



COVID-19 POLICY

All Sunshine Heights child care staff must strictly maintain routine infection prevention and control practices (refer to the [“Preventing and Managing Illnesses in Child Care Centres”](#) guidelines), as well as adhere to additional sanitary precautions and physical distancing measures in all aspects of care to prevent the spread of COVID-19 as described in this policy. Upon arrival Sunshine Heights Daycare will conduct screening using the public health recommendations to foster the safest environment for children, visitors and staff members.

PURPOSE

Our primary goal is to clearly identify requirements and procedures necessary to control the spread of infection at the workplace while also maintaining a quality childcare environment.

The policy is based on information available at the time of its development and is subject to change based on further information provided by the government, health authorities, and the latest evidence.

PROCEDURES, GENERAL ROLES & RESPONSIBILITIES

EMPLOYER

Employers must take every reasonable precaution necessary to protect the health and safety of workers. Appropriate and reasonable measures include but are not limited to:

- Implementing a system for screening and notifying the appropriate workplace parties and public health authorities in case of a positive diagnosis.
- Providing education (policies) and training to all workers regarding specific safety protocols and measures.
- Providing the appropriate personal protective equipment (PPE) and training.
- Administering policies and responding to crisis in a non-discriminatory manner.
- Implementing controls to allow for appropriate physical distancing requirements.
- Encouraging good hygiene, like hand washing and enhancing environmental cleaning and disinfection.



- Reporting to the Ministry any suspected or confirmed cases of COVID19 in the child care centre, as a serious occurrence.
- Ensuring that daily records are kept of anyone entering the centre premises (e.g., cleaners, people supporting children with special needs).
- Ensuring (in coordination with kitchen staff and supervisor) an adequate supply of soap, disinfectant, facial tissues, paper towel, etc is available for use.
- Providing clear direction to families with respect to enhanced health and safety protocols.

Supervisor

Supervisors are responsible for the health and safety of workers under their supervision. Supervisors must ensure that all infection prevention and control protocols are being followed and workers are complying with and following established safe work procedures. Some responsibilities include:

- Ensuring workers are adhering to measures and procedures as required.
- Ensuring workers use equipment/protective devices and clothing as required.
- Advise a worker of any existing or potential risks of exposure.

Employees

Employees will protect their own health and safety by working in compliance with the law and with safe work practices and procedures. Some responsibilities include:

- Familiarizing themselves with the symptoms of COVID-19 and self-monitoring.
- Informing their supervisor if they develop symptoms and do not go to work.
- Following safe working procedures and properly using appropriate PPE.
- Practicing good hygiene protocols including frequent hand washing, using appropriate respiratory etiquette, not touching the face with unwashed hands, and avoiding close contact with people who are sick.
- Participating in training and review policies and plans with respect to enhanced health and safety protocols; signing the record provided off to verify completion.



DOCUMENTS, TRAINING, RESOURCES & FORMS

MUST BE FAMILIAR WITH AND ADHERE TO THE FOLLOWING:

- Daily Screening Checklist
- Breaking Down the Day
- Daily Educator Requirements
- General Additional Cleaning Duties
- Kitchen Additional Cleaning Duties
- Plan for Sick, Children, Staff/Providers, Parents
- Talking with children about Coronavirus Disease 2019

Resources/Training (not limited to the following)

- How to Self-Monitor
- How to Handrub
- When and How to Wear a Mask
- Non-Medical Masks and Face Coverings
- Facemask Do's and Don'ts
- How to Remove Gloves
- Talking with Children about Coronavirus Disease 2019
- Signage related to these topics can be found posted throughout the centre

Rescheduling/cancellation of group events or meetings

No group activities will be planned/ organized for children from other rooms. No trips or in person entertainment will be planned during the pandemic. Staff meetings will be held electronically and parent/staff meetings, discussions will be done by phone or video conference.

Attendance records and contact tracing

Parents will complete the google doc's covid screening for each child attending the centre before the child/ren arrive at the centre each day. Staff will check for the completed screening before allowing the child to enter the centre each day.

Staff will complete the google doc's covid screening before they arrive at the centre each day.



Screening staff will meet each visitor (maintenance, resource teacher, inspector) at the front entrance and complete the covid 19 screening, collect the person's name, company they work for, and their phone number.

All screening results and personal information will be documented on the screening document and kept for at least one year in order to facilitate contact tracing in the event of a covid 19 outbreak.

Communication with parents of a covid 19 outbreak

Upon the discovery of a positive covid 19 case or outbreak the Executive Director or designate (supervisor, administrative assistant) will notify all families of the confirmed case or outbreak through Email, Class Dojo app, facebook and posting of a physical notice at the front door for parents to view .



SERIOUS OCCURRENCE REPORTING

Effective **November 9, 2020**, child care licensees will only be required to report a serious occurrence for COVID-19 related matters for:

1. **Confirmed COVID-19 cases;** or
2. **Closures ordered by your local Public Health Unit** (i.e., where a closure is ordered for a centre, program room/s or provider's home due to a **confirmed** or a **suspected** COVID-19 case(s)).

To support these changes, the serious occurrence categories related to COVID-19 have been updated in the Child Care Licensing System (CCLS):

Confirmed COVID-19 cases

For a Confirmed Case of COVID-19 with **no** Related Public Health Ordered Closure

- Submit a serious occurrence in CCLS under "Confirmed COVID-19" category

For a Confirmed Case of COVID-19 **with** a Public Health Ordered Closure

- Submit a serious occurrence in CCLS under 'Confirmed COVID-19' category, including information about the closure in the fields provided; or
- Where there is a confirmed case and a closure is subsequently ordered by Public Health while the serious occurrence under "Confirmed COVID-19" category is still open, please revise the existing serious occurrence to include the closure information in the fields provided; or
- Where a closure is ordered by public health **after** the serious occurrence has been closed, submit a **new** serious occurrence for an "Unplanned Disruption of Service" with the subcategory of "Public Health Ordered Closure" (as per information below).



PLEASE NOTE: Where there is an open serious occurrence for a confirmed case of COVID-19, should a second individual develop a confirmed case, please do not submit a new/additional serious occurrence for the new confirmed case.

Instead, licensees must revise the existing/open serious occurrence report to add the information related to the new confirmed case.

Closures Ordered by your Local Public Health Unit

- Where public health orders a closure with no confirmed COVID-19 case, submit a serious occurrence in CCLS under 'Unplanned Disruption of Service' with the subcategory of 'Public Health Ordered Closure'
- Where there is an existing/open serious occurrence in CCLS under 'Unplanned Disruption of Service' with the subcategory of 'Public Health Ordered Closure' and an individual develops a confirmed case of COVID-19, submit a new serious occurrence in CCLS under the 'Confirmed COVID-19' category

2. Existing Serious Occurrences reported for COVID-19 Matters Prior to November 9, 2020

Existing Serious Occurrences for Confirmed Case

Where there is an open serious occurrence for a previously reported confirmed case of COVID-19, this serious occurrence **will remain open** until it is resolved.

Existing Serious Occurrences for Suspected Cases

Where there is an open serious occurrence for a previously reported **suspected case:**

- If this suspected case did **not** result in a **public health ordered closure**, this serious occurrence **will be closed in CCLS by the ministry**.
- If this suspected case resulted in **voluntary closure by the licensee**, this serious occurrence **will be closed in CCLS by the ministry**
- If this suspected case resulted in a **public health ordered closure**, this serious occurrence **will remain open** until it is resolved.



3. Changes to individuals to be reported for confirmed COVID-19 cases

Please note that there has been a change to the list of individuals that a serious occurrence must be reported for with respect to confirmed cases of COVID-19.

Moving forward, a serious occurrence is **not** required for a **parent of a child** with a confirmed case of COVID-19.

Below is the current list of individuals with a confirmed case of COVID-19 for whom a serious occurrence report is required:

1. a **child who receives child care** at a home child care premises or child care centre,
2. a home child care **provider**,
3. a person who is **ordinarily a resident of a home child care premises** (e.g. the home provider's child, the home provider's spouse etc.; for complete definition please refer to the Home Child Care Licensing Manual)
4. a person who is **regularly at a home child care premises** (eg. the home provider's friend who visits the premises once a week etc.; for complete definition please refer to the Home Child Care Licensing Manual),
5. a **home child care visitor**,
6. a **staff** member at a child care centre
7. a **student** at a home child care premises or child care centre,

Existing Serious Occurrences for Parents with Confirmed or Suspected Cases of COVID-19

Where there is an open serious occurrence for a previously reported **confirmed or suspected case of COVID-19 for a parent of a child**:

- If this case did **not** result in a **public health ordered closure**, this serious **will be closed in CCLS by the ministry**.
- If this case resulted in **voluntary closure by the licensee**, this serious occurrence **will be closed in CCLS by the ministry**.
- If this case has resulted in a **public health ordered closure**, this serious occurrence **will remain open** until it is resolved.



ADDITIONAL INFORMATION/TIPS

REPORTING RESPONSIBILITY

The Supervisor/ designate is responsible for reporting and posting the appropriate information.

INFECTION PREVENTION AND CONTROL PROCEDURES

Continuous monitoring of the effectiveness of the controls is necessary to ensure the ongoing protection of children's and workers' health and safety.

MODIFICATIONS TO THIS OR OTHER POLICIES

Any policy that does not respect and promote the dignity, independence, integration and equal opportunity of people with disabilities will be modified or removed. Our policies are maintained and updated regularly to reflect our practices, employees and best serve our customers.

Procedures

Washing

Staff should wash their hands with soap and warm water frequently, and must wash their hands in the following situations:

- When they arrive at the centre and before they go home
- Before handling food, preparing bottles, feeding children
- Before and after eating and drinking
- Before and after touching their own or someone else's face
- After sneezing or coughing into hands
- Before and after giving/applying medication or ointment to a child or self



- Before and after diaper check or changing diapers, assisting a child to use the toilet, and using the toilet
- Before and after contact with bodily fluids (i.e. runny noses, spit, vomit, blood)
- After cleaning and handling garbage

Children should wash their hands with soap and warm water frequently, and must wash their hands in the following situations:

- When they arrive at the centre and before they go home
- Before and after eating
- After a diaper change and using the toilet
- After playing outside
- After sneezing or coughing into hands

Staff should follow and role model the following steps for proper [hand washing](#):

- Wet hands
- Apply soap
- Lather for at least 20 seconds (or as long as the “Happy Birthday” song). Rub between fingers, back of hands, fingertips, under nails
- Rinse well under running water
- Dry hands well with paper towel or hot air blower
- Turn taps off with paper towel, if available

Staff should increase monitoring of hand washing supplies to ensure all sinks in washrooms, kitchens, and classrooms are well stocked at all times (i.e. soap, paper towels, waste receptacles). Ensure hand sanitizer or alcohol-based hand rub (containing at least 70% alcohol) is available at the designated entrance for the centre and throughout the centre.

When hands are not visibly soiled, staff should follow these steps for cleaning hands using [hand sanitizer](#):

- Apply hand sanitizer (at least 70% alcohol-based)
- Rub hands together for at least 15 seconds
- Work sanitizer between fingers, back of hands, fingertips, and under nails. Rub hands until dry



Hand sanitizer must only be used on children who are over the age of two and must always be used under staff supervision. Staff must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity.

MASKS & EYE PROTECTION

Child care licensees must secure and sustain an amount of PPE (including but not limited to face shields, goggles, medical masks, gloves etc.), and cleaning supplies that can support their current and ongoing operations.

Guidance on the Use of Masks, Personal Protective Equipment (PPE) and Handwashing

WHO MUST WEAR MASKS & EYE PROTECTION

All adults in a child care setting (i.e., child care staff, visitors, and students) are required to wear medical masks and eye protection (i.e. face shield/goggles) while inside in the child care premises, including in hallways.

If staff move from room to room (i.e. supply/float staff) they must wash their hands and change their mask and clean the shields/goggles before exiting/ entering each room.

All school-aged children are encouraged but not required to wear a mask while inside in the child care premises, including in hallways (see information about the use of masks on the provincial COVID-19 website or the Public Health Ontario fact sheet on non-medical masks). Parents/guardians are responsible for providing their school-aged child(ren) with a mask(s).

The use of masks is not required outdoors for adults or children if physical distancing of a least 2-metres can be maintained between individuals.

Eye Protection is defined as:

From the Public Health website: <https://www.publichealthontario.ca/en> eye protection includes:

- Face shield
- Safety glasses
- Safety goggles



- Visors attached to medical masks

Prescription glasses are not acceptable by themselves as eye protection: they may be worn underneath face shields and some types of protective eyewear.

Exceptions to wearing masks and eye protection indoors:

Outdoors

Masks and eye protection are not required for children and adults where physical distance of at least 2- meters (6 feet) can be maintained between individuals.

Indoors

Masks and eye protection are not required for children and adults where physical distance of at least 2- meters (6 feet) can be maintained between individuals.(Eg. rest time,meals and snacks).

For Children

From Carl Chan,BAA, Certified Public Health Inspector ©, Certified Infection Control Practitioner, Haliburton,Kawartha,Pine Ridge District Health Unit, Health Protection Division,EH,CDCEE Department. “ I am of the opinion that there should be flexibility in complying the 6 feet physical distancing,if the children are seated in such a way that they are not face to face then the 6 feet physical distance can be reduced”

Situations where a child and staff cannot tolerate wearing a mask, or persons with exceptions for medical conditions, individuals must provide a Dr note.

For Staff:

Staff may remove their masks in the lunch/break room once seated. All staff need to be in compliance with the social distancing protocols (6 feet) while in the lunch/break room. Staff are encouraged to take their lunch break outside (weather permitted)

Dietary staff will only have to wear masks while serving children, while they are in common areas and/or if they have other people in the kitchen with them and cannot maintain physical distancing.

Office staff will only have to wear masks,goggles or shields while in the playrooms and they are in common areas and/or if they have other people in the office with them and cannot maintain physical distancing



Masks are not recommended for children under the age of two (see information about the use of masks on the provincial COVID-19 website).

When wearing a medical mask, you should wash your hands before putting on the mask and before and after removing the mask. Refer to Public Health Ontario resources for how to properly wear and take off masks and eye protection.

Perform and promote frequent, proper hand hygiene (including supervising or assisting participants with hand hygiene). Hand washing using soap and water is recommended over alcohol-based hand rub for children. Refer to Public Health Ontario's How to Wash Your Hands fact sheet.

Cleaning and Disinfecting

Cleaning and disinfecting reduces the spread of germs. Some germs can live for hours, days or weeks on toys, counters, diapering table/area, door knobs, computer keyboards and other surfaces.

Cleaning with soap and water removes dirt and grease that can hide and protect germs from disinfectants. Cleaning will substantially reduce the number of germs that may be on surfaces.

Disinfecting after cleaning will kill most of the germs that were left behind. Cleaners and disinfectant products and methods already used by child care centres are effective against COVID-19.

Only use disinfectants with a Drug Identification Number (DIN). Low-level hospital grade disinfectants may be used. Check expiry dates.

The supervisor will set up a schedule to ensure all cleaning and disinfecting duties are consistently completed and documented.

The steps for cleaning and disinfecting are:

1. Wash all items with soap and water
2. Rinse with water
3. Apply the disinfectant according to the manufacturer's instructions on the label
4. Allow the surface or object to soak in the disinfectant for the required contact time.



5. Rinse with clean water if required according to the manufacturer's instruction on the label.
6. Let air dry.

Refer to Public Health Ontario's "[COVID-19 Cleaning and Disinfection for Public Settings](#)" guidelines for more information.

Toys and Equipment

Staff must ensure that all toys and equipment are in good repair, clean and sanitary. The supervisor must be advised of any concerns regarding toys and equipment.

- Group water/sensory tables must not be used. Only individual sensory play is permitted (i.e. each child has their own separate bin).
- Ensure each child's individual sensory play toys are cleaned and disinfected between use.
- Remove toys that cannot be easily cleaned and disinfected, such as plush toys.
- Ensure all shared items are cleaned and disinfected between users.
- It is recommended that items such as books, puzzles, and cardboard/boxboard that are absorbent and cannot be easily cleaned/disinfected are removed.
- Any outdoor play equipment that is used must be cleaned and disinfected before use, and after use of each cohort/group.
- Do not use the community parks, playground or any structure.
- Mouthed toys must be set aside after being mouthed for cleaning and sanitization after each use.
- Tables and chairs being used are to be cleaned and disinfected daily and as often as needed.



- Should any child present with symptoms of COVID-19, all toys and equipment accessed by the child will be removed from the room to be cleaned and disinfected as soon as possible

Cots

Children will have a cot assigned to them. Cots will be placed to support physical distancing practices (ideally 2 meters/6.5 feet spatial separation if feasible). If space is tight, place children head-to-toe or toe-to-toe.

- Cots must be cleaned and disinfected between each user. Cots must be cleaned and disinfected weekly or more frequently as needed.
- High touch surfaces on cots and cribs must be disinfected at least twice per day and as often as necessary.
- Cot sheets and blankets must be changed between each user.
- Sheets and blankets if used by the same user must be cleaned weekly or more frequently as needed.
- Ensure cot sheets and blankets belonging to different children are labelled with the child's name and stored separately in a bag or bin.
- Families will be permitted to bring their own blankets and/or sleeping sack but they must be laundered by the child care centre prior to use and weekly or more frequently as needed.
-

Children Who Display COVID-19-related Symptoms During Care

If a child needs immediate medical attention, call 911.

There will be a designated space (with window for ventilation) for isolation that will be stocked with masks, gloves, hand sanitizer, a garbage bin with lid, lined with a garbage bag, cot/mat, extra sheets, and a few toys that can easily be disinfected.

If ANY ONE of the symptoms related to COVID-19 are present in a child, the child must be immediately excluded from the child care center and sent home. If the child has a sibling who attends the same child care center, the sibling must also be excluded. Staff are required to:

- Immediately isolate the child with symptoms from other children into a designated exclusion room (e.g. sick room).



- While waiting for the child to be taken home, the child must be supervised by only one staff person until the child leaves while maintaining a physical distance of 2-meters if possible.
- Keep the child comfortable by providing a separate cot and toys. Clean and disinfect the cot and all toys after the child leaves the center.
- Have the child wear a surgical-type face mask to cover the child's nose and mouth if possible. The staff caring for the child should also wear a surgical-type face mask. In addition, staff should perform hand hygiene and attempt to not touch their face with unwashed hands. Although not required, disposable gloves may be used when there is close contact with the child. Staff must ensure that they wash their hands or use hand sanitizer (if hands not visibly soiled) immediately upon removal of the gloves. The most important measures are proper hand hygiene and maintaining a 2-meter distance as much as possible.
- The supervisor or designate will notify the parent(s) to arrange for immediate pick-up of the child. If a parent cannot be reached, an emergency contact person will be contacted to pick up the child.
- Staff will document the symptoms observed, the date and time that symptoms occurred, and the program room the child attended on the Illness Tracking Form.
- Once the child has been picked up, the supervisor will ensure that the exclusion room (i.e. room where the child was separated from the group) is thoroughly cleaned and disinfected.

COVID-19 testing will be required for the child experiencing symptoms before s/he can return to care if the one symptom has not cleared up within the 24/48 hour period or if they exhibit more than 1 symptom after being sent home. The Covid-19 test results needs to be emailed or presented to the centre before re-entry is granted

The supervisor will contact Public Health to notify them of a potential case and seek input regarding the information that should be shared with staff and other parents.

Children who have been exposed to a confirmed case of COVID-19 or symptomatic person(s), should be excluded from the child care setting for 14 days.



Additional Infection Control Practices

- Regularly clean and disinfect high-touch surfaces including door knobs, light switches, faucet handles, handrails, and electronic devices at least every four hours to prevent the transmission of viruses from contaminated objects and surfaces. Additional cleaning and disinfecting may be required based on daily need.
- High touch electronic devices (i.e. keyboards, tablets) may be disinfected with 70% alcohol (i.e. alcohol prep wipes) while ensuring the solution makes contact with the surface for at least 1 minute.
- Low-touch surfaces (any surfaces at the location that have minimal contact with hands), must be cleaned and disinfected daily (i.e. Window ledges, doors, sides of furnishings etc.).
- Ensure garbage is kept in waterproof containers lined with plastic garbage bags. Staff must dispose of garbage daily. Any bodily fluids/blood-soiled items must be discarded in sealed bags.
- For creams and lotions during diapering, staff must never put hands directly into lotion or cream bottles. They must use a tissue or single-use gloves. Upon arrival into the centre, wipe the cream/lotion container with a disinfecting wipe.
- Reinforce messages with children to not share their food or drinks with others.
- Where meals or snacks are provided, ensure each child has their own individual meal or snack.
- When holding infants and toddlers, use smocks, blankets or cloth's over staff's clothing and change the smocks, blankets or cloths between children when possible.



- Avoid getting close to the faces of all children, where possible.

Physical Distancing Measures

Physical distancing may be difficult to maintain in the child care setting; however, steps should be taken to limit the number of people in close contact (i.e. within minimum 2-metres of each other) and to reduce the group sizes of children.

If feasible, consider the following physical distancing measures:

- Staggering the children's arrival and departure times, spreading out the use of the outdoor play area to allow smaller numbers of children to play together and thus avoid large groups.
- Eliminate large group activities.
- Keep the same group of children along with staff together throughout the day, do not combine groups of children or staff (i.e. at opening and closing).
- Make sure that the children are distanced from each other during mealtime, table work, and nap time, as much as possible. Stagger these times if possible.
- Ideally, try to avoid activities involving direct contact between the children as much as possible (i.e. holding hands or cuddling each other), as well as toy sharing (i.e. rather than playing a table game in which all the children touch the tokens or dice, it should be one child in the group who handles the material).
- Limit the number of children who are in the communal areas at the same time (i.e. alternate the groups of children in the activity rooms).
- Incorporate outside time in daily activities and open windows (weather permitting). Outdoor play is encouraged and should be offered in staggered shifts if possible.



COVID-19 PLAN FOR SICK CHILDREN, EDUCATORS, OR PARENTS WITH POSSIBLE COVID-19 OR EXPOSURE TO COVID-19

CHILDREN

If a child begins to experience symptoms of COVID -19 while attending the centre the following plan will be implemented:

- Immediately physically distance the child from others (centre: either in the office or if an empty room is available).
- The child will be supervised by an educator keeping 2 metres apart and wearing all PPE.
- If unable to keep 2 metres apart, it is recommended the child wear a mask, if the child is over 2 years of age ,staff can ask the child to wear a mask, if able to tolerate it.
- If the child is very ill, call 911 and inform the operator that it is a possible case of COVID-19.
- Notify the parents to come and pick up the child and remind them the child must be excluded from the centre for 24 hours after the last symptom was experienced. Direct parent to this link <https://www.canada.ca/coronavirus> and use the self assessment tool to determine if they need to seek medical testing for their child.
- Notify the local Public Health Unit of a potential case to seek advice to prevent/limit virus transmission and what information should be shared with other parents of children in the care setting.
- If the case is confirmed to be COVID -19, children and educators working in that child's specific group should be excluded from the centre for 14 days or as directed by the local Health Unit.
- The situation will be reported as a serious occurrence to the Ministry of Education within 24 hours; the comments will include that the situation is Covid-19 related.



EDUCATORS

If an educator begins to experience symptoms of COVID-19 while working, the following plan will be implemented:

Check your own temperature using an actual thermometer for accuracy (37.8C or greater is considered a fever). If you do feel ill, stay home and follow the Public Health Agency of Canada's step for self-assessment at <https://www.canada.ca/coronavirus>.

- The educator will immediately don a mask to protect those in the area.
- The educator will inform the executive director or supervisor and remove themselves from the children and any other adults(if applicable) as soon as possible while ensuring the children are supervised at all times.
- Coverage for a centre educator will be arranged as quickly as possible to allow the sick educator to leave the premises by the most direct route.
- The educator will consult with the local Public Health Unit to determine next steps.
- The educator will remain off work until symptoms are fully resolved or on advice of the local Public Health Unit and report back to the executive director or supervisor with the expected date of return.
- The executive director or supervisor will notify the local Public Health Unit to the potential case to seek advice to prevent/limit virus transmission and what information should be shared with parents of children and colleagues at the centre.
- If the case is confirmed to be COVID-19 children and educators working in that educator's specific group should be excluded from care for 14 days or as directed by our local Health Unit..
- The situation will be reported as a serious occurrence to the Ministry of Education within 24 hours; the comments will include that the situation is Covid-19 related



PARENTS:

If a parent of a child that attends the program is exposed to COVID-19 or experiences symptoms of COVID-19 the following plan will be implemented:

- The parent must exclude their children from the program for 24/48 hrs until the parents symptoms have completely diminished. If the parent develops more than 1 symptom they will be asked to take a Covid 19 test and wait for results to come back before their child can return to the centre. If the parent is not conducting a Covid test then the child will remain absent from the centre for 14 days and is exhibiting no symptoms or signs.
- The executive director or supervisor will inform the Health Unit of the potential case and follow any advice that is given on preventing/limiting virus transmission and what information should be shared with parents of children and educators at the centre.
- Check your own temperature using an actual thermometer for accuracy (37.8C or greater is considered a fever). If you do feel ill, stay home and follow the Public Health Agency of Canada's step for self-assessment at <https://www.canada.ca/coronavirus>.

COVID-19 CENTRE – DAILY EDUCATOR REQUIREMENTS

Check your own temperature using an actual thermometer for accuracy (37.8C or greater is considered a fever). If you do feel ill, stay home and follow the Public Health Agency of Canada's step for self-assessment at <https://www.canada.ca/coronavirus>.

- When you arrive at work and after your lunch break use the east door entrance (near kitchen) and confirm your temperature using the centre's non touch thermometer and record it in the Educator Screening book provided along with documenting that you have no signs or symptoms relating to COVID-19; make



sure the thermometer and recording pen are cleaned and disinfected between usage.

- If you feel sick or start to experience symptoms while at work, notify the supervisor or executive director immediately – Follow the Self Assessment Tool and remove yourself from the centre immediately.
- While working, physical distance between co-workers maintaining 2 metres apart – use your own pen for signing in and out the children or documenting notes and use individual staff cubbies or a designated area used only by the same staff member.
- Maintain physical distancing between staff in the staff room, during your breaks, sanitize space after use to be ready for the next staff to use.
- Educators will be assigned to one specific age group with no interaction between educators throughout the day. Communication can be by telephone or keeping the 2 metres apart.
- Supply/float staff will sign in and out of each room they cover, changing/cleaning masks, shield/ goggles and use proper hand hygiene between rooms.
- Educators entering a room that is not their assigned room must wear a mask and shield/goggles. Be sure to wash/sanitize hands before and after leaving the room.
- Bring extra clothing for example shirts, pants etc in case of bodily fluids transferred from a child.
- Use the provided portable hand sanitizers when outside.
- Children will be assessed for symptoms throughout the day by staff. An emergency response to a potential case- see Plan for Children.
- A mask and/or shield must be worn when/ if the 2 metre distance cannot be maintained.



- Practice good personal hygiene, respiratory etiquette. Signage re: proper hand hygiene and respiratory etiquette is posted in every playroom, staff room, washroom and common areas. Avoid touching your face and wear disposable gloves when needed – Recommended to wash your hands for at least 20 seconds with soap and warm water (wearing gloves does not replace handwashing).

- At the start of your shifts and after breaks
 - ❖ - Before eating or drinking
 - ❖ - Before preparing food
 - ❖ - After cleaning up meal and snack times
 - ❖ - After touching shared items
 - ❖ - After wiping a child's nose
 - ❖ - After using the washroom, changing diapers, or helping others with toileting
 - ❖ - After handling garbage/recycling
 - ❖ - Before leaving your workspace

COVID -19 BEFORE AND AFTER SCHOOL PROCEDURES

Children who are Dropped off

- If a child is dropped off at the centre by a parent/guardian, the regular drop off screening procedures are followed as detailed on the **Breaking Down of the Day** document.

Children who arrive by School Bus from St Anthony's, Ganaraska Trails and Beatrice Strong Public Schools.

- Connect with the school designate of each school listed, regarding any information on ill children that attend the schools or who ride back on the buses. Document any illness and instructions in the communication book and on the child's Ill Health Form in their file.



- After completing the **After School Pick Up Confirmation** list, educators will walk to the designated bus stop and receive the children off the bus.
- Educators will wear a mask and eye protection.
- Children will be encouraged to wear their masks. The children are not mandated to do so as the children are all under the Grade 4 masks requirement. Physical distancing of 2 meters will be maintained where possible.
- Educators will do a visual ill health check for all children along with a temperature check before entering the centre after school.
- Once back at the centre the children will be asked to wear their masks in their room and to wash their hands before they begin to play.
- Children will be spaced out during snack as much as possible.
- If a child starts to experience symptoms, the **Plan for sick children** will be implemented.

COVID-19 CENTRE – BREAKING DOWN THE DAY

Drop off: open * 6 am.

- The main door to the centre will be kept locked throughout the day and the parents must ring the doorbell when they arrive. Markers will be set up ensuring that parents are kept 2 metres apart while waiting to drop off. A screening checklist will be available and signs listing the symptoms of COVID- 19 will be posted on the main entrance door.
- Parents will **NOT** enter the playground at any time.
- From 6 am to 10 am an educator wearing PPE will greet the parents and children outside and screen both child and parent before the children can enter the facility using the Screening tool provided.. Parents will not be allowed in the building, the educator will escort each child to their designated room.
- Educators will wear a face shield and a non medical mask when screening and when physical distancing of 2 metres cannot be maintained. All equipment and supplies (i.e. hand sanitizer, thermometer, PPE) will be provided at the screening station for all staff conducting the screening.
- Symptomatic staff and children will be sent for testing. Those who test negative for COVID- 19 will be excluded from the program until 24 hours after all



symptoms are resolved, For those who test positive for COVID - 19, they will be excluded from the program for 14 days after the onset of symptoms.

- If the parent is experiencing any of the symptoms the child will not be able to attend and will not be able to return for 24 hours after the last symptom is experienced
- Records will be kept in our communication book of any visitor or delivery person etc. that must enter the building including name of the person, arrival and departure time and screening questions.
- children's items should be brought in labelled plastic bags, diaper bag or backpack and left at the centre for the week.
- Please limit sleep toys and blankets from home, these will be put into a plastic bag, labelled, and kept in their baskets
- Sleep toys and blankets from home are to stay at the centre for the week and be washed by us once a week
- Cloakroom – space between each child, if possible *
- Staff will help or have children wash their hands before they begin to play and should encourage additional times throughout the day
- Each program will have their own designated washroom, i.e. Preschool Room A uses only Preschool room A's washroom.
- Parents will be asked to ensure children have at least one full change of clothes, diapers for the week and indoor shoes.
- Staff should also have an extra shirt or top etc. should they be exposed to anything and need to change
- When holding the Infant/ toddlers, have them face away from you or if unable, have a receiving blanket over your shoulder or wear a smock.



Playroom:

- Each program will have their own designated toys and equipment.
- Easy to clean toys will be set out- no fabric or stuffed toys in the playrooms. – toys cleaned at the end of the day – see Additional Cleaning Duties
- Educators will sign the Additional Cleaning Duties checklist to ensure that the cleaning is done
- Incorporate more individual activities or activities that allow space between children
- No carpets for now
- No books on the shelves. Teachers will have a collection for their use , stored away.
- No group water, sand/ sensory bins will be used at this time. Playdough,craft materials along with individual sensory activities will be offered.
- No plastic food in the dramatic centre

Playground:

- Stagger outdoor time between groups to avoid the different groups playing together
- Outdoor play equipment will be disinfected between each program usage
- Sunscreen – Educators will dab or spray sunscreen on the children and the children will rub it in themselves, unless the child needs assistance, then the educator will apply using gloves.
- Parents will be asked to bring their own sunscreen. Please provide a spray bottle type to reduce contact. Each child's sunscreen will be labeled.



- Water bottles – will be labelled and a partitioned bucket will be provided to avoid touching – a slotted container like the one used for hockey players is suggested by the health inspector to keep bottles apart for the younger groups has been purchased.

Lunch and Snack Times:

- Each program will have their own lunch/ snack portioned in the kitchen area. Staff will portion into individual servings before serving it to each child.
- Lunch and snack times – space if able between children * no family style dining, We will serve the children at this time, staff will avoid sitting at the table with the children.
- No Children’s food from home – Infants that require formula, bottles or jarred food will be labeled and kept in their individual buckets inside Infant fridge

Rest Time:

- Rest time- head to toe, placed at least 2 metres apart if possible *
- After rest time bedding from home will be kept in plastic bags with their sleep toys and kept in their baskets ready for the next day
- Cots are designated and will not be shared. Cots are to be washed weekly unless required due to soiling or illness. – sprayed front and back and left to dry, stacked
- Soothers sent up to kitchen to be washed daily – labelled
- Rest time will be used for the regular cleaning and additional cleaning like high touched surfaces in the rooms as well as railings, doorknobs, light switches etc. Appropriate PPE will be worn by staff during cleaning – see Additional Cleaning Duties



- Educators will sign the Cleaning/Additional Cleaning Duties checklist daily to ensure the additional cleaning is done

Pick Up:

- No later than 530pm * so we have time to sanitize toys and surfaces for the next day
- Ensure parents include drop off and pick up times on their child's schedule so we are aware of the busy times of the day. Drop off times will be staggered to prevent long wait times.
- Please follow the physical distancing signage located on the sidewalk.
- Pick up time will be similar to the drop off procedures. Parents will ring the doorbell, call or message on DoJo and the children will be brought out to them. If unable to keep 2 metres apart from the parents, a mask and/or face shield will be worn by staff members.
- Parents can message staff 15 minutes ahead of pick up time through the Dojo app or call the centre directly . Giving staff time to gather the child and belongings and will meet parents at the main entrance. Parents will not be allowed into the back yard area.