



COVID-19 Protocols

Legislative Authority

Leeds, Grenville & Lanark District Health Unit

Issue Date: June 2020
Revision Date: October 2021

Protocol:

Cleaning and Disinfecting

Background:

Cleaning and disinfecting objects and surfaces that a child comes in contact with, including floors, is one of the most important steps in reducing the spread of infectious diseases including COVID-19 among children and child care staff. From what is currently understood about COVID-19, commonly used cleaners and disinfectants are effective against the virus that causes COVID-19.

Policy:

It is the policy of The Children's Centre to maintain a high standard of cleaning and disinfection of the child care setting to control the spread of infectious disease including COVID-19 among children, staff and visitors. The Children's Centre will maintain their routine cleaning and disinfection schedules, providing enhanced cleaning and disinfection of high-touch surfaces and toys.

Definitions:

Cleaning: Using soap/detergent, water, and mechanical action (e.g., scrubbing) to remove visible dirt. Cleaning physically removes rather than kills microorganisms. Cleaning must be done prior to disinfecting. After cleaning an object, it is necessary to rinse with clean water to ensure detergent film is removed.

- There are three steps to the cleaning process: wash, rinse and dry.
- Cleaning tools include laundered cloths, mops, and brooms.
- **Disinfecting:** Disinfection, a process completed after cleaning, is the process of killing most disease-causing microorganisms on objects using chemical solutions.
 - Selection of Disinfectants:
 - Particular attention should be paid to appropriate surfaces, contact time (must be achievable), dilution, material compatibility, shelf-life, storage, first aid, and PPE.
 - Follow manufacturer's instructions and Safety Data Sheet requirements for proper use of cleaning and disinfecting products.

General Criteria:

The Children's Centre uses Oxivir Tb as an all-purpose cleaner and BIO-SCRUB and/or Safeguard as a hand sanitizer/disinfectant. We also use Lysol wipes and/or spray for disinfection.

Staff must check product expiry dates and follow manufacturer's instructions on the MSDS located in the location of MSDS.

- Staff will respect contact time for the disinfectant to kill germs.
- Cleaning and disinfecting supplies are stored in locations of cleaning supplies where they are out of reach of children and labelled.
- Safety Data Sheets (SDS) that are up to date and stored in custodial room.
- Each childcare room and washroom should have its own designated cleaner and disinfectant.
- Use cleaning cloths for cleaning and disinfecting.

Procedures:

Cleaning and Disinfection Procedures:

Child care centres should be cleaned frequently. Cleaning plus disinfection twice daily is suggested at minimum however more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soilage.

Maintain routine cleaning and provide enhanced cleaning and disinfection of high-touch surfaces and mouthed toys. Follow disinfection schedules.

- The beginning and end of the day have added time for the cleaning and disinfection of toys, furniture and frequently touched things in each child care room. Be sure cleaning is completed by the end of each shift.
- Frequently touched surfaces include but are not limited to washrooms (for example toilet fixtures, faucets), eating areas (for example, tables, sinks, countertops), doorknobs, light switches, handles, desks, phones, keyboards, touch screens, push buttons, handrails ,computers, photocopiers, sports equipment, water fountain knobs.
 - Further information on routine cleaning requirements and scheduling recommendations can be found in *Leeds, Grenville and Lanark District Health Unit: Preventing and Managing Illnesses in Manual*,

https://healthunit.org/wp-content/uploads/Infection_Control_Childcare_Manual.pdf

Record Keeping

The Children's Centre will maintain a cleaning and disinfecting schedule for each cohort, washroom, kitchen, common areas, indoor/outdoor play areas, and other areas accessed by the program.

- Staff will complete a cleaning and disinfection log to track and demonstrate cleaning schedules (indoor and outdoor).
 - Designated staff will record the date, time, the initials of the staff responsible, etc.

Enhanced Cleaning Frequencies:

- Toys and equipment are designated for each room/cohort.
 - If shared, toys and equipment must be cleaned and disinfected at a minimum between cohorts.
 - Place used toys (art, games, toys, etc.) in a designated area to be disinfected.
- Toys will be cleaned prior to disinfection if not going in the commercial dishwasher for disinfection. Any mouthed toys are cleaned and disinfected immediately after each use.
 - After disinfecting, rinse with potable water if not using dishwasher for disinfection prior to returning to play.
- Soft fabric toys and items that cannot tolerate regular cleaning and disinfection must not be used.

Frequently touched areas:

High touch surfaces such as light switches, doorknobs and handles, handrails, water fountain knobs, tabletops, electronic devices, etc. are cleaned and disinfected at least twice per day and more often as needed.

- Tables must be washed before and after use for any activity including art, games and meals.
- Children and staff chairs will be sanitized and wiped down at the end of each day.
- If liquids can be withstood, disinfect high-touch electronic devices (keyboards, tablets, smartboards) with alcohol or disinfectant wipes.
- Staff will adhere to diapering and toileting procedures as guided by the Lanark, Leeds and Grenville District Health Unit, and ensure proper cleaning and disinfecting between diaper change or toileting processes.
 - https://healthunit.org/wp-content/uploads/Toileting_Poster.pdf
 - https://healthunit.org/wp-content/uploads/Diapering_Poster.pdf
- Items that cannot be properly cleaned and disinfected must not be used by children in the facility.
- Cots and cribs must be disinfected after each use.
- All items used by a symptomatic individual are cleaned and disinfected.
 - If the items cannot be cleaned (e.g., books), remove them and store in a sealed container for a minimum of 3 days.
- Toilets and faucets must be wiped down with disinfectant a minimum of twice daily
- The beginning and end of the day have added time for the cleaning and disinfection of toys, furniture, and frequently touched things in each program's room.
- All common areas must be disinfected between cohorts of children.
 - 10 minutes of drying time will be allowed between cohorts.

Food:

Tables used for eating and preparation will be cleaned, rinsed, and then sanitized before and after each meal or snack.

All equipment, work surface, floors and eating utensils must be cleaned and disinfected to prevent illness from food.

- All dishes must be washed, rinsed, and disinfected using one of the following methods:
 - Commercial dishwasher
 - Two or three compartment sink.

Linens:

Towels, face cloths, etc. will be laundered after every use.

- Bedding, and stuffed animals will be stored in labeled Ziplock bags between use and laundered weekly or when soiled.
- All child care laundry will be washed on a warm to hot cycle with detergent.
- Disinfect beds, cots and cribs after each use

Carpets, Floors and Floor Mats:

- All hard floors will be swept and mopped with a sanitizing detergent each day.
- Carpets/floor mats will be cleaned as often as necessary and promptly if a spill occurs.
- Shampoo/steam clean carpets in infant rooms every 3 months
- Shampoo/steam carpets in non-infant rooms every 6 months.
- If carpets do not appear to be adequately cleaned, re-cleaning is necessary, or replacement must be considered.
- Promptly remove and replace floor mats that cannot be adequately cleaned and disinfected.

For further information on cleaning and disinfection, visit Public Health Ontario's website at <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet-covid-19-environmental-cleaning.pdf?la=en>

Toys and Activities

- As items are used (art, games, toys etc.) place in a bin to be cleaned and disinfected by staff member.
- Any mouthed items are placed in a bin to be cleaned and disinfected immediately by the Staff.
- Toys and equipment are cleaned and disinfected at a minimum in each cohort, after lunch and at the end of the day.
- Toys/equipment that cannot be cleaned and disinfected will be avoided, and when possible, placed out of reach.
- There should be designated toys and equipment (e.g., balls, loose equipment) for each room or group of children
- Planning activities for smaller groups when using shared objects or toys
- 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.
- Tables will be washed before and after use for any activity including art, games, and meals.
- Singing is permitted indoors; masking is encouraged but not required for singing indoors if a minimum of two metres can be maintained between cohorts and as much distance maintained within a cohort.
- Community playgrounds will not be used at this time.

Items from Home

- Children are discouraged from bringing items from home.

Food Provision

- There will be no self-serving of food or food sharing.
- Children must not share food or feeding utensils.
- Meals will be served in individual portions, using utensils.
- Staff will perform hand hygiene before preparing food, and as needed during preparation.
- Staff will perform hand hygiene before serving food.
- Children will wash hands before meals and snacks.
- Families are not permitted to bring food to the facility with the purpose of sharing with others. (e.g., cookies, cupcakes)
- No outside food will be brought in except where required for menus.

Sunscreen

Children must bring their own sunscreen and it should not be shared. Staff may provide assistance but must wash their hands before and after applying sunscreen or wear gloves for each application.

Hand Hygiene:

Appropriate hand hygiene and respiratory etiquette are among the most important protective strategies. Focus should be on regular hand hygiene to reduce the risk of infection related to high touch surfaces. Assist the children on appropriate hand hygiene and respiratory etiquette, including the use of alcohol-based hand rub and reinforcing its use.

Anyone entering the facility must perform hand hygiene upon entering.

- Cohort staff to assist child with hand hygiene upon entering the program.
- Staff will wash hands frequently throughout the day (setting an example of proper handwashing for the children)
- Wash hands for at least 20 seconds with soap and warm water
 - at the start of shifts
 - before eating or drinking
 - before preparing food
 - before and after putting on PPE
 - after cleaning up meal and snack times
 - after touching shared items
 - before and after playing games, art activities and going outside
 - after going outside
 - after using the washroom, changing diapers, or helping others with toileting
 - after handling garbage, and
 - before leaving your workspace.
- Handwashing signs have been posted. Demonstrate to children the proper procedure and assist them if needed.
- Sneeze and cough into your sleeve.
- If you use a tissue, discard immediately and wash your hands afterward.
- Avoid touching your eyes, nose or mouth.
- Avoid high-touch areas, where possible, or ensure you clean your hands after.

Attendance Records:

In addition to attendance record for all children receiving care we are responsible for maintaining daily records of anyone entering the Child Care Centre. These records must include all individuals who enter the premises (e.g., parents and guardians dropping off children, cleaners, people doing maintenance work, people providing supports for children with special needs, those delivering food).

- Records are to be kept on the premises and along with name and contact information much include approximate time of arrival and time of departure, and screening completion for each individual.
- Records must be kept up to date and available to facilitate contact tracing in the event of a confirmed COVID-10 case or outbreak (e.g., records to be made available to public health within 25 hours of a confirmed case or outbreak).

Coronavirus Disease 2019 (COVID-19)

How to wash your hands



Wash hands for at least 15 seconds

1

Wet hands with warm water.

2

Apply soap.

3

Lather soap and rub hands palm to palm.

4

Rub in between and around fingers.

5

Rub back of each hand with palm of other hand.

6

Rub fingertips of each hand in opposite palm.

7

Rub each thumb clasped in opposite hand.

8

Rinse thoroughly under running water.

9

Pat hands dry with paper towel.

10

Turn off water using paper towel.

11

Your hands are now clean.

How to use hand sanitizer



Rub hands for
at least 15 seconds

1



Apply 1 to 2 pumps
of product to palms
of dry hands.

2



Rub hands together,
palm to palm.

3



Rub in between and
around fingers.

4



Rub back of each hand
with palm of other
hand.

5



Rub fingertips of each
hand in opposite palm.

6



Rub each thumb
clasped in opposite
hand.

7



Rub hands until
product is dry. Do not
use paper towels.

8



Once dry, your hands
are clean.

Sources:

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Provincial Infectious Diseases Advisory Committee. Best practices for hand hygiene in all health care settings [Internet]. 4th ed. Toronto, ON: Queen's Printer for Ontario; 2014. Available from: <https://www.publichealthontario.ca/-/media/documents/bp-hand-hygiene.pdf?ia=en>

The information in this document is current as of March 16, 2020.

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Space set-up and Physical Distancing

Physical distancing of 2 meters will be maintained whenever possible.

- Staff arrival and departure,
- Child drop off and pick ups,
- Between cohorts (including outdoor play), and
- Within cohorts.
- Staff will avoid getting close to faces of children whenever possible (e.g. activities that may result in droplet spread).
 - Cohorts will have scheduled times in common areas (e.g., gyms, outdoor playgrounds).
- Physical distancing is promoted within cohorts.
 - Spreading children out.
 - Incorporating more individual activities or activities that encourage more space between children.
 - More time will be spent playing outdoors in order to facilitate physical distancing. Where the outdoor play area is large enough to accommodate multiple groups, the groups must be separate by at least two metres.
 - If play structures are to be used by more than one group, the structures should be used by one group at a time.
 - Designate toys and equipment (e.g., balls, loose equipment) for each room group. Where toys and equipment are shared, they should be cleaned and disinfected prior to being shared.
 - Only alternating seats will be used in strollers.
 - If practical and safe, the number of people allowed in the same room will be limited.

Sleep/Nap time:

Physical distance will be maintained (minimum 18 inches) between cots

- Where space is limited, children will be placed head-to-toe, or toe-to-toe.
- Educators are encouraged to allow children to self-regulate as much as possible.

Meal and Snack Time:

Physical distancing will be maintained at snacks and meals by spreading children out and staggering snack and mealtimes when possible. Children must not share food or feeding utensils.

Gyms

- When using gymnasiums for physical activity:
 - Children and staff should not be engaged in moderate to vigorous physical activity indoors. When moderate or vigorous physical activity takes place outdoors, children and staff should maintain physical distance.
 - Limit the use of shared equipment. Shared equipment should be disinfected regularly and proper hand hygiene before and after participating in physical activity and equipment use.

Outdoor Space

In shared outdoor space, mixing between groups and any other individuals outside of the group is permitted, though physical distancing should be encouraged between groups as much as possible.

Drop-off and Pick-up:

- All entrances should have alcohol-based hand rub with a concentration of 60-90% available with signage demonstrating appropriate use. It should be accessible to children and children should be supervised when using the hand rub.
- Personal belongings should be labeled and kept in the child's cubby/designated space (e.g., backpack, hats, mittens, etc.). While appropriate clothing for the weather (e.g., jackets, hats, sunscreens) should continue to come with the child other personal belongings (e.g., toys) should be minimized.
- For screening an individual at the Centre and escorting children to the program, appropriate precautions including. Maintaining a distance of at least 2 metres from those being screened, or being separated by a physical barrier such as plexiglass.

Maximum Capacity of Building:

More than one child care program can be offered per building as long as they maintain separation between groups and/or programs and follow all health and safety requirements that apply to those programs.

Staff and Shift Scheduling:

Movement of Supervisor and/ or designates, staff and students on educational placement between child care locations and between licensed groups is permitted. Reducing the movement of staff and placement students where possible is encouraged to minimize potential for transmission.

Visitors and Events:

- Field trips are permitted. Children should be cohorted throughout the duration of the trip. Health and safety requirements set out in the guidelines and regulations (e.g., masking, eye protection) and of the place being visited would continue to apply. Keeping a daily accurate record of individuals attending field trips (name, contact information, time of arrival/departure, transportation, location visited) is required to facilitate contact tracing.
- Group events and meetings (e.g., staff meetings, tours, interviews) will be rescheduled, or done virtually, or over the phone. Events may be held outdoors if proper distancing can be maintained.
- There should be no non-essential visitors to the program. Essential staff are permitted into the building, if staff are not working their shift, they should not be on site.
- All visitors entering the daycare will need to be screened this will be done by the Supervisor or designated staff to replace the Supervisor. The visitors will need to fill in their information in the visitor's logbook.
- Special needs services will continue where services are essential and necessary.

Recommendations for the use of Personal Protective Equipment (PPE) in Child Care Centres

For non-healthcare settings the use of PPE should be based on a risk assessment of the task, the individual and environment.

Considerations for PPE Use:

- Staff will wash hands before putting on PPE and after removal.
- Staff will follow guidelines when removing PPE.
- Staff will not reuse PPE.
- PPE will be promptly discarded after use.
- Staff will use masks when unable to practice physical distancing of 6 feet.
- Staff will remember not to touch their face with gloved hands.

NOTE: N95 respirators are not indicated for use in childcare settings.

PPE Available for Staff Use:

Masks

- Gloves
- Face shield/Goggles
- Please advise the Supervisor/Director when PPE supplies are in need of replacement.

Location of PPE:

- St. John Bosco Site: Staff Room and cupboards in hallway
- Ange Gabriel Site: Office
- J.L. Jordan Site: Filing cabinet
- St. Francis Site: Filing cabinet

Protocol for Use:

Screener

- Mask/face shield
- Gloves if taking temperatures, otherwise optional

Cleaning

- Gloves
- Face shield/mask and gloves if cleaning and disinfecting blood or bodily fluids.

Illness

- Mask/ face shield
 - Children showing symptoms of illness may be provided with a mask to wear if tolerated and over the age of two.
- Gloves (optional)
 - If not wearing gloves, staff will practice hand washing frequently.

Expectations:

Adults

- All child care staff and students are required to wear medical masks (e.g. surgical/procedural) while inside the childcare centre, including hallways and staff rooms (unless eating - but times with the masks off should be limited and physical distance should be maintained)
- Eye protection (e.g., face shield or goggles) is required for individuals working in close contact with children who are not wearing face protection (children younger than Grade 1). Eye protection is not required for the individuals working with children who wear face protection (children Grade 1 and above). The use of medical masks and eye protection is for the safety of child care staff and the children in their care. This is especially important when working with individuals who may not be wearing face coverings (i.e., young children under two).
- All childcare staff are required to wear medical masks outdoors when 2 metres cannot be maintained by the Ministry. According to the Leeds & Grenville Health Unit masks are required outdoors presently.
- All other adults (parents/guardians and visitors) are required to wear a face covering or non-medical mask while inside the premises.

Children

- All children Kindergarten and above are required to wear a non-medical mask or face covering provided by the by parents/guardians while inside a childcare setting including hallways.
- All children Kindergarten and above are required to wear a non-medical mask or face covering outdoors when a distance of 2 metres cannot be maintained. All younger children are also encouraged to do this, but it is not required.
- Parents/guardian are responsible for providing a non-medical or cloth mask each and they will require a way for their child/ren to store their masks when not in use.

Exceptions:

There are also exceptions to wearing medical masks and eye protection which include medical conditions that make it difficult to wear a medical mask or eye protection (e.g., difficulty breathing, low vision), a cognitive condition or disability that prevents wearing a medical mask, and hearing impairments or when communicating with a person who is hearing impaired and where the ability to see the mouth is essential for communication. Clear mask options are available to meet some of the above needs. If there are medical exceptions to medical mask wearing, the supervisor must document this.

Training: Proper use of PPE

- Staff are trained on and can demonstrate proper donning and removal of PPE. Please see next page
- Since it may be difficult to put on a mask and eye protection properly (i.e., without contamination) after having removed them, given the frequent and spontaneous need for close interactions with young children in a child care setting proper hand hygiene is important.
- Masks should be replaced when they become damp or visibly soiled.

Coronavirus Disease 2019 (COVID-19)

Non-medical Masks and Face Coverings

Wearing non-medical masks or face coverings may be an added way to protect others around you, particularly where physical distancing may be challenging (e.g., on public transit, while shopping). Here are some tips on what masks and face coverings do, when you could consider using one, and how to wear it safely.

If you or a household member has symptoms of, or is suspected to have COVID-19, follow the [guidance for self-isolation](#).

Why use a non-medical mask or face covering

- COVID-19 can be spread from infected individuals who have a few or no symptoms and are unaware that they may be infected.
- A non-medical mask or face covering is intended to protect others from your infectious droplets.
- It may also prevent other people's droplets from landing in your mouth or nose.
- Consider wearing one in areas where community transmission of COVID-19 is occurring and where [physical distancing](#) may not be possible, e.g., public transit, smaller grocery stores or pharmacies.



What kind of non-medical mask or face covering should I use

- No specific design or material is known to be better than others.
- The [Public Health Agency of Canada](#) provides guidance on how to make cloth masks.
- Make sure each cloth mask is made of at least two layers and can be laundered multiple times without losing shape or deteriorating.
- Don't offer to children under the age of two, or individuals who are unable to wear it e.g., medical condition, or unable to wear/remove properly.



How to wear a non-medical mask or face covering

- Clean your hands with [soap and water or alcohol-based hand sanitizer](#) for at least 15 seconds.
- Make sure it fits snugly (no gaps between mask and face) to cover the nose and mouth, i.e., from below the eyes to around the chin.
- Secure it with ties or ear loops so that it is comfortable, and doesn't hinder breathing and vision.
- Avoid touching the front of the mask or face covering while wearing it – if you do, clean your hands immediately.
- Wear it as long as it is comfortable, and remove when it becomes soiled, damp, damaged or difficult to breathe through.
- Do not share your mask with others.



How to remove and care for non-medical masks or face coverings that can be cleaned

- Remove carefully by grasping the straps only and place directly in the laundry.
- If you have to use it again before washing, ensure that the front of the mask folds in on itself to avoid touching the front. Store it in its own bag, e.g., paper bag.
- Immediately clean your hands with soap and water or alcohol-based hand sanitizer for at least 15 seconds.
- Machine wash with hot water and with regular detergent, which should kill any viruses.
- The [Ministry of Health](#) has more information on the use and care of non-medical masks and face coverings.

Note

- Non-medical masks and face coverings may not provide complete protection against viral particles, especially if they fit loosely.
- As they are not tested to recognized standards, their effectiveness will vary.

The information in this document is current as of May 21, 2020

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Coronavirus Disease 2019 (COVID-19)

How to self-monitor

Follow the advice that you have received from your health care provider.
If you have questions, or you start to feel worse, contact your health care provider, Telehealth (1-866-797-0000) or your public health unit.

Monitor for symptoms for 14 days after exposure



Fever



Cough



Difficulty breathing

Avoid public spaces

- Avoid crowded public spaces and places where you cannot easily separate yourself from others if you become ill.

What to do if you develop these or any other symptoms

- Self-isolate immediately and contact your public health unit and your health care provider.
- To self-isolate you will need:
 - Instructions on [how to self-isolate](#)
 - Soap, water and/or alcohol-based hand sanitizer to clean your hands
- When you visit your health care provider, avoid using public transportation such as subways, taxis and shared rides. If unavoidable, wear a mask and keep a two metre distance from others or use the back seat if in a car.

Contact your public health unit:

Learn about the virus

COVID-19 is a new virus. It spreads by respiratory droplets of an infected person to others with whom they have close contact such as people who live in the same household or provide care.

You can also access up to date information on COVID-19 on the Ontario Ministry of Health's website: ontario.ca/coronavirus

Screening:

All individuals, including children, parents/guardians, and staff must complete the online COVID-19 school and childcare screening app including daily temperature checks prior to entry; upon arrival at the child care setting.

Screening Reception Area

- The facility will use entrance as the single point entry point where screening will take place.
- The Children's Centre will use a designated screener.
 - Screeners are trained on the screening procedure.
- The screener will complete the COVID-19 screening questionnaire with staff, parents, and essential visitors if they have not completed the online app. The person or child's temperature will be taken if not done prior to arrival.
 - Thermometers will not be used between children/staff without disinfecting between use.
- The screening area has posted signage identifying the screening process and meets the following criteria:
 - A dedicated screening area/table (if space permits) at location.
 - Space allows for a minimum of 2 metres distance between screener and the person being screened, or screener must wear personal protective equipment (PPE) i.e., mask/face shield and gloves
 - Access to hand sanitizer.
 - Signage regarding proper hand hygiene, respiratory etiquette, and proper mask use are to be displayed at the screening area.
 - Signage prompting staff, parents/guardians, and essential visitors to self-identify if they or their children have signs and symptoms of COVID-19.
- Screener will complete a logbook of all individuals entering the facility logging the following:
 - Name
 - Contact Information
 - Time of arrival/departure
 - Screening
 - The logbook will be kept up to date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak.
- Deny entry to any individual who fails the screening procedure. Any individual who fails the screening process will be advised to contact the Leeds, Grenville and Lanark District Health Unit for direction or their family Doctor.
- Entry into The Children's Centre past the screening area, must be limited only to staff, children, and essential visitors.
- Children/staff who are ill are not permitted to enter the childcare facility.

Arrivals and Departures:

- Physical distancing practices will be adhered to during drop off and pick up times.

Staff Arrival:

1. Before arrival complete the [COVID-19 School and Child Care Screening Tool](#) and email a screen shot of the completed screen to the office.
2. Keep a physical distance of 6 feet from other staff members.
 - Enter the centre wearing a mask (it is recommended to replace the mask you wear into the Centre with a new mask once inside the building)
 - Avoid physical contact in shared areas (entrance and hallway)
 - Spray hands with sanitizer.
 - If you have not checked your temperature before arriving, please do so at the door.
3. Remove outerwear. Keep all belongings in one place.
4. Wash hands.
5. Report to the room you will be working in.
 - Remain in this room. Do not enter other childcare rooms.
 - Supply/replacement staff should be assigned to specific cohorts
6. When screening is completed, the Screener will clean the door handle, buzzer/bell, entryway and initial on the cleaning checklist.

Staff Dismissal:

1. Wash your hands before leaving the childcare room.
2. Collect your belongings and outerwear.
3. Disinfect the area you have used for your belongings.
4. Leave the building without visiting other rooms.

Arrival of Children:

1. Parents may buzzer/phone to notify staff of arrival. Screener will answer the door and meet parents outside at the front door of the Centre.
2. Parents are to keep a physical distance of 6 feet from other parents/persons.
3. Parents will proceed to the screening area with child(ren) and the screener will sanitize the children's hands.
4. Parents will show a completed screen to the Screener or email to the office before arrival.
5. Wipe down any used door surfaces.
6. Staff will bring the child to their childcare room.
7. Staff in the childcare room will ask/assist the child to wash their hands upon entering the room.
8. Staff member will bring the child to their cubby to take off outerwear.
9. Ask/assist the child to wash their hands upon entering the room.
10. Children should be monitored for signs and symptoms of COVID-19.

Departure of Children:

1. Parents will use the buzzer or phone to notify staff when they have arrived at entrance.
2. Staff members will retrieve the child(ren), dress them and bring to their parents.
3. Remind parents to keep a physical distance of 6 feet from other parents/persons while waiting for their child. Staff members will identify them.
4. Wash and disinfect hands before continuing work.
5. When screening is completed, the Screener will clean the door handle, buzzer/bell, entryway and initial the cleaning checklist.

Screening for Symptoms

Child care centre staff, placement students, and children with any new or worsening symptoms of Covid-19, as indicated in [COVID-19 School and Child Care Screening Tool](#), must stay home until:

- They receive a negative COVID-19 test result.
- They receive an alternative diagnosis by a health care professional, or
- It has been 10 days since their symptom onset, and they are feeling better.

In addition, if any household members are experiencing any new COVID-19 symptoms and/or are waiting for COVID-19 tests results after experiencing symptoms, the child, the child care staff or placement student must not attend child care.

Child Care Centre

All child care staff, placement students will receive a link to the COVID-19 School and Child Care Screening Tool and must complete and pass the COVID-19 self screen, screen shot the results and email to the Centre.

Any individuals who do not pass the online screening procedures will be asked to return home and self-isolate.

Children

Parents and guardians are to screen their children for symptoms of illness everyday using the [COVID-19 School and Child Care Screening Tool](#). The parents or guardians will provide proof of completing the screening tool by showing a screen shot or emailing it to the Centre.

Any parent or guardian who has not completed the screening prior to arrival will be required to complete screening prior to entry.

Any child that does not pass the online screening will be asked to return home and self-isolate.

General Screening

For screening an individual at the Centre and escorting children to the program the screener should take appropriate precautions including, maintaining a distance of 2 metre from those screened and providing alcohol-based hand rub at all screening locations.

Attendance Records

In addition to attendance records for children the Centre is responsible for maintaining daily records of anyone entering the building. This record is located at the entrance and will be filled out by any individuals who enter the premises. Records must be kept up to date to facilitate contact tracing in the event of a confirmed case or outbreak.

Monitoring and Responding to Reports of COVID-19 Symptoms in a Child Care Setting

Persons who test positive for COVID-19 should follow the guidance of their local public health Unit and health care professional regarding direction for isolation and returning to the childcare setting. The individual cannot return until cleared by the public health unit. Note: individuals do not need to provide a medical note or proof of negative result to enter the program.

If an individual becomes sick while at the Centre:

- The ill individual must be immediately separated from others, in a separate room if possible. Parents/guardians must be contacted for pick-up of the symptomatic children.
- Anyone providing care for the ill individuals should maintain as much physical distance as possible. If physical distance is impossible staff should consider additional PPE (i.e., gloves gown)
- The person caring for the individual must wear a medical mask and eye protection.
 - If tolerated, the ill individual should wear a medical mask
- Hand hygiene and respiratory etiquette should be practiced while the individual waits for pick up.
- Cleaning of the area the separated individual was in and the other areas of the setting where the ill individual was should be conducted as soon as reasonably possible after the individual leaves.
- The parent or guardian of the ill individual should be advised to use the online self assessment tool and follow instructions which may include seeking medical advice and/or going for COVID-19 testing.
- Communication protocols to update and inform the necessary people in the childcare community while maintaining confidentiality of the ill individual should be initiated. (e.g., contact the school, service system manager and/or ministry through a Serious Occurrence Report if applicable)
- Regular child care operation can continue unless directed other wise by the public health unit. An ill individual who has a known alternative diagnosis provided by a health care professional may return to child care if they do not have a fever and their symptoms have been improving for at least 24 hours.

Reporting and Serious Occurrence Reporting

Child Care licensees have a duty to report a suspected or confirmed case of COVID-19 to the medical officer of health.

Where a child, staff, student, has a confirmed case of COVID-19 (i.e.,) a positive COVID-19 test result the licensee must:

- Report this as a Serious Occurrence
- Report to the local public health unit and provide materials (e.g., daily attendance records to public health to support case management and contact tracing.



COVID-19 SCREENING QUESTIONS

Do you or your child or any member of your household have any of the following symptoms?

- Fever (37.8C Or Higher)
- New/Worsening Cough
- Shortness of Breath
- Sore Throat
- Difficulty Swallowing
- Loss of Taste or Smell
- Nausea/Vomiting, Diarrhea, Abdominal Pain
- Runny Nose, or Nasal Congestion (In the absence of underlying reasons such as Seasonal Allergies, Nasal Drip, Etc.)
- Unexplained Fatigue/Malaise/Myalgia
- Chills
- Headache
- Conjunctivitis (Pink Eye)
- Lethargy/Difficulty Feeding in Infants

Have you had contact with anyone with acute respiratory illness or who travelled outside of Canada in the last 14 days?

Have you had close contact with someone who has been diagnosed with COVID-19?

If you answered YES to any of these DO NOT enter.

Your child cannot be permitted to enter to ensure the safety of everyone.
Contact your health care provider as well as Public Health at **905-546-9848, option 2.**

Dear Parents

Please be advised that there has been a confirmed case of COVID-19 in your child's program. The children and the staff from this program will be excluded from the Centre for 14 days. If symptoms develop during the children and staff exclusions, they should be tested or extend exclusion until 14 days after onset of symptoms.



**WE HAVE A
COVID-19 OUTBREAK**

**DO NOT ENTER
IF YOU HAVE SYMPTOMS**



Do your part to **STOP** the spread of illness:

- Screen for COVID-19 before entering
- Clean your hands frequently
- Keep your distance from others
- Follow the child care setting's instructions