



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 placement 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 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.
- Staff interaction with multiples groups should be avoided as much as possible.
- Supply/replacement staff should be assigned to a specific group so as to limit staff interactions with multiple groups of children.
- Maximum group size rules do not apply to Special Needs Resource staff. (consultants and enhanced 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 movement between rooms, doing so when absolutely necessary.
- Students on field placement should be assigned to a specific licensed age group.

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.
- When using gymnasiums to provide opportunities for physical activity for children and youth:

- Children and staff should not be engaged in moderate to vigorous physical activity indoors. When moderate to vigorous activity takes place outdoors, children and staff should maintain physical distancing. Masks should not be worn for high intensity activity.
- Gymnasiums should only be used for moderate activity where physical distancing measures and current masking protocols for children and program staff can be followed.
- Efforts should be made to limit the use of shared equipment. Shared equipment should be disinfected regularly and children and program staff should practice proper hand hygiene before and after participating in physical activity and equipment use.

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 or PREempt RTU) 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, and manufacturer's instruction will be followed.
- 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, either Triad, Virex or PREempt RTU will be used. OXIVIR wipes will also be used. Contact time for Triad and Virex is ten (10) minutes. Contact time for PREempt is three (3) minutes. Contact time for OXIVIR wipes is 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. 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.
- The dishwasher may also be used for smaller items.

Disinfecting Using OXIVIR (Triad, Virex or PREempt):

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. OXIVIR Wipes contact time is one (1) minute).
3. Once the five (5) (or ten, three 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) then disposed of appropriately.
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 (e.g. 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, Virex or PREempt) 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. If PREempt is used the contact time is three (3) 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.
- Blankets must be laundered daily, unless stored in a manner as to not come in to contact with other blankets/sheets/cots, such as in a ziplock bag, and when soiled or wet. Sheets must be laundered weekly, 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 labelled 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 modelled 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.
- A focus on proper hand hygiene before and after using shared play structures is advised.
- Ensure that employees and children are always practising 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
- Handling soiled toys or other items
- Coming into contact with any soiled/mouthed items
- Gardening
- Outdoor play
- Toileting/diapering routine
- Handling soiled laundry or dishes
- Coming into contact with bodily fluids

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 participating in the screening process.

Surgical masks must be worn if inside the child care premise.

• PPE will be available for staff and students.

• All children in grades 1 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 1 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 is not required outdoors for adults or children in grades 1 and above if physical distancing of at least 2 meters can be maintained between individuals.

• If a staff or child in grade 1 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

Donning and Doffing Personal Protective Equipment

Terminology

- *Donning* refers to putting on personal protective equipment
- *Doffing* 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 centre for drop off, all children will enter through the main child care entrance and complete the active screening process, and this will be documented (Appendix O).
- If the child passes the screening process, he/she 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 active screening process, he/she will not be permitted to stay. Parents/guardians are encouraged to use the Decision Tool for Parents: What to do if your child FAILS the COVID-19 school/childcare screening (Appendix Q).
- 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

- Parents/guardians are to screen their children for symptoms of illness every day. The COVID-19 on-line self-assessment tool is available to support parents and guardians in meeting this requirement; <https://covid-19.ontario.ca/school-screening/>
- All staff, students and visitors must complete and pass their daily COVID-19 self-screen. The COVID-19 on-line screening tool is available to support staff, students, and visitors in meeting this requirement; <https://covid-19.ontario.ca/school-screening/>
- Staff, students, and visitors must provide daily confirmation of having self-screened. This is done by signing off on the surveillance form (Appendix P) each morning as confirmation. Visitors will also sign in using the CCC Sign –In Form (Appendix M), for tracing purposes.
- In addition to self-screening prior to arrival, all individuals must complete the active screening process every day upon arrival at the centre/school, this includes all children, as well as those attending our before and after school program, staff, students and essential visitors.
- Upon arrival at the centre for drop off, all children will enter through the main child care entrance and will be screened, and this will be documented (Appendix O).
- Any individuals who do not pass the on-site screening procedures will be asked to return home and self-isolate. They are asked to refer to the Decision Tool for Parents: What to do if your child FAILS the COVID-19 school/childcare screening (Appendix Q).
- Staff, students, and children with any new or worsening symptom of COVID-19, as indicated in <https://covid-19.ontario.ca/school-screening/> even those with only one symptom, must stay home until:
 - They receive a negative COVID-19 test result,
 - They receive an alternative diagnosis by a health care professional, or
 - It has been 10 days since their symptom onset and they are feeling better.

- In addition, if any household members who are experiencing any new COVID-19 symptoms and/or waiting for COVID-19 test results after experiencing symptoms, the child, child care staff or student must not attend child care.
- 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.
- Staff **must not** go past the screening station if symptomatic.
- CCCC screening station will be located just inside the entrance.
- 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. At our St. Joseph's location, a mask and eye protection will be worn when conducting screening.
- 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 an active screening process.
- 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.

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

- All asymptomatic household contacts of symptomatic individuals are required to quarantine until the symptomatic household member:
 - receives a negative COVID-19 test result, or
 - receives an alternate diagnosis by a health care professional
- If the symptomatic individual tests positive, or is not tested and does not receive an alternative diagnosis from a health care professional, the symptomatic individual must isolate (including from household members) for 10 days from symptom onset, and all household contacts must isolate 14 days from their last contact with the symptomatic individual.
- Anyone who is symptomatic, does not pass screening, or has been advised to self-isolate by the local public health unit must not be permitted to attend the program (this includes children, childcare staff, and students)
- Persons who test positive for COVID-19 should follow the guidance of their local public health unit and health care professional regarding direction for isolation and returning to a childcare setting. The individual cannot return until cleared by their local public health unit. Note that individuals do not need to provide a medical note or proof of negative results to return to the program.

If an Individual Becomes Ill While in the Childcare Setting

- Childcare 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).
- If a staff member becomes ill with COVID-19 symptoms while at the centre, they must let their supervisor know and remove themselves from the centre.
- The ill child 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.
- Parents/guardians will be contacted for pick-up of symptomatic children. 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 an 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).
- Hand hygiene and respiratory etiquette should be practiced while the ill individual is waiting to be picked up.
- Increase ventilation, if possible (e.g. open windows and/or doors)
- Upon pick up, the parent/guardian will receive a letter from Huron Perth Public Health (Appendix N)
- Cleaning/disinfecting of the area the ill individual was in, and other areas of the child care setting where the ill individual was, should be conducted as soon as reasonably possible after the ill individual leaves. This includes all surfaces within 2 meters of the space the ill child was in, including the hallway and front entrance. Paper towels or rags will be used and disposed of. PPE including mask, eye protection, gloves and gown 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 symptomatic individual 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.
- The ill individual and/or their parent or guardian be advised to use the <https://covid-19.ontario.ca/school-screening/> and follow instructions which may include seeking medical advice or going for testing for COVID-19.
- Communication to update necessary stakeholders within the child care community while maintaining confidentiality of the ill individual may occur.
- Regular childcare operation can continue unless directed otherwise by the local public health unit.
- The local public health unit determines if a full or partial closure is required; if this happens a serious occurrence report must be submitted.
- Illness will be documented in the office journal and in the classroom's daily journal as per the CCEYA.

- The supervisor will file notification with the appropriate bodies (WSIB, MOL) for any employee illnesses that are believed to be the result of exposure to infectious disease through the course of work.
- HPPH 1-888-221-2133 may be contacted for advice/direction, and that information will be followed.

COVID-19 Post-Vaccination Symptoms

If a child, staff, placement student, or essential visitor received a COVID-19 vaccination in the last 48 hours and are experiencing mild headache, fatigue, mild muscle aches and/or joint pain that only began after vaccination, and no other symptoms, they should respond “no” in the screening tool and may continue to attend the childcare program if they are feeling well enough to do so.

◦ If the childcare staff, placement student, child or essential visitor lives in a household with an individual who received a COVID-19 vaccination in the last 48 hours and is experiencing mild headache, fatigue, muscle aches, and/or joint pain that only began after vaccination, and no other symptoms, they should respond “no” in the screening tool and are not required to self-isolate (stay home).

◦ **Masking:** If the childcare staff placement student, child or visitor received a COVID-19 vaccination in the last 48 hours and has mild headache, fatigue, muscle aches and/or joint pain that only began after immunization, and no other symptoms, they are to wear a properly fitted mask for their entire time in the childcare setting. The mask may only be removed to consume food or drink and the individual must remain at least two meters away from others when their mask has been removed.

◦ **Isolation and Testing:** If the mild headache, fatigue, muscle aches, and/or joint pain symptoms worsen, continue past 48 hours, or if the individual develops other symptoms, they should leave the child care setting immediately to self-isolate and seek COVID-19 testing.

Required Screening Questions for Children

1. **In the last 14 days, has the child travelled outside of Canada?**
If exempt from federal quarantine requirements, select “No.”
 Yes No

2. **Has a doctor, health care provider, or public health unit told you that they child should currently be isolating (staying at home)?**
This can be because of an outbreak or contact tracing.
 Yes No

3. **In the last 14 days, has the child been identified as a “close contact” of someone who currently has COVID-19?**
 Yes No

4. **In the last 14 days has the child received a COVID Alert exposure notification on their cell phone?**
If they already went for a test and got a negative result, select “No.”
 Yes No

5. **Is the child currently experiencing any of these symptoms?**
Choose any/all that are new, worsening, and not related to other known causes or conditions they already have.

Fever and/or chills Temperature of 37.8° Celsius/100°Fahrenheit or higher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cough or barking cough (croup) Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, or other known causes or conditions they already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions they already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Decrease or loss of taste or smell Not related to seasonal allergies, neurological disorders, or other known cause or conditions they already have	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat or difficulty swallowing Painful swallowing (not related to seasonal allergies, acid reflux, or other known causes or conditions they already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Runny or stuffy/congested nose Not related to seasonal allergies, being outside in cold weather, or other known causes or conditions they already have	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headache Unusual, long-lasting (not related to tension-type headaches, chronic migraines, or other known causes or conditions they already have) If the child received a COVID-19 vaccine in the last 48 hours and is experiencing a mild headache that only began after the vaccination, select “No.”	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Nausea, vomiting and/or diarrhea Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions they already have	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Extreme tiredness or muscle aches Unusual fatigue, lack of energy, poor feeding in infants (not related to depression, insomnia, thyroid dysfunction, sudden injury, or other known causes or conditions they already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the child received a COVID-19 vaccination in the last 48 hours and is experiencing mild fatigue and/or muscle aches/joint pain that only began after vaccination, select, “No.”		
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6. Is someone that the child lives with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?

If the individual experiencing symptoms received a COVID-19 vaccination in the last 48 hours and is experiencing mild headache, fatigue, muscle aches, and/or joint pain that only began after the vaccination, select “No.”

Yes No

Results of Screening Questions:

If you answered “YES” to question 1 or 3 do not go to childcare.

- The child must self-isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- If you answered “YES” to question 1, follow the advice of public health. The child can return to childcare after they are cleared by your local public health.
- If you answered “YES” to question 3, talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test. The child can return to childcare after 14 days, even if they get a negative test result.
 - Siblings and other people in your household can go to school, childcare or work, but must not leave the home for other non-essential reasons. Ask your childcare for more information.
- If they develop symptoms or test positive, contact your local public health unit or doctor/health care provider for more advice.
- Contact your child care provider to let them know about this result.

If you answered “YES” to question 2 do not go to childcare.

- The child must self-isolate (stay home) and not leave except for a medical emergency.
- Follow the advice of public health. The child can return to child care after they are cleared by your local public health unit.
- If they develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
- Siblings and other people in your household can go to school, childcare or work, but must not leave the home for non-essential reasons. Ask your childcare for more information.
- Contact your child care provider to let them know about this result.

If you answered “YES” to question 4 do not go to child care.

- The child must self-isolate (stay home) and not leave except for a medical emergency.
- Visit an assessment centre to get them a COVID-19 test.
 - If they test negative (they do not have the virus), they can return to childcare.
 - If they test positive (they have the virus), they can return only after they are cleared by your local public health unit.
- If they develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
- Siblings or other people in your household can go to school, childcare or work, but must not leave the home for other, non-essential reasons until the individual who got the COVID alert tests negative or is cleared by your local public health unit.
- Contact our childcare provider to let them know about this result.

If you answered “YES” to any of the symptoms included under question 5 or question 6 do not go to childcare

- The child must isolate (stay home) and not leave except to get tested or for a medical emergency.
- If you answered “YES” to question 5, talk with a doctor/health care provider to get advice or an assessment, including if the child needs a COVID-19 test.
- If you answered “YES” to question 6, the child can return to childcare after the individual gets a negative COVID-19 test result, or is cleared by your local public health unit, or is diagnosed with another illness.
- Siblings or other people in your household must stay at home until the child showing symptoms or individual tests negative, or is cleared by your public health unit, or is diagnosed with another illness.
- Contact your childcare provider to let them know about this result.

If you answered “NO” to all questions, your child may go to childcare because they seem to be healthy and have not been exposed to COVID-19. Follow your child care provider’s established process for letting staff know about this result (if applicable).

If the child received a COVID-19 vaccination in the last 48 hours and has mild headache, fatigue, muscle aches and/or joint pain that only began after immunization, and no other symptoms, they are to wear a properly fitted mask for their entire time at child care. Their mask may only be removed to consume food or drink and they must remain at least two meters away from others when their mask has been removed. If the symptoms worsen, continue past 48 hours, or if they develop other symptoms, they should leave child care immediately to self-isolate and seek COVID-19 testing.

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

Required Screening Questions for Employees and Essential Visitors

1. In the last 14 days, have you or anyone you live with travelled outside of Canada?

If exempt from federal quarantine requirements (for example, an essential worker who crosses the Canada-US border regularly for work), select “No.”

Yes No

2. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?

This can be because of an outbreak or contact tracing.

Yes No

3. In the last 14 days, have you been identified as a “close contact” of someone who currently has COVID-19?

Yes No

4. In the last 14 days, have you received a COVID Alert exposure notification on your cell phone?

If you already went for a test and got a negative result, select “No.”

Yes No

5. 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 you already have.

Fever and/or chills Temperature of 37.8°C/100.0°F or higher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cough or barking cough (croup) Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, COPD, or other known causes or conditions you already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath Out of breath, unable to breathe deeply (not related to asthma other known causes or conditions you already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Decrease or loss of taste or smell Not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat Not related to seasonal allergies, acid reflux, or other known causes or conditions you already have	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Difficulty swallowing Painful swallowing (not related to other known causes or conditions you already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Runny or stuffy/congested nose Not related to seasonal allergies, being outside in cold weather, or other known causes or conditions you already have	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pink eye Conjunctivitis (not related to reoccurring styes or other known causes or conditions you already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headache Unusual, long-lasting (not related to tension-type headaches, chronic migraines, or other known causes or conditions you already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you received a COVID-19 vaccination in the last 48 hours and are experiencing a mild headache that only began after vaccination, select “No.”		
Digestive Issues like nausea/vomiting, diarrhea, stomach pain Not related to irritable bowel syndrome, menstrual cramps or other known causes or conditions you already have)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Muscle aches Unusual, long-lasting (not related to a sudden injury, fibromyalgia, or other known causes or conditions you already have) If you have received a COVID-19 vaccination in the last 48 hours and are experiencing mild muscle aches/joint pain that only began after vaccination, select “No.”	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Extreme tiredness Unusual, fatigue, lack of energy, (not related to depression, insomnia, thyroid dysfunction, or other known causes or conditions you already have) If you received a COVID-19 vaccination in the last 48 hours and are experiencing mild fatigue that only began after vaccination, select “No.”	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Falling down often For older people	<input type="checkbox"/> Yes	<input type="checkbox"/> No

6. **Is anyone you live with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?**
If the individual experiencing symptoms received a COVID-19 vaccination in the last 48 hours and is experiencing mild headache, fatigue, muscle aches, and/or joint pain that only began after vaccination, select “No.”
- Yes No

Results of Screening Questions:

If you answered “YES” to question 1 or 3 do not go to childcare.

- You must self-isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- If you answered “YES” to question 1, follow the advice of public health. You can return to childcare after you are cleared by your local public health unit.
- If you answered “YES” to question 3, 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 childcare after 14 days, even if you get a negative test result.
 - Other people in your household can go to childcare/school or work, but must not leave home for other non-essential reasons. Ask our childcare for more information.
- If you develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
- Contact your child care provider to let them know about this result.

If you answered “YES” to question 2 do not go to childcare.

- You must self-isolate (stay home) and not leave except for a medical emergency.
- Follow the advice of public health. You can return to child care after you are cleared by your local public health unit.
- If you develop symptoms, contact your local public health unit or doctor/health care provider for more advice.

- Other people in your household can go to school, childcare or work, but must not leave the home for non-essential reasons. Ask your childcare for more information.
- Contact your child care provider to let them know about this result.

If you answered “YES” to question 4 do not go to child care.

- You must self-isolate (stay home) and not leave except for a medical emergency.
- Visit an assessment centre to get them a COVID-19 test.
 - If you test negative (you do not have the virus), you can return to childcare.
 - If you test positive (you have the virus), you can return only after you are cleared by your local public health unit.
- If you develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
- Other people in your household can go to school, childcare or work, but must not leave the home for other, non-essential reasons until you test negative or are cleared by your local public health unit.
- Contact our childcare provider to let them know about this result.

If you answered “YES” to any of the symptoms included under question 5 or “YES” to question 6, do not go to childcare

- You and your entire household must self-isolate (stay home) and not leave except to get tested or for a medical emergency.
- If you answered “YES” to question 5, talk with a doctor/health care provider to get advice or an assessment, including if you need a COVID-19 test.
- If you answered “YES” to question 6, you can return to childcare after the person gets a negative COVID-19 test result, or is cleared by your local public health unit, or is diagnosed with another illness.
- Other people in your household must stay at home until you or the individual gets a negative COVID-19 test result, or is cleared by your public health unit, or are diagnosed with another illness.
- Contact your childcare provider to let them know about this result.

If you answered “NO” to all questions, you can go to childcare because they seem to be healthy and have not been exposed to COVID-19. Follow your child care provider’s established process for letting staff know about this result (if applicable).

If you have received a COVID-19 vaccination in that last 48 hours and you have mild headache, fatigue, muscle aches and/or joint pain that began after immunization, and no other symptoms, you are to wear a surgical/procedure mask for your entire tie at work. Your mask may only be removed to consume food or drink and you must remain at least two meters away from others when your mask has been removed. If the symptoms worsen, or continue past 48 hours, or if you develop other symptoms, you should leave work immediately to self-isolate and seek COVID-19 testing.

- 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 centre, and the approximate length of their stay (e.g, maintenance, and 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 and 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.
- If there is a confirmed case of COVID-19, this will be communicated with parents, as per HPPU direction.

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, including communication with the families, 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.

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 are 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 and students prior to reopening, any time a change is made, or when they are new to the centre.
- 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. Sunscreen will not be shared. Staff may provide assistance to apply sunscreen to any child requiring it and should exercise proper hand hygiene when doing so.
- 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 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 proper hand hygiene before and after use will be followed.
- The school playgrounds may be used, but 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 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.
- 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.
- 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 jk/sk school age programs where children bring their own lunch, CCCC's Anaphylactic 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. The provision of special needs services may continue and licensees may use their discretion to determine whether the services being provided are essential and necessary at this time.
- CCCC will work with special needs service providers to explore alternative models of service delivery where in-person delivery is not possible.
- 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 self-screen before entering the childcare setting, and will also be screened upon arrival to the Centre and will sign in using the CCCC Sign In Form (Appendix M)

- SNR staff will follow all health and safety measures that staff follow, including attendance logged, practice proper hand hygiene, wearing a medical mask and eye protection and maintaining social distancing as much as possible.