



# **Clinton Co-operative Childcare Centre Inc.**

## **GPS COVID-19 Policies**

27 Percival Street  
Clinton Ontario  
N0M 1L0  
519-482-5777-Main Site  
519-440-8032-St. Joseph's Location  
519-440-7426-Goderich Location  
[clintonchildcare@hotmail.com](mailto:clintonchildcare@hotmail.com)  
[www.clintonchildcare.com](http://www.clintonchildcare.com)

Approved June 2020  
Revised July 24, 2020  
Revised September 1, 2020  
Revised September 15, 2020  
Revised September 24, 2020  
Revised October 2, 2020  
Revised November 26, 2020

## **Table of Contents**

Group Sizes and Staffing

Physical Distancing

Environmental Cleaning and Disinfecting Procedures

- Cleaning
- Disinfecting
- Disinfecting Using OXIVIR spray and Wipes(Triad, Virex, PREempt RTU or SteriKleen)
- Cleaning and Disinfecting Frequency Requirements
- Cleaning and Disinfecting Frequencies for Other Surfaces and Items
- Clean and Disinfect Daily
- Clean and Disinfect As Required
- Cleaning and Disinfecting Cots, Mats and Cribs
- Additional Infection Prevention and Control Practices for Hygiene Items

Hand Hygiene

Hand Sanitizer

Respiratory Etiquette

Masks and Personal Protective Equipment (PPE)

Glove Use

- Gloves and Hand Hygiene

Donning and Doffing Personal Protective Equipment

- Instructions for donning (putting on) and doffing (taking off) PPE

Parent Drop Off and Pick Up Procedures

Health Screening

- Required Screening Questions for Children

Attendance Records

How to Report Illness

Exclusion of Children and Staff Who Are Ill

Outbreak

Childcare Provider Illness

Returning from Exclusion

Access and Prioritizing Families

Additional Training

Events, Meetings and Visits

Children's Belongings

Visitors

Equipment/Toy Usage and Restrictions/Outdoor Play

Interactions with Infants/Toddlers

Food Provisions

Provision of Special Needs Resources (SNR) Services

## **References**

- Appendix A Cleaning and Disinfection for Public Settings
- Appendix B COVID-19: Don't take it Home!
- Appendix C CCCC Disinfecting Log
- Appendix D Cleaning and Sanitizing In Your Workplace
- Appendix E Cleaning Up Body Fluid (Urine, Feces, Vomit, Blood, Breast Milk)
- Appendix F How to Wash Your Hands
- Appendix G How to Use Hand Sanitizer
- Appendix H How to Wear a Surgical Mask
- Appendix I Putting On Personal Protective Equipment (PPE)  
Taking Off Personal Protective Equipment (PPE)
- Appendix J Reminder of Screening Requirements Poster
- Appendix K Screening Tool for Children
- Appendix L Screening Tool for Staff and Essential Visitors
- Appendix M CCCC Sign-In Form
- Appendix N Letter for Parents from Huron Perth Public Health
- Appendix O Screening Confirmation Checklist

# **COVID-19 POLICIES**

\*\*Direction from Huron Perth Public Health shall be followed

\*\*All employees and post-secondary students (referred to in this document as students) will review and be familiar with this document

\*\*This document shall remain available to families

## **Group Sizes**

- 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.
- Staff interaction with multiple groups should be avoided as much as 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.
- Staff shifts will be scheduled as such that no additional coverage is needed, to the best of our ability. Staff shifts in each program will be when the first child arrives and will be scheduled according to the numbers each day. Supervisors and/or designates should limit their movements between rooms, doing so when absolutely necessary.

## **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 spray, OXIVIR wipes, Triad, Virex, PREempt RTU or SteriKleen) 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 Spray is used at CCCC, contact time is five (5) minutes.
- When unavailable, the following will be used. Triad, Virex, the contact time is ten (10) minutes. Contact time for PREempt is three (3) minutes, and for SteriKleen contact time is one (1) minute. OXIVIR wipes contact time is one (1) minute.
- 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, or PREempt the contact time is three (3) minutes, SteriKleen the contact time is one (1) minute, OXIVIR wipes is one (1) minute).
- 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.

### 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. If using PREempt the contact time is three (3) minutes. For SteriKleen contact time is one (1) minute. OXIVIR wipes contact time is one (1) minute.
3. Once the five (5) (or 10, or 3 or 1) 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).
5. If the surface is still wet, you may wipe it dry with a single-use paper towel, which is 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.
- AMDSB is responsible to ensure that spaces used for our before and after school programs are cleaned and disinfected: 1) after the before school program ends and the core day program starts and 2) after the core day program ends and the after school program begins.
- Existing practices will be reviewed to determine where enhancements might be required. This includes the frequency and timing of cleaning and disinfecting, areas to be cleaned and/or disinfected, choice of cleaning products, child safety, staffing, signage, and PPE use when cleaning.

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 (i.e. when spills occur) as well as throughout the day when available (e.g. during outdoor play).

- Outdoor play materials: must be disinfected before each use, between each group use, and as required (e.g. when visibly dirty). Any outdoor play materials that are used must be easy to clean and disinfect.
- 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, Virox, PREempt, or SteriKleen) 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 face shield, 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. If PREempt is used the contact time is three (3) minutes. If SteriKleen is used the contact time is one (1) minute.
  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 shall assist children with hand hygiene with hand washing opportunities incorporated into the daily schedule.
- A focus on proper hand hygiene before and after shared play structures is advised.
- 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
- Coming into contact with bodily fluids
- Coming into contact with any soiled/mouthed items
- Gardening
- Outdoor play
- Toileting/diapering routine
- Handling soiled toys or other items
- Handling soiled laundry or dishes

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

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

**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 childcare staff and students are required to wear medical masks and eye protection (e.g. face shields or safety glasses) while inside the building, including hallways and the staff room (unless eating-but time with masks off should be limited and physical distance should be maintained).
- The use of medical masks and eye protection is for the safety of childcare staff and the children in their care. This is very important when working with young children who may not be wearing face coverings.
- All other adults (e.g. parents/guardians and visitors) are required to wear a face covering or non-medical face mask while inside the building
- PPE will be available for staff and students.
- All children in grades 4 and above are required to wear a non-medical mask or face covering while inside the building, including in the hallways.
- All younger children (grades 3 and below) are encouraged but not required to wear a mask while inside the building, including hallways.
- Masks are not recommended for children under the age of 2 years old.
- See information on the use of masks on the provincial COVID-19 website.  
<https://www.ontario.ca/page/face-coverings-and-face-masks>
- Parents/Guardians are responsible for providing their child(ren) with a non-medical mask or face covering and should be reminded that if children are wearing masks, they will require a way to store their masks when not in use. The centre will have masks on hand if required.
- Masks should be replaced when they become visibly soiled.
- The use of masks and eye protection 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 and eye protection 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, there will be a discussion between the staff, parent/guardian and the Director/Supervisor and this will be documented in both the office journal and their file. 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
  - *Dooffing* refers to removing/taking off personal protective equipment
- 
- Video-How to properly put on and take off masks and eye protection.  
<https://www.publichealthontario.ca/en/videos/ipac-maskeyes-on>
  - Link to Public Health Ontario Resources:  
<https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/public-resources>
  - Refer to the HPPH resources How to Wear a Surgical Mask (Appendix H).
  - Refer to the Public Health Ontario resources 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, and we request that both use hand sanitizer which is available at the entrance, with signage demonstrating appropriate use posted. (How to Use Hand Sanitizer-Appendix G)
- Upon arrival at the GPS CCCC location for drop off, children will enter through the main doors located at the front of the school, and parents/guardians will confirm they have screened their child(ren), and this will be documented (Appendix O).
- If the child passes the screening process, 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 is required to go past the screening area, then he/she will need to be screened. If the parent/guardian fails the screening process, he/she will not be permitted to stay.
- If the child fails the screening process, they child will not be permitted to stay.
- Upon pick up, we ask that the parent/guardian stay in their vehicle, and call the GPS program (519-440-7426) to let child care staff know they are there to pick up. If you are walking, we ask that you 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.

## **Health Screening**

- All individuals must self-screen every day prior to arrival at the centre/school, this includes children attending our before and after school program.
- Upon arrival at the centre for drop off, all children will enter through the main entrance doors of GPS, and parents/guardians will confirm they have screened their child(ren), and this will be documented (Appendix O).
- The COVID-19 self-assessment tool is available to support parents/guardians, childcare staff and essential visitors;  
<https://covid-19.ontario.ca/school-screening/>
- Anyone who is symptomatic, does not pass screening, or has been advised to self-isolate by the HPPH or healthcare professional will not be permitted to attend the program and should stay home.
- If a child develops symptoms and their self-screening indicates they should stay home but their sibling(s) do not have symptoms, the siblings do not need to isolate until the other child tests positive for COVID-19.
- An ill individual who has a known alternative diagnosis provided by a health care provider may return to childcare if they do not have a fever and their symptoms have been improving for at least 24 hours.
- Students, parents/guardians, and any other persons engaging in business within a child care site shall sign in using the CCCC Sign-In Form (Appendix M).
- Staff **must not** go past the screening station if symptomatic.
- CCCC screening station will be located just inside the entrance. Parents will be asked if they have screened their child(ren) prior to arrival and this shall be documented. If the answer is no, then we shall screen the child(ren) prior to their entry to the centre, and this will be documented. If screening is required, staff will follow the screening checklist for each person entering the school age program and record the outcome (pass/fail). If the outcome is a fail, he/she will be denied entry.
- 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 and GPS.
- 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.
- Signs will be posted at the entrance to remind staff, parents/caregivers, and visitors of screening requirements.
- Hand sanitizer will be on the screening table; and will be visible to all individuals entering the building.
- Huron Perth Public Health information will be available for anyone who is denied entry into the building.

## Required Screening Questions for Children

### 1. Are they currently experiencing any of these symptoms?

Choose any/all that are new, worsening, and not related to other known causes or medical conditions.

<b>Fever and/or chills</b> Temperature of 37.8°C/100.0°F or higher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Cough or barking cough (croup)</b> Continuous, more than usual, making a whistling noise when breathing, not related to other known causes or conditions (for example, asthma, post-infectious reactive airways).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Shortness of breath</b> Out of breath, unable to breathe deeply, not related to other known causes or conditions (for example, asthma)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Decrease or loss of smell or taste</b> Not related to other known causes or conditions (for example, allergies, neurological disorders)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### 2. Are they currently experiencing any of these symptoms?

Choose any/all that are new, worsening, and not related to other known causes or medical conditions.

<b>Sore throat or difficulty swallowing</b> Painful swallowing, not related to other known causes or conditions (for example, seasonal allergies, acid reflux)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Runny or stuffy/congested nose</b> Not related to other known causes or conditions for example, seasonal allergies, being outside in cold weather)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Headache that's unusual or long lasting</b> Not related to other known causes or conditions (for example tension-type headaches, chronic migraines)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Nausea, vomiting and/or diarrhea</b> Not related to other known causes or conditions (for example irritable bowel syndrome, anxiety in children, menstrual cramps)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Extreme tiredness that is unusual or muscle aches</b> Fatigue, lack of energy, poor feeding in infants, not related to other known causes or conditions (for example, depression, insomnia, thyroid dysfunction, sudden injury).	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### 3. Have they travelled outside of Canada in the past 14 days?

Yes       No

### 4. In the last 14 days, has a public health unit identified them as a close contact of someone who currently has COVID-19?

Yes       No

5. Has a doctor, health care provider, or public health unit told them/you that they should currently be isolating (staying at home)?  
 Yes       No
6. In the past 14 days, have they received a COVID Alert exposure notification on their cell phone?  
 Yes       No

### Results of Screening Questions:

#### **If you answered “YES” to any of the symptoms included under question 1:**

- Contact the child care to let them know about this result.
- They should isolate (stay home) and not leave except to get tested or for a medical emergency
- Talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test.
- Household members without symptoms may go to school/child care/work. Check your local public health unit’s website or call to see if they have different rules based on local risk.

#### **If you answered “YES” to only one of the symptoms included under question 2:**

- Contact the child care to let them know about this result.
- They should isolate (stay home) for 24 hours and not leave except for a medical emergency.
- After 24 hours if their symptom is improving, they can return to child care when they feel well enough to do so. They do not need to get tested.
- Household members without symptoms may go to school/childcare/work. Check your local public health unit’s website or call to see if they have different rules based on local risk.

#### **If you answered “YES” to two or more of the symptoms included under question 2:**

- Contact the childcare to let them know about this result.
- They should isolate (stay home) and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test.
- Household members without symptoms may go to school/childcare/work. Check your local public health unit’s website or call to see if they have different rules based on local risk.

#### **If you answered “YES” to question 3, 4, 5 or 6**

- Contact the child care to let them know about this result.
- They should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test.

#### **If you answered “NO” to all questions, your child may go to childcare.**

- COVID-19 Screening Tool for Children (Appendix K).

## Required Screening Questions for Employees and Essential Visitors

### 1. Are you currently experiencing any of these symptoms?

Choose any/all that are new, worsening, and not related to other known causes or medical conditions.

<b>Fever and/or chills</b> Temperature of 37.8°C/100.0°F or higher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Cough or barking cough (croup)</b> Continuous, more than usual, making a whistling noise when breathing, not related to other known causes or conditions (for example, asthma, post-infectious reactive airways).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Shortness of breath</b> Out of breath, unable to breathe deeply, not related to other known causes or conditions (for example, asthma)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Sore throat</b> Not related to other known causes or conditions (for example, seasonal allergies, acid reflux)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Difficulty swallowing</b> Painful swallowing, not related to other known causes or conditions	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Runny or stuffy/congested nose</b> Not related to other known causes or conditions (for example, seasonal allergies, being outside in cold weather)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Pink eye</b> Conjunctivitis, not related to other known causes or conditions (for example, reoccurring styes)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Headache that's unusual or long lasting</b> Not related to other known causes or conditions (for example tension-type headaches, chronic migraines)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Digestive Issues like nausea/vomiting, diarrhea, stomach pain</b> Not related to other known causes or conditions (for example, irritable bowel syndrome, menstrual cramps)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Muscle aches that are unusual or long lasting</b> Not related to other known causes or conditions (for example, a sudden injury, fibromyalgia)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Extreme tiredness that is unusual or muscle aches</b> Fatigue, lack of energy, poor feeding in infants, not related to other known causes or conditions (for example, depression, insomnia, thyroid dysfunction, sudden injury).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Falling down often</b> For older people	<input type="checkbox"/> Yes	<input type="checkbox"/> No

2. Have you travelled outside of Canada in the past 14 days?
- Yes                       No
3. In the last 14 days, has a public health unit identified you as a close contact of someone who currently has COVID-19?
- Yes                       No
4. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?
- Yes                       No
5. In the past 14 days, have they received a COVID Alert exposure notification on your cell phone?
- Yes                       No
- If you already went for a test and got a negative result, select "No."

#### Results of Screening Questions:

##### **If you answered "YES" to any of the symptoms included under question 1:**

- Contact the child care to let them know about this result.
- You should isolate (stay home) and not leave except to get tested or for a medical emergency
- Talk with a doctor/health care provider to get advice or an assessment, including if you need a COVID-19 test.
- Household members without symptoms may go to school/child care/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

##### **If you answered "YES" to question 2 or 4:**

- Contact the child care to let them know about this result.
- You should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Follow the advice of public health. You can return to child care only after you are cleared by your local public health unit.
- Household members without symptoms may go to school/childcare/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

##### **If you answered "YES" to question 3:**

- Contact the childcare to let them know about this result.
- You should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if you need a COVID-19 test. You can return to child care only when you are cleared by your local public health unit, regardless of a test result.
- Household members without symptoms may go to school/childcare/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

##### **If you answered "YES" to question 5:**

- Contact the child care to let them know about this result.
- You should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Visit an assessment centre to get a COVID-19 test. Talk with a doctor/health care provider for more advice.

##### **If you answered "NO" to all questions, your child may go to childcare.**

- COVID-19 Screening Tool for Employees and Essential Visitors (Appendix L).

### **Attendance Records**

- Daily attendance records of the children will be kept.
- A daily record will be kept of anyone entering the program, and the approximate length of their stay (e.g., 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.
- Records will be kept 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**

- If a child, staff, student has a confirmed case of COVID-19, CCCC must report this to the Ministry as a serious occurrence.
- If a closure is ordered by HPPH and the licensee has already submitted a serious occurrence for a confirmed case, the existing serious occurrence must be updated to reflect the closure.
- Should additional individuals at the childcare program develop a confirmed case, licensees must either revise the open serious occurrence or submit a new serious occurrence if the first has been closed already.
- 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 become 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.
- A confirmed case of COVID-19 will also be reported to Huron Perth Public Health. CCCC will provide any materials to public health officials to support case management and contact tracing and other activities in accordance with all applicable legislation.
- Public health officials will determine any additional steps required, including but not limited to how to monitor for other possible infected staff and children and the declaration of an outbreak and closure of rooms and/or entire child care settings.

### **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 symptoms of COVID-19, as per the Screening Tool for Children (Appendix K).
- 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 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).
- Upon pickup, the parent/guardian will receive a letter from Huron Perth Public Health. (Appendix N)
- Communication will remain open between the school and the before and after school program when children become ill.
- Once the child has been picked up, immediately conduct environmental cleaning of the space the child was in, including the hallway and front entrance. Paper towels or rags will be used and disposed of. PPE including a mask, eye protection, gloves, and gowns will be worn. The gown will be laundered, the goggles disinfected, with masks and gloves disposed of.
- When possible the other children will be taken out of the room for the time it takes to clean/disinfect the space, including contact time of the disinfectant.
- 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 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, or as directed by a healthcare provider.
- 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.
- If a parent chooses not to have their symptomatic child assessed by a health care provider, the child cannot return to the centre until 14 days after the onset of symptoms, and must be symptom free for 24 hours upon return.
- If a child is assessed by a health care provider, and is advised to go for testing, but the parent chooses not to have their child tested, the child cannot return to the centre until 14 days after the onset of symptoms, and must be symptom free for 24 hours.
- Children or staff who have been exposed to a confirmed case of COVID-19 must be excluded from the childcare setting for 14 days.
- If a child is tested for COVID-19, they must follow the guidance of HPPH and their health care provider and related direction for isolation and returning to the program, including siblings.

- Persons who test positive may not return to the childcare centre until they are cleared by HPPH. Individuals do not need to provide a medical note or proof of a negative result to return to the program.
- 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/school-screening/>
- If they do not have a doctor, they can call Huron Perth Public Health to be assessed (1-888-221-2133).
- Symptoms of illness will be recorded in the office journal 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.

### **Outbreak**

- HPPH is responsible for determining if an outbreak exists, declaring an outbreak and providing direction on outbreak control measures to be implemented.
- An outbreak may be declared by HPPH when within a 14-day period, there are two or more laboratory-confirmed COVID-19 cases in children, staff or other visitors with an epidemiological link (e.g., cases in the same room, cases that are part of the same before/after school care cohort) where at least one case could have reasonably acquired their infection in the childcare setting.
- HPPH will work with CCCC to determine whether epidemiological link exists between cases and whether transmission may have occurred in the child care setting
- If HPPH declares an outbreak, they will determine what happens next. This could include closing particular childcare rooms or cohorts or the entire child care centre.
- HPPH will help determine which groups of children and or staff need to be sent home or if a partial or full closure of the childcare centre is required.
- All appropriate bodies will be notified, as per HPPU direction.
- 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 self-screening process to work at the centre (Appendix L).
- If a staff member becomes ill with COVID-19 symptoms while at the centre, they must let their supervisor know, put on a face mask and remove themselves from the centre as soon as possible.
- The employee will need to be seen and assessed by a health care provider.
- Those who test negative for COVID-19 must be excluded from the program until 24 hours after symptom resolution, or as directed by a healthcare provider.

- 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
- If a staff chooses not to be assessed by a health care provider, he/she cannot return to the centre until 14 days after the onset of symptoms, and must be symptom free for 24 hours upon return.
- If a staff is assessed by a health care provider, and is advised to go for testing, but chooses not to be tested, he/she cannot return to the centre until 14 days after the onset of symptoms, and must be symptom free for 24 hours.
- 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.
- Public Health advice will be followed.

### **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.
  - CCCC will continue to assess the demand for care as the COVID-19 outbreak and health and operational advice changes.

### **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 **no home toys** be brought on-site, with the exception of books. Children may bring books from home, and kept in your child's back pack when not in use.
- We ask that items stay onsite as much as possible, including a change of clothing, water bottle, 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.
- 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.
- Students will be subject to the same Health and Safety protocols as other staff members such as self-screening and the use of PPE when onsite. They will also review the COVID-19 policies.
- 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.
- The School playground may be used, and will be disinfected before and after use. Community playgrounds will not be used.
- 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 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 groups 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.

- Play structures that are used by more than one group will only be used by one group at a time.
- 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) between the school and our programs.

### **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.
- When possible, one staff will be dedicated to serve meals.
- Meals will be served to children in individual portions.
- 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 and GPS Staff will work with special needs service providers to explore alternative models of service delivery where in-person delivery is not possible
- Maximum capacity rules do not apply to SNR staff (consultants and enhanced staff) on site
- Where SNR services are provided through external staff/service providers, CCCC and GPS staff will inform families and record their attendance for tracing purposes
- All SNR staff must be screened before entering the childcare setting.