

Pandemic Health and Safety Protocol Policy

Screening

All individuals, including children, parents/guardians and staff must be screened upon arrival. Entry will be denied to any person including the child of a parent/guardian who has any of the symptoms outlined in the 'COVID-19 Reference Document for Symptoms' on the Ministry of Health's COVID-19 website. Children in particular should be monitored for atypical symptoms and signs of COVID-19.

All staff/parents/caregivers should be aware of signs and symptoms of COVID-19, including:

- fever (equal or greater than 38 degrees Celsius)
- cough
- muscle aches and tiredness
- difficulty breathing
- and less commonly: sore throat, headache, diarrhea

Screeners should take appropriate precautions when screening, including maintaining a distance of at least 2 metres (6 feet) from those being screened, or being separated by a physical barrier (such as a plexiglass barrier), and wearing personal protective equipment (PPE) (i.e., surgical/procedure mask; gown; gloves; eye protection (goggles or face shield)).

Passive screening:

Parents/guardians should be instructed to check their child's temperature daily. Staff should be instructed to check their own temperature daily.

Staff/children with any of the above signs and symptoms should stay home and not attend the facility for 14 days from symptom onset and no longer feeling unwell.

Active screening:

Screening will be conducted at the main entrance daily by a designated person. The area should allow a minimum of two metres (six feet) distance between staff conducting screening and the person being screened.

Signage will be posted in visible areas which clearly explains the screening process and the rules and conditions for entry.

Management will actively screen staff, children and parents/caregivers prior to entry/drop-off by asking about the following:

- Do you/your child *or any member of your household* have any of the following symptoms: fever/feverish, new or existing cough, sore throat, or difficulty breathing?
- Have you/your child travelled outside of Canada, including the United States, within the last 14 days?
- Have you/your child had close contact with a confirmed or probable COVID-19 case?
- Have you/your child had close contact with a person with acute respiratory illness who has been outside Canada, including the United States, in the last 14 days?

*Thermometers must not be used between children/staff without single-use protective covers or disinfecting between use.

Alcohol-based hand sanitizer will be available at the screening stations for people who have answered NO to all questions for use prior to entry into the facility.

-Staff/parents/caregivers who answer YES to any of the question will not be permitted to enter the facility.

-Nonessential visitors will not be permitted to enter the facility. Essential visitors will all be required to be screened as well before being granted permission to enter the facility.

Essential visitors are as follows;

- Health unit inspectors
- Fire inspectors
- Ministry of Education program advisors

*Persons who are ill will not be permitted to enter the facility

Duty to report

Child care centres within the meaning of the Child Care and Early Years Act, 2014, have duty to report suspected or confirmed cases COVID-19 under the Health Protection and Promotion Act. The centre should contact their local public health unit to report a child suspected to have COVID-19. The local public health unit 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 members and children.

Management of children suspected to have Covid-19

If a child begins to experience symptoms of COVID-19 while attending child care, the following actions are to be followed;

- Symptomatic children be immediately separated from others in a supervised area until they can go home. In addition, where possible, anyone who is providing care to the child should maintain a distance of at least 2 metres.
- If a 2-metre distance cannot be maintained from the ill child, advice from the local public health unit will be necessary to prevent/limit virus transmission to those providing care.
- Contact the local public health unit to notify them of a potential case and seek advice regarding the information that should be shared with other parents/guardians of children in the child care centre.
- While contacting the public health unit, at a minimum the child and staff member should wear a surgical/procedure mask (if tolerated), and any other PPE appropriate for the circumstance.
- 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, along with proper disposal of the tissues.
- Environmental cleaning of the space the child was separated from should be conducted once the child has been picked up.
- Children with symptoms should be tested.
- Other children and staff in the centre who were present while a child or staff member became ill should be identified as a close contact and cohorted (i.e., grouped together). The local public health unit will provide any further direction on testing and isolation of these close contacts.
- Children or staff who have been exposed to a confirmed case of COVID-19 should be excluded from the child care setting for 14 days.

Management of staff suspected to have Covid-19

If a staff member begins to experience symptoms of COVID-19 while providing child care, the following actions are to be followed;

- Staff who become ill while at the facility should be sent home immediately.
- Contact the local public health unit to notify them of a potential case and seek advice regarding the information that should be shared with parents/guardians/other staff members in the child care centre.
- Staff member with symptoms should be tested.
- Other children and staff in the centre who were present while a child or staff member became ill should be identified as a close contact and cohorted (i.e., grouped together). The local public health unit will provide any further direction

on testing and isolation of these close contacts.

-Children or staff who have been exposed to a confirmed case of COVID-19 should be excluded from the child care setting for 14 days.

Persons diagnosed with Covid-19

-If any person who attends/ has visited Seeds to Sprouts at is diagnosed with COVID-19, the person must immediately quarantine for 14 days following symptom onset.

-Seeds to Sprouts management will consult with the local public health unit to determine when the staff member can return to work.

-Children, staff and parents may only return to Seeds to Sprouts once they have received clearance from the local public health unit.

-A serious occurrence must also be reported to the Ministry of Education in all suspected or confirmed cases of covid-19

Health and Safety Requirements

Practice proper hand hygiene and respiratory etiquette:

-Wash hands with soap and water for at least 15 seconds.

-If soap and water are not available use an alcohol-based hand sanitizer provided hands are not visibly soiled.

-Provide additional hand sanitizer stations (e.g., wall mounted hand sanitizer dispensers) in supervised areas.

-Cover your cough or sneeze into a tissue. Immediately throw the tissue in the garbage and wash your hands.

-If you don't have a tissue, sneeze or cough into your sleeve.

-Avoid touching your face, nose and mouth with unwashed hands.

-Operators should monitor hand hygiene supplies to ensure adequate amounts of liquid soap, paper towel, hand sanitizer, tissues, and waste receptacles lined with plastic bags.

Enhance environmental cleaning and disinfecting schedules:

Cleaning refers to the removal of dirt and organic material from surfaces. Cleaning alone does not kill or deactivate germs. Disinfection works by using chemicals to kill/deactivate germs on surfaces. This process does not work effectively if surfaces are not cleaned first.

Indoors

-Ensure all toys used at the centre are made of materials that can be cleaned and disinfected easily.

- High-touch surfaces and items in common areas (e.g. tables, chairs, toys, indoor/outdoor play equipment, doorknobs, light switches, handles, desks, toilets, sinks, electronic devices) must be cleaned and disinfected at least twice daily, when visibly dirty, and after contact with body fluids (e.g. saliva).
- Disinfect cots and cribs after each use. Linens must be laundered between children.
- Low-touch surfaces (e.g. floors, wall, and windowsills) must be cleaned and disinfected as needed.
- Disinfectants should have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada. Alternatively, chlorine bleach solutions, may be used for disinfection.
- Check the expiry date of products you use, and always follow manufacturer's instructions.

Outdoors

- Each class (cohort) will have a designated bin of outdoor play equipment.
- Play equipment will go out with the class during outdoor play time, and brought in when outdoor play ends.
- Both during nap/rest and at the end of the day, the outdoor play equipment will be thoroughly cleaned and sanitized.

Reduce the risk of transmission during activities:

- Practice physical distancing as best as possible to maintain a two metre (six feet) distance between staff and children.
- Avoid getting close to face of all children, where possible
- When holding children, a blanket, sheet or barrier of some form must be between the staff member and the child.
- Linens must be laundered between children.
- Increase the distance between nap cots and cribs, if possible. If space is tight children are to be placed head-to-toe or toe-to-toe. Cribs and cots are to be disinfected after each use.
- Children are to have individual bins for sensory play activities.
- Reinforce "no sharing" This includes the current practice of not sharing food, water bottles or personal items and belongings. Personal items should be clearly labelled with each child's name.
- Children must never share soothers, bottles, sippy cups, toothbrushes, facecloths, etc.
- Activities that permit the mixing of children from different care groups are not permitted.
- Include individual activities to increase space between children.
- Mealtimes will be staggered.
- Washroom times will be staggered for cohorts who share the same restrooms.
- Shared outdoor play space will have staggered times for use.

- Supervise and ensure that children practice hand hygiene frequently while using dedicated playgrounds and after using playground equipment.
- Cohorts will be responsible for their own rooms laundry.
- The staff room must be thoroughly sanitized between each staff member ensuring to use the designated sanitizer.
- Staff are permitted to use their assigned lockers only. The coat rack will no longer be permitted for shared use.

Provide support and reassurance

- Being a positive role model is an effective strategy to help reduce fear and anxiety as well as promoting healthy behaviours. Remember that children are often listening when you talk to others about COVID-19.
- Maintain familiar routines and activities to reinforce a sense of security.
- Acknowledge concerns and provide reassurance about personal safety and health.
- Help identify when sources of misinformation are circulating and correct this information when it occurs.
- Further guidance is available from the World Health Organization to help children cope with stress.

Staff to Parent Communications

All correspondence is to be contactless. The use of the telephones and electronic means of communication should be used as often as possible. Staff and management will use the following forms of communication to relay messages between the centre and families;

- Seeds to Sprouts landline telephone
- SeeSaw
- Seeds to Sprouts Facebook messenger (management use)
- Seeds to Sprouts administration email.

Until further notice paper methods of communication will be suspended, with the exception of documentation requiring signatures.

Cancellation/Rescheduling of Events and Meetings

In regards to all pre planned events and meeting;

- Events will postponed until further direction from the local Public Health Unit confirms that they can recompense.
- Previously scheduled and newly scheduled meetings will now be required to take place via the use of the telephones and electronic means of communication such as video conference calls.
- Until further notice paper methods of communication will be suspended, with the exception of documentation requiring signatures.

Cohort Scheduling/Assigned Rooms

For the purposes of this document, a cohort is defined as a group of children and the staff members assigned to them, who stay together throughout the duration of the program for minimum 7 days.

- Maximum cohort size for each room in a child care centre (including each family age group) will consist of no more than 10 individuals (“a cohort”). This includes both staff and children.
- Maximum capacity rules do not apply to Special Needs Resource staff on site (i.e., if they are not counted towards staff to child ratios they are not included in the maximum capacity rules).
- Each cohort must stay together throughout the day and are not permitted to mix with other cohorts, therefore classes will not be permitted to mix during opening reduced ratio times. Reduced ratios are not permitted at any time for infants.
- All staff shifts will be made two weeks in advance.
- Staff members will be assigned to a designated room for a minimum of one week for contact tracing purposes.
- Should a staff member require time off, another staff member will completely replace the shift for the entire Monday-Friday time span. Half day shifts will be available in one week intervals, should a full time staff member require time off for an appointment.
- RECE staff members must be lead teachers within all classrooms unless Director approval has been granted from the Ministry of Education.

Classroom Set Up

For the health and safety of the children and staff there will be sections created within the classrooms that allow for parallel play and communication with the security of social distancing. All of the play spaces, craft and eating areas will allow for the children to still actively interact with one another at a safe distance as to avoid direct physical contact.

Teachers will continue to develop programming that is engaging, educational, creative and fun for the children. This will be done through storytelling, creative art experiences both planned and open ended as well as staged classroom activities and outdoor play.

The classrooms are to be broken up into large centers/areas. The areas and safety measures in place are as follows.

Eating areas

- There are 2 children per table, one on each end.
- The children will have their own designated spot with identifying features such as their picture, name tag or symbol depending on the room they attend. This will help to ensure that they are not coming in contact with one another through surface transmissions, well providing a fun and educational way to learn names, shapes, colours and so on.
- Disposable cups, plates and bowls will also be used to prevent possible spread of illness

to other areas in the centre through transportation to and from the kitchen.
-Serving dishes and utensils for snack and lunch will be handled by a designated staff member each snack or meal to ensure multiple people aren't coming into contact.

Craft areas

-The children will be provided with their own containers of art supplies. When crafts are planned they will be given all the materials they need individually.
-Just as in the eating area the children will have their own designated spot with identifying features.
-The children will still be able to enjoy an array of sensory activities such as finger painting, water play, playdough etc. As they will be provided their own sensory bins and all the supplies, they require to express their creativity.
-Art projects will still be able to come home. Once projects are completed, the children's art will be placed into take home bags that will be sent home periodically. If families prefer things from the centre not enter their home we will display their child's art on the class bulletin boards.

Fine motor

-The children will have access to puzzles, tabletop games and activities in the same location as their craft area with their designated spot being their craft space.

Free play area

-The free play area within the classroom has been made large enough for children to play freely in their own space without physically coming into direct contact with one another. The children will have access to an array of toys that must be thoroughly sanitized in-between children.

Nap/rest areas

-As always, the children will have their own crib or cot that only they use. With their name on or above their bed.
-Cribs and cots must be sanitized after each use and sheets and blankets will be laundered after each use.

Restrooms and diapering areas

-Diapering areas must be thoroughly sanitized after each use. This includes but is not limited to the change table, changing pads, sink, taps and paper towel dispensers
-Washrooms will be sanitized in between each classes use of the designated facilities. This includes but is not limited to the change table, changing pads, toilets, stall doors, sinks, taps and paper towel dispensers.

Drop off and pick up

Drop off

- Outside the building and in the main entrance parents/guardians will wait at designated social distancing markers.
- Once at the designated screening point a note taker will ask a panel of screening questions, that indicate a fail or pass to be admitted into the centre. After the screening questions a 2nd screener in full PPE temperature reading of 37.7 C or less will allow a child to attend childcare.
- Once a child is admitted to care, they will be escorted to a designated washing area where their hands will be thoroughly cleaned before entering the program.

Pick up

- Outside the building and in the main entrance parents/guardians will wait at designated social distancing markers.
- The note taker will inform the assigned chaperone of which child is being picked up. The chaperone will then retrieve and escort the child(ren) to their parent/guardian

All of the information contained within this policy was received by Hastings County and Hastings Prince Edward Public Health Unit with consultation from surrounding Public Health Units. All precautions and guidelines follow all direction given by our local medical officer of health.