolled Camper

Parents are required to check-in upon drop-off and sign out upon pick-up at the end of the camp day. In the event that a student arrives who is not enrolled in camp, parents will be notified immediately. Campers who are not enrolled will not be allowed to remain at camp. In the event that the parents of an un-enrolled camper cannot be reached, the police will be notified.

Plan for the No-Show of Enrolled Camper

In the event that an enrolled camper does not come to camp, a staff member will double-check the daily attendance, emails, and voicemails to ensure a parent hasn't attempted to reach the camp to notify staff of an absence. The final step would be to contact parents to confirm the camper's absence.

Plan for No-Show of Camper at the End of Day

In the event that the camper has not arrived by the end of the day, parents will be contacted again to confirm the camper's absence.

Plan for Lost Camper

All campers will be brought into the main building, divided into groups, and a full head count/attendance check will be made to establish that all other campers are present. This procedure will utilize half of the staff members. The other half of the staff members will start at the last place the camper was seen and begin a search immediately. The parents of the camper will be notified and, if the situation warrants it, the police will be notified and asked to assist in the search.

Location for Storage of

- Toxic substances (cleaning supplies):
 - Kitchen cabinet
 - Custodial offices
- Medication
 - Locked cabinet at check-out desk at First Church.

Plan for Meals and Snacks

Campers will have scheduled mid-morning and mid-afternoon snacks, mid-day lunch, and frequent water breaks throughout the camp day. Campers will wash hands with soap and water and/or be given hand sanitizer before and after each snack/lunch break. When necessary, campers with life-threatening allergies will be seated at their own table with campers who have safe snacks. Campers will not be permitted to trade or share food with one another.

Plan for Camper Who Forgets Lunch

BASEC teachers check with all campers at morning meeting to identify campers that have not packed lunch or snacks. Parents are notified immediately and a plan is discussed. The first option is for the parent/guardian to deliver a lunch for the camper. If this is impossible, BASEC teachers will suggest that the parent contact a local restaurant to purchase and deliver a hot lunch for the student. BASEC teachers will communicate the plan to the student.

Plan for Using Underwood Pool During Vacation Program

BASEC Vacation Program plans to walk campers from our program site at First Church to the Underwood Pool. Campers will participate in the free swim beginning at approximately 1:00 PM. Prior to leaving the building, BASEC teachers will prepare campers by reminding them to change into swim gear, apply sunscreen and bring towels or other necessities. The Aquatics Director, as well as BASEC teachers (which will maintain a ratio of at least 9 students : 1 teacher) and lifeguards, will then walk campers to the pool entrance. Walking plans include:

First Church

BASEC teachers will lead the group of campers along Concord Ave to the pool entrance.

Campers will have access to the shallow end of the pool. Those that have passed the Underwood Pool deep end test will have access to the deep end of the pool. BASEC teachers and lifeguards will supervise campers while using the pool and surrounding area. BASEC Aquatics Director will supervise all campers using the water. Campers will return to camp locations, arriving at approximately 3:45 PM. BASEC campers will utilize changing rooms at Underwood Pool.

Plan for Swimming at Beach Field Trips

Several of the Summer Vacation Camp field trips are to beaches with swimming options. BASEC highly values providing equitable opportunities to get cooled off in the summer, along with experiencing the beautiful beaches of MA as part of a camp experience!

For these field trips, campers must bring and wear a U.S. Coast Guard Approved Type I, II, or III life jacket/PFD that is properly sized and fitted to the camper. This is required by law under the state of Massachusetts, known as Christian's Law. Campers may go without such PFD if they have passed an advanced swim test with BASEC's Aquatic Director during the time they are at the Underwood Pool during the 2024 summer camp season*. However, if a child does not pass this test, they are not allowed to enter the open water without a PFD, so we advise all families to procure a PFD in advance just in case.

*Please note that all rising first graders attending the beach trips must have a PFD as they won't be allowed to take the advanced swim test.

As part of this law, BASEC is required to assess that the PFD is the correct type and fit for each child. To help expedite this process, we ask families to upload pictures or a video of their children wearing their PFD using a Google form. If a family does not do this in advance, they need to bring their child's PFD to camp one of the days leading up to the beach trip to assure it is the correct type and size PFD. BASEC makes referrals about where to purchase a PFD and addresses concerns about the cost of buying one.

Additionally, BASEC staffs lifeguards for these trips at the required 25:1 ratio required by law and positions lifeguards and Educators in the water while swimming occurs, effectively creating a perimeter that all campers must remain inside.

Plan for Lost Swimmer

A teacher will call 911 and notify police, indicating that first aid and/or CPR may be necessary. All other campers are to be removed from the water immediately and gathered on the lawn. Attendance will be taken by half of the teachers to ensure that all other campers are present. The remaining teachers will search the pool. If a camper is found in the water in an unconscious state, he or she will be treated by a first aid/CPR certified staff member until paramedics arrive on the scene. The camper's parents will be simultaneously notified.

Procedure for Using Insect Repellant

BASEC will communicate to summer camp families that BASEC does not provide insect repellent for campers. Families are welcome to communicate to BASEC that they will send insect repellent with their camper to camp each day. BASEC teachers can assist students in applying repellent. Insect repellent cannot be shared from camper to camper.

Procedure for Conducting Tick Checks

Immediately following any field trip to wooded areas or spaces with tall grasses, BASEC teachers will do a visual inspection of students for ticks. Teachers will instruct campers to enter bathroom areas so that campers can conduct a closer self-check. BASEC curriculum will include tick awareness instruction.

Protection from the Sun

BASEC encourages students and campers to limit exposure to the sun by utilizing wide brim hats, long sleeve shirts, long pants, screens with a solar protection factor of 25 or greater and lip balm. BASEC provides written information to all summer camp families

as part camp orientation correspondence regarding the topical application of sunscreen.

Standing Orders by Health Care Consultant:

The health consultant will review and approve CPR/First Aid training of all staff and be available for consultation regarding the health and safety of the campers and staff at all times. The health supervisor on the camp premises will be responsible for the distribution and maintenance of all first aid kits. The health supervisor will dispense prescription medications to campers from their original packaging provided there is signed authorization from parents to administer at camp. A list of all prescription medications held at camp must be approved by the health consultant.

Over-the-counter medications such as Tylenol, Ibuprofen, and Benadryl may be administered by the health supervisor provided there is signed or verbal consent from parents. If an over-the-counter medication is administered while on the premises, the caregiver of the child will be notified. The health consultant will review and approve all prescription and over-the-counter medications administered at camp. In addition, the health supervisor will maintain a medical log of any health problems or injuries that arise at camp. The health consultant will be available for consultation regarding injury and illness management at all times.

BASEC Vacation Programs must comply with Regulations of the Massachusetts Department of Public Health and be licensed by the local board of health.

FIELD TRIPS

On any trips away from the BASEC program site, BASEC staff will pack students and campers IHCP form and all medications with the travel first-aid kit. BASEC will clearly specify any special meals or snacks that will take place on the trips. If students or campers are bringing their own lunches or snacks, BASEC staff will package meals appropriately to avoid cross-contamination. BASEC staff will provide hand wipes and hand sanitizers before and after meals.

CHILD ABUSE & NEGLECT REPORTING

A Guide for Mandated Reporters

Introduction

Under Massachusetts law, the Department of Children and Families (DCF) is the state agency that receives all reports of suspected abuse and/or neglect of children under the age of 18. State law requires professionals whose work brings them in contact with children to notify DCF if they suspect that a child is being abused and/or neglected. DCF depends on reports from professionals and other concerned individuals to learn about children who may need protection, more than 75,000 reports are received on behalf of children each year.

The Department is responsible for protecting children from abuse and/or neglect. DCF seeks to ensure that each child has a safe, nurturing, permanent home. The Department also provides a range of services to support and strengthen families with children at risk of abuse and/or neglect.

As a mandated reporter, what are my responsibilities?

Massachusetts law requires mandated reporters to immediately make an oral report to DCF when, in their professional capacity, they have reasonable cause to believe that a child under the age of 18 years is suffering from abuse and/or neglect. A written report is to be submitted within 48 hours.

In addition to filing with the Department, a mandated reporter may notify local law enforcement or the Office of the Child Advocate of any suspected abuse and/or neglect.

You are required to report any physical or emotional injury resulting from abuse; any indication of neglect, including malnutrition; any instance in which a child is determined to be physically dependent upon an addictive drug at birth; any suspicion of child sexual exploitation or human trafficking; or death as a result of abuse and/or neglect. In addition, you must report a death as a result of abuse and/or neglect to the local District Attorney and to the Office of the Chief Medical Examiner.

Mandated Reporters who are staff members of medical or other public or private institutions, schools or facilities, must either notify the Department directly or notify the person in charge of the institution, school or facility, or his/her designee, who then becomes responsible for filing the report. Should the person in charge/designee advise against filing, the staff member retains the right to contact DCF directly and to notify the local police or the Office of the Child Advocate. (Ch. 119, § 51A) Under the law, mandated reporters are protected from liability in any civil or criminal action and

from any discriminatory or retaliatory actions by an employer. The written report must be submitted to DCF within 48 hours after the oral report has been made.

Any person defined by law as a mandated reporter is required to assist DCF in its response under Ch. 119, § 51B, even if they are not the filer of the 51A report. Mandated reporters who are licensed by the Commonwealth are required to complete training to recognize and report suspected child abuse and/or neglect.

What if I fail to report?

Any mandated reporter who fails to make required oral and written reports can be punished by a fine of up to \$1,000. Any mandated reporter who willfully fails to report child abuse and/or neglect that resulted in serious bodily injury or death can be punished by a fine of up to \$5,000 and up to 2½ years in jail, and be reported to the person's professional licensing authority.

All mandated reporters who knowingly and willfully file a frivolous report of child abuse and/or neglect can be punished by a fine of up to \$2,000 for the first offense, up to 6 months in jail for a second offense, and up to 2½ years in jail for a third offense.

How do I make a report of suspected child abuse and/or neglect? When must I file?

When you suspect that a child is being abused and/or neglected, you should immediately telephone the DCF Area Office and ask for the screening unit. You will find a directory of the DCF Area Offices at the end of this guide and on the DCF web site. Offices are staffed between 9 am and 5 pm weekdays. To make a report at any other time, including after 5 pm and on weekends and holidays, please call the Child-At-Risk Hotline at 800-792-5200.

As a mandated reporter you are also required by law to submit a written report to the Department within 48 hours after making the oral report. Mandated reporters are encouraged to utilize the online abuse/neglect report option available at mass.gov/dcf to submit the written report; however, written reports may be mailed or faxed to the Department within 48 hours of the oral report. The form for faxing/mailing this report can also be obtained from the DCF website: mass.gov/dcf.

Your report should include:

- Your name, address, telephone number and relationship (if any) to the child(ren);
- All identifying information you have about the child and parent or other caregiver,

- if known, including emergency contacts and language(s) spoken;
- The nature and extent of the suspected abuse and/or neglect, including any evidence
- or knowledge of prior injury, abuse, maltreatment, or neglect;
- The identity of the person you believe is responsible for the abuse and/or neglect;
- The circumstances under which you first became aware of the child's injuries, abuse, maltreatment or neglect, including dates and/or timeframes;
- What action, if any, has been taken thus far to treat, shelter, or otherwise assist the child;
- Any other information you believe might be helpful in establishing the cause of the injury and/or person responsible;
- Any concerns about alcohol/drug use/misuse by the parent/caregiver;
- Any information that could be helpful to DCF staff in making safe contact with an adult victim in situations of domestic violence (e.g., work schedules, place of employment, daily routines);
- Any concerns you have for social worker safety; and
- Any other information about the family's strengths and capacities you believe would be helpful in ensuring the child's safety and/or supporting the family to address the abuse and/or neglect concerns.

How does DCF define abuse and neglect?

Under the Department of Children and Families regulations (110 CMR, section 2.00):

Abuse means: The non-accidental commission of any act by a caregiver which causes, or creates a substantial risk of, physical or emotional injury or sexual abuse to a child; or the victimization of a child through sexual abuse or human trafficking, regardless if the person responsible is a caregiver. This definition is not dependent upon location (i.e., abuse can occur while the child is in an out-of-home or in-home setting). DCF defines "sexual abuse" as any non-accidental act by a caregiver upon a child that constitutes a sexual offense under the laws of the Commonwealth or any sexual contact between a caregiver and a child for whom the caregiver is responsible.

Neglect means: Failure by a caregiver, either deliberately or through negligence or inability, to take those actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, emotional stability and growth, or other essential care, including malnutrition or failure to thrive; provided, however, that such inability is not due solely to inadequate economic resources or solely to the existence of a handicapping condition.

Physical Injury means: Death; or fracture of a bone, a subdural hematoma, burns, impairment of any organ, and any other such non trivial injury; or soft tissue swelling or skin bruising, depending upon such factors as the child's age, circumstances under which the injury occurred and the number and location of bruises.

Emotional Injury means: An impairment to or disorder of the intellectual or psychological capacity of a child as evidenced by observable and substantial reduction in the child's ability to function within a normal range of performance and behavior.

Who is a caregiver?

A "caregiver" can be a child's parent, step-parent, guardian, or any household member entrusted with the responsibility for a child's health or welfare. In addition, any other person entrusted with the responsibility for a child's health or welfare, both in and out of the child's home, regardless of age, is considered a caregiver. Examples may include: relatives from outside the home, teachers or staff in a school setting, workers at an early education, child care or afterschool program, a babysitter, foster parents, staff at a group care facility, or persons charged with caring for children in any other comparable setting.

When should a report involving domestic violence be filed?

Domestic violence is defined as a pattern of coercive controlling behaviors that one person exercises over another in an intimate relationship. Not every situation involving domestic violence merits intervention by DCF. Mandated reporters are encouraged to carefully review each family's situation and to identify any specific impact on the child(ren) when considering whether or not to file a 51A report with DCF. In some situations a report may actually create additional risks for the victim and the children. If possible, discuss the filing of a report with the caregiver who is a victim first and address the potential need for safety planning. A report is more likely necessary if the following higher risk circumstances are current concerns:

- The alleged perpetrator threatened to kill the caregiver, children or self and the caregiver fears for their safety;
- The alleged perpetrator physically injured the child in an incident where the caregiver was the target;
- The alleged perpetrator coerced the child to participate in or witness the abuse of a caregiver;
- The alleged perpetrator used or threatened to use a weapon, and the caregiver believes that the perpetrator intended or has the ability to cause harm.

For more information on this topic, please refer to the DCF Brochure, [Promising Approaches: Working with Families, Child Welfare and Domestic Violence](#)

What happens when DCF receives a report of child abuse and/or neglect?

When DCF receives a report of abuse and/or neglect, called a “51A report,” from either a mandated reporter or another concerned citizen, DCF is required to evaluate the allegations and determine the safety of the children. During DCF’s response process, all mandated reporters are required to answer the Department’s questions and provide information to assist in determining whether a child is being abused and/or neglected and in assessing the child’s safety in the household.

Here are the steps in the Child Protective Services (CPS) process:

1. The report is screened. The purpose of the screening process is to gather sufficient information to determine whether the allegation meets the Department’s criteria for suspected abuse and/or neglect, whether there is immediate danger to the safety of a child, whether DCF involvement is warranted and how best to target the Department’s initial response. The Department begins its screening process immediately upon receipt of a report. During the screening process DCF obtains information from the person filing the report and also contacts professionals involved with the family, such as doctors or teachers who may be able to provide information about the child’s condition. DCF may also contact the family if appropriate.
2. If the report is “Screened-In”, it is assigned for a Child Protective Services (CPS) Response to determine whether there is reasonable cause to believe that a child has been abused and/or neglected. “Reasonable cause to believe” means a collection of facts, knowledge or observations which tend to support or are consistent with the allegations and when viewed in light of the surrounding circumstances and the credibility of the persons providing the information, would lead a reasonable person to conclude that a child has been abused or neglected. The response includes an investigation of the validity of the allegation(s) received, a determination of current danger and future risk to the child and an assessment of the capacity of the parent(s)/caregiver(s) to provide for the safety, permanency and well-being of their child.
3. A determination is made as to whether the report is:
 - “Unsupported” – There is not reasonable cause to believe that the child was abused and/or neglected, or that the child’s safety or well-being was compromised; or
 - “Supported” – There is reasonable cause to believe the child was abused and/or neglected; the actions or inactions by the parent(s)/caregiver(s) place the child in danger or pose substantial risk

to the child's safety or well-being, or the person was responsible for the child being a victim of sexual exploitation or human trafficking; or

- "Substantiated Concern" – There is reasonable cause to believe that the child was neglected and the actions or inactions by the parent(s)/caregiver(s) create the potential for abuse and/or neglect, but there is not immediate danger to the child's safety or well-being.
- DCF also determines whether Department intervention is needed to safeguard the safety and well-being of the children in the home. If DCF involvement continues, a Family Assessment and Action Plan are developed with the family.

Some families come to the attention of the Department outside the 51A process: Children Requiring Assistance (CRA) cases referred by the Juvenile Court, cases referred by the Probate and Family Court, babies surrendered under the Safe Haven Act, and voluntary requests for services by a parent/family. These cases are generally referred directly for family assessment.

What are the timeframes for completing a Screening and/or Response?

- Screening: Begins immediately for all reports. For an emergency response it is completed within two hours. For a non-emergency response, screening is completed in one business day and may be extended for one additional business day in limited circumstances.
- Emergency Response: Must begin within two hours and be completed within five business days of the report.
- Non-Emergency Response: Must begin within two business days and be completed within 15 business days of the report.
- Family Assessment: May take up to 60 business days.

Will I be informed about the DCF determination?

If you are the mandated reporter who filed the report, you will receive a copy of the decision letter that is sent to the parents or caregiver. In that letter you will be informed of the Department's response, the determination and whether DCF is opening a case for continued DCF involvement.

If you submitted your written report online, you will also be able to see the screening decision online.

Does DCF tell the family who made the 51A report?

DCF regulations do not allow the Department to disclose the name of a reporter unless ordered by a court or required by statute such as when the Department is required to provide the 51A report to the District Attorney or other law enforcement

(CMR 12.00 etseq).

Referrals to the District Attorney

If the Department determines that a child has been sexually abused or sexually exploited, has been a victim of human trafficking, has suffered serious physical abuse and/or injury, or has died as a result of abuse and/or neglect, DCF must notify local law enforcement as well as the District Attorney, who have the authority to file criminal charges.

Where can I obtain more information about child abuse and neglect?

- Child Protection Information: For more information about reporting child abuse and/or neglect: www.mass.gov/dcf for general information or to find a DCF Area Office.
- Child-At-Risk-Hotline: 800-792-5200
- DCF Ombudsman: 617-748-2444 (9 am – 5 pm, weekdays) for inquiries about DCF programs, policies or service delivery.

GUIDE FOR HEAD LICE

Head lice are parasitic insects that live in the hair and scalp of humans. They need human blood to survive. Head lice are spread easily from person to person by direct contact. Head lice can infect anyone, regardless of personal hygiene. Head lice are usually treatable with lice-killing shampoos and cream rinses. To prevent infection: 1) avoid direct contact with the head, hair, clothing, or personal belongings of a person with head lice, and 2) treat affected persons, their contacts, and their households.

What are head lice?

Head lice are parasitic insects that live in the hair and scalp of humans. The scientific name for head louse is *Pediculus humanus capitis*. Another name for infestation with head lice is pediculosis.

Head lice develop in three forms: nits, nymphs, and adults.

Nits: Nits are head lice eggs. They are hard to see and are often mistaken for dandruff or droplets of hairspray. Nits are found firmly attached to the hair shaft. They are oval and usually yellow to white. Nits take about 1 week to hatch.

Nymphs: Nits hatch into nymphs. Nymphs are immature adult head lice. Nymphs mature into adults about 7 days after hatching. To live, nymphs must feed on blood.

Adults: An adult louse is about the size of a sesame seed, has six legs, and is tan to grayish- white. In persons with dark hair, adult lice will look darker. Adult lice can live up to 30 days on a person's head. To live, adult lice need to feed on blood. If a louse falls off a person, it dies within 2 days.

How are head lice spread?

Head lice are spread easily from person to person by direct contact. People can get head lice by:

- Coming into close contact with an already infested person. In children, contact is common during play, while riding the school bus, and during classroom activities in which children sit in groups close to each other.
- Wearing infested clothing, such as hats, scarves, coats, sports uniforms, or hair ribbons
- Using infested combs, brushes, or towels
- Lying on a bed, couch, pillow, carpet, or stuffed animal that has been contaminated
- Lice do not jump or fly. Lice are not spread to humans from pets or other animals.

What are the signs and symptoms of head lice?

- Itching—the body's allergic reaction to the bite

- Irritability

How is head lice infestation diagnosed?

- Head lice infestation is diagnosed by looking closely through the hair and scalp for nits, nymphs, or adult lice.
- Nits are the easiest to see. They are found "glued" to the hair shaft. Unlike dandruff or hairspray, they will not slide along a strand of hair. If you find nits more than 1/4 inch from the scalp, the infection is probably an old one.
- Nymphs and adults can be hard to find; there are usually few of them, and they can move quickly from searching fingers. If lice are seen, finding nits close to the scalp confirms that a person is infested.

If you are not sure if a person has head lice, the diagnosis should be made by the local health department or a health-care provider, school nurse, or agricultural extension service worker.

Who is at risk for head lice?

Anyone can get head lice. Pre-school and elementary-school-aged children and their families are infested most often. Girls get head lice more often than boys, and women more often than men.

What complications can result from head lice?

Scratching can lead to skin sores and skin infections

What is the treatment for head lice infestation?

- Getting rid of head lice requires treating the individual, the family, and the household.
- Treat the individual and the family -- This requires using an over-the-counter or prescription lice-killing medicine. Treat only persons who are infested.
- Remember that all lice-killing products are pesticides. Follow these treatment steps:
 - Remove all clothing.
 - Apply lice-killing medicine, also called pediculicide [peh-DICK-you-luh-side], according to label instructions. If the affected person has extra-long hair, you may need to use a second bottle.
 - **WARNING:** Do not use a cream rinse or combination shampoo/conditioner before using lice-killing medicine. Do not re-wash hair for 1-2 days after treatment.
 - Have the affected person put on clean clothing after treatment.
 - If some live lice are still found but are moving more slowly than before treatment, do not re-treat. Comb dead and remaining live lice out of the

hair. The medicine sometimes takes longer than the time recommended on the package to kill the lice.

- o After treatment, if no dead lice are found and lice seem as active as before, the medicine may not be working. See your health-care provider for a different medicine. Follow treatment instructions.
- o Remove nits and lice from the hair shaft using a nit comb; often found in lice-killing medicine packages. Flea combs used for cats and dogs can also be used.
- o After treatment, check, comb, and remove nits and lice from the hair every 2-3 days.
- o Re-treat in 7-10 days.
- o Check all treated persons for 2-3 weeks until you are sure all lice and nits are gone.

Treat the household:

- o To kill lice and nits, machine-wash all washable clothing and bed linens that the infested person touched during the 2 days before they were diagnosed. Wash clothes and linens in the HOT water cycle (130 F). Dry items on the hot cycle for at least 20 minutes.
- o Dry clean clothing that is not washable (coats, hats, scarves, etc.). OR
- o Seal all non-washable items (clothing, stuffed animals, comforters, etc.) in a plastic bag for 2 weeks.
- o Soak combs and brushes for 1 hour in rubbing alcohol or Lysol, or wash with soap and hot water.
- o Vacuum the floor and furniture. Do not use lice sprays; they can be toxic if inhaled.

Cautions:

- o Women who are pregnant or breastfeeding should not use head-lice medications.
- o Consult a health-care provider before using lice-killing products on a person who has allergies, asthma, or other medical conditions.
- o Do not use extra amounts of lice-killing medicines.
- o Do not use lice-killing medicines on the eyebrows or eyelashes.

How can head lice be prevented?

- Educate parents and schools about head lice. All parents should know that outbreaks of head lice have nothing to do with a family's income, social status, or level of personal hygiene.
- Avoid direct contact with a person who has lice, or with their clothing or personal belongings.
- Watch for signs of lice, such as frequent head scratching. Nits do not cause symptoms, but they can be seen on the hair shaft; they are yellow-white and oval-shaped.

- Teach children not to share combs, brushes, scarves, hair ribbons, helmets, headphones, hats, towels, bedding, clothing, or other personal items.
- Examine household members and close contacts of a person with head lice, and treat if infested.
- Make sure schools, camps, and child-care centers provide separate storage areas (cubbies or lockers) and widely spaced coat hooks for clothing and other personal articles. They should assign sleeping mats and bedding to only one child and store these separately. They should wash dress-up clothes and play costumes between uses by different children. During an outbreak, costumes should not be used in the classroom.
- BASEC follows guidelines made by the American Association of Pediatrics and does not exclude children with head lice from programming.

MENINGOCOCCAL DISEASE

What is Meningococcal disease?

Meningococcal disease is caused by infection with bacteria called *Neisseria meningitidis*. The two most common types of meningococcal infections are meningitis and bloodstream infections.

With meningococcal meningitis, the bacteria infect the lining of the brain and spinal cord and cause swelling.

With a meningococcal bloodstream infection, the bacteria enter the blood and damage the walls of the blood vessels. This causes bleeding in the skin and organs.

The most common symptoms of meningitis include:

- Fever
- Headache
- Stiff neck

There are often additional symptoms, such as

- Altered mental status (confusion)
- Nausea
- Photophobia (eyes being more sensitive to light)
- Vomiting

Symptoms of a bloodstream infection may include:

- Cold hands and feet
- Diarrhea or nausea with or without vomiting
- Fatigue (feeling tired)
- Fever and chills
- Rapid breathing
- Severe aches or pain in the muscles, joints, chest, or abdomen (belly)
- In the later stages, a dark purple rash

How is meningococcal disease spread?

The bacteria are passed from person-to-person through saliva (spit). You must be in close contact with an infected person's saliva in order for the bacteria to spread. Close contact includes activities such as kissing, sharing water sources, sharing eating/drinking utensils or sharing cigarettes with someone who is infected; or being within 3-6 feet of someone who is infected and coughing or sneezing.

Who is most at risk for getting meningococcal disease?

People who travel to certain parts of the world where the disease is very common, microbiologists, people with HIV, and those exposed to meningococcal disease during an outbreak are at risk for meningococcal disease. Children and adults with damaged or removed spleens or persistent complement component deficiency (an inherited immune disorder) are at risk. Adolescents, and people who live in certain settings such as college freshman living in dormitories and military recruits are at greater risk from some of the serotypes.

Are camp attendees at increased risk for meningococcal disease?

Children attending day or residential camps are **not** considered to be at an increased risk for meningococcal disease because of their participation.

Is there a vaccine for meningococcal disease?

There are 2 different meningococcal vaccines. Quadrivalent meningococcal conjugate vaccine protects against 4 serotypes (A, C, W, and Y) of meningococcal disease. Meningococcal serogroup B vaccine protects against serogroup B meningococcal disease, for age 10 and older.

Should my child or adolescent receive meningococcal vaccine?

It depends. Meningococcal conjugate vaccine is routinely recommended at age 11-12 years with a booster at age 16. In addition, these vaccines may be recommended for children with certain high-risk health conditions, such as those described above. Otherwise, meningococcal vaccine is **not** recommended for attendance at camps.

Meningococcal serogroup B vaccine (Bexsero and Trumenba) is recommended for people with certain relatively rare at-risk health conditions (examples: persons with damaged spleen or whose spleen has been removed, those with persistent complement component deficiency (an inherited disorder), and people who may have been exposed during an outbreak.) Adolescents and young adults (16 through 23 years of age) who do not have high risk conditions may be vaccinated with a serogroup B meningococcal vaccine, preferably at 16 through 18 years of age, to provide short term protection for most strains of serogroup B meningococcal disease. Parents of adolescents and children who are at a higher risk of infection, because of certain medical conditions or other circumstances, should discuss vaccination with the child's healthcare provider.

How can I protect my child or adolescent from getting meningococcal disease?

The best protection against meningococcal disease and many other infectious diseases is through frequent hand-washing, respiratory hygiene and cough etiquette. Individuals should:

- wash their hands often, especially after using the toilet and before eating or preparing food (hands should be washed with soap and water or an alcohol-based hand gel or rub may be used if hands are not visibly dirty);
- cover their nose and mouth with a tissue when coughing or sneezing and discard the tissue in a trash can; or if they don't have a tissue, cough or sneeze into their upper sleeve;
- not share food, drinks, or eating utensils with other people, especially if they are ill;
- contact their healthcare provider immediately if they have symptoms of meningococcal disease.

If your child is exposed to someone with meningococcal disease, antibiotics may be recommended to keep your child from getting sick.

Obtain more information about meningococcal disease or vaccination from your healthcare provider, your local Board of Health, or the Massachusetts Department of Public Health Divisions of Epidemiology and Immunizations at (617) 983-6800 or on the MDPH website at www.mass.gov/dph.

RESPIRATORY VIRUSES

COVID-19, Influenza, RSV, and other respiratory illnesses cause significant health impacts. The following preventative measures can help protect the BASEC community:

- Staying up to date with vaccination to protect people against serious illness, hospitalization, and death. This includes flu, COVID-19, and RSV if eligible.
- Practicing good hygiene by covering coughs and sneezes, washing or sanitizing hands often, and cleaning frequently touched surfaces.
- Taking steps for cleaner air, such as bringing in more fresh outside air, purifying indoor air, or gathering outdoors.

Vaccinations

All BASEC students and teachers are strongly encouraged to receive the seasonal influenza vaccine and COVID boosters when available.

Isolation Policy

When people get sick with a respiratory virus, the updated guidance recommends that they stay home and away from others. For people with COVID-19 and influenza, treatment is available and can lessen symptoms and lower the risk of severe illness. The recommendations suggest returning to normal activities when, for at least 24 hours, symptoms are improving overall, and if a fever was present, it has been gone without use of a fever-reducing medication.

Once people resume normal activities, they are encouraged to take additional prevention strategies for the next 5 days to curb disease spread, such as taking more steps for cleaner air, enhancing hygiene practices, wearing a well-fitting, high-grade mask, keeping a distance from others, and/or getting tested for respiratory viruses.