

## NEWSTEAD ACADEMY CHILD CARE

# COVID-19 RECOVERY PERIOD POLICIES & PROCEDURES

## Introduction

According to the World Health Organization, “coronaviruses are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV)”. COVID-19 is an infectious respiratory disease caused by the SARS-CoV-2 virus. Some key factors for increased risk of COVID-19 transmissions are: close proximity, longer exposure, crowded and/or poorly ventilated spaces, and forceful exhalation during activities such as vigorous exercising and singing.

## Purpose

Depending on individual circumstances, the severity of symptoms can be vastly different from one person to another, with some being asymptomatic and with some facing fatal consequences. Newstead Academy Child Care (NACC) recognizes the need for heightened measures in preventing the spread of COVID-19 and aims to protect staff, children and their families from contracting this disease.

The purpose of this policy and procedure is to provide guidelines on infectious disease control within NACC and to provide a response plan in case of a COVID-19 outbreak. It has been developed in accordance with the [COVID-19 Integrated Testing & Case, Contact and Outbreak Management Interim Guidance: Omicron Surge](#) published by the Ministry of Health.

## Scope

The measures described in this document will be practiced and updated until the Ministry of Education and York Region Public Health provide the instructions to resume the normal operating procedures prior to COVID-19. All NACC operators and employees must adhere to regulations set forth by these authorities and practice prevention & control measures written in this policy.

## Responsibilities

### 1. Directors

- a. Keep up-to-date with regulations changes and other instructions from Ministry of Education and York Region Public Health
- b. Develop, revise and implement all necessary policies and procedures
- c. Implement recommendations from York Region Public Health
- d. Make executive operational decisions based on changes to the COVID-19 development, including but not limited to determining number of programs being opened and number of children in each cohort
- e. Monitor the centre's day-to-day operation and identify areas of risk in regards to infectious disease control; collaborate with supervisor(s) to develop amendments as needed
- f. Provide training to supervisor(s) and staff as needed
- g. Inform staff and parents in the event of declaring an outbreak as per Public Health instructions

## 2. Supervisor

- a. Maintain communication with director in regards to COVID-19 related requirements
- b. Enforce the implementation of policies and procedures set out for infectious disease control and documentation of relevant information
- c. Report serious occurrence(s) to the Ministry of Education and WSIB (when applicable), as well as inform families in the event of a centre-wide shutdown due to an outbreak
- d. Assign a health and safety representative amongst the staff, collaborate on providing the most updated resources and information in regards to COVID-19 preventative measures, financial aid, mental health resources etc.
- e. Train and remind staff of the COVID-19 policies and procedures, as well as the proactive strategies in preventing the transmission of this disease
- f. Maintain an office communication log book for staff to read important information (each staff should initial as acknowledgement after reading)

## 3. Staff

- a. Review WSIB information on COVID-19
- b. Adhere to all regulations, as well as measures set out within this policy
- c. Attend all training session to stay informed
- d. Report all violations against the COVID-19 regulations and policies
- e. Report to the supervisor immediately at the first signs of developing COVID-19 symptoms and/or feeling unwell without an observable cause
- f. Role-model health & safety measures for children to learn how to prevent becoming ill
- g. After drop-off hours, call the parents of each child with an unplanned absence to find out the cause and determine if it is illness and/or COVID-19 related

- h. Maintain a classroom communication log book and mark down any information that needs to be shared amongst staff

#### 4. Parents

- a. Recommended: Complete electronic daily screening on behalf of child(ren) prior to dropping off
- b. Closely monitor child's well-being, keeping in mind the symptoms of COVID-19
- c. Seek COVID-19 testing for self or for anyone within the household at first signs and symptoms; and report this information to the centre supervisor as soon as possible
- d. Keep child home if he/she experiences one or more COVID-19 symptoms not related to vaccination, allergies or other known medical cause; provide an attestation for returning to care after child had a leave of absence due to illness
- e. Help maintain consistency at home in regards to hand-washing, disinfecting, and other preventative measures taken against the disease

## Policy & Procedures

### Sanitization of the Space, Toys & Equipment

To minimize the spread of COVID-19, enhanced cleaning and disinfection procedure must be put in place. Zochlor (DIN 00764914) is the approved disinfectant to use for all sanitization purposes within the centre, the concentration and contact time will be adjusted according to MIFU for use in the specific situations. Refer to York Region Public Health presentation "COVID-19 Guidance for Child Care" for current requirements.

#### Procedure

##### *Records of Cleaning Schedule*

- Each program room must maintain a daily classroom cleaning log and a daily washroom cleaning log, which will be filed and kept for one year; the cleaning tasks will be shared amongst the room partners
- Kitchen staff is responsible to maintain a daily kitchen cleaning log, which will be filed and kept for one year

##### *Handling Cleaning Chemicals*

- All cleaning products must be out of reach of children, labelled, and must have up-to-date Safety Data Sheets (SDS) stored in the WHMIS binder on site.
- One opening staff will prepare a fresh batch of Zochlor solution, divide it into labelled containers and distribute them to the door of each program room
- One closing staff will gather all the emptied labelled containers of Zochlor at the end of the day from the door of each program room
- Each program room should have their own designated and labelled containers of Zochlor, one for use within the classroom and one for use specifically in the washroom
- Contact time of the Zochlor solution for regular disinfecting should be at least one to three minutes before being wiped or rinsed off the surface, and up to 10 minutes at an outbreak

level of concentration for disinfecting surfaces that came in contact with bodily fluids such as blood; staff must supervisor to prevent children from touching and/or licking such surfaces

#### *Washroom*

- All children must wash hands before and after using the toilet
- Staff will pump soap onto each child's hands for washing, as well as turning on and off faucets; minimize creating high-touched areas within the washroom
- Surfaces, including but not limited to toilets, sinks, counters and mirrors, will be disinfected after each washroom routine and when visibly soiled
- The floor will be mopped and disinfected by the cleaning staff on a daily basis, however staff should clean and disinfect as often as necessary

#### *Diapering Stations*

- Staff must wear gloves when changing a child's diaper or soiled clothing, and change gloves in between changing each child.
- Changing stations must be disinfected after each use; always cover the station with fresh changing paper/pad in between use for each child

#### *General Classroom & Common Area*

- Door knobs, light switches, handles, counters and chairs, all open shelves will be disinfected twice daily
- Table tops will be disinfected after each activity
- Common area will be clean and disinfected by cleaning staff on a daily basis, however any visibly soiled area should be cleaned and disinfected immediately

#### *Cots & Bedding*

- The use of home toys should not be allowed; minimize the use of sleep associations to pacifiers, pillow and blanket
- Each cot should be disinfected, and all beddings belonging to the centre should be laundered, on a weekly basis; personal beddings/linens must be sent home for cleaning weekly

#### *Laundry*

- All laundry will be washed by a full cycle in hot water with regular laundry detergent
- Anything soiled by bodily fluids (urine, feces, vomit and blood) needs to be laundered and disinfected separately, or be discarded when necessary
- A separate laundry basket should be used for putting in washed items; the laundry basket for collecting soiled items should be disinfected after each use
- Staff should wear full PPE when handling laundry (anything that belongs to the centre) from an unwell child and/or adult
- Staff shall not be responsible for laundering personal clothing from an unwell child, these garments should be packed securely, placed into the child's cubby, and will be sent home for laundering by parents

#### *Toys, Equipment & Materials*

- All toys will be washed and disinfected using the three-sink method: wash with soap and rinse, soak in disinfectant, rinse thoroughly and dry
- Staff should supervise closely and redirect attempts to mouth toys; any toy that has been in the mouth of a child must be immediately removed from use, then washed and disinfected accordingly

- Clothing, stuffed toys, and any soft materials that are not meant for single-use should not be made available to children
- Smocks used for activities must be laundered after each use; or, for conservation reasons, a smock can be assigned to each child for the day's use before getting laundered
- Toys rotation should not be more frequent one a month, and only do so after they have been thoroughly disinfected
- No cooking or food preparation activities with the children will be allowed until MOE and Public Health announces the return of regular operations for child care centres

#### *Food & Drinks*

- Children should minimize the number of items brought to the centre from home; if parents are sending their child with a water bottle, it must be clearly labelled with the child's name and be taken home for cleaning on a daily basis
- Meals and snacks will be served in individual portions; staff can provide second servings to children with caution not to cause cross-contamination between individual plates (i.e., use one serving utensil per food item and do not touch the utensil onto any plates children eat from
- Unless of a documented dietary/medical need, meals and food containers from home should not be accepted into the centre

## **Attendance/Screening**

For case tracking purposes, it is essential to maintain a clear screening record of all staff, children and visitor entering the centre. The information gathered will be filed and kept for a minimum of 1 year.

#### **Procedure:**

- Parents and staff are recommended to complete a screening through the Edusafe app each morning prior to entering the premises.
- Any person who does not pass the screening or who is exhibiting symptoms of COVID-19 will not be permitted to enter and must self-isolate in accordance with the below Screening Guidance section.

## Screening Guidance

If an individual is symptomatic with **one or more major symptoms** or **two or more other symptoms** (see Table 1 below), the individual must self-isolate (see Table 2) and will not be permitted to enter NACC premises. This policy is in accordance with the current guidelines announced by the Ministry of Health on March 9, 2022.

**If a child or staff member becomes symptomatic while on NACC premises**, NACC will provide the individual with a set of two Rapid Antigen Tests (RATs). If the symptomatic individual tests **negative** on two separate RATs taken 24-48 hours apart, the individual may return to NACC once their symptoms have been improving for 24 hours, or 48 hours in the case of gastrointestinal symptoms.

Note: Your isolation period begins the day after you noticed your symptoms or the day after you received a positive test result – whichever came first. The day you first noticed symptoms or took the test is considered day zero.

Table 1

Major Symptoms	Other Symptoms
<ul style="list-style-type: none"> <li>• Fever/chills</li> <li>• Cough</li> <li>• Shortness of Breath</li> <li>• Decrease of Taste or Smell</li> </ul>	<ul style="list-style-type: none"> <li>• Sore Throat</li> <li>• Headache</li> <li>• Extreme Fatigue</li> <li>• Runny Nose/Nasal Congestion</li> <li>• Muscle Aches/Joint Pain</li> <li>• Vomiting or Diarrhea (Gastrointestinal Symptoms)</li> </ul>

Table 2

	Symptomatic Individual is Fully Vaccinated OR Under 12 years of Age	Symptomatic Individual is 12 years or Older AND Not Fully Vaccinated or Immunocompromised
Symptomatic Individual	Isolate for 5 days and must be fever free with symptoms improving for at least 24 hours (48 hours if gastrointestinal symptoms)	Isolate for 10 days and must be fever free with symptoms improving for at least 24 hours (48 hours if gastrointestinal symptoms)
Household Contacts	Household members who <b>do not</b> meet any of the following criteria must also self-isolate for the same period as the symptomatic individual: <ul style="list-style-type: none"> <li>• They have previously tested positive for COVID-19 in the past 90 days</li> <li>• They are 18 + and boosted</li> <li>• They are under 18 years old and are fully vaccinated</li> </ul>	Household members who <b>do not</b> meet any of the following criteria must also self-isolate for the same period as the symptomatic individual: <ul style="list-style-type: none"> <li>• They have previously tested positive for COVID-19 in the past 90 days</li> <li>• They are 18 + and boosted</li> <li>• They are under 18 years old and are fully vaccinated</li> </ul>