

This translation consists of
9 pg. / 21 sheets
No. 12
Date: April 30, 2020

Certified translation from the Croatian Language

(Certified Translation from Croatian)

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Croatian Institute of Public Health
Zagreb, April 29, 2020.

GUIDELINES FOR THE PREVENTION AND CONTROL OF THE EPIDEMIC COVID-19 FOR
INSTITUTIONS OF PRESCHOOL EDUCATION AND ELEMENTARY SCHOOL INSTITUTIONS
THAT ENSURE THE CARE OF EARLY CHILDHOOD AGED CHILDREN, PRESCHOOL CHILDREN
AS WELL AS STUDENTS ATTENDING GRADES 1 THROUGH 4 (LOWER CLASSES OF
ELEMENTARY SCHOOL)
-proposal

Purpose

The guidelines are intended for institutions of early childhood and preschool education (hereinafter “kindergarten”) as well as elementary school institutions (hereinafter “school”) that ensure the care of early childhood aged children, preschool children as well as students attending grades 1 through 4. Spending time in kindergartens and schools potentially may present a higher risk of COVID-19 infection for children than staying in the family home/household, especially if the members of the household are involved in such a type of daily obligations that allow them to consistently avoid situations of high risk of COVID-19 infection

Basic principles

Children with chronic illnesses or in contact with persons with chronic illnesses. Remaining at home is recommended for children and staff with chronic illnesses and/or underlying medical conditions (respiratory, cardiovascular, diabetes, malignant illnesses, immunodeficiencies, children with higher physical/motor disabilities) as well as children whose parents/guardians or members of the household have any such underlying medical condition. If members of the household of staff have any of the aforementioned underlying medical conditions or are elderly (65 years of age or older), staff must during their time at home maintain measures of physical distance in relation to other members of the household as well as increased hygiene measures, in order to protect household members.

Remaining at home when that is possible. We encourage remaining at home for all children whenever possible, taking into account that the number of children in kindergartens and school may be such that it may not be possible to respect measures of physical distance in such collectives. Since online education will continue, we encourage the education of children in grades 1-4 from home, in all situations where it is possible.

Physical distancing of 2 m. It is imperative to organize the work in institutions in such a way as to ensure as strictly as possible social distancing (physical distance) as well as heightened personal hygiene and hygiene of the space. Physical distance of at least 2 meters in closed spaces is to be maintained especially by staff members in relation to other staff members, and the aforementioned physical distance is recommended

between staff members and children, with the exception of offering care for a child in as short a time span as possible.

In the same communal space (for example staff room) staff members maintain a physical distance of 2 meters, and meetings, collaboration, and professional development of staff members is conducted via e-communication or telephone. The entrance of parents into the institution should be avoided whenever possible. The same space at the same time may be occupied exclusively by the children and teacher from the same educational group. It is essential to encourage physical distance as well as heightened hygiene measures for children, however, it is must be expected that in the implementation of such measures there will inevitably be certain deviations due to developmental traits of certain age groups characterized by:

- exploration of space and objects that surround the child (at a certain age placing hands and objects into the mouth),
- curiosity in relation to other persons/other children,
- not understanding instructions,
- not adhering to instructions, motor skill clumsiness and immaturity,
- motor skill restlessness and a need for movement.

The organization of work with children. Time spent in kindergartens and schools must be organized in the following way:

- academic groups with fewer number of always the same children (if possible up to 9 children in a group and one teacher which gives a total of 10 persons – after forming groups of children, 14 days from the beginning of implementation of these guidelines, including non-work days, no new children are accepted into the group),
- one group of children is under the care of one teacher, or two (in case of extended stay in school or afternoon shift in kindergarten) with no “overlap”,
- physical contact (close contact) is to be avoided with children from one academic group and other children, parents/guardians of other children and other staff members,
- each academic group resides in one appropriate room,
- the teacher spends as much time as possible with children outdoors,
- beds for daily naps, tables for eating and desks are arranged so that children lie and/or sit at a distance of 2 meters from each other and each child is always in the same spot.

Organization of space. Recommended principles for the room where one academic group resides (classroom or other appropriate space, for example sports hall):

- a room with as large an area and height as possible, aired and sunlit (appropriate source of daily light),
- a room that has a door that separates it from other rooms where other groups reside,
- a room that can be well aired out by fresh air,
- in close vicinity to the room there is a restroom that is used exclusively by that academic group,
- meals must be organized in the room for the children (meals can be delivered to the room and eaten in the room), so that one person brings the food to the room and leaves on a cart in front of the room and the teacher brings the food into the room where the children reside, the food must be divided into portions beforehand.
- The room has a direct exit onto a larger terrace, balcony or if possible, yard,
- avoidance of all entry of other persons (for example for cleaning, maintenance, or food delivery) into the room so long as the children are in the room,
- passing through communal spaces should be avoided and limited to minimum time, and if it is necessary, passing through communal spaces is to be organized in such a manner that children and teacher form one academic group do not pass at the same time as other persons, encouraging the children during such passing not to touch surfaces or objects.

Entry into and exit form kindergartens and schools

Limited entry into school institutions. Until further notice all visits to kindergartens and schools are prohibited (for example theatre troupes, extracurricular activities etc.)

It is essential to ensure circulation/arrival of as few persons as possible, both at the entry of kindergartens and schools as well as internal spaces of the institution.

Drop off and pick-up of children. Parents/guardians drop off and pick up children at the institution in such a way, if at all possible, by not entering the institution except for emergency situations, but rather they arrive to the entrance where they maintain a distance of at least 2 meters in relations to other parents/guardians and children. The child is handed over to the teacher or parent (drop off / pick up) at the entrance of the institution, appropriate to the age of the child. During the hand over, the other children are in the care of another adult person that is employed by the institution.

Children must not be left unsupervised.

School equipment. The student arrives to school and leaves school with his/her schoolbag, if keeping the bag at school is not made possible, the equipment and supplies are not shared with other students. If it is possible, the parent brings and takes home a labeled bag to kindergarten with supplies exclusively on Friday (the last day of the week) when he/she picks up his/her child. The teacher takes the bag and returns the bag at the front entrance. The teacher stores the bag at the kindergarten and the bag remains unused over the weekend and is only used again after a time of 48-72 hours.

Escorting children to the educational institution and from it. The child is brought to and taken from the institution in such a way that he/she is escorted always by an adult person/parent/guardian. When possible, the child is always escorted by the same person or two adult persons take shifts.

Vulnerable escorts. Whenever possible, the adult person escorting the child will live in the same household as the child and a person who in relation to other persons could bring the child and pick up the child, and is involved in such daily activities that have the lowest possibility of COVID-19 infection.

Whenever possible the child should be escorted by an adult person that does not fall into the at risk of COVID-19 infection group, namely, the elderly (65 years of age or older), nor should it be a person with underlying medical conditions.

Entrance into kindergartens and schools by age groups. Whenever possible, children from each academic group are dropped off and picked up by parents/guardians at a separate previously arranged time that is different for each academic group, with a time different of at least 10 minutes between two academic groups. Children and parents are met at the front entrance by the teacher up to grade 1. Children in grades 2-4 enter the school on their own. Parents do not gather in front of the entrance.

Parents who are ill. Parents/guardians may not drop off or pick up children from the institution nor enter the outdoor spaces (yard, garden, playground) and indoor spaces of the institution if they have a fever, respiratory symptoms such as cough or shortness of breath or are at risk of possibly having been in contact with persons positive to COVID-19 or suspected of possibly being infected with COVID-19 and especially if they are in self-isolation because in that case they are prohibited from leaving their homes.

Children who are ill. Children who have a fever, respiratory symptoms such as cough or shortness of breath or are at risk of possibly having been in contact with persons positive to COVID-19 (for example in their households or in the institution) or suspected of possibly being infected with COVID-19 stay at home

and their parents/guardians may not bring them to the institution. The facts from the previous two sentences, as well as the fact that the child in question has two working parents who have no other possibility for the care of their child, as well as the fact that the parent has been informed of these guidelines in their entirety, is confirmed by the parent in writing to the principal before inclusion of the child in the institution.

Behavior of children upon entry into the kindergarten or school. The child enters and goes to their cubby/locker, puts on slippers, takes off his/her jacket, washes his/her hands with soap and water before entering the group/classroom.

Organization of work in the institutions

Work in shifts. If it is possible to organize work in shifts in such a way that employees work in 7-day or 14-day shifts, applicable to administrative and technical staff, as well as teachers when two care for the same group (in schools the aforementioned can be considered for example when there is organized extended stay). Outside of the institution staff adhere as much as possible to rules that decrease risk of infection (avoiding stores, other places where people gather, public transport, consistent maintenance of social distance and hygiene etc.). The exception is for example in institutions with more children with severe developmental disabilities where it is possible to organize during a shift that employees reside in an organized isolated accommodation, so called, work isolation within the institution or some other form of accommodation.

Limited number of employees. Employees who are not scheduled to be at work are prohibited from entering the institution.

The institution should have as few employees as possible at any given time, but enough to make it possible to organize the care for children in small groups (a total of 10 children and adults per groups, and if possible as few children as possible).

Entry and delivery in the kindergarten or school. The entry door is opened via telephone or a bell during working hours or on-call times. On weekends/holidays/afternoons of workdays the door is opened by the employee on call.

Deliveries for the purposes of the institution are handled by appropriate employees of the institution at the front entrance, and entry is allowed for only service personnel and other services whose for whose services there is an immediate need (which includes consistent implementation of epidemiological measures such as monitoring water for human consumption, health inspection of food etc.) with mandatory measures of disinfecting hands and wearing protective masks and replacement shoes if necessary.

Cleaning staff and cleaning. The morning shift cleaning staff enter first. The last person to leave the kindergarten is the cleaning staff from the afternoon shift that disinfects all used surfaces. It is recommended to take all work clothes to be washed at the washing service of the institution. Bedding and textiles are washed at a temperature of 60-90° C twice a week.

Disinfectants. At the entrance of the kindergarten and school and in schools in several other easily accessible areas, it is imperative to place disinfectant dispensers for the sanitation of hands of school children and adults with instructions for use (children of preschool age do not disinfect hands rather they engage in hand washing with water and soap more frequently).

Hand hygiene. Disinfectant liquid is used in amounts of 1 to 2 ml on clean dry palms (usually one pump, or according to manufacturer instructions). Palms and the space between fingers must be rubbed together until dry, it is not necessary to rinse. It is necessary to monitor appropriate use of hand disinfectant and to inform the supervisor in case the dispenser has a small amount of disinfectant left so that more can be ensured.

Airing out spaces. It is mandatory to air out rooms at least twice a day for a minimum of half an hour before children arrive and after they leave, or weather permitting to leave windows open.

Cleaning of space. Points of contact such as door handles, window handles, work spaces, keyboards, consoles, faucets in restrooms and kitchens, buttons on toilets, remote controls, light/electrical switches, doorbells, elevator buttons and other points of contact that used by a larger number of people must be disinfected at the beginning and end of each shift at least twice a day. Avoid using air-conditioning and ventilation devices. Cleaning is implemented at times when children are outdoors or after they have left the institution.

Disinfection of cellphones. It is mandatory for all employees to disinfect their own cellphones immediately upon arrival to the institution.

Special work shoes. At the entrance to the room where children reside there must be ensured a space for putting on work shoes for all employees. All others who enter the space of the institution must be given replacement shoes or disinfection of the soles of shoes.

Face masks. Teachers may use face masks optionally (they are not mandatory) whilst caring for infants and small children who require additional care that requires close contact and where various infectious diseases with higher temperature are frequent in order to decrease the frequency of such diseases and consequent panic of suspicion of COVID-19.

Gloves. Wearing gloves is not recommended, precedence is given to frequent hand washing and hand disinfection (instructions for correct use of masks can be found on the HZJZ and SZO websites).

Measuring temperature and monitoring the emergence of symptoms among employees

Daily temperature checks. All employees have an obligation to measure their body temperature every day before arriving to work, and in case of increased body temperature not to come to work, but to inform the principal by telephone and his/her family doctor as explained subsequently. It is recommended to perform temperature checks with a non-contact (temporal) thermometer on all employees every day upon arrival to work and before leaving from work, and to determine whether they have respiratory symptoms or signs of other infectious diseases. Persons with higher temperatures measured with a non-contact thermometer (37.2C or higher, depending on the specifications of the non-contact thermometer) are recommended to perform an axillary temperature check with a standard thermometer under the armpit and a fever is concluded based on the results from the axillary method.

Records book. A record of body temperature values and possibility of respiratory symptoms and signs of other infectious diseases is kept in a separate records book.

Behavior of persons with fever and symptoms. Persons with fever, respiratory symptoms and other symptoms of infectious diseases are not allowed to work with, take care of, or enter the institution, which are measures that are necessary always in work in these institutions.

Substitutes and testing of employees with fever. Employees with fever and/or respiratory symptoms immediately leave the work space (previously informing the principal of this fact) or inform the principal by telephone that they will not be arriving to work, and then informing by telephone their family doctor who guides them to testing. The principal must have an organized substitute in advance for such situations. Testing for SARS-CoV-2 is necessary for all employees with fever or respiratory symptoms.

Suspicion of COVID-19

Behavior in cases of suspicion of infection. In case there is suspicion of employee contact with an infected person or a patient of COVID-19 or other reason for suspicion that the employee may be infected with COVID-19, fever and/or respiratory symptoms (cough and liquid breathing-shortness of breath), the employee must immediately:

- inform the principal by telephone,
- inform family doctor by telephone to make arrangements for testing for SARS-CoV-2 and to determine need for sick leave, and
- distance from the workplace and not come to work – teachers must be replaced by a substitute, who if possible, in the same period is not caring for another group of children.

Informing doctor by telephone urgently. Any suspicion of COVID-19 infection among employees or children (of which the parent/guardian has an obligation to urgently inform the principal by phone) the principal of the institution in agreement with the health director of the kindergarten must inform by telephone the appropriate epidemiologist for kindergartens, and must inform the appropriate school doctor for schools. Especially urgently and unavoidably the principal informs the appropriate epidemiologist/school doctor in cases of suspicion of groupings or infection of COVID-19 (two or more employees and/or children suspected from the same group/classroom/building etc.). In cases of information about a possible carrier/source of infection every employee is obligated to immediately inform the principal.

Children

Without masks. Children do not wear protective masks.

Sick children. Parents/guardians have an obligation to perform temperature checks on their children every day before arrival to the institution, in cases of fever they may not bring the child to the institution but must inform the principal of the institution by telephone and the pediatrician or family doctor for the purpose of decisions on testing and treatment of the child. If children develop symptoms of COVID infection whilst in the institution, the teacher immediately informs the parents, who in the shortest time possible must come pick up the child.

Other infectious diseases. Children with signs of other infectious diseases may not come to the institution. Children should be encouraged to maintain distance (physical distance) from other children and adults, appropriate to developmental age.

Touching the face. Children should be encouraged not to touch their mouth nose, eyes and face and not to place hands and objects into their mouth, appropriate to developmental age.

Hand hygiene. Children should be encouraged to regularly and properly wash their hands before entering their group/classroom, before and after preparing food, before eating, after using the restroom, after coming being outdoors, after wiping/blowing their nose, whenever their hands look dirty. Running water and soap should be used for hand washing. When washing hands use the guidelines for proper hand washing found at: https://www.hzjz.hr/wpcontent/uploads/2020/03/Pranje_riku_.pdf

After washing hands with soap and water, for drying hands it is essential to use disposable paper towels which must be disposed of in a trashcan with a lid. When they cough and sneeze children should be encouraged to cover their mouth and nose with their elbow or a paper tissue which must be disposed of in a trashcan with a lid and then wash their hands.

Sneezing and coughing. When coughing and sneezing they should turn their face away from other persons and avoid touching their face, mouth and eyes with their hands.

Food equipment. No sharing of glasses, cups, dishes and utensils with other people.

Manipulatives and toys. When planning for educational manipulatives precedence should be given to equipment that is made of smooth, hard surfaces that are easily washed with detergent and water. It is prohibited to use materials such as kinetic sand, clay, corn, rice etc. and all toys that cannot be washed with detergent (dishwashing detergent) and water and air dried. If at all possible, it is necessary to expose all manipulatives and toys to be air dried in the sun. Washing and drying of toys is necessary, if possible, at the end of each day, especially for groups of children who are at a developmental age where they are more likely to place objects in their mouths.

Children's clothes, shoes and school equipment. It is preferable for each child/student to handle his/her own clothes and shoes, school equipment, bag, books, but if that is not possible, the teacher after touching the clothes, shoes, equipment, bag, books must immediately disinfect his/her hands.

Classes outdoors. When the weather is nice it is recommended to teach classes outdoors, whenever it is possible.

Physical activity. During physical activity it is essential to avoid activities that intensely speed up and deepen breathing such as running and other forms of movement among children. If such activities cannot be avoided, it is essential to increase the distance between children so that the distance is as large as possible but certainly more than 2 meters. It is not recommended to teach physical education classes indoors.

Students who have ensured support of Teaching Assistants or Professional Communication Intermediaries (TA)

Students with disabilities. In accordance with the Regulation on Primary and Secondary Education of Students with Developmental Difficulties (Official Gazette, No. 24/2015) the groups of types of difficulties are:

1. Visual impairments
2. Hearing impairments
3. Impairments of language-to-speech voice communication and specific learning disabilities
4. Damage to organs and organ systems
5. Intellectual disabilities
6. Behavioral disorders and mental health impairments
7. Existence of multiple types and degrees of difficulty in psychophysical development

Risk of infection. Observing the aforementioned groups of types of disabilities, children who have been ensured the right to a personal aide in education or an expert communication aide should not necessarily be at higher risk of COVID-19 infection in the sense of increased sensibility of their bodies to the new coronavirus, with the exception of children with underlying medical conditions mentioned in the first paragraph Basic Principles (certain damage from group 4). However, it still must be taken into consideration that these disabilities (for example the disabilities from groups 1, 2, 5 or 6) could undermine the consistency of the children's ability to maintain social distance and hygiene, which could place them at higher risk of infection. For this reason, for the children who have been ensured TA support, school inclusion could be considered with the support of a TA, only if the parent/guardian has no possibility of organizing for the child

to stay at home, with the exception of children who have underlying medical conditions such as those mentioned in paragraph one of the Basic Principles (certain damage from group 4).

Previous consultation with school doctor. Before school inclusion and whenever it is necessary during the student's time at school (for example if there is a change with the student's health), it is imperative that the parent/guardian, employee of the school and/or TA consult (first by telephone) with the appropriate school doctor about specific questions with regards to the health and education of the student under these circumstances. Furthermore, special care and attention is necessary in the inclusion of preschool children with disabilities and severe health issues in kindergartens, therefore consultation with the pediatrician or family doctor is recommended.

Limited number of students, physical distance and personal hygiene. Teaching Assistants or Professional Communication Intermediaries (TA) make up the total number of persons in an academic group that should not exceed the recommended number aforementioned in these guidelines (up to 10 children and adults). In relation to other students and adults in the school, the TA upholds all the rules of physical distance of 2 meters and maintains consistent heightened measures of personal hygiene and offers support in encouraging heightened measures of hygiene and social distance among students as well as support in maintaining the hygiene of the space.

Physical distance of TA. In relation to the child that has been ensured the right to support by TA, the TA will not be able to always maintain a distance of 2 meters because by maintaining such a distance he/she would not be able to complete all the work in accordance with the Regulations on Teaching Assistants and Professional Communication Intermediaries (Official Gazette No. 102/2018, 22/2020). When he/she offers support to the student and is close to the students, it is recommended that the TA always wear a surgical mask, and when offering support to the student with activities such as use of the restroom, if possible, to use disposable gloves. Outside of the institution and in relation to the parents/guardians of the child the TA adheres as much as possible to guidelines which decrease his/her possibility of infection (avoiding stores, other places where people gather, public transport, consistent maintenance of social distance and hygiene etc.). While offering support to the student, the TA especially strongly encourages the student to maintain distance and to adhere to hygiene for prevention of COVID-19 infection, in accordance with guidelines and other official recommendations.

Final recommendations

In situations where it is not possible to organize work due to a larger number of employees being in self-isolation, the Civil Protection Headquarters (state and local) in coordination with founders may redistribute employees to other educational institutions, in order to ensure continuity of care for children. Continued necessary cooperation is ensured with the founder. For obligations within these guidelines where the position of principal has been cited, the principal may appoint a health manager – a medical nurse or other professional associate (expressions used in the text, that have gender semantics, regardless of whether they are used in the feminine or masculine form, encompass equally both female and male gender).

The principal must delegate each task to a responsible person who keeps daily written record of such whenever that is possible. These guidelines will be adapted to the current epidemiological situation, and there will certainly be consideration for adaptation of the guidelines after the first 14 days of implementation (including weekends and holidays). These recommendations do not exclude the implementation of other recommendations in accordance with the current epidemiological situation.

Guidelines for cleaning and disinfection: Those without cases of COVID-19: <https://www.hzjz.hr/wp-content/uploads/2020/03/Ciscenje-idezinfekcija-prostorije-bez-obiljelih-od-COVID-19-2.4.2020..pdf>
[Persons suspected of COVID-19](https://www.hzjz.hr/wp-content/uploads/2020/03/Ciscenje-i-dezinfekcija-prostora-u-kojima-je-boravila-osoba-podsumnjom-COVID-19-2.4.2020..pdf) infection and those infected with COVID-19:
<https://www.hzjz.hr/wp-content/uploads/2020/03/Ciscenje-i-dezinfekcija-prostora-u-kojima-je-boravila-osoba-podsumnjom-COVID-19-2.4.2020..pdf>

-End of Translation-

I, Kristina Ana Šprljan court interpreter for English, as appointed by the President of the County Court – Commercial Court in Velika Gorica Decree No. 4 Su-7/2020-4 from January 24, 2020 do hereby certify that the above translation is a faithful and complete translation of the original document written in the Croatian language.

In Zagreb April 30, 2020
No.: 12



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Hrvatski zavod za javno zdravstvo
Zagreb, 29. 04. 2020.

UPUTE ZA SPRJEČAVANJE I SUZBIJANJE EPIDEMIJE COVID-19 ZA USTANOVE RANOG I PREDŠKOLSKOG ODGOJA I OBRAZOVANJA TE OSNOVNOŠKOLSKE USTANOVE U KOJIMA JE OSIGURANA MOGUĆNOST ZBRINJAVANJA DJECE RANE I PREDŠKOLSKE DOBI TE UČENIKA KOJI POHAĐAJU RAZREDNU NASTAVU

Namjena

Upute se odnose na ustanove ranog i predškolskog odgoja i obrazovanja (dalje u tekstu dječji „vrtić“) te osnovnoškolske ustanove (dalje u tekstu „škola“) u kojima je osigurana mogućnost zbrinjavanja djece rane i predškolske dobi te učenika koji pohađaju razrednu nastavu. Boravak u vrtićima i školama potencijalno može predstavljati veći rizik za zarazu djece s COVID-19 nego je to obiteljski dom odnosno kućanstvo, posebno ako su ukućani uključeni u takav tip dnevnih obaveza da mogu dosljedno izbjegavati situacije povećanog rizika za zarazu COVID-19.

Temeljne odrednice

Djeca s kroničnim bolestima ili u doticaju s kroničnim bolesnicima. Preporučuje se ostanak kod kuće djece i osoblja/djelatnika s kroničnim bolestima (respiratornim, kardiovaskularnim, dijabetesom, malignim bolestima, imunodefijencijama, djece s većim tjelesnim/motoričkim oštećenjima) kao i djece čiji roditelji/skrbnici ili ukućani imaju jednu od navedenih bolesti. Ako ukućani osoblja/djelatnika imaju jednu od navedenih bolesti ili su starije životne dobi (65 i više godina), osoblje/djelatnici se tijekom boravka kod kuće pridržavaju mjera fizičkog razmaka u donosu na ukućane kao i pojačane higijene, radi zaštite ukućana.

Ostanak kod kuće kada je to moguće. Također potičemo ostanak kod kuće sve djece za koju se to može osigurati, s obzirom da broj djece u vrtićima i školama može biti takav da se mjere fizičkog razmaka u tim kolektivima neće moći poštovati. Budući da će se nastava na daljinu i dalje održavati, potičemo nastavak obrazovanja djece razredne nastave od kuće, u svim situacijama kad je to moguće.

Fizičko udaljavanje od 2 m. Rad ustanove neophodno je organizirati na način da se osigura u što većoj mjeri socijalno distanciranje (fizički razmak) kao i pojačana osobna higijena i higijena prostora. Fizički razmak od najmanje 2 metra u zatvorenom prostoru posebno provode djelatnici u odnosu na druge djelatnike, te se navedeni fizički razmak preporuča održavati kada je god moguće između djelatnika i djece, s iznimkom njege djeteta koja se provodi u što kraćem vremenu.



U istom zajedničkom prostoru (primjerice zbornica) djelatnici održavaju fizički razmak od 2 metra, te se sastanci, dogovori i edukacije djelatnika odvijaju e-komunikacijom ili telefonom, a ulazak roditelja u ustanovu treba izbjeći kad je god moguće. U istom prostoru u isto vrijeme smiju boraviti isključivo djeca i odgajatelj/nastavnik iz iste odgojno-obrazovne grupe.

Fizički razmak kao i pojačanu osobnu higijenu djece neophodno je poticati ali treba očekivati da će kod provedbe neminovno dolaziti do određenih odstupanja uslijed razvojnih značajki pojedinih dobi koje karakterizira:

- istraživanje prostora i predmeta koji okružuju dijete (u određenoj dobi stavljanje u usta ruku i predmeta),
- znatiželja u odnosu na druge osobe/dругu djecu,
- nerazumijevanje uputa,
- nepoštovanje uputa, motorička nespretnost i nedoraslost,
- motorički nemir i potreba za kretanjem.

Organizacija rada s djecom. Boravak u vrtićima i školama neophodno je organizirati na sljedeći način:

- odgojno-obrazovne skupine djece s manjim brojem uvijek iste djece (po mogućnosti do 9 djece u grupi i jedan odgajatelj/nastavnik što ukupno daje po mogućnosti 10 osoba – nakon formiranja skupine djece, 14 dana od početka primjene ovih uputa uključujući neradne dane, ne primaju se nova djeca u skupinu),
- za jednu grupu djece brine jedan odgajatelj/nastavnik odnosno dva (u slučaju produženog boravka u školi odnosno u popodnevnoj smjeni u dječjem vrtiću) bez „preklapanja“,
- izbjegava se fizički kontakt (bliski kontakt) djece iz jedne odgojno-obrazovne skupine s drugom djecom, roditeljima/starateljima druge djece i drugim djelatnicima ustanove,
- svaka odgojno-obrazovna skupina boravi u jednoj odgovarajućoj prostoriji,
- odgajatelj/nastavnik s djecom provodi što je više moguće vremena na otvorenom,
- krevetići za dnevni odmor djece, stolovi za jelo i školske klupe razmiču se tako da djeca leže odnosno sjede na udaljenosti od 2 metra i to svako dijete uvijek na istom mjestu.

Organizacija prostora. Preporučene značajke prostorije u kojoj boravi jedna odgojno-obrazovna grupa djece (učionica ili drugi odgovarajući prostor, primjerice sportska dvorana):

- prostorija što veće površine i visine, prozračna i osunčana (odgovarajući izvor dnevnog svjetla),
- prostorija je vratima odvojena od prostorija u kojima borave druge skupine,
- prostorija se može dobro provjetriti vanjskim zrakom,
- u neposrednoj blizini prostorije je toalet koji koristi isključivo ta odgojno-obrazovna grupa,
- u prostoriji je potrebno organizirati prehranu djece (obroci se mogu dostaviti u prostoriju te konzumirati u prostoriji), na način da osoba koja donosi hranu ostavi hranu na kolicima



ili sl. ispred ulaza u učionicu/skupine te odgajatelj/učitelj unosi hranu u prostoriju u kojoj borave djeca, hrana mora biti unaprijed podijeljena u porcije.

- prostorija ima direktan izlaz na veću terasu, balkon ili, ako je moguće, dvorište,
- izbjegava se svaki ulazak drugih osoba (primjerice zbog čišćenja, popravka ili donošenja hrane) u prostoriju tako dugo dok su djeca u prostoriji,
- prolazak kroz zajedničke prostorije treba izbjegavati i skratiti na minimum, a ako je navedeno neophodno, prolaz kroz zajedničke prostorije se organizira na način da u isto vrijeme prolaze djeca i odgajatelj/nastavnik iz jedne odgojno-obrazovne skupine dok druge osobe ne prolaze u isto vrijeme, uz poticanje djece da kod takvih prolaza ne dotiču površine ili predmete.

Ulazak i izlazak iz vrtića i škola

Ograničen ulazak u školske ustanove. Do daljnjeg su zabranjeni svi posjeti vrtićima i školama (primjerice kazališne predstave, izvannastavne aktivnosti i sl.).

Neophodno je osigurati protok/dolazak što manjeg broj osoba, kako na ulazu u vrtić ili školu tako i u unutarnjim prostorima ustanove.

Primopredaja djece. Roditelji/skrbnici dovode i odvođe djecu u predmetne ustanove na način da, ako je ikako moguće, ne ulaze u ustanovu osim u krajnjoj nuždi, već dolaze do ulaza pri čemu zadržavaju distancu od najmanje 2 metra u odnosu na druge roditelje/skrbnike i djecu.

Dijete odgajatelj preuzima ili prepušta roditelju/skrbniku ispred ulaza u ustanovu, primjereno dobi djeteta. Za vrijeme primopredaje, drugu djecu čuvaju druge odrasle osobe koje su na radnom mjestu.

Djeca se ne ostavljaju bez nadzora.

Školska oprema. Učenik dolazi i odlazi iz škole sa školskom torbom, ako nije omogućeno zadržavanje torbe u školi, te svoju opremu i pribor ne dijeli s drugim učenicama.

Ako je moguće organizirati, roditelj donosi i odnosi u dječji vrtić obilježeni ruksak s opremom isključivo petkom (posljednji radni dan u tjednu) kada dolazi po dijete. Odgajatelj preuzima i vraća ruksak roditelju ispred ulaznih vrata. Odgajatelj odlaže ruksak u vrtiću, te ruksak stoji nekorišten preko vikenda i počinje se koristiti tek nakon pauze od 48-72 sati.

Pratnja djece do školske ustanove ili iz nje. Dijete roditelj/skrbnik dovodi i odvođi iz ustanove na način da je u pratnji jednog djeteta uvijek jedna odrasla osoba/roditelj/skrbnik.

Kada je god moguće, u pratnji pojedinog djeteta uvijek je ista osoba ili se izmjenjuju dvije odrasle osobe.

Rizični pratitelji. Kada god je moguće, u pratnji djeteta treba biti odrasla osoba koja živi u istom kućanstvu s djetetom te upravo ona osoba koja je, u odnosu na druge osobe koje bi mogle dovoditi i odvoditi dijete, uključena u takav tip dnevnih aktivnosti da je njena mogućnost zaraze s COVID-19 najmanja.



Kada god je moguće, u pratnji djeteta treba biti odrasla osoba koja ne spada u rizičnu skupinu na obolijevanje od COVID-19, to jest nije starije životne dobi (65 i više godina) niti je kronični bolesnik.

Ulazak u vrtiće i škole po dobnim skupinama. Kada god je moguće, djecu iz svake odgojno-obrazovne skupine dovode i odvođe roditelji/skrbnici u zasebno prethodno dogovoreno vrijeme različito za svaku odgojno-obrazovnu skupine, s razmakom od najmanje 10 minuta između dvije odgojno-obrazovne skupine. Djecu i roditelje pred ulaznim vratima dočekuje odgajateljica odnosno učiteljica u prvom razredu osnovne škole. Nakon prvog razreda osnovne škole, djeca sama ulaze u zgradu škole. Roditelji se ne okupljaju na ulazu.

Bolesni roditelji. Roditelji/skrbnici ne smiju dovođiti niti odvođe djecu iz ustanova niti ulaziti u vanjske prostore (dvorište, vrt, igralište) i unutarnje prostore ustanove ako imaju povišenu tjelesnu temperaturu, respiratorne simptome poput kašlja i kratkog daha ili koji su pod rizikom da su mogli biti u kontaktu s osobama pozitivnim na COVID-19 ili su pod sumnjom da bi mogli biti zaraženi s COVID-19 a pogotovo ako su u samoizolaciji jer tada ne smiju izlaziti iz kuće.

Bolesna djeca. Djeca koja imaju povišenu tjelesnu temperaturu, respiratorne simptome poput kašlja i kratkog daha ili koji su pod rizikom da su mogli biti u kontaktu s osobama pozitivnim na COVID-19 (primjerice u kućanstvu ili u ustanovi) ili su pod sumnjom da bi mogli biti zaražena s COVID-19 ostaju kod kuće te ih roditelji/skrbnici ne smiju dovođiti u ustanove. Činjenice iz prethodne dvije rečenice, kao i činjenicu da se radi o djetetu s oba zaposlena roditelja te ne postoji druga mogućnost zbrinjavanja djece, kao i to da je roditelj upoznat s ovim uputama u cjelini, roditelj potvrđuje pisanom izjavom ravnatelju ustanove prije uključivanja djeteta u ustanovu.

Postupanje djece po ulasku u vrtić ili školu. Dijete ulazi tako da odlazi do garderobe, obuva papuče, skida jaknu, te pere ruke sapunom i vodom prije ulaska u skupinu/učionicu.

Organizacija rada ustanova

Rad u turnusima. Ako je moguće organizirati rad u turnusima na način da zaposlenici rade u sedmodnevnim ili četrnaestodnevnim smjenama i to za administrativno i tehničko osoblje, kao i za odgajatelje i nastavnike kada po dvoje skrbe za istu skupinu djece (u školi se navedeno može razmotriti primjerice kada je organiziran produženi boravak). Izvan ustanove djelatnici se pridržavaju što je više moguće pravila kojima se smanjuje njihova mogućnost zaraze (izbjegavanje trgovina, drugih mjesta gdje se okupljaju osobe, javnog prijevoza, dosljedno provođenje socijalne distance i higijene i sl.).

Iznimno primjerice u ustanovama s više djece s većim teškoćama u razvoju može se pokušati organizirati da tijekom smjene zaposlenici borave u organiziranom izoliranom smještaju tzv. radnoj izolaciji u krugu ustanove ili u nekom drugom obliku smještaja.

Ograničen broj djelatnika. U ustanovi nije dozvoljen ulazak zaposlenicima koji nisu raspoređeni na posao.

U ustanovi treba biti najmanji mogući broj djelatnika u isto vrijeme, ali opet dovoljan broj da je moguće organizirati skrb za djecu u malim skupinama (do ukupno po mogućnosti 10 djece i odraslih po skupini, a po mogućnosti što manji broj djece).



Ulazak i dostava u vrtić ili školu. Ulazna vrata otvaraju se na poziv telefonom ili zvonom tijekom radnog vremena i dežurstva. Vikendom/blagdanom/radnim danom poslijepodne vrata otvara dežurni djelatnik.

Dostavu za potrebe ustanove preuzimaju nadležni radnici ustanove na vanjskim vratima, a ulaz je dozvoljen iznimno serviserima i ostalim službama za čijim uslugama postoji neodgodiva potreba (što uključuje dosljednu provedbu protuepidemijskih mjera poput monitoring vode za ljudsku potrošnju, zdravstvena ispravnost hrane i sl.) uz obveznu mjeru dezinfekcije ruku i po potrebi nošenja zaštitne maske i zamjenske obuće.

Spremačice i čišćenje. Spremačica iz jutarnje smjene prva ulazi. Zadnja osoba koja izlazi iz vrtića je spremačica iz poslijepodnevne smjene koja dezinficira sve korištene površine. Preporuka je odnijeti svu radnu odjeću na pranje u praonicu ustanove. Posteljina i tekstil se pere na temperaturi 60-90° C dva puta na tjedan.

Dezinficijensi. Na ulazu u vrtić i školu te u školi na još nekoliko lako dostupnih mjesta, neophodno je postaviti dozatore s dezinficijensom za dezinfekciju ruku djece školske dobi i odraslih s uputom za korištenje (djeca predškolske dobi ne dezinficiraju ruke već se pojačano provodi pranje ruku sapunom i vodom).

Higijena ruku. Sredstvo za dezinfekciju potrebno je u količini od 1 do 2 ml nanijeti na suhe i čiste dlanove (obično jedan potisak, ili prema prema uputama proizvođača).

Dlanove i područje između prstiju potrebno je protrljati dok se ne osuše, a sredstvo nije potrebno isprati.

Potrebno je voditi brigu o dostatnoj upotrebi dezinficijensa za ruke te se obavezno javiti nadređenom u slučaju da je u dozatoru preostala manja količina sredstva za dezinfekciju kako bi se osigurao novi.

Prozračivanje prostora. Prostorije je obvezno prozračivati najmanje dva puta dnevno u trajanju od minimalno pola sata prije dolaska i nakon odlaska djece, ili ako to vremenske prilike dopuštaju ostaviti otvoren prozor.

Čišćenje prostora. Dodirne točke kao što su ručke na vratima, ručke na prozorima, radne površine, tipkovnice, konzole, slavine u toaletima i kuhinjama, tipke vodokotlića, daljinske upravljače, prekidače za struju, zvona na vratima, ploče dizala te druge dodirne površine koje koristi veći broj osoba neophodno je dezinficirati na početku i na kraju svake smjene a najmanje 2 puta dnevno. Izbjegavajte koristiti klimatizacijske i ventilacijske uređaje.

Čišćenje se provodi u vrijeme kada su djeca na dvorištu ili nakon odlaska djece.

Dezinfekcija mobitela. Svi zaposleni obavezno moraju odmah po ulasku dezinficirati vlastite mobitele.

Posebna Radna obuća. Na samom ulazu u prostor smještaja treba osigurati zaseban prostor za oblačenje radne obuće svim zaposlenicima. Svima ostalima koji ulaze u prostor ustanove treba osigurati korištenje zamjenske obuće ili dezinfekciju potplata.



Maske za lice. Zaštitne maske odgajatelji mogu koristiti opcionalno (ali nisu obavezne) kod skrbi za dojenčadi odnosno malu djecu kod koje je potrebna pojačana njega koja zahtjeva bliski kontakt te kod koje su učestale različite zarazne bolesti s povišenom temperaturom, kako bi se smanjila učestalost takvih zaraza i posljedično panika zbog možebitne sumnje na COVID-19.

Rukavice. Nošenje rukavica nije preporučljivo, prednost se daje učestalom pranju i dezinficiranju ruku (upute za pravilno korištenje maski nalaze se na stranicama HZJZ-a i SZO-a).

Mjerenje temperature i praćenje pojave simptoma kod zaposlenika

Dnevno mjerenje temperature. Svi djelatnici imaju obavezu mjeriti tjelesnu temperaturu svaki dan prije dolaska na posao, te u slučaju povećane tjelesne temperature ne dolaze na posao već se javljaju telefonom ravnatelju i izabranom liječniku obiteljske medicine kako je kasnije navedeno. Preporuča se mjerenje tjelesna temperatura bezkontaktnim toplomjerom svim djelatnicima svakodnevno kod dolaska i odlaska s posla, te se utvrđuje imaju li respiratornih simptoma ili znakove drugih zaraznih bolesti. Kod osobe s povišenom temperaturom izmjerenom bezkontaktnim toplomjeom (37,2°C i veća, ovisno na specifikaciji bezkontaktnog toplomjera) preporuča se mjerenje temperature i standardnim toplomjerom pod pazuhom te se o povećanoj temperaturi zaključuje temeljem rezultata mjerenja pod pazuhom.

Evidencijska knjiga. Evidenciju o vrijednostima izmjerene tjelesne temperature i eventualnom postojanju respiratornih simptoma i znakove drugih zaraznih bolesti upisuje se u zasebnu evidencijsku knjigu.

Postupanje febrilnih osoba sa simptomima. S temperaturom, respiratornim simptomima i drugim simptomima zarazne bolesti nije dozvoljeno raditi, brinuti se o djeci, niti dolaziti u prostor poslodavca odnosno ustanove, što je i inače nužno u radu ovakvih ustanova.

Zamjena i testiranje febrilnih djelatnika. Djelatnici s povišenom tjelesnom temperaturom i/ili respiratornim simptomima odmah napuštaju radna mjesta (prethodno obavještavaju ravnatelja o ovoj činjenici) ili javljaju telefonom ravnatelju da neće doći na posao, te se javljaju telefonom svom izabranom liječniku koji ih upućuje na testiranje. Ravnatelj treba imati unaprijed organiziranu zamjenu za takav slučaj. Potrebno je testirati na SARS-CoV-2 sve djelatnike s povišenom tjelesnom temperaturom ili respiratornim simptomima.

Sumnja na COVID-19

Postupanje u slučaju sumnje na zarazu. U slučaju sumnje na kontakt djelatnika sa zaraženim ili oboljelim od COVID-19 ili drugog razloga za sumnju da se kod djelatnika radi o zarazi COVID-19, kod povišene tjelesne temperature i/ili respiratornih simptoma (kašalj i tekuće disanja-kratak dah), djelatnik odmah:

- telefonom obavještava ravnatelja,
- telefonom obavještava izabranom liječniku obiteljske medicine radi dogovora o testiranju na SARS-CoV-2 te radi utvrđivanja potrebe za bolovanjem, te se



- udaljava s radnog mjesta ili ne dolazi na posao- odgajatelja/nastavnika na radnom mjestu treba zamijeniti drugi odgajatelj/nastavnik koji, ako je ikako moguće, u istom razdoblju ne skrbi za drugu grupu djece.

Hitno telefonsko obavješćivanje liječnika. Ravnatelj ustanove u dogovoru sa zdravstvenom voditeljicom vrtića o svakoj sumnji na COVID-19 kod zaposlenika ili djece (o čemu roditelj/skrbnik ima obavezu hitno telefonom obavijestiti ravnatelja) obavještava odmah telefonom nadležnog epidemiologa ako se radi o vrtiću, odnosno obavještava nadležnog školskog liječnika ako se radi o školi. Posebno žurno i neizostavno ravnatelj obavještava nadležnog epidemiologa/školskog liječnika u slučaju grupiranja sumnje ili zaraze COVID-19 (2 i više djelatnika i/ili djece sa sumnjom iz iste skupine/učionice/zgrade i sl.).

U slučaju saznanja za mogućeg prenositelja/mogući izvor infekcije svaki zaposlenik dužan je odmah obavijestiti ravnatelja.

Djeca

Bez maske. Djeca ne nose zaštitne maske.

Bolesna djeca. Roditelji/skrbnici imaju obavezu izmjeriti tjelesnu temperaturu djetetu svaki dan prije dolaska u ustanovu, te u slučaju povišene tjelesne temperature ne smiju dovesti dijete u ustanovu već se javljaju telefonom ravnatelju ustanove i izabranom pedijatru/liječniku obiteljske medicine radi odluke o testiranju i liječenju djeteta.

Ako djeca razviju simptome COVID infekcije tijekom boravka u ustanovi, odgajatelji/učitelji odmah obavještavaju roditelje, koji u najkraćem roku moraju doći po dijete.

Druge zarazne bolesti. Djeca sa znakovima drugih zaraznih bolesti također ne dolaze u ustanovu. Djecu treba poticati da održavaju distancu (fizičku udaljenost) od druge djece i odraslih, primjereno razvojnoj dobi.

Dodirivanje lica. Djecu treba poticati da ne dodiruju usta, nos, oči i lice kao i da ne stavljaju ruke i predmete u usta, primjereno razvojnoj dobi.

Higijena ruku. Djecu treba poticati da redovito i pravilno peru ruke prije ulaska u svoju skupinu/učionicu, prije i nakon pripreme hrane, prije jela, nakon korištenja toaleta, nakon dolaska izvana, nakon čišćenja nosa, uvijek kada ruke izgledaju prljavo.

Za pranje ruku treba koristiti tekuću vodu i sapun.

Pri pranju ruku pridržavajte se naputaka za pravilno pranje ruku:
https://www.hzjz.hr/wpcontent/uploads/2020/03/Pranje_ruku_.pdf

Nakon pranja ruku sapunom i vodom, za sušenje ruku neophodno je koristiti papirnate ručnike za jednokratnu upotrebu koje nakon korištenja treba odbaciti u koš za otpad s poklopcem.

Djecu treba poticati da kada kašlju i kišu prekriju usta i nos laktom ili papirnatom maramicom koju poslije treba odbaciti u koš za otpad s poklopcem te oprati ruke.



Kihanje i kašljanje. Pri kašljanju i kihanju trebaju okrenuti lice od drugih osoba te izbjegavati dodirivanje lica, usta i očiju rukama.

Pribor za jelo. Ne treba dijeliti čaše, šalice, drugo posuđe i pribor za jelo s drugim osobama.

Didaktička oprema i igračke. U planiranju didaktičke opreme treba dati prednosti opremi glatkih, tvrdih površina koje se lako operu deterdžentom i vodom. Zabranjeno je korištenje materijala kao što su kinetički pijesak, glina, kukuruz, riža i sl., te svih igračaka koje se ne mogu oprati deterdžentom (deterdžent za suđe) i vodom te osušiti na zraku. Ako je ikako moguće potrebno je izložiti didaktičku opremu i igračke da se osuše na suncu. Prati i sušiti igračke potrebno je, ako je moguće, na kraju svakog radnog dana posebno za skupine djece koja su sukladno razvojnoj dobi sklona stavljati predmete u usta.

Dječja odjeća, obuća i školski pribor. Poželjno je da svako dijete/učenik samo postupa sa svojom odjećom i obućom, školskim priborom, torbama, knjigama, no ako nije u mogućnosti, odgajatelji/učitelji nakon dodirivanja odjeće i obuće, školskog pribora, torbi, knjiga trebaju poslije toga poslije toga dezinficirati ruke.

Nastava na otvorenom. Za lijepog vremena preporučuje se nastava na otvorenom prostoru, kada god je moguće.

Tjelesne aktivnosti. Kod tjelesne aktivnosti neophodno je izbjegavati aktivnosti koje intenzivno ubrzavaju i produbljuju disanje kao i brzo trčanje i druge oblike brzog kretanja djece. Ako se takve aktivnosti ne mogu izbjeći, neophodno je povećati razmak između djece tako da razmak bude što je moguće veći a svakako veći od 2 m. Ne preporučuje se izvođenje nastave tjelesnog odgoja na zatvorenom prostoru.

Učenici kojima je osigurana podrška pomoćnika u nastavi odnosno stručnih komunikacijskih posrednici (PUN)

Učenici s teškoćama. Prema Pravilniku o osnovnoškolskom i srednjoškolskom odgoju i obrazovanju učenika s teškoćama u razvoju (NN 24/2015), skupine vrsta teškoća su:

1. Oštećenja vida
2. Oštećenja sluha
3. Oštećenja jezično-govorne-glasovne komunikacije i specifične teškoće u učenju
4. Oštećenja organa i organskih sustava
5. Intelektualne teškoće
6. Poremećaji u ponašanju i oštećenja mentalnog zdravlja
7. Postojanje više vrsta teškoća u psihofizičkom razvoju.

Rizik od zaraze. Promatrajući navedene skupine vrsta teškoća, djeci kojoj je osigurano pravo na pomoćnika u nastavi ili stručnog komunikacijskog posrednika ne trebaju nužno biti povećanog rizika za zarazu s COVID-



19 u smislu pojačane osjetljivosti njihovog organizma na novi koronavirus, uz izuzetak djece s bolestima/zdravstvenim stanjima koja su navedena u prvom odlomku Temeljnih odrednica (određene oštećenja iz skupine 4). No ipak treba uzeti u obzir da i ove teškoće (primjerice teškoće iz skupina 1, 2, 5 ili 6,) mogu narušiti dosljednost djece u održavanju socijalne distance i higijene, što ih može staviti u povećani rizik za zarazu. Zbog toga bi se kod djece kojima je prethodno osigurana podrška PUN-a moglo razmišljati o uključivanju u školu uz podršku PUN-a, isključivo ako roditelj/skrbnik nikako nije u mogućnosti organizirati ostanak djeteta kod kuće, uz izuzetak djece s bolestima/zdravstvenim stanjima koja su navedena u prvom odlomku Temeljnih odrednica (određene oštećenja iz skupine 4).

Prethodna konzultacija sa školskim liječnikom. Prije uključivanja učenika u školu te kada je god potrebno tijekom boravka učenika u školi (primjerice kod promjene u zdravstvenom stanju učenika), neophodna je da se roditelj/skrbnik, djelatnik škole i/ili PUN konzultiraju (ponajprije telefonom) s nadležnim školskim liječnikom oko specifičnih pitanja vezanih u zdravstveno stanje i obrazovanje učenika u ovim okolnostima. Također, posebna skrb i oprez potreban je kod uključivanja djece predškolske dobi s teškoćama u razvoju i težim zdravstvenim smetanja u dječje vrtiće, te se preporučuje konzultacija s izabranim pedijatrom odnosno liječnikom obiteljske medicine.

Ograničen broj učenika, fizička udaljenost i osobna higijena. Pomoćnici u nastavi i stručni komunikacijski posrednici (PUN) ubrajaju se u ukupan broj osoba u odgojno-obrazovnoj skupini koja ne treba prelaziti ukupan broj preporučeni u ovim uputama (do ukupno 10 djece i odraslih). U odnosu na druge učenike i odrasle osobe u školi, PUN se pridržava svih pravila fizičke udaljenosti od 2 metra te provodi dosljedno pojačanu osobnu higijenu i pruža podršku u poticanju na pojačanu higijenu i socijalnu distancu svim učenicima kao i podršku u održavanju higijene prostora.

Fizička distanca kod PUN-a. U odnosu na dijete kojemu je osigurano pravo na podršku PUN-a, PUN neće uvijek moći održavati distancu od 2m jer održavanjem distance on ne bi bio u mogućnosti izvršavati sve poslove sukladno Pravilniku o pomoćnicima u nastavi i stručnim komunikacijskim posrednicima (NN 102/2018, 22/2020). Kada pruža potporu učeniku i u njegovoj blizini, preporučuje se PUN-u da uvijek nosi kiruršku masku, a kod pružanja potpore učeniku pri korištenju toaleta preporuča se, ako je moguće, da koristi jednokratne rukavice. Izvan ustanove te u odnosu na roditelje/skrbnike djeteta, PUN-ovi se pridržavaju što je više moguće pravila kojima se smanjuje njihova mogućnost zaraze (izbjegavanje trgovina, drugih mjesta gdje se okupljaju osobe, javnog prijevoza, dosljedno provođenje socijalne distance i higijene i sl.). Kod pružanja potpore učeniku, PUN posebno intenzivno potiče učenika na održavanje distance i provođenje higijene radi prevencije zaraze COVID-19, sukladno ovim uputama i drugim važećim preporukama.

Završne preporuke

U slučaju nemogućnosti organizacije posla zbog većeg broja zaposlenika koji su u samoizolaciji, stožeri civilne zaštite (državni i lokalni) u koordinaciji s osnivačima mogu preraspodijeliti zaposlenike drugih odgojno-obrazovnih ustanova, kako bi se osigurala kontinuirana skrb za djecu. Osigurava se kontinuirana nužna suradnja s osnivačem.

Za obaveze iz ovih uputa gdje je navedena pozicija ravnatelja, ravnatelj može zadužiti zdravstvenu voditeljicu – medicinsku sestru ili stručnog suradnika ustanove (izrazi koji se koriste u tekstu, a imaju rodno značenje, bez obzira jesu li korišteni u muškom ili ženskom rodu, obuhvaćaju na jednak način i muški i ženski rod).



Svaki zadatak ravnatelj treba dodijeliti jednoj odgovornoj osobi koja o navedenom provodi dnevnu pismenu evidenciju kada je to moguće.

Ove će se upute prilagođavati aktualnoj epidemiološkoj situaciji, a svakako će se razmotriti potreba i mogućnost prilagodbe uputa nakon privih 14 dana primjene (uključujući neradne dane).

Ove preporuke ne isključuju provođenje drugih preporuka sukladno aktualnoj i promijenjenoj epidemiološkoj situaciji.

Upute za čišćenje i dezinfekciju:

Bez oboljelih od COVID-19: <https://www.hziz.hr/wp-content/uploads/2020/03/Ciscenje-i-dezinfekcija-prostorije-bez-oboljelih-od-COVID-19-2.4.2020..pdf>

Osobe pod sumnjom ili oboljele od COVID-19: <https://www.hziz.hr/wp-content/uploads/2020/03/Ciscenje-i-dezinfekcija-prostora-u-kojima-je-boravila-osoba-pod-sumnjom-COVID-19-2.4.2020..pdf>