



*"We are a community-based child care centre fostering  
a co-operative learning environment  
for the entire family."*

## **Operating Guideline – Infectious Disease COVID 19**

**Updated November 12, 2021**

All child care centres are required to follow all existing health and safety requirements as directed by the local medical officer of health and as outlined in the *Child Care and Early Years Act, 2014 (CCEYA)* and other policies and guidelines issued by the Ministry of Education. Plans must be in place to respond should any staff, children, or parents/guardians be exposed to COVID-19.

**Building positive relationships and continued partnerships with families and staff is a priority.**

### **What is COVID -19**

COVID -19 is a coronavirus that is spread primarily from person-to-person through close contact. The virus typically spreads through coughing and sneezing, personal contact with an infected person, or touching an infected surface and then face – mouth, nose or eyes.

There is an increased risk of more severe COVID-19 outcomes for those:

- Aged 65 and over, and/or
- With compromised immune systems, and/or
- With underlying medical conditions

### **Common Symptoms of COVID-19 for Children and Adults (as indicated on screening tool)**

- Temperature of 37.8 degrees Celsius or higher and/or chills
- Any new/worsening cough or barking cough (croup) – continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways or other known causes or conditions)
- Shortness of breath - (out of breath, unable to breathe deeply (not related to asthma other known causes or conditions.)

- Decrease or loss of taste or smell – not related to seasonal allergies, neurological disorders or other known cases or conditions
- Nausea, vomiting and or diarrhea – not related to irritable bowel syndrome, anxiety, menstrual cramps or other known causes or conditions
- Muscle aches/joint pain (**adults only**) – no related to getting a COVID vaccine in the last 48 hours
- Extreme tiredness (**adults only**) – no related to getting a COVID vaccine in the last 48 hours

## Other Signs and Symptoms of COVID -19

- Sore throat – painful swallowing or difficulty swallowing
- Runny nose (rhinorrhea)
- Nasal congestion (stuffy nose) - not related to other known causes or conditions.)
- Headache – new and persistent, unusual, unexplained or long lasting
- Abdominal pain that is persistent and ongoing
- Conjunctivitis (Pink Eye)

## Child Care Centre Policy Requirements

Child care centres must develop new health and safety policies and protocols including how to operate through the COVID – 19 pandemic.

Ensure all staff have reviewed the Operating Guideline – Infectious Disease COVID 19 document.

Ensure policies and procedures are developed to meet all requirements of Child Care Guidelines.

## Use of Medical Masks and Eye Protection

- All adults in a child care setting must wear a medical mask and eye protection (ie face shield/ goggles) while inside in the child care premises, including in hallways and staff rooms ((unless eating – but time with masks off should be limited and physical distance should be maintained)
- Medical masks (surgical/procedural) are required to be worn outdoors. Eye protection is also required if a staff member comes within two metres of an unmasked individual both indoors and outdoors, as per occupational health and safety requirements
- Children younger than grade 1 are encouraged to wear a face covering while inside a child care setting.
- Face covering are not recommended for children under the age of 2.
- All children in grades 1 and above are required to wear a non-medical mask or face covering while inside a child care setting.

**\*\*If a family would like their child to wear a mask at childcare, they are required to provide a labelled, cleanable container with a lid for storage of the mask.**

- Exceptions to wearing masks indoors could include circumstances where a physical distance of at least 2 metres can be maintained between individuals, situations where a child cannot tolerate wearing a mask, reasonable exemptions for medical conditions, etc.

## Overall Capacity and Group Size

- While physical distancing is not always possible in a child care setting, every precaution and measure will be taken to reduce the spread of COVID-19. This priority will be consistent throughout all sections of this document.
- Groups will stay together throughout the day and are not permitted to mix with other groups.

## Daily Routines

All people participating in child care i.e. staff, parents, child (ren) need to consistently monitor their health for signs and/or symptoms of COVID-19.

### Before leaving home

All parents/guardians/ staff must complete the **Ontario Online COVID screening tool** to determine whether your child should attend or not. Please follow the instructions provided by the screen on how to proceed.

Any staff or children with **any new or worsening symptom** of one COVID 19 consistent symptom must stay home and isolate.

<https://covid-19.ontario.ca/school-screening/>

For information on local Assessment Centres, please visit the Assessment Centre website

<https://www.wdgpulichealth.ca/your-health/covid-19-information-public/testing-and-assessment-centres-wdg/guelph-covid-19>

## Arrivals

**\*\***The Ministry of Education has issued a statement noting that child care operators are no longer able to restrict access to parents into the child care centre if requested. Our main priority at the centre is to keep the children and staff healthy as well as our environment. We continue to ask parents and visitors to limit their access to the centre child centre at this time. Should anyone request access to the centre, there are strict health and safety protocols we are required to follow and will be implementing. We ask that everyone allow us some time to adapt to this new change in order to make this transition as soon as possible.

The following health and safety protocols must be met in order to enter in the child care centre beyond the screening table:

1. Must show proof of screening using the Ontario School and Child Care screening tool, daily each time entry is requested with time in and out noted and contact information provided.
2. Change to a medical mask (provided by the centre) – cloth masks or face covering will not be permitted.
3. Wear eye protection in the form of a face shield (provided by the centre) and / or eye protection (goggles/safety glasses that have full coverage from brow bone to top of cheekbone) – not provided by centre. Eye glasses are not an acceptable form of eye protection
4. Must distance 2 meters from others at all times
5. Will be limited to a 5 minute drop off at the child's program door – entry into the child care program will not be permitted. If you need to speak to your child's teacher, we ask that a phone call still be the primary way of contact

Please note that entry into the child care centre will be contingent on staff availability in order to monitor time and distancing. Scheduling an appointment may be a better alternative as this may create longer wait times at drop off and pick up.

Adults/ staff are to put on a face covering to approach the centre entrance and **only** enter through the main front entrance/exit to enter the centre.

Parents/guardians must not enter beyond the Daily Health Screening table.

Staff are required to put on a medical mask and face shield/goggle before proceeding to program.

All families will be asked if the **Ontario Online COVID screening tool** has been completed and your child's temperature will be taken using a no touch infrared thermometer or an ear thermometer with disposable caps and recorded. The thermometer (infra-red) will be disinfected at the end of each screening process.

Please follow the instructions given by the screening tool on how to proceed.

All children will have their temperatures taken during screening

Parents/guardians must support their child in getting their temperature taken, and cannot leave the child at the site until approved by the screener.

The screener will maintain a distance of 2 metres (6 feet) from those being screened and wearing personal protective equipment (PPE) ie face covering, face shield/ goggles.

A table will be set up to place any items that the child needs, this will include backpacks, any special food and medication. There will be clear containers to place these personal items.

Screening table will be cleaned/ disinfected after each screening period.

Staff will gather information about your child ie sleeping, diapering, toileting, feeding and other general information and relay this to your child's program teacher. If you would like to speak with your child's teacher in more detail we will be happy to set up a phone conversation.

Staff will complete their own screening and temperature taking upon arrival.

Alcohol based sanitizer will be available at all entry points and throughout the centre.

Distancing Requirements:

- Only one adult may drop off a child at the centre at one time.
- Others waiting to drop their child must remain outside and use distancing markers or remain in their vehicles until the person at the screening table has left.
- Child Care Centre staff must practice physical distancing of 2 metres or more when entering the child care centre.
- Child care staff should not carpool (even with the use of a face coverings)

## **Daily Health Screen Requirements:**

### **Child Care Daily Health Screening Policy (Appendix A)**

**\*\*If not completed online**

Parents/Guardians must comply with the centre's process of completing the Daily Health Screening process either outside or just inside the main entrance. A staff member will then escort the child to the washroom or hallway sink to wash their hands (20 seconds) before going to their cubby to remove outdoor clothing and disinfect any items from home. The staff person will then bring the child to their program room and sanitize their hands before assisting the next child.

All Staff must complete the Daily Health Screening as per policy and then immediately wash their hands with soap and water ( 20 seconds) and disinfectant any personal items that have hard surfaces such as cell phones, water bottles, bags, purses etc.

## **Departures**

Parents/guardians are asked to provide the centre with arrival and departure times for their child(ren) to assist with pickup. Please note that we will not be able to get the children ready in advance.

Parents/guardians must remain outside the main front entrance until their child is brought outside by centre staff and keep away from outdoor play areas.

Staff will provide families with a daily information form on their child's day ie sleeping, eating, toileting/diapering and general day activities. If you would like to speak with your child's teacher in more detail we will be happy to set up a phone conversation.

Only one parent can approach the centre at one time, others waiting to pick up their children must remain outside or in their vehicles until the parent leaves and is at least 2 metres away from the entrance.

- *Only if necessary*, a parent may enter into the vestibule at the main front entrance one at a time to pick up their child. If this occurs, they must wear a face covering.

All children/staff must wash their hands before leaving the child care centre.

## Attendance Records

In addition to attendance records for all children receiving child care, the centre is responsible for maintaining daily records of anyone entering the child care centre. These records must include all individuals who enter the premises (e.g., staff, cleaners, people doing maintenance work, people providing supports for children with special needs, those delivering food). Records are to be kept on the premises (centre) and along with name and contact information must include an approximate time of arrival and time of departure for each individual. Records must be kept up-to-date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak (i.e., records can be made available to public health within 24 hours of a confirmed COVID-19 case or outbreak).

All daily health screening forms will be kept in the Executive Director's office.

## Child/Staff Member with Symptoms while at Child Care

Children or staff who develop any signs or symptoms of COVID-19 while at child care, should be re-screened and follow the direction provided in the COVID-19 School and Child Care Screening which may require isolation and testing.

Children or staff who develop any of the following symptoms while at child care must be immediately separated from others and maintain 2 metre distance until they can go home and may require testing for COVID-19:

- Fever and/or chills
- Cough or barking cough
- Shortness of breath
- Decrease or loss of smell or taste
  
- **APPLICABLE ONLY TO CHILDREN:**
  - Nausea, vomiting and/or diarrhea
  
- **APPLICABLE ONLY TO ADULTS:**
  - Muscle aches/joint pain that are unexplained, unusual, or long-lasting.
  - Extreme tiredness, general feeling of being unwell, lack of energy, extreme tiredness) that is unusual or unexplained

Children/staff who develop any of the following symptoms while at child care will only be required to isolate if they are a **High Risk Contact (HRC)** of a positive case of COVID-19 or have received a positive rapid antigen test. These symptoms include:

- Sore throat
- Runny nose

- Nasal congestion
- Abdominal pain
- Headache
- Conjunctivitis (pink eye)
- Decrease or loss of appetite

\*NOTE: an individual who experiences any of the above seven symptoms and is not a HRC of a positive case and has not tested positive using a rapid antigen test, would not be required to isolate and is permitted to attend child care.

***\*NOTE: operators should keep in mind that even if children are not required to isolate as per the provincial screening tool, if a child is too ill to participate in all program activities, they should remain home.***

## **Caring for a child / staff who becomes ill at child care and is required to go home**

The staff will move a child away from other children in care ( 2 metre distance) who begins to show consistent or worsening of symptoms of COVID-19. The supervising staff will remain with the child until they are picked up.

Personal Protective Equipment must be readily available and immediately put on by the person supervising the child.

- face mask
- goggles or face shield
- gown
- disposable gloves if needed

A medical mask should be worn by the child (if tolerated).

Parents should be contacted immediately for the ill child to be picked up.

Hand hygiene and respiratory etiquette should be practiced while the child is waiting to be picked up.

Tissues should be provided to the child for proper respiratory etiquette, with proper disposal of the tissues in a non-touch garbage bin, and proper hand hygiene.

The child should be closely monitored and comforted as needed while trying to maintain as much social distancing as possible.

Once the child is picked up, the supervising person thoroughly cleans and disinfects the program where the child spent his/her time at the centre.

Once cleaning is completed, the supervising staff member safely removes and disposes PPE, ties up and disposes garbage and washes hands immediately before returning to normal duties

If a child care staff member develops any signs or symptoms COVID-19 while at work, they must report to their symptoms to the Executive Director / Supervisor immediately.

Once staff coverage is confirmed, the staff will be required to leave work following the departure process as per guidelines and follow the directions provided in the <https://covid-19.ontario.ca/school-screening/> and/or attached documents.

The symptomatic staff member will be responsible to contact the Executive Director/ Supervisor on a daily basis and report any changes to their health.

Management will begin to complete the appropriate Suspected/Confirmed Case of COVID-19 Tracking Form to document details of the suspected case.

## **Children/Staff – While in Not Attendance (After Hours, Weekend)**

Parents / Staff will notify the Executive Director immediately by email [director@campuschildcare.org](mailto:director@campuschildcare.org) with details of anyone who begins to experience symptoms of COVID-19 and is advised to seek testing. If the Executive Director is away, please email the Supervisor [office@campuschildcare.org](mailto:office@campuschildcare.org) with the details. Please note that the main office phone 519-822-1280 is not a confidential phone.

Staff will notify the Executive Director/ Supervisor immediately by phone to the number indicated with details of symptoms of COVID -19.

The Executive Director / Supervisor must complete the appropriate Centre Suspected Case of COVID-19 Tracking Form.

The person with the symptoms compatible with COVID-19 is to follow the direction provided by the Ontario online screening tool.

The Executive Director / Supervisor will notify those who may have been in contact with the person exhibiting symptoms of COVID-19 of the report and remind them to continue to self-monitor.

## **Definitions**

### **Risk Factors**

- Exposure to a Confirmed or Probable Case of COVID-19 or Any International Travel in the past 14 days prior to symptoms

### **Probable Case of COVID-19**

- A person (who has not had a laboratory test) with symptoms compatible with COVID-19 **AND**:
  - Traveled to an affected area (including inside of Canada) in the 14 days prior to symptom onset;**OR**
  - Close contact with a confirmed case of COVID-19; **OR**
  - Lived in or worked in a facility known to be experiencing an outbreak of COVID-19**OR**
  - A person with symptoms compatible with COVID-19 **AND** in whom laboratory diagnosis of COVID-19 is inconclusive

### **Close Contacts**

- Household members, and anyone with close contact (>15 minutes, <2 metres apart), while they (a probable or confirmed case) had symptoms and 48 hours prior to symptoms.

## **Return to Child Care for Children/Staff with Symptoms**

Individuals who develop symptom(s) of COVID-19 should follow the direction provided by the COVID-19 School and Child Care Screening tool and can refer to the Return to Child Care Protocol for Children/Staff with COVID-19 Symptoms attached.

An ill individual who has a known alternative diagnosis provided by a health care provider may return to child care if they do not have a fever and their symptoms have been improving for at least 24 hours.

**\*\*A note will be required indicating the alternate diagnosis.**

### **If COVID-19 test result is NEGATIVE:**

- Symptomatic child/staff may return to child care/work if all the following are met:
  - Test results are negative for COVID-19; AND
  - Symptoms have been improving for 24 hours (and no fever); AND
  - Must be able to pass screening tool

Note: proof of negative test result is not required

### **Household members (HM) that are not vaccinated or are partially vaccinated:**

HM must self-isolate while symptomatic individual is awaiting test results.

- If symptomatic individual tests negative for COVID-19, household members can discontinue self-isolation
- Pass screening tool before returning to school/child care/work.

### **Household members (HM) that are fully vaccinated:**

HM do not need to self-isolate while symptomatic individual is waiting for test results.

### **If COVID-19 test result is POSITIVE:**

- Symptomatic child/staff who tests positive for COVID-19 must follow directions from Public Health (i.e. self-isolate for 10 days from symptom onset and symptoms improving for 24 hours (and no fever).

### **Household members (HM) that are not vaccinated or are partially vaccinated:**

HM must self-isolate for 10 days from last exposure/contact with individual who tested positive.

- **Household members** should get tested immediately, and if they receive a negative test result, recommended to re-test on or after day 10 of isolation.

- If **household member** develops symptoms get tested immediately.

### **Household members (HM) that are fully vaccinated:**

HM do not need to self-isolate.

- Household members should get tested immediately, and if they receive a negative test result, re-test as directed by Public Health.
- If household member develops symptoms self-isolate and get tested immediately.

### **If testing is recommended but individual does NOT GET TESTED:**

**Scenario 1:** If a health care provider (HCP) has diagnosed the symptomatic child/staff with a condition that is not related to COVID-19, they can return to child care/work:

- 24 hours after their symptoms start improving (and no fever)

**Scenario 2:** Symptomatic child/staff may return to child care/work if all the following are met:

- Child/staff has isolated for 10 days from symptom onset; AND
- Symptoms have been improving for 24 hours (and no fever); AND
- Must be able to pass screening tool

### **Household members (HM) that are not vaccinated or partially vaccinated:**

HM must self-isolate for 10 days from their last contact with the symptomatic individual who was not tested.

- If symptomatic person gets an alternative diagnosis by health care provider, household member can stop self-isolation and return to work.
- Pass screening tool before returning to school/child care/work.

### **Household members (HM) that are fully vaccinated:**

HM do not need to self-isolate.

- If vaccinated household member develops symptoms, self-isolate and get tested.

## **Guidance for High Risk Contacts (HRC) of a Positive Case**

### **If HRC individual HAS SYMPTOMS:**

### **HRCs that are not vaccinated or partially vaccinated:**

Self-isolate and get tested immediately

- Self-isolate for 10 days from last exposure/contact with positive case
- Pass screening tool before returning to school/child care/work.

### **HRCs that are fully vaccinated:**

Self-isolate & get tested immediately

- Self-isolate while waiting for test results
  - Return to school/child care/work when test results are negative & symptoms improving for 24 hours.
- **Household members** must also self-isolate while waiting for test results (unless fully vaccinated).
  - If HRC tests negative for COVID-19, **household members** can discontinue isolation.

### **If HRC individual does NOT have symptoms:**

#### **HRCs that are not vaccinated or partially vaccinated:**

Self-isolate and get tested (as directed by Public Health)

- Self-isolate for 10 days from last exposure/contact with positive case
- Pass screening tool before returning to school/child care/work.

**Household members** must stay home except for essential reasons (e.g., work, school, child care) while waiting for test results (unless fully vaccinated)

- If the HRC tests negative for COVID-19, **household members** can discontinue staying home except for essential reasons.

#### **HRCs that are fully vaccinated:**

Self-isolation not required – may continue to go to work, school, child care

- Get tested (as directed by Public Health)
- **Household members** do not need to stay home while waiting for test results (regardless of vaccination status)

### **If HRC tests POSITIVE for COVID-19:**

#### **HRCs that are not vaccinated or partially vaccinated:**

Self-isolate for 10 days from when your symptoms started, or positive test date (or as directed by Public Health)

#### **HRCs that are fully vaccinated:**

Self-isolate for 10 days from when our symptoms started, or positive test date (or as directed by Public Health)

- **Household members** must self-isolate for 10 days from last exposure with the individual who tested positive (unless fully vaccinated)
- **Household members** should be tested for COVID-19 immediately.

## Reporting a confirmed case of COVID-19

Child care centres within the meaning of the Child Care and Early Years Act, 2014 have the duty to report confirmed cases of COVID -19 under the Health Protection and Promotion Act. We will contact the local public health unit to report any confirmed case of COVID -19. Once contacted, they will provide specific advice on what control measures should be implemented to prevent the potential spread and how to monitor for other possible infected staff and children.

An **Outbreak** is defined by the local Public Health Unit when:

- within a 14-day period, there are two or more laboratory-confirmed COVID-19 cases in children, staff/providers or other visitors with an epidemiological link (e.g., cases in the same room, cases that are part of the same before/after school care cohort) where at least one case could have reasonably acquired their infection in the child care setting.
- The local public health unit will work with the centre to determine whether epidemiological links exist between cases and whether transmission may have occurred in the child care setting.
- If the local public health unit declares an outbreak, they will determine what happens next. This could include closing particular child care rooms or cohorts or an entire child care setting.
- The public health unit will help determine which groups of children and/or staff need to be sent home or if a partial or full closure of the child care setting is required.
- If the public health unit determines that partial or full closure of the child care setting is required, the centre must revise their existing serious occurrence report for a confirmed COVID-19 case to include information about the closure.

Should a positive case or Outbreak occur at the centre, parents/staff will be notified via email.

## Contacting Public Health

In order to best support child care centres, WDGPB has adopted the following process for incoming communications from a) childcare providers and operators and b) parents and families:

**Childcare providers and operators are instructed to contact WDGPB Intake:**

Call: 1-800-265-7293 or 519-822-2715, Ext. 4753

Or email: [PHI.intake@wdgpublichealth.ca](mailto:PHI.intake@wdgpublichealth.ca)

- For inquiries, questions, or concerns related to COVID-19 and child care centres

- For reporting suspected COVID-19 cases
- For public health inspection-related information

**Parents and families are directed to call the COVID-19 Call Centre at:**

Call: **1-800-265-7293** or **519-822-2715, Ext. 7006**

## **Infection Prevention and Control**

### **Limiting the Spread of COVID-19**

#### **General Guidelines**

- Wash your hands often with soap and water ( 20 seconds) or use alcohol-based sanitizer
- Sneeze or cough into your sleeve
- Avoid touching your eyes, nose and mouth
- Avoid contact with people who are sick
- Do not go to work if you are experiencing symptom(s)

#### **Hand Hygiene**

Conduct hand hygiene as per COVID 19 protocols by incorporating additional hand hygiene opportunities into the daily schedule. Hands should be washed for a minimum of 20 seconds.

All persons must wash their hands at the start of the day prior to engaging in the play with the group and before leaving at the end of the day. Frequent hand washing should be incorporated into the daily schedule at regular intervals during the day above and beyond before and after eating food; after using the washroom; before and after playing with shared items. Performing proper hand hygiene including, assisting children with hand hygiene.

Minimize the use of jewellery. Be aware of washing hands thoroughly with rings on.

Gloves should be worn when it is anticipated the hands will come into contact with blood or body fluids and when providing care to a symptomatic child.

Ensure hands are cleaned before putting on gloves and after removing gloves and that gloves are removed immediately after completing a task and prior to touching clean items and surfaces.

70% alcohol-based hand sanitizer is recommended and should be available, especially in areas without immediate access to hand washing sinks. Do not use alcohol-free hand rub.

Hand washing using soap and water is recommended over alcohol based hand rub for children.

Ensure all hand washing sinks are unobstructed; possess hot and cold water, liquid soap, and disposable paper towel. Liquid soap containers cannot be “topped up” and reusable pumps must be cleaned and disinfected prior to refilling. Resource: Handwashing posters (child and adult)

## Personal Items

Bringing in personal items into the child care facility is strongly discouraged and is limited only to essential items.

Any hard surface items (e.g., water bottle keys, cell phones, purses/bags,) must be cleaned and disinfected each day upon arrival. Essential personal items should be stored in a dedicated area for each child (i.e. labelled cubby).

We ask that water bottles not be brought into the centre unless absolutely necessary. If a water bottles must be brought into the centre it must be clearly labelled with the child's name. The centre will have paper cups and additional sippy cups available.

Soothers must be labelled with the child's name to discourage accidental sharing and stored in a sanitary manner (cleanable closed container).

Products such as creams and lotions must be labelled with the child's name, dedicated to that child and must be dispensed in a manner that does not contaminate the remaining portion (i.e. using a disposable applicator or clean gloved hand). For creams and lotions during diapering, use a tissue or single-use gloves.

All personal items used for diapering must be labelled with the child's name and stored in a dedicated area.

All other personal items including clothing and footwear must be stored in a dedicated area for each child (labelled cubby).

Extra clothing / items will be brought in and the backpack / bag should stay at the centre. Parents are asked to replenish as needed.

## Cleaning and Disinfecting

Focus should be on regular hand hygiene and respiratory etiquette to reduce the risk of infection related to high touch surfaces. Cleaning plus disinfection twice daily is suggested at a minimum, however, more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soilage. Staff will refer to the Cleaning and Disinfecting Schedule provided by WDG Health Unit and the centre. The centre currently uses a one step cleaner/disinfectant.

- o High touched surfaces include light switches, door knobs/handles, tables/chairs, counters, cabinet/drawer handles, handrails, faucet taps and toilet levers are cleaned and disinfected twice daily.

Every effort will be made to limit movement of staff between rooms.

If a child care centre chooses to have dedicated cleaning staff who will have no direct care or close contact with children or other staff, they must wear a medical mask and gloves as required. It is not required for cleaning staff to replace PPE between cleaning rooms, given the PPE is being worn properly and is in good repair. If the PPE is wet, damaged or visibly soiled, PPE must be removed, disposed of/laundered and new PPE put on prior to continuing into another room. If PPE is removed for any reason (i.e.soiled, break time, lunch), staff must follow proper removal procedure and conservation/disposal.

All soiled and visibly dirty surfaces must be cleaned before disinfecting. Cleaning involves the use of soap, water and friction to remove organic matter on surfaces. After cleaning, surfaces must be rinsed and dried prior to disinfection if a one-step product is not used. Organic matter such as blood, body secretions and excretions can decrease the effectiveness of disinfectants.

A cleaning and disinfecting log will be used to track and demonstrate cleaning schedules.

## Toys and Play

Child care providers are encouraged to provide toys and equipment made of materials that can be easily cleaned and disinfected.

Singing is permitted indoors; masking is required.

Water or sensory play in a group is permitted. If sensory materials (e.g., playdough, water, sand, etc.) are offered, emphasis should be placed on hand hygiene before and after the use of materials.

- o Sensory materials must be replaced and/or cleaned and disinfected once every two weeks
- o Sensory table must be cleaned and disinfected weekly

## Items/Toys that can be cleaned and disinfected

Child care providers are encouraged to provide toys and equipment made of materials that can be easily cleaned and disinfected, cleaning and disinfection schedules for toys and shared objects **may return to pre-covid frequency**:

- o **Infant toys:** cleaned and disinfected weekly. Note that mouthed toys must still be cleaned and disinfected immediately after the child is finished using them.
- o **Toddler and preschool toys:** cleaned and disinfected once every two weeks
- o **High touch surfaces:** cleaned and disinfected twice daily

## Nature based toys and other items that cannot be cleaned and disinfected

Child care staff must clean and disinfect surfaces in the centre in order to minimize disease transmission since viruses and bacteria can survive on surfaces for days or weeks. Common viruses found in a child care centre such as norovirus can survive on surfaces for up to 12 days.

Toys/items that cannot be cleaned and disinfected (e.g., craft supplies, unsealed wooden items, nature-based toys) must be placed on a rotational schedule as was permitted prior to COVID.

- o Nature based and other toys/items that cannot be cleaned and disinfected must be rotated out of the program for two weeks before being reintroduced to the children to reduce exposure and illness:
  - o **Infant items:** in the program for one week, out for two weeks
  - o **Toddler/preschool items:** in program for two weeks, out for two weeks
  - o Hand washing must be performed before and after play.
  - o Staff must track and record rotation of items.

Mouthed toys should be removed immediately and set aside in a designated area for cleaning and disinfecting and cannot be shared with other children.

## Outdoor play

Children/ staff must perform hand hygiene before and after outdoor play.

- Outdoor play structures are not required to be cleaned and disinfected unless the equipment is visibly soiled or dirty.

Outdoor play should be scheduled by cohorts to facilitate physical distancing. Where the outdoor play area is large enough to accommodate multiple cohorts, each cohort should be separated by at least 2 metres.

- Our groups use the playground one at a time

If play structures are to be used by more than one cohort, the structures should only be used by one cohort at a time.

There are designated toys and equipment (e.g., balls, loose equipment) for each cohort. Outdoor bins should also be cleaned and disinfected.

Sandbox use is permitted if the following conditions are met:

- Children wash hands before and after use
- Sandbox should only be used by one cohort at a time.
- Sand should be raked between cohorts.

Children should bring their own sunscreen.

- Staff may provide assistance to apply sunscreen to any child requiring it and should exercise proper hand hygiene when doing so (for example washing hands before and after application).

Outdoor gates and shed latches should be disinfected as part of playground cleaning for each cohort.

## **Physical distancing**

Physical distancing of at least 2 metres must be maintained between groups and should be encouraged, where possible, between children within the same group.

Each cohort must have their own assigned indoor space, separated from all other cohorts by a physical barrier. The purpose of the barrier is to reduce the spread of respiratory droplets that are thought to transmit COVID-19 and to reinforce physical distancing requirements between cohorts.

### **Encourage more physical space between children by:**

- Spreading children out into different areas
- Staggering, or alternating, lunchtime and outdoor playtime
- Incorporating more individual activities or activities that encourage more space between children
- Offering increased outdoor play
- Groupings of children (i.e. separate classes) must remain separate from other groupings within the child care centre

**Limiting direct contact between children and staff:**

- Avoid getting close to faces of all children, where possible

**Distancing between staff**

- Staff should respect the 2-meter recommendations from the Province. Staff should not gather for lunch, break or other activities.
- Staff should not carpool with other staff.

**Nap time**

Increase the distance between nap mats, if possible. If space is tight, place the children head-to-toe or toe-to-toe. Where possible, cots, cribs and bedding should be dedicated to one child and the linens laundered at least weekly or when wet or soiled.

Blankets are stored in a designated location (i.e., individually labelled bag/container/cubby).

If cots, cribs and bedding are shared between children, they must be cleaned and disinfected, and laundered, between each use.

Cots and cribs must be disinfected after weekly.

Cots must be stored in a manner which there is no contact with the sleeping surface of another cot

**Food**

For child care centres that are licensed under the Food Premises Regulation, the facility must operate in accordance with the Regulation and ensure that food handling staff practice hand hygiene and are excluded from work if they do not pass the screening tool.

Ensure the kitchen has a hand wash sink which possesses hot and cold water, liquid soap and paper towel. This sink should never be obstructed.

Food handlers/staff must wash hands before handling food, preparing bottles or feeding children.

Hand hygiene must be performed by children before and after eating food.

Ensure kitchen area is accessible only to kitchen staff. When not in use, ensure kitchen is inaccessible to non-designated staff and children.

Ensure food contact surfaces are cleaned and sanitized as often as necessary to maintain them in a clean and sanitary condition, at a minimum twice per day.

Provide test strips to monitor sanitizer concentration for food surface disinfectants and mechanical dishwashing disinfectant (if applicable).

Cease activities involving child participation in food preparation.

Reinforce “no food sharing” policies.

Consider staggering snack and lunch time so you can accommodate smaller groups with more space.

Kitchen staff to bring food to programs and leave outside door. Cart handles should be disinfected.

Where possible, children should practice physical distancing while eating.

Family style dining is permitted with modifications:

- staff are required to always wear proper PPE while in program with children (medical mask and eye protection).
- staff are not permitted to eat with children or move away from the group and eat
- children are permitted to serve themselves – staff must continue to limit any potential sharing of utensils/items that may enter the child’s mouth.

Staff can continue to serve individual portions to each child.

There should be no common food items (e.g., salt and pepper shakers, condiment bottles).

If meals or snacks are provided by the family, for their child only, food should be stored with the child’s belongings or, if refrigeration is required, should be kept in an area designated for the child’s cohort and should not be handled by staff designated to other cohorts

All food deliveries must be dropped at the side kitchen door for staff to bring in. Staff will continue with grocery shopping to the local stores and follow the proper safety precautions.

Dishes at the end of the day will be completed by either the kitchen staff or other designated staff while following all proper protocols.

## **Diapering and Toileting**

Child care staff must adhere to diapering and toileting steps and ensure proper cleaning and disinfecting between diaper change or toileting process.

Clean and disinfect the diaper change area and/or diaper change mat after each use.

Ensure there is a hand washing sink with hot and cold water, liquid soap and paper towel in close proximity to the diaper change table.

Provide a supply of single-use disposable gloves at the diaper change table. Hand hygiene must be performed before putting on gloves and after taking them off.

Ensure staff and children wash their hands after each diaper change and after using the toilet.

Provide a lined plastic waste container with a lid in the diaper changing area.

## **Cleaning and Disinfecting Blood/Bodily Fluid Spills**

In the event of Blood/Bodily Fluid Spills, using the steps below, the surface must be cleaned first then disinfected:

Isolate the area around the spill so that no other objects/humans can be contaminated

Gather all supplies, and put on Personal Protection Equipment (Face shield, mask, gown and disposable gloves). Ensure gloves have no pinholes or tears and fit securely

Scoop up the fluid with disposable paper towels (check the surrounding area for splash/splatter) and dispose of in separate garbage bag

Clean the spill area with detergent, warm water and single-use towels

Rinse to remove detergent residue with clean water and single-use towel

Discard used paper towels immediately in a tied plastic bag

Spray disinfectant on and around the spill area and allow the appropriate disinfecting contact time

A final rinse is required if children come into contact with the area

Remove and immediately discard Personal Protection Equipment.

Any soiled clothing will be placed in a bag and put in the child's cubby and sent home (soiled clothes will not be laundered or rinsed at the centre).

If possible the contaminated area / room should be closed until dry. In the case of vomiting or diarrhea, the room should be aired out for at least one hour if possible.

## **Shared Space / Objects**

The risk associated with transmission with shared objects is low. Instead of regular cleaning of shared objects, the focus should be on regular hand hygiene and respiratory etiquette to reduce the risk of infection related to shared equipment.

Where an individual is suspected of having COVID-19 in the child care setting, environmental cleaning of the space and all items used should be conducted immediately following all protocols for PPE use, and disinfecting steps

Management will be responsible to clean and disinfect the equipment and materials in their offices as needed.

Staff washrooms ie hallway (one and two) and upstairs to be assigned to specific programs/supply staff. Staff to refer to procedures/ policy for disinfecting.

## **Daily Health Screen Policy and Procedure (Appendix A)**

### **Health Screen Area Set Up**

The Daily Health Screening area must be set up at the identified entrance/exit of the site. This area must:

- Be visible to staff and families and block access to further entry to site if possible (preferably outside).
- Ensure a minimum of 2 metres distance between the person conducting the screen and those participating in the screen.
- Ensure access to the following materials: COVID-19 ACTIVE SURVEILLANCE SCREEN for Children and Staff, hand sanitizer, ear thermometer with disposable covers or infra-red thermometer, personal protection equipment for the person taking the child's temperature, as well as Public Health resources.
- Provide visual guides to assist with physical distancing should a line-up form outside the site.
- The screening area will have trained staff members present at all times
- Screener who is taking people's temperature must wear a medical mask, goggles or face shield, and have access to sanitizer and disposable gloves.
- Once the screening is complete, if the individual answers YES to any of the screening questions, or refuses to answer then they have not met the screening requirements and cannot enter the building.
- Please contact your health care practitioner for next steps.
- Ensure all completed COVID-19 online screening tool results are submitted to the Executive Director / Supervisor

