



Clinton Co-operative Childcare Centre Inc.

COVID-19 Policies

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COVID-19 POLICIES

**Direction from Huron Perth Public Health shall be followed

**All employees and students will review and be familiar with this document

**This document shall remain available to families

Group Sizes and Staffing

- Beginning September 1, 2020, the child care centre can return to maximum group sizes as set out under the CCEYA (Child Care and Early Years Act).
- Staff and students are not included in the maximum group size, but will be assigned to a specific group where possible.
- Maximum group size rules do not apply to Special Needs Resource staff.
- Each group will stay together throughout the day and as much as possible will not mix with other groups.
- Ratios will be maintained as set out under the CCEYA.
- Reduced ratios are permitted as set out under the CCEYA provided that groups are not mixed and that reduced ratios are not permitted at any time for infants.
- Staff and students should work only in one location, as much as possible.

Physical Distancing

- Maintain physical distancing of at least 2 meters (6 feet) or more between co-workers, students, and children when possible, while maintaining a welcoming and caring environment for the children.
- Physical distancing will be encouraged between the children by separating children to different areas of the classroom and outdoor space, staggering outdoor playtime between groups, placing chairs at the table which encourage distancing for mealtimes and individual activities. When possible activities will be moved outside to allow for more space.
- When in the same common space (e.g. entrances, hallways) physical distancing of at least 2 meters must be maintained by different groups, and should be encouraged within the same group.
- Visual cues will be used to promote physical distancing.
- Staff will avoid getting close to faces of children when possible.

Environmental Cleaning and Disinfecting Procedures

Cleaning: refers to the physical removal of foreign material (e.g. dust, soil) and organic material (e.g. blood, secretions, microorganisms). Cleaning removes, rather than kills, microorganisms. Warm water, detergent and mechanical action (i.e. wiping) is required to clean surfaces. Rinsing with clean water is required to complete the cleaning process to ensure the detergent film is removed.

Disinfecting: describes a process completed after cleaning in which a chemical solution (e.g. OXIVIR, Triad or Virex) is used to kill most disease-causing microorganisms. In order to be effective, disinfectants must be left on a surface for a period of time (*contact time*). Contact times are generally prescribed by the product manufacturer. Any items that children may come into contact with require a final rinse, after the required contact time has been observed.

- All products, including cleaning agents and disinfectants, must:
 - be out of reach of children,
 - be labelled, and
 - have up to date Safety Data Sheets (SDS)
- Products must not be expired and products must have a DIN approved by Health Canada.
- Refer to Environmental Cleaning Policy at the End of this document (Appendix A)

Cleaning

1. Use detergent and warm water to clean visibly soiled surfaces.
2. Rinse the surface with clean water (warm to tepid temperature preferred), to ensure detergent film has been removed.
3. Let the surface dry.

Disinfecting

- OXIVIR RTU (Ready To Use) Spray is used at CCCC, contact time is five (5) minutes.
- When unavailable, either Triad or Virex RTU will be used. The contact time for these are ten (10) minutes.
- These are considered high level disinfectants which is defined as the complete elimination of all microorganisms in or on a surface.
- General environmental disinfection of high touch surfaces, all toys, equipment and materials, will be sprayed with **OXIVIR**, the **contact time is five (5) minutes**. (or Triad or Virex, the contact time is ten (10) minutes).
- All toys, equipment and materials used in the centre will be made of material that can be cleaned and disinfected.
- Spray bottles and large sprayers will be used, labelled correctly, and will be disinfected between users.
- The dishwasher may also be used for smaller items.

Disinfecting Using OXIVIR (Triad or Virex):

1. Put on mask and gloves.
2. Spray OXIVIR solution and leave on the surface for the appropriate disinfecting contact time (five (5) minutes). (If using Triad or Virex the contact time is ten (10) minutes).
3. Once the five (5) (or ten) minute disinfecting contact time has elapsed, the surface has been disinfected.
4. Any surface children may come into contact with requires a final rinse with a single use paper towel and clean water (e.g. lunch tables, high chair tray, floor, toy shelves) then disposed of appropriately.

Cleaning and Disinfecting Frequency Requirements

Clean and Disinfect Upon ENTRY to Child Care:

- For Staff and Students:
 - Any hard surfaces such as water bottles, travel mugs, cell phones, lunch containers, etc. Staff will be encouraged to only bring in the items needed for the day (Appendix B).

- For Children:
 - Any hard surfaces such as water bottles, containers, etc.

Cleaning and Disinfecting Frequencies for Other Surfaces and Items:

- All toys, equipment and materials, as well as frequently touched surfaces throughout the centre will be cleaned and disinfected twice daily at a minimum and documented in the daily journals and office (see attached Disinfecting Log, Appendix C).
- All toys, equipment and materials will be cleaned and disinfected between groups if sharing occurs.
- When possible, toys, equipment and materials will be disinfected after each use.
- Mouthed toys will be cleaned and disinfected immediately.

Cleaning and disinfecting routines **must** be increased as the risk of environmental contamination is higher:

- Tables and countertops: used for food preparation and food service must be cleaned and disinfected before and after each use.
- Spills must be cleaned and disinfected immediately.
- Hand wash sinks: staff and children's washroom areas (including sinks, faucets, counters, mirrors, toilets, partitions walls, dispensers, doors, garbage bins, floors, grab bars, light switches) must be cleaned and disinfected at least two times per day and as often as necessary (e.g. when visibly dirty or contaminated with bodily fluids).
- Washrooms: children's toilets, sinks and change tables will be disinfected after each use. Only one group shall access a washroom at a time, and will be disinfected between groups.
- Floors: cleaning and disinfecting must be performed as required (e.g. when spills occur) as well as throughout the day when available (e.g. during outdoor play).
- Outdoor play equipment: must be disinfected before each use, between each group use, and as required (e.g. when visibly dirty). Any outdoor play equipment that is used must be easy to clean and disinfect. The school playgrounds may be used, and will be disinfected before and after use. Community playgrounds will not be used.
- High-touch surfaces: surfaces that have frequent contact with hands (e.g. light switches, shelving, containers, hand rails, door knobs, sinks, toilets, etc). These surfaces should be cleaned at least twice per day and as often as necessary (e.g. when visibly dirty or contaminated with bodily fluids).
- Other shared items: shared items (e.g. phones, iPads, attendance binders, pens, etc) must be disinfected between users.

Note: most areas are best cleaned with OXIVIR (Triad or Virex) and do not require a final rinse if children do not come into contact with them.

- Refer to the HPPH Resource: Cleaning and Sanitizing in the Workplace (Appendix D).

Clean and Disinfect Daily:

- Low-touch surfaces (any surfaces at your location that have minimal contact with hands) must be cleaned and disinfected daily (e.g. window ledges, doors, sides of furnishings, etc).
- Carpets are to be vacuumed daily when rooms are available (e.g. during outdoor play).

Clean and Disinfect As Required:

• **Blood/Bodily Fluid Spills:** Using the steps below, the surface must be cleaned first and then disinfected:

1. Isolate the area around the spill so that no other objects or humans can be contaminated.
2. Gather all supplies, perform hand hygiene, then put on single use nitrile gloves and other PPE including eye protection, gown, and mask if there is a risk of splashing.
3. Scoop up the fluid with disposable paper towels (check the surrounding area for splash/splatter), and dispose of in separate garbage bag.
4. Clean the spill area with detergent, warm water and single use towel.
5. Rinse to remove detergent residue with clean water and single-use towel.
6. Discard used paper towels and gloves immediately in a tied plastic bag.
7. Spray OXIVIR in and around the spill area and allow the appropriate five (5) minute disinfecting contact time (If Triad or Virex is used the contact time is ten (10) minutes).
8. A final rinse is required if children come into contact with the area.
9. Remove gloves as directed and discard them immediately.
10. Perform hand hygiene as directed.

Notes:

- If the spill includes broken glass, ensure a brush and dustpan is used to pick it up and discard. Disinfect the brush and dustpan after use. **NEVER** use your hands to clean up the glass.
- If the spill occurs on a carpet, follow the above steps along with professional steam/wet cleaning the carpet.
- Refer to the HPPH resource Blood and Bodily Fluid Spills (Appendix E).

Cleaning and Disinfecting Cots, Mats and Cribs:

- Cots/mats/cribs must be labelled and assigned/designated to a single child per use.
- Cots/mats/cribs must be cleaned and disinfected before being assigned to a child.
- Cots/mats/cribs must be disinfected after each use, and as often as necessary.
- Cots/mats must be stored in a manner in which there is no contact with the sleeping surface of another cot/mat.
- Linens must be laundered daily, and when soiled or wet.
- As much as possible, every other crib will be used, with cribs not being used clearly marked in order to support physical distancing. As much as possible cots and cribs will be spaced 6 feet apart. Head-to-toe or toe-to-toe sleeping will be encouraged.

Additional Infection Prevention and Control Practices for Hygiene Items

- Pacifiers must be individually labeled and stored separately (not touching each other); they must not be shared among children. The pacifier must be washed in soap and water upon arrival at the centre.
- For creams and lotions during diapering, never put hands directly into lotion or cream bottles; use a tissue or single-use gloves. Upon arrival to the centre, the cream/lotion container will be disinfected.

Hand Hygiene

- Hands carry and spread germs. Touching your eyes, nose or mouth, or sneezing or coughing into your hands may provide an opportunity for germs to get into your body or spread to other people. Keeping your hands clean through good hygiene practice is one of the most important steps to avoid getting sick and spreading germs. Good hygiene practices will be modeled and encouraged with the children.
- All staff, students and children shall wash their hands upon entry to their classroom.
- Staff and shall assist children with hand hygiene with hand washing opportunities incorporated into the daily schedule.
- Ensure that employees and children are always practicing good hand hygiene.

Use soap and water when hands are visibly dirty and after:

- Sneezing, coughing or blowing your nose
- Using the washroom
- Handling garbage
- Handling raw foods
- Outdoor play
- Toileting/diapering routine
- Handling soiled laundry or dishes
- Handling soiled toys or other items
- Coming into contact with bodily fluids
- Coming into contact with any soiled/mouthed items
- Gardening

Hands should be cleaned using soap and water or alcohol-based hand sanitizer before and after:

- Preparing, handling, serving and eating food
- Handling animals
- Touching a cut or open sore
- Coming into contact with any bodily fluids
- Changing diapers or providing assistance with toileting
- Glove use
- Before and after giving medication

For washing hands with soap and water, follow these steps:

1. Remove rings, bracelets and watches
 2. Wet hands
 3. Apply soap
 4. Lather for at least 15 seconds; rub between fingers, back of hands, fingertips, under nails
 5. Rinse well under running water
 6. Dry hands well with paper towel or hot air blower
 7. Turn taps off with paper towel, if available
- Refer to Public Health Ontario resource How to Wash Your Hand (Appendix F).

Hand Sanitizer

- When hands are not visibly dirty, an alcohol-based hand sanitizer containing at least 60% alcohol content can be used.
- Hand sanitizer can only be used on children who are over the age of two, and must always be used under adult supervision.
- Adults must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity.
- Hand washing using soap and water is recommended over alcohol-based hand rub for children.

For hand hygiene with hand sanitizer, follow these steps:

1. Apply alcohol-based hand sanitizer (minimum 60% alcohol content).
2. Rub hands together for at least 15 seconds.
3. Work sanitizer between fingers, back of hands, fingertips and under nails.
4. Rub hands until dry.

- Refer to Public Health Ontario resource How to Use Hand Sanitizer (Appendix G).

Respiratory Etiquette

- Germs, such as influenza and COVID-19, are spread by coughing and/or sneezing.
- When you cough or sneeze on your hands, your hands carry and spread these germs.
- Attempt to keep your distance (more than 2 metres/6 feet) from people who are coughing or sneezing.
- Follow these steps to stop the spread of germs:
 1. If you have a tissue, cover your mouth and nose when you cough, sneeze or blow your nose. If no tissue is available, cough or sneeze into your upper sleeve or elbow, not into your hands. Always cover and protect your coughs and sneezes.
 2. Put used tissues in the garbage.
 3. Clean your hands with soap and water or hand sanitizer (60-90% alcohol based) regularly and after using a tissue on yourself or others.

Masks and Personal Protective Equipment (PPE)

- All adults are required to wear medical masks and eye protection (e.g. face shields or safety glasses) while inside the building, including hallways.
- It is strongly recommended that parents wear a face mask at drop off and pick up.
- PPE will be available for staff and students.
- Masks are not recommended for children, particularly those under the age of two.
- All children in grades 4 and above are required to wear a non-medical or cloth mask while inside the building, including in the hallways.
- All school-aged children in grades 3 and below are encouraged but not required to wear a mask while inside the building, including hallways.
- Parents/Guardians are responsible for providing their school-aged child(ren) with a mask(s). The centre will have masks on hand if required.
- The use of masks is not required outdoors for adults or children if physical distancing of at least 2 meters can be maintained between individuals.
- An exception to wearing a mask indoors will be if a staff is able to maintain a physical distance of at least 2 meters between individuals, and if a child cannot tolerate wearing a mask.
- If a staff or child in grade 4 and above is unable to wear a mask due to a medical condition, a doctor's note will be required. If a staff is unable to wear a medical mask, they will wear be required to wear a face shield rather than safety glasses.
- PPE, including a gown, medical grade mask, gloves, and face shield will be worn in the screening area and when accompanying children into their classrooms. Full PPE will be worn when caring for a sick child or a child showing symptoms of illness.
- When wearing a mask, staff and students should wash their hands before donning and doffing the mask.

Glove Use

- Gloves shall be worn when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment or environmental surfaces.
- Gloves will also be worn during the screening process and when with a child who is showing symptoms of being ill.
- Nitrile gloves are single use only.

Gloves and Hand Hygiene

Gloves do not replace the need for proper hand hygiene. Hand hygiene shall be practised before applying and after removing gloves. Gloves shall be removed and discarded after each use. Do not wear rings with gloves unless they have only a smooth band.

To reduce hand irritation related to gloves:

- Wear gloves for as short a time as possible.
- Ensure that hands are clean and dry before wearing gloves.
- Ensure gloves are intact, clean and dry inside.
- Gloves are single use only, and must be task specific such as nitrile gloves for diaper changes.

Donning and Doffing Personal Protective Equipment

Terminology

- *Donning* refers to putting on personal protective equipment
- *Doﬀing* refers to removing/taking off personal protective equipment

Instructions for donning (putting on) and doﬀing (removing) PPE:

Putting on gloves: <https://www.youtube.com/watch?v=UIBmi578NmE>

Removing gloves:

https://www.youtube.com/watch?v=WDI0Zj573Js&feature=emb_rel_end

Putting on mask: <https://www.youtube.com/watch?v=1YiLjpLXvg4>

Removing mask: <https://www.youtube.com/watch?v=pFJaU9nxmTA>

Putting on full PPE: <https://www.youtube.com/watch?v=s2z1uM1fXN8>

Removing full PPE: https://www.youtube.com/watch?v=crGIUX3_4DA

Recommended steps for putting on and taking off PPE:

<https://www.publichealthontario.ca//media/documents/ncov/ipac/pperecommended-steps.pdf?la=en>

How to wash your hands and How to use hand sanitizer:

<https://www.publichealthontario.ca//media/documents/ncov/factsheet/factseet-covid-19-handhygiene.pdf?la=en>

- Refer to the HPPH resources How to Wear a Surgical Mask (Appendix H).
- Refer to the Public Health Ontario resource Putting on Personal Protective Equipment and Taking off Personal Protective Equipment (Appendix I).

Parent Drop Off and Pick Up Procedures

- We ask that only ONE parent/guardian drop off and pick up.
- Upon arrival at the centre for drop off, all children will enter through the main child care entrance.
- Once the parent/guardian and child enters, they shall both be screened as per the screening policy in this document.
- If the parent/guardian and child both pass the screening process, then the child shall be walked to their classroom by a staff, while maintaining physical distancing where possible. As much as possible, parents should not go past the screening area.
- If the parent/guardian and/or child fails the screening process, they child will not be permitted to stay.
- Upon pick up, we ask that the parent/guardian call the centre (519-482-5777) to let child care staff know they are there to pick up. We ask that parents/guardians follow physical distancing outside as per the signage. A staff will walk your child to the door. Once you see your child and staff at the door you can then go to the entrance to pick up your child.
- At our St. Joseph's location, we ask that you use the gym doors, around the back of the school. Please call 519-440-8032 for pick up.

Health Screening

- In order to help reduce the risk of respiratory infections (including COVID- 19), an active health screening is an essential step.
 - All individuals including employees, students, parents, guardians, children, and any other persons engaging in business within a child care site will be screened each day prior to being admitted into the childcare centre. Avon Maitland District School Board staff will self-monitor and sign in and out at the school entrance.
 - Children attending the before and after school program will be screened both before and after school.
 - Staff **must not** go past the screening station if symptomatic.
-
- CCCC screening station will be located just inside the front entrance of the child care centre. At our St. Joseph's location, screening will take place at the doors of the gymnasium, around the back of the school.
 - Two (2) metres distance will be kept between employees conducting screening and the person being screened, with a plexi-glass barrier used. Full PPE including a medical mask, eye protection, gown and gloves will be worn by staff in the screening area at the main site. At our St. Joseph's location, a mask and eye protection will be worn when conducting screening.
 - Visual guides will assist with physical distancing.
 - Families will approach the door one at a time, while following the physical distancing guides and await your turn for the screening process.
 - Employee(s) will be trained on conducting the screening tool.
 - There will be signage identifying the screening process outside and directly inside the child care centre doors (please refer to the HPPH resource **Active Screening in Effect** (Appendix J).
 - Hand sanitizer will be on the screening table; and will be visible to all individuals entering the building.
 - Staff must follow the screening checklist for each person and record the outcome (pass/fail).
 - Any person who answers yes to any of the screening criteria will be denied entry into the building.
 - Huron Perth Public Health information will be available for anyone who does not pass the screening.
 - A daily record of screening results will be maintained and kept on site.

Questions for Staff, Students and Families

- Screening questions will be provided to families along with current best practices and recommendations by Huron Perth Public Health and the Ontario Ministry of Health.
- Families will be required to monitor themselves and their children prior to arrival at the child care centre, to ensure they are not exhibiting COVID-19 symptoms as issued by the Ministry of Health.
- Only ONE parent/guardian may enter the centre with the child, and we request that both use hand sanitizer.

*"Good morning/afternoon. As you are aware, COVID-19 continues to evolve. As a result, we are conducting active screening for potential risks of COVID-19 for

everyone who enters the location. The screening will ensure the safety and well-being of staff, children and families.”

Screening Questions:

1. Do you, the child(ren) or any member of your household have any of the following symptoms:

- 1) Fever (37.8°Celsius or higher/100.04°Fahrenheit or higher)
- 2) New or worsening cough
- 3) Shortness of breath
- 4) Sore throat
- 5) Difficulty swallowing
- 6) New olfactory (smell) or taste disorder(s)
- 7) Nausea/vomiting, diarrhea, abdominal pain
- 8) Runny nose, or nasal congestion—in absence of underlying reason for these symptoms such as seasonal allergies, post nasal drip, etc.
- 9) Clinical or radiological evidence of pneumonia
- 10) Unexplained fatigue/malaise/myalgias
- 11) Delirium (altered mental status and inattention)
- 12) Unexplained or increased number of falls
- 13) Acute functional decline
- 14) Exacerbation of chronic conditions
- 15) Chills
- 16) Headaches
- 17) Croup
- 18) Conjunctivitis (pink eye)
- 19) Unexplained tachycardia, including age specific tachycardia for children
- 20) Decrease in blood pressure
- 21) Unexplained hypoxia
- 22) Lethargy, difficulty feeding in infants (if no other diagnosis)
- 23) Multisystem inflammatory syndrome in children
 - persistent fever, conjunctivitis, rash, gastrointestinal symptoms, such as nausea/vomiting, diarrhea, and abdominal pain

Yes/No

2. Have you given your child any type of fever reducing medication in the last five (5) hours? Yes / No (If yes, record reason for administering medication)

3. Have you or your child(ren) travelled outside of Canada within the last 14 days? Yes / No

4. Using a temporal artery thermometer, the screener will take the temperature of the parent and the child.

How to Respond

If the individual answers **NO** to all questions and their temperature is recorded at less than 37.8 degrees Celsius, they have passed the screening and can enter the building:

“Thank you for your patience. Your child has been cleared to enter the centre. A staff member will drop your child in _____ room.”

If the individual answers YES to any of the screening questions, their temperature is 37.8 degrees Celsius, or they refuse to answer, then they have immediately failed the screening and cannot enter the building:

“Thank you for your patience. Unfortunately, based on these answers I am not able to let you enter the child care centre.

Please review the self-assessment tool on the Ministry of Health website or on the Huron Perth Public Health Website www.hpph.ca/coronavirus to determine if further care is required.”

- If the positive response is for a child care staff member, advise that the Supervisor will be notified and will follow up. HPPH will be contacted and their direction followed.
- Staff must not go past the screening station if symptomatic.
- Resources will be available for parents.
- CCCC Screening Checklist (Appendix K).

Attendance Records

- Daily attendance records of the children will be kept.
- A daily record will be kept of anyone entering the centre, and the approximate length of their stay (eg, maintenance, children’s supports) with their contact information up-to-date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak.
- These records will be kept onsite.

How to Report Illness

- Childcare Centre licensees have a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. CCCC will contact Huron Perth Public Health (1-888-221-2133 X 2329) to report a child suspected to have COVID-19. HPPH 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.
- If a child, parent of a child, staff, student is suspected (e.g. has one or more symptoms and has been tested or has indicated that they will be tested) of having, or has a confirmed case of COVID-19, CCCC must report this to the Ministry as a serious occurrence.
- A serious occurrence must be reported using the Child Care Licensing System within 24 hours of becoming aware of the serious occurrence. If CCLS cannot be accessed, the Program Advisor must be notified via telephone or email within 24 hours of the serious occurrence and complete a Serious Occurrence report in CCLS as soon as the system becomes available. We will generate and post a summary of the serious occurrence in a conspicuous place highly visible to parents for a minimum of 10 business days from the date of the final update, unless HPPH advises otherwise. This information will be kept on file.
- Where a room, centre, or premise closes due to COVID-19, CCCC must report this to the Ministry as a serious occurrence.

Exclusion of Children Who Are Ill

As required by the Child Care and Early Years Act and Ministry of Health, County of Huron child care operators must separate children of ill health and contact parents/guardians to take the child home as soon as possible.

Child care employees should exclude a child from the program when the child has one or more of the following symptoms of COVID-19:

- Fever (37.8°Celsius or higher/100.04°Fahrenheit or higher)
 - New or worsening cough
 - Shortness of breath
 - Sore throat
 - Difficulty swallowing
 - New olfactory (smell) or taste disorder(s)
 - Nausea/vomiting, diarrhea, abdominal pain
 - Runny nose, or nasal congestion – in absence of underlying reason for these symptoms such as seasonal allergies, post nasal drip
 - Clinical or radiological evidence of pneumonia
 - Unexplained fatigue/malaise/myalgias
 - Delirium (acutely altered mental status and inattention)
 - Unexplained or increased number of falls
 - Acute functional decline
 - Exacerbation of chronic conditions
 - Chills
 - Headaches
 - Croup
 - Conjunctivitis)
 - Unexplained tachycardia, including age-specific tachycardia for children
 - Decrease in blood pressure
 - Unexplained hypoxia
 - Lethargy, difficulty feeding in infants (if no other diagnosis)
 - Multisystem inflammatory syndrome in children
 - persistent fever, conjunctivitis, rash, gastrointestinal symptoms, such as nausea/vomiting, diarrhea, and abdominal pain
- Ill children will be kept a minimum of 2 meters (6 feet) from others. A caregiver will stay with the child and monitor, and will attempt physical distancing of two (2) meters. Staff will wear gloves, a mask, eye protection and gown at all times, and will follow the proper steps for donning and doffing PPE. Staff should avoid touching their face, especially with gloved or unwashed hands. Staff will not interact with others and should avoid contact with the child's respiratory secretions. If tolerated, and above the age of 2 the child should wear a medical mask.
- The parent/guardian of the ill child will be notified to take them (and their siblings) home. If unable to reach the parents, the emergency person listed will be called.
 - If it appears that the child requires immediate medical attention, the child will be taken to the hospital by ambulance and examined by a legally qualified medical practitioner or nurse registered under the Health Disciplines Act. R.R.O. 1990, Reg. 262, s. 34(3).

- Every effort will be made to keep the child comfortable until someone arrives to take him or her home.
 - Tissues should be provided to the child for proper respiratory etiquette, with proper disposal of the tissues and proper hand hygiene.
 - Increase ventilation, if possible (e.g. open windows and/or doors).
 - Once the child and their siblings have been picked up, immediately conduct environmental cleaning of the space the child was in.
 - All items used by the person who is symptomatic should be cleaned and disinfected.
 - Items that cannot be cleaned (paper, books) should be removed and stored in a sealed container for a minimum of 7 days.
 - Huron Perth Public Health (1-888-221-2133 x 2329) may be contacted for advice/direction
 - Those who test negative for COVID-19 must be excluded from the program until 24 hours after symptom resolution.
 - Those who test positive for COVID-19 must be excluded from the program for 14 days after the onset of symptoms and/or clearance has been received from the local public health unit.
 - Testing of asymptomatic persons should only be performed as per provincial testing guidance
 - Children with symptoms must be excluded from childcare for 14 days after the onset of symptoms, or have a doctor's note clearing them of COVID-19 or have a negative COVID-19 test. Children may then return 24 hours after symptom resolution.
 - Children or staff who have been exposed to a confirmed case of COVID-19 or symptomatic person(s), should be excluded from the childcare setting for 14 days.
 - Encourage the parents to call their Health Care Provider to have the child assessed and follow their direction.
 - They can also complete the online assessment tool at: <https://covid-19.ontario.ca/self-assessment>
 - If they do not have a doctor, they can call Huron Perth Public Health to be assessed (1-888-221-2133).
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- Symptoms of illness will be recorded on a COVID-19 surveillance form (Appendix L), in the child's daily record and in the classroom's daily journal as per the CCEYA.
 - Staff, students, parents, and children who are symptomatic or have been advised to self-isolate by HPPH must not attend the program. Asymptomatic individuals awaiting results may not need to be excluded and should follow the advice of public health.
 - Other children, including siblings of the sick child, and child care staff in the program who were present while the child or staff member became ill should be identified as a close contact and should be grouped together until they can be picked up by parent/guardian to self-isolate at home. Public Health will provide further direction on testing and isolation of these close contacts.
 - HPPH will be notified and their advice will be followed. (1-888-221-2133 ext 2329). As we are in a shared setting, HPPH advice will also be followed on notifying others using the space of the suspected.

Outbreak

- HPPH is responsible for determining if an outbreak exists, declaring an outbreak and providing direction on outbreak control measures to be implemented.
- HPPH will assist the childcare centre in determining which groups may be sent home or if a partial or full closure is required based on the scope of the outbreak. All appropriate bodies will be notified, as per HPPU direction.
- A single, symptomatic, laboratory confirmed case of COVID-19 of a staff member or child must be considered a confirmed COVID-19 outbreak, in consultation with the HPPH. Outbreaks should be declared in collaboration between the program and HPPH to ensure an outbreak number is provided.
- In the event that the childcare centre is made aware of a positive diagnosis of COVID-19 for staff or children, it is essential that key information pertaining to staff and children be available upon request by HPPH, for the purposes of contact tracing.
- HPPH will determine when the outbreak can be declared over.

Childcare Provider Illness

- Any staff who suspects they have an infectious disease should not attend the child care centre if they are not well, particularly if their symptoms include any outlined in the COVID-19 screening. Staff must pass the daily active screening process to work at the site.
- If a staff member becomes ill with COVID-19 symptoms while at the centre, they should let their supervisor know, put on a face mask and remove themselves from the centre as soon as possible.
- The employee will begin self-isolation at home and will not be permitted back to work or to have children into their care until 14 days of isolation are complete.
- If a childcare worker is suspected to have or is diagnosed with COVID-19, the childcare worker must remain off until symptoms are fully resolved and negative laboratory tests have been confirmed.
- The supervisor or designate will notify Huron Perth Public Health of the symptomatic staff member and follow their direction.
- If directed by HPPH the supervisor or designate will contact children and/or staff who have been in close contact (up to 48 hours before symptoms) with a symptomatic person(s) (or confirmed COVID-19 positive), with instructions to begin self-isolation for 14 days.
- The supervisor will file notification with the appropriate bodies (WSIB, MOL) for any illnesses that are believed to be the result of exposure to infectious disease through the course of work.
- A staff person who presents with non-respiratory symptoms of ill health (non COVID-19 related) must follow normal procedures for return to work.
- During gastrointestinal outbreaks, staff must not return to the centre until symptom-free for 48 hours.
- Public Health will be notified and their advice will be followed. Public Health advice will be followed upon notifying others using our shared space of the suspected case.

Criteria for Leaving Isolation

Criteria for symptomatic employees or children with COVID-19 symptoms:

- Where individuals can manage their symptoms at home and are not health care or essential service workers, it is currently recommended that they self-isolate for 14 days from symptom onset.
- After 14 days, if they are afebrile (without fever) and their symptoms are improving, they may discontinue self-isolation.
- Absence of cough is not required for those known to have a chronic cough or who are experiencing reactive airways post-infection. If symptoms or fever are persisting, individuals should follow up with their primary care provider or Telehealth.

Criteria for asymptomatic employees or children who were in close contact with a staff member or child with COVID-19 symptoms:

- Self-isolate for 14 days from last exposure to the symptomatic individual

Returning from Exclusion

Employees and/or children who are being managed by Huron Perth Public Health (e.g. confirmed cases of COVID-19, household contacts of cases), should follow instructions from Huron Perth Public Health to determine when to return to the facility.

Access and Prioritizing Families

When determining prioritization of childcare spaces the following will be considered, and done to the best of our ability:

- Care for families where parents must return to work and that work outside of the home
 - Care for families where parents must work from home
 - Families with special circumstances that would benefit from children returning to care
 - Other circumstances
- Prior to reopening a survey was conducted to assess the demand for care.
 - All factors taken into account when confirming children's spaces.

Additional Training

- The COVID-19 Policies and Procedures will be reviewed and signed off on by all employees prior to reopening and at any time a change is made.
- All staff will receive PPE use training.

Events, Meetings and Visits

- In-person meetings will be limited, and conducted only if necessary.
- Zoom meetings and telephone interviews will be used.
- Communication between the families and caregivers will be done via email.

Children's Belongings

- Children's belongings going between home and daycare should be minimized.
- We ask that items stay onsite as much as possible, including a change of clothing, water bottle, a blanket and stuffy (if required), sunscreen, and indoor shoes.
- All items should be labelled and will be kept in your child's cubby/designated space.
- You will need to send sunscreen with your child each day, and we ask that you apply it prior to arrival.
- Your child's blanket and stuffy will be laundered daily.
- If walking with a stroller, we ask that you please take these with you after drop off as they will not be permitted to stay on site.
- Car seats will not be permitted to stay on site.

Visitors

- There will be no non-essential visitors at the program.
- Ministry staff and other public officials are permitted to enter and inspect a childcare centre and premises at any reasonable time.
- Zoom meetings, email, and telephone interviews will be used to interact with families as much as possible, rather than in person.
- No volunteers will be admitted into the program.
- Students completing post-secondary educational placements will be permitted in the childcare centre and will be assigned to one group.
- All visitors are required to wear a mask. Masks will be available for visitors as needed.

Equipment/Toy Usage and Restrictions/Outdoor Play

- All toys, equipment and materials used will be made of material that can be cleaned and disinfected.
- Sensory experiences will be provided for single individual use and labelled with the child's name if applicable.
- Singing will be avoided indoors.
- Play structures will be used by one group at a time and will be disinfected between groups.
- In shared outdoor space, groups must maintain a distance of at least 2 meters and any other individuals outside of the group.
- All toys and equipment will be disinfected prior to being shared by different groups.
- Schedules for outdoor play in groups will allow for physical distancing. Where the outdoor play area is large enough to accommodate multiple groups, licensees may divide the space with physical markers to ensure cohorts remain separated by at least 2 meters.
- As much as possible we have designated toys and equipment for each group/room.
- Where toys and equipment are shared, they will be disinfected prior to being shared.
- Groups are welcome to go for community walks while maintaining physical distancing.
- Children are required to supply their own sunscreen and will not be shared. Parents will be asked to apply sunscreen prior to arrival to the centre. Staff may provide assistance to apply sunscreen to any child requiring it and should exercise proper hand hygiene when doing so.
- For before and after school programs, there will be no sharing of resources (e.g. toys)

Interactions with Infants/Toddlers

- Educators will continue to supervise and hold bottles for infants not yet able to hold their own bottle to reduce the risk of choking.
- Recognizing that physical distancing is difficult with small children and infants, suggestions to support physical distancing include:
 - planning activities that do not involve shared objects or toys
 - when possible, moving activities outside to allow for more space
- Children must not share food, feeding utensils, soothers, bottles, sippy cups, etc.
- Mouthed toys must be removed immediately for cleaning and disinfecting and must not be shared with other children.
- Items will be labelled with the child's name to discourage accidental sharing.

Food Provision

- At the Main site, while the Food Services Personnel is onsite, no one else shall be permitted in the kitchen. Once the Food Services Personnel is gone for the day, staff may enter the kitchen, ensuring hands are washed in the hand washing sink inside the door using proper hand hygiene.
- There will be no self-serve of food at meal times.
- Utensils will be used to serve food.
- Meals will be served to children in individual portions.
- There should be no items shared (i.e. serving spoon or salt shaker)
- There shall be no sharing of food between children.
- There will be no food brought from home except where required and special precautions for handling and serving the food is in place.
- For our school age program where children will bring their own lunch, CCCC's Bagged Lunch policy will be followed.
- Children will not prepare or provide food that will be shared with others.
- Proper hand hygiene will be practiced by staff when preparing food for all individuals before and after eating.
- Where possible, children will practice physical distancing while eating
- There will be no sharing of utensils between children.

Provision of Special Needs Resources (SNR) Services

- In-person special needs services will continue where appropriate. If questions arise in respect of which service providers are permitted to enter the premises, Public Health will be consulted.
- CCCC will work with special needs service providers to explore alternative models of service delivery where in-person delivery is not possible.
- Maximum group size rules do not apply to SNR staff (consultants and enhanced staff) on site.
- Where SNR services are provided through external staff/service providers, CCCC will inform families and record their attendance for tracing purposes.
- All SNR staff must be screened before entering the childcare setting.

