



HAMILTON • WENTWORTH
Catholic Child Care Centres

HWCCCC COVID-19

Policies and Procedures

January 2022

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PROTOCOLS FOR COVID-19

Sick Policy During Covid-19

Symptomatic

An Educator, student, or child have one of the following COVID-19 symptom: fever/chills, cough, shortness of breath, decrease/loss of smell and taste; or two of the following sore throat, extreme fatigue, muscle aches/joint pain, headache, runny nose/nasal congestion or GI Symptoms (i.e. vomiting or diarrhea) and it is not related to a previously diagnosed condition, they must isolate as advised by public health. If the individual is fully vaccinated OR is a child under the age of 12 years old, they should isolate for at least 5 days from the onset of symptoms, they have no fever (without the support of medication) AND all other symptoms have been improving for 24hrs (or 48 hours if gastrointestinal symptoms). If the individual is not fully vaccinated and is 12 years old or older, or if they are immune compromised, they should self isolate for 10 days from the onset of symptoms, they are fever free, AND their symptoms have been improving for 24 hours (or 48 hours if gastrointestinal symptoms).

If you live with someone who is required to isolate due to COVID-19 symptoms, regardless of vaccination status, you should stay home while the symptomatic individual is isolating (for at least 5 days from onset of symptoms AND they have no fever AND all other symptoms have been improving for 24 hours or 48 hours if gastrointestinal symptoms) Should you develop **any** symptoms, the isolation period may be extended. If the household member tests negative on a PCR test or has two negative rapid antigen test (24hours between test), and symptoms are improving household members who do not have any symptoms are not required to isolate.

Educators and school age children who have been in contact with an individual who has tested positive for Covid-19, but does not live with them, must carefully monitor themselves or their child for symptoms for 10 days. Should you develop symptoms, follow the recommended isolation period.

Children 0-3.8 yrs will be required to isolate should they be deemed a close contact, have COVID-19 symptoms or have tested positive for COVID-19. We will continue to isolate cohorts and notify families of positive cases. Our youngest learners are unmasked and unvaccinated, these measures will help with easing the spread of COVID-19

In cases where a child shows symptoms of Covid-19 while in program. Parents will be called immediately, and the child (and any unvaccinated siblings) will be isolated. Parents are expected to pickup their child in a timely manner. If you are unable to pick your child up, then your designated (emergency) contact person will be notified. Educators will take the precautions of cleaning anything the child may have touched. After all children have left for the day a deep clean of the room will take place.

Parents with children who attend school, will be required to notify the school if their child is sick or absent due to Covid-19, as we are unable to share any information.

Positive Covid Test

If a parent/guardian is tested for Covid-19 as part of surveillance testing by their employer and they are **asymptomatic** they may continue to bring their child to the centre/program while awaiting test results.

A single positive case in a child 0-3.8 yrs, will result in all members of that group(cohort) that were in contact with the infected individual being excluded from the child care centre for 5 days. Educator may be exempted from isolation if they have maintained all PPE standards, this will be determined by the Leads in consultation with the Director Team.

Travel

If an Educator, student, or child has travelled outside of Canada in the last 14-days, and are not exempt from quarantine requirements, they must isolate for 14-days. Children under the age of twelve who travel outside of Canada will automatically be required to self-isolate for 14 days upon return.

Return to Child Care

If a child is unable to attend due illness (related to Covid-19) or because they were required to self-isolate, an attestation form must be completed and returned to the centre before the child can resume care.

Educators who are ill must complete the isolation period with symptoms improving before they are able to return to work. Should an Educator become ill while at work the must leave the centre immediately and self isolate.

Should Public Health provide additional instructions, you will be required to follow their direction in addition to our policies.

Screening Protocols

Every Director, Lead, Educator, student, child and essential visitors must complete the online Provincial COVID-19 school and childcare screening tool prior entering the childcare centre. If you do not have access to the internet HWCCCC can provide you with paper copies to take home so that you can complete screening prior to arrival. Educators are responsible to confirm that anyone entering their classroom has passed the self-screen. Proof of screening will not be required unless Public Health mandates it. Educators must record whether a person has passed or failed on the daily attendance. Entry will be denied to any individual who fails the screening procedure. During the school year screening is only required once a day for School Age, children who only attend in the afternoon do not need to be screened as they will have been screened prior to attending school. School Age programs will work closely with their school to ensure that information is shared in a timely manner.

Covid-19 Daily Records

Leads will maintain a pass/fail log of Educator's online Provincial COVID-19 school and childcare screening results, while Educator's will log children's result on the Daily Attendance sheets. All records will be kept in a secure location in case Public Health requires access to them. All sites should have paper copies of this survey available should the online tool be unavailable and for approved visitors.

Attendance Records:

Attendance records will log the arrival and departure of children and Educators within each classroom. Educators will maintain these records for one week, after which they will be stored by date in the office. Should an Educator or Child test positive the attendance records for that classroom will be shared with Public Health for contact tracing purposes.

Symptoms:

Symptoms include but are not limited to

One of the following:

- * Fever and/or chills, temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher.
- * 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 you already have)
- * Shortness of breath, out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions you already have).
- * Decrease or loss of taste or smell, not related to seasonal allergies, neurological disorders, or other known causes or conditions you already have.

Two or more of the following:

- * Runny Nose/nasal congestion (not related to seasonal allergies)
- * Headache
- * Extreme fatigue
- * Sore Throat
- * Muscle Aches/Joint Pain
- * Gastrointestinal symptoms such as Nausea, vomiting, and/or diarrhea, not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions you already have

If symptoms do not include any of the above, the individual is less likely to have COVID-19 and is advised to self-isolate until symptoms are improving for at least 24hrs (or 48 hrs if gastrointestinal symptoms)

Communication with Families

All communications with families regarding Covid-19 HWCCCC policies and procedures will either be posted on our website, at the front entrance of the centre, or communicated via email or the Daily Wonders App depending on the seriousness of the situation. We will be following the direction of the Medical Officer of Health and Public Health when determining if services, meetings, trips and or events must be cancelled. Families will be notified as soon as a decision is reached.

Personal Protective Equipment (PPE)

All Educators are required to wear medical masks and eye protection/face shields at all times. School Age Children (JK to Grade 8) are required to wear cloth masks at all times. The use of cloth masks for children ages 2-3.8 years of age is recommended but remains at the discretion of the parents. Exceptions to wearing masks and eye protection will be made on case to case basis. Accommodations will be based on medical documentation and in consideration of all risk factors.

Additional PPE should be worn when:

- With an ill child (Full PPE, gloves, gowns, mask and face shield/goggles/glasses)
- When doing a deep clean of the centre/program after a child/Educator has tested positive (Full PPE, gloves, gown, mask and face shield/goggles/glasses)
- When in contact with any body fluids such as saliva, urine, stool, vomit, mucus, blood (gloves, gowns, mask and face shield/goggles/glasses). Gowns are not required during normal diapering/toileting routines.
- An Educator/Lead may remove their masks when they are alone in a designated office space, or as long as they can guarantee that social distancing will be maintained.

Entering/Exiting the Centre

Educators –

- Educators must put on a fresh mask and disinfect face shield/goggles just prior to entering the centre. If an educator leaves the premises, they must change their PPE before returning. Alternatively, if they remove their mask immediately after leaving the centre and store it in a designated container they may use the same mask for the remainder of the day.
- Bring only what is necessary into centre.
- Should an Educator need to bring their cellphone into the classroom with them, then cellphones must be cleaned with disinfectant. This would also be applicable after the Educator returns from break
- In some locations, cell phones may be permitted in programming so that Educators can be notified of a parent arrival
- Each Educator is designated a space to store personal items that is separate from other Educators. Each Educator is responsible for cleaning and disinfecting their area at the end of each shift
- Educators who bring lunches from home and can store them in their individual bins (it is recommended that Educators use ice packs and thermal bags to keep lunches cold) or the centre refrigerator
- Educators are encouraged not to leave the centre during their shift, if they must leave the centre for an appointment it should be scheduled later in the day, whenever possible

Children (Infant – Preschool) –

- No outside food products will be allowed in the infant, toddler and preschool classrooms. If there are allergy or dietary restrictions, they will be purchased by the centre.
- Children are allowed to bring in a cup or water bottle into programming as long as it is clearly labelled and not shared with other children
- Any diapers or creams brought into the centre will need to be disinfected before storing
- Avoid having children gather at the cubbies
- Avoid holding hands
- All blankets will be laundered at the centre each week, unless cot is shared with another child, in which case they will be laundered after each use. Please only send items which can withstand this type of cleaning
- It is recommended that no additional sleep toys are sent to the centre, however, if it is necessary for the comfort of the child the toy must be able to withstand weekly laundering and sanitizing

School Age Children –

- Children will be provided snacks during regular programming and should not bring in additional food.
- School Age children are only allowed to bring lunch into program during PD days and school breaks.
- Children in School Age programs are encouraged not to bring any outside toys or materials into the program. Back packs will be kept in a designated area during programming

Parents/Guardians

- Your entrance to the Centre will be staggered to ensure physical distancing
- Parents/guardians must enter the designated doors for the Centre/Before and After Program
- Medical masks are mandatory for parents/guardians to enter the building (will be available at our entrance if needed)
- Parents must apply hand sanitizer upon entry and exit (will be provided at the entrance)
- All children and adults must have completed the COVID-19 screening tool, you may be asked to show proof of your morning screen
- Please take your child(ren) directly to their classroom door where the educator will receive them
- Please do not stop at other classrooms or congregate in hallways and cubby areas
- At this time, you are not to interact with others inside the school. Please enter and exit in a timely manner, this will allow the next family access to the building
- We ask that you arrange your arrival/departure times to allow you extra time to get to your next destination, as you may have to wait before entering the building.

Exiting the centre –

- Children must take all personal belongings home with them at the end of each day (with the exception of items regularly stored on site)
- Educators must ensure that everything has been thoroughly cleaned before leaving.
- After leaving the centre, all masks and face shields should be removed and either discarded or cleaned thoroughly

Social Distancing

- Educators are permitted to support multiple cohorts, while maintaining all Covid-19 safety protocols
- Small groups rotate through available space indoors and outdoors
- Encourage children to spread out in classrooms and common areas (cubbies, outside)
- Stagger or alternate lunchtime and outdoor playtime; so that two groups are not sharing a space (there must be a 6ft divider between spaces)
- Incorporate more individual activities or activities that encourage more space between children
- Avoid holding hands
- Avoid sharing of toys, materials between children, where possible, without disrupting play
- Place cots 2 meters apart where possible, and interchange head to toe sleeping positions.

Common Areas/Washrooms

All Centres and programs should schedule the use of common areas (ie. Gyms & playgrounds) and washrooms to ensure that multiple cohorts are not using the same space at the same time. Educators must clean these spaces after their cohort has finished using them.

Indoor Activities

The following practices are necessary to reduce the risk of disease transmission to children when playing with toys and participating in activities:

- All child care staff, essential visitors, and students on educational placement are required to wear masks (e.g. surgical/procedural) and goggles/face shield while inside a child care/school setting, including hallways
- Physical distancing is promoted within groups by spreading children out and incorporating individual activities or activities to encourage more space between children
- Children must practice hand hygiene before and after playing with toys or participating in sensory play activities
- Classrooms must be provided disinfectants and have a designated hand washing sink

- Toys must be maintained in good repair and inspected for damage. Damaged toys that compromise cleaning and disinfection must be discarded
- Toys must be easy to clean and be able to withstand frequent cleaning and disinfection
- Toys must be returned to a cleaning bin after each use and cannot be put back into play until they have been properly disinfected
- Water play and sensory bins will not be used unless they are for individual use only
- Materials should be spread throughout the classroom and washed after each use
- Toys that are mouthed or contaminated by body fluids must be cleaned and disinfected immediately before handling by another child
- Mouthed toy bins must be designated and clearly labelled for cleaning
- Children should not share homemade playdough and slime, due to its high moisture content, it may harbour and allow the growth of microorganisms. Used homemade playdough and slime can be stored in labelled individual containers for reuse, but must be discarded after use or sent home with the child at the end of the week

Outdoor Play

- Children K-12 years of age are required to wear masks outside
- Outdoor play will be scheduled in small groups
- Where outdoor play space is large enough to accommodate multiple groups, the space will be divided with physical distancing markers/pylons to ensure groups are separated by at least 2 meters
- Leads will Schedule time for each cohort to access common areas (gyms, outdoor playgrounds, cubbies)
- Natural play structures and mud kitchens will be cleaned and disinfected before and after each group
- All toys will be disinfected after each group has finished outside
- Educators can take children for walks on public paths but should maintain social distancing,
- School age children may visit public playgrounds and use equipment however each child must sanitize their hands before and after use.
- Educators are encouraged to bring inside toys outside to avoid sharing
- Outdoor sandboxes and mud kitchens can be used, toys used with these activities should be divided into cohorts and kept in separate bins.
- Waterplay can also be implemented outdoor, mask do not need to be worn as long as social distancing is maintained
- Sunscreen will be put on inside the classroom and Educators should wash hands between applications
- Parents will be required to provide individual sunscreen for each child

Cooks/Food Guidelines

- Only one educator/cook with a current Food Handler Certificate will be responsible for preparing meals and snacks
- School Age programs are encouraged to prepare the morning snack prior to leaving the day before. A designated person will be responsible for preparing all snacks, Educators may pick these snacks up on the way to their classroom
- This person must not be the same person who is assigned to cleaning and disinfecting, or the person assigned to look after ill children
- Cooks will be required to wear masks while in the kitchen, masks and face shields/goggles when interacting with other staff and children, and when exiting the kitchen. Cooks who are not vaccinated must wear masks and eye protection at all times
- Educators should avoid entering the kitchen while the cook is working
- Cooks may use fans in the kitchen, however the airflow should be directed upwards away from surface areas, and fans should be wiped down once a day
- Groceries will be cleaned/disinfected before storing
- The kitchen space must be thoroughly cleaned morning and night, and between use
- Food may be served “family-style” but only one educator is allowed to use the serving utensils to portion out the meal to children. Children may not serve themselves although the same plate may be used for second servings
- Educators will monitor children so they are not sharing food
- School Age Children who are required to wear masks in program may take them off during meal or snack time as long as the 2-metre social distancing standard is maintained, or plexi glass dividers are in place. Masks should be placed face down on a piece of clean paper towel or a designated container with their name on it. Masks must be put back on immediately after eating.
- Educators **cannot** eat with the children, snacks/lunch should be taken to the break room and eaten while maintaining social distancing.
- Provide a bin with lid, that is lined with a garbage bag to discard food. Take garbage outside of classroom after each snack/lunch
- If the Food Preparation area is in the same space as the laundry machines, then food preparation can not be done at the same time as laundry.

School Age Lunches During Breaks and PD Days

- School Age children are allowed to bring their own packed lunches during breaks and PD days
- Educators should ensure proper hand hygiene before and after eating
- School Age children may have their own drink bottle (or has access to disposable cups) that is labeled, kept with them during the day, and not shared
- Ensure water bottles/disposable cups are filled from water fountains rather than drinking directly from the water fountain mouthpiece;
- Ensure each camp participant has their own individual meal or snack with no common food

- Do not have self-serve food items or have open access dishware/cutlery
- Educators should reinforce the no food sharing policies; and,
- Maintain physical distancing within and between cohorts while eating/drinking.

Isolation Space Protocols

Each Centre or School Age program will have a designated isolation space(s) which will be used if children become sick. For full-day centres, the Float or Leads will be assigned to attend to the sick child until parents can pick them up. If the Float or Lead is not readily available to support the child, then the classroom teacher will provide support until the Float or Lead can arrive. Any Educators supporting an ill child will put on full PPE once a child becomes symptomatic, this includes gloves, masks, face shield and gowns. Children (when tolerated and above the age of 2) should wear a surgical mask. All equipment needed to care for the child and disinfect the space will be kept readily available at all times.

In School Age programs where there is only one Educator in the room, the symptomatic child will be placed in the isolation space and direction will be given to the other children to continue their play on the opposite side of the room. Social distancing will be maintained until a Float or Lead becomes available. Once the Float or Lead becomes available, the classroom teacher will remain with the sick child while the Lead/Float escorts the remaining children outside or make use of an alternate space until the parent has been able to pick up the child and the space has been cleaned.

Once the room has been thoroughly cleaned the Lead/Educators should discard all PPE and put on a fresh mask and face shield.

If a Child is or Educator is Sick:

- Symptomatic children will immediately be separated from others and remain in the isolation room/space until they can go home
- Symptomatic Educators will immediately put on full PPE and insure that they maintain social distancing until they can be replaced at which time they will go home
- If possible, anyone who is providing care to the child should maintain a distance of 2 metres and avoid contact with the child's respiratory secretions and perform hand hygiene after any contact with the ill child
- Symptoms and temperature must be documented using the Covid-19 Daily Screening Survey
- Contact parent or guardian and remind them of our sick policy, if parents can not be reached the designated contact person will be called
- Increase ventilation in the designated exclusion room if possible (e.g., open windows)
- Environmental cleaning of the isolation room/space should be conducted once the child has been picked up or the Educator has been replaced
- Educators will immediately clean or disinfect any items the child has come into contact with
- In programs where an isolation room is not designated, Educators will create a space using desks or tables to ensure that other children do not have access

- Educators and children who were in the same room with a child/educator who tests positive for Covid-19 will remain in the classroom until all parents arrive to pick up their children at which point the Educator can leave. Once everyone has left, a third person will be designated to clean the room thoroughly, they must wear full PPE while doing this. Children and Educator may not return to the centre for 5 days or until further direction is provided by Public Health

Equipment Needed for Room or designated space:

- Chair and Cot to make Child comfortable
- Kleenex
- Water
- Thermometer (if available)
- Hand Sanitizer
- Cleaning and disinfecting supplies (including extra garbage bags to dispose of waste)
- phone to receive direction from Leads

Serious Occurrences

Leads will notify the Director of Operations/ designate immediately if a Child, Educator, or Visitor to the centre has a confirmed case of COVID-19. A serious occurrence must be filed within 24 hours of receiving the information

Should a second case of Covid-19 be confirmed this to can be added to the original report. A Serious Occurrence will also be filed if a room, centre or program is closed due to Covid-19 by Public Health

All serious occurrences notification form need to be posted, for 10 business days, where parents/guardians can review them unless Public Health advises otherwise

Ratios

Educator to Child ratios;

- Infant – 3 Educators to 10 Children
- Toddler – 3 Educators to 15 Children (1:5)
- Preschool – 3 Educators to 24 Children (1:8) max 24
- JK/SK – 2 Educators to 26 Children (1:13) max 26
- Primary/Junior (64 mths to 13years) – 2 Educators to 30 Children (1:15) max 30
- Junior (9-13yrs) – 1:20 max 20

Leads, cooks, organizational support staff and community partners will not be considered part of ratio or the cohort.

Prioritization

Where space is limited the recommendations to prioritize are:

- Educators requiring child care in order to return to work
- Returning children served through emergency child care to their original placement and continuity of service for these families
- Care for families where parents must return to work and that work outside of the home
- Families with special circumstances that would benefit from children returning to care, such as children with special needs or high-risk families

Shifts

During Covid-19, HWCCCC will implement the childcare ratios recommended by Public Health. Educator's schedules will vary from site to site depending on the Individual drop off and pick up times of children. Our goal will be to maintain the same schedule for 7 days while ensuring the recommended ratios and all safety measures are maintained throughout the day.

Cleaning and Disinfecting Protocols

Specific cleaning and disinfecting schedules must be created and completed for each cohort, washroom, kitchen, common areas, indoor/outdoor play areas, and other areas accessed by the program (Cleaning Checklist). Educators must sign off after they complete cleaning. It is recommended that plush toys, play clothes, books, puzzles, cardboard/boxboard, etc. that are absorbent and cannot be easily cleaned and disinfected be removed.

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.

When there are two or more Educators in a classroom, Educators will work together to ensure that the cleaning protocols are implemented and that the cleaning checklists are completed. This effort will be supported by the float who may clean the classroom/playground when not in use.

In the case of School Age programs, the school janitorial staff will be responsible for cleaning the classrooms before and after use. The Educators will be responsible for cleaning any shared spaces like bathrooms, gym equipment and outside toys after each use. Cleaning checklist for these common areas should be completed after use.

Staff room/washroom – each Educator is responsible for cleaning and disinfecting after each use.

Office – each Educator is responsible for cleaning and disinfecting after each use including - desk, phone, computer, chair arms, door handles, and light switches.

How to Disinfect High Touch & Low Touch Surfaces/Toys

- All Centres use Oxivir Five 16. To disinfect using this product it must remain on the surface area you are cleaning for 5 minutes, the area can then be wiped with a paper towel or allowed to air dry
- Plastic/soother/cups toys that can be cleaned using a dishwasher must be put through the sanitization cycle. This can only be done before or after the cook is done for the day

High-touch and Low-touch Surfaces

- High-touch surfaces include: cubbies, sinks, faucet taps, toilets, railings, high chairs, feeding tables, plastic bibs, cribs, doorknobs, light switches and electronic devices that are touched frequently by hands. These surfaces are required to be cleaned a minimum of twice daily
- Low-touch surfaces include: floors, walls and windowsills that are touched less frequently. Low-touch surfaces will be cleaned and disinfected once a day by janitorial staff
- Carpets and floor mats that can not be adequately cleaned should be removed from the centre

Laundry

- Receiving blankets should be laundered after each use
- Only one Educator should be in the laundry room at a time
- Only one Educator at a time should be responsible for doing laundry
- Ensure that laundry is washed using a sanitary or high heat setting plus detergent
- Fully dry items on a high heat setting
- Disinfect hampers/basket before re-filling with clean laundry
- Fold laundry in designated laundry area
- Close dryer doors when not in use.
- Don't shake or hug dirty laundry
- Don't leave soiled laundry or baskets on top of machines.
- Disinfect door handle and lid on each machine after use

Sleep Equipment and Arrangement

- Children must be placed in a sleeping arrangement that minimizes the spread of respiratory infections (i.e. head to toe) or two meters apart if possible
- Sleep equipment must be labelled and assigned to a single child
- Cots/Crib mattresses must be made of a cleanable material
- Crib mattresses must be cleaned and disinfected when contaminated (soiled or wet) or on a weekly basis. If cribs cannot be stored without touching, they must be cleaned daily

- Linens (i.e., infant blankets and single-use face/hand cloths) and cot covers are laundered in between children, or weekly at a minimum if used by the same child. Daily laundering of linens and cot covers is not required unless being shared between children.

Floats/Supply Educator

- Float and Supply Educators must wear masks and face shields/goggle when entering the classroom where children are unmasked
- Float and Supply Educators must complete full PPE/Covid-19 training prior to starting
- Floats may relieve lunches; however, Centres are encouraged to keep them with the same classrooms whenever operationally feasible
- Educators are encouraged to take vacation in intervals of 1 week (Mon-Fri) so that supply staff can stay with the same group for the week

Training Requirements

Please keep a log book of all completed training. Educators can not begin working until they have watched/read the materials and demonstrated knowledge.

| | | |
|---|---|--|
| Educator Name: | | Date: |
| 7 Steps of Hand Hygiene | https://www.publichealthontario.ca/en/videos/7-steps-handhygiene | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Putting on Gloves | https://www.publichealthontario.ca/en/videos/ipac-gloves-on | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Putting on Mask and Eye Protection | https://www.publichealthontario.ca/en/videos/ipac-maskeyes-on | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Taking off Mask and Eye Protection | https://www.publichealthontario.ca/en/videos/ipac-maskeyes-off | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Taking off a Gown and Gloves | https://www.publichealthontario.ca/en/videos/ipac-gowngloves-off | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Taking off Full Personal Protective Equipment | https://www.publichealthontario.ca/en/videos/ipac-fullppe-off | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Putting on Full Personal Protective Equipment | https://www.publichealthontario.ca/en/videos/ipac-fullppe-on | <input type="checkbox"/> Watched <input type="checkbox"/> Demonstrated |
| Sick Policy & Isolation Room | Sick policy, Screening Protocols, Isolation Room, Removal from program | <input type="checkbox"/> Read <input type="checkbox"/> Demonstrated |
| Cleaning Protocols | Laundry, Classrooms, Common Areas, Outdoors, how to use disinfectants, High touch/low touch surface areas | <input type="checkbox"/> Read <input type="checkbox"/> Demonstrated |
| Play Protocols | Play protocols | <input type="checkbox"/> Read <input type="checkbox"/> Demonstrated |
| Social Distancing | Common areas, Outside and in the classroom | <input type="checkbox"/> Read <input type="checkbox"/> Demonstrated |
| Sleep Protocols | Bedding, head-to-toe placements, storage of personal items, cleaning | <input type="checkbox"/> Read <input type="checkbox"/> Demonstrated |
| Eating Protocols | Spacing, Individual servings, cleanup, utensils | <input type="checkbox"/> Read <input type="checkbox"/> Demonstrated |

I have completed the above training and feel confident that I can implement these protocols.

Employee Signature: _____ Date: _____

Lead Signature: _____ Date: _____

Appendix A – PERSONAL PROTECTIVE EQUIPMENT

Guidance for wearing non-medical masks

What does a non-medical mask do?

A mask acts as a barrier. It reduces the chance of spreading respiratory droplets to others and prevents droplets from landing on surfaces when you cough or sneeze.

Wearing a non-medical mask in public or other settings is not a replacement for proven measures such as handwashing, physical distancing, and staying home unless it is absolutely essential to go out.

When to wear a non-medical mask

Public Health suggests that you wear a non-medical mask when you must go out in public and can't keep a safe distance of 2 metres (6 feet) from others (for example, when grocery shopping or using public transit).

How to use a non-medical mask safely

Non-medical or cloth masks have limits and you need to use them safely.

Your mask should:

- fit snugly but comfortably against the side of the face covering your nose and mouth
- be secured with ties or ear loops
- include multiple layers of fabric
- allow for breathing without restriction
- be disposable or be able to be washed and machine dried without damage or change to shape

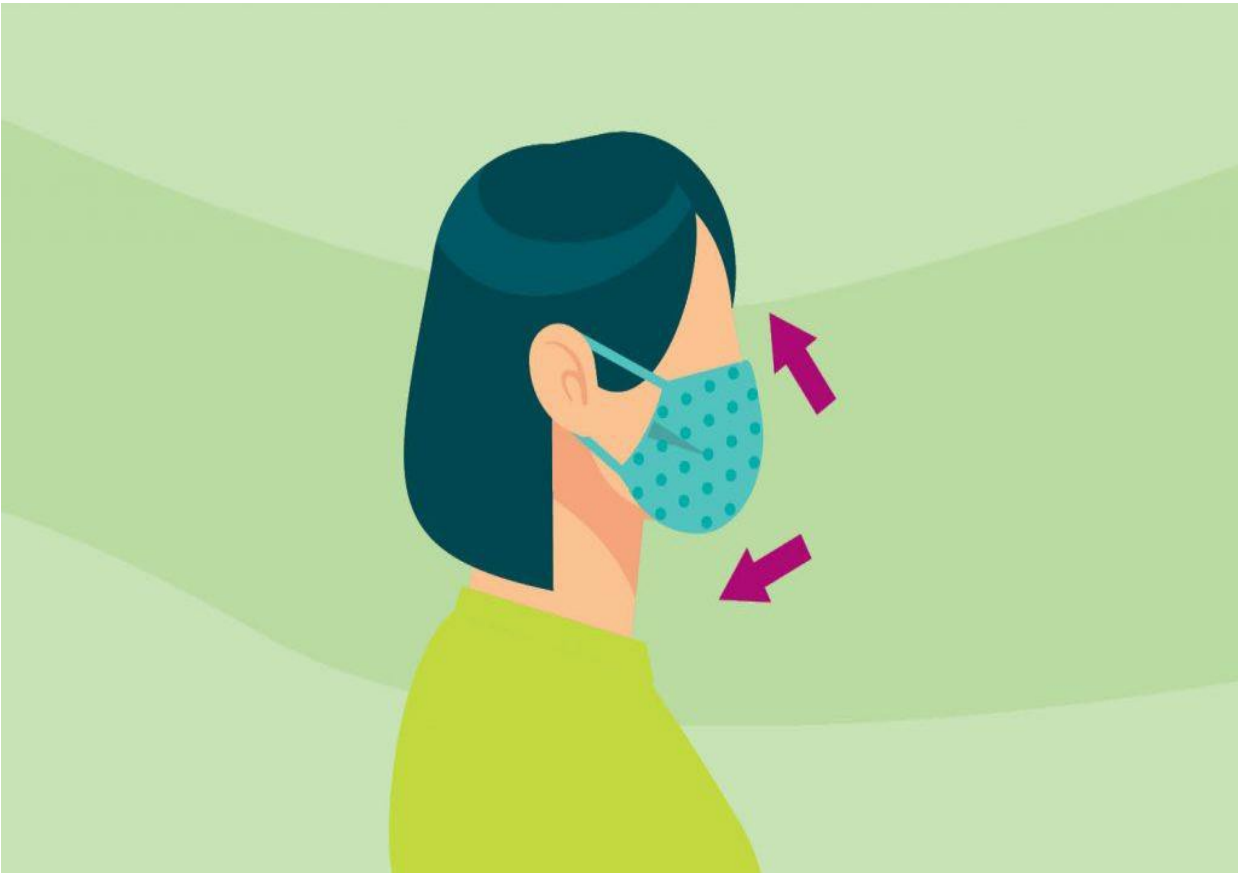
Using your mask

To use your mask, you must:

- wash your hands immediately before putting it on
- avoid touching or adjusting your mask while wearing it
- be sure not to touch or rub your eyes while you wear it
- don't share your mask with others

Do not place a mask on:

- children under age 2
- anyone who has trouble breathing or is unconscious
- anyone that cannot remove the mask without help



Removing your mask

- Masks can become contaminated on the outside or when touched by hands.
- To remove your mask safely you must:
- Be very careful not to touch your eyes, nose, or mouth when removing your mask.
- Wash your hands immediately after you remove it.
- Place your used mask directly into the washing machine or garbage
- Wash your mask with other items using a hot cycle, and then dry it thoroughly. If you can't wash your mask, throw it in the garbage right away.

Hand Washing Procedures

- Children should wash their hands...
- When they arrive at the centre and before they go home
- Before eating or drinking
- After a diaper change, using the toilet
- After playing outside
- After sneezing or coughing into hands
- Whenever hands are visibly dirty

Child Care Educators should wash hands...

- When they arrive at the centre and before they go home
- Before handling food, preparing bottles, feeding children
- Between handling raw and cooked food – cross contamination is a risk
- Before giving or applying medication or ointment to a child or self
- After changing diapers, assisting a child to use the toilet, using the toilet
- After contact with body fluids (e.g. runny noses, spit, vomit, blood)
- After cleaning, and removing gloves
- After handling garbage
- Whenever hands are visibly dirty

Seven steps to proper handwashing

- Wet hands with warm running water.
- Apply a small amount of liquid soap. Antibacterial soap is not required.
- Rub hands together for at least 20 seconds. Rub palms, backs of hands, thumbs, wrists and between fingers and under nails/creating a lather and
- Rinse off all soap with running water.
- Dry hands with a clean, disposable towel
- Use paper towel to turn off tap
- Discard the used towel in the waste container

REDUCE THE SPREAD OF COVID-19

WASH YOUR HANDS



1
Wet hands with
warm water



6
Turn off tap
using paper towel



2
Apply
soap



3
For at least
20 seconds, make
sure to wash



4
Rinse
well



5
Dry hands well
with paper towel



palm and back
of each hand



between fingers



under nails



thumbs

Coughing Etiquette

Why should I cover my mouth and nose with a tissue when I cough or sneeze?

Germs such as influenza, cold viruses, and even whooping cough are spread by coughing or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs. When you touch an object such as a door handle, subway pole, telephone or computer keyboard with unclean hands, you are spreading germs. The next person who touches these objects may pick up germs and get sick if they do not clean their hands before touching their eyes, nose or mouth.

How do I stop the spread of germs if I am sick?

To stop the spread of germs:

- Cover your mouth and nose with a tissue when you cough, sneeze, or blow your nose.
- Clean your hands with soap and warm water or an alcohol-based hand sanitizer.
- If you don't have a tissue, cough or sneeze into your sleeve, not into your hands.
- Put used tissues in the garbage.
- Keep your distance (more than 2 metres / 6 feet) from people.
- Stay at home if you are sick.
- Don't share eating utensils (e.g., cups or straws), toothbrushes or towels.

COVER YOUR COUGH

Stop the spread of **germs** that can make you and others sick!



Cover your mouth and nose with a tissue when you cough or sneeze. Put your used tissue in the waste basket.



If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, not your hands.



You may be asked to put on a facemask to protect others.

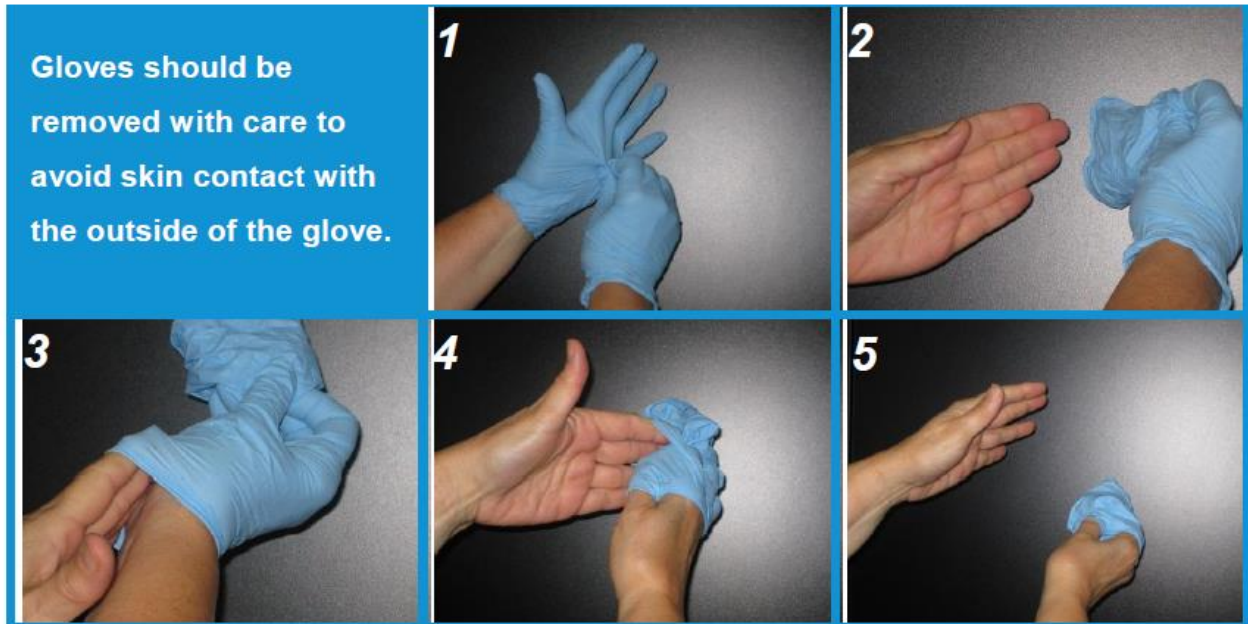


Wash hands often with soap and warm water for 15 seconds. If soap and water are not available, use an alcohol-based hand rub.



For more information please contact Public Health Ontario's Infection Prevention and Control Department at ipac@oahpp.ca or visit www.publichealthontario.ca

Steps to Put on and Remove Gloves and PPE



Using disposable gloves

- Disposable gloves do not replace handwashing.
- Educators must wash their hands before gloves are put on and immediately after gloves are removed.
- Educators should wear disposable gloves to clean up blood, vomit, urine and stool.
- Educators should wear disposable gloves when they have cuts on their hands and when the diaper change involves a messy bowel movement.
- Educators should wear gloves whenever a child is showing symptoms of illness

Five steps for putting on and taking off disposable gloves

- Wash your hands.
- Put on gloves. Be careful not to tear or puncture the glove.
- Remove gloves by using a glove-to-glove and skin-to-skin technique. Grasp the outside edge near the wrist and peel away, rolling the glove inside out. Reach under the second glove and peel away.
- Discard gloves immediately into the garbage
- Wash your hands

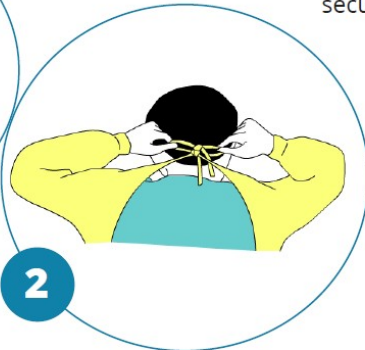
Putting on Personal Protective Equipment

1. Perform Hand Hygiene



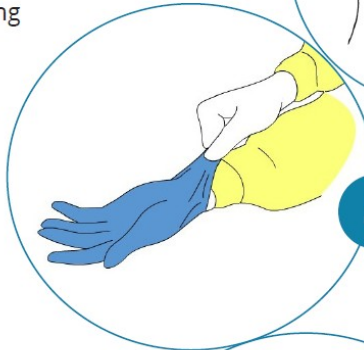
2. Put on Gown

- Tie neck and waist ties securely



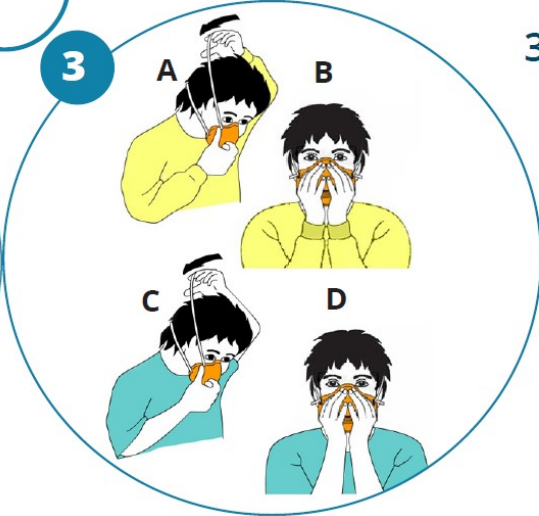
5. Put on Gloves

- Put on gloves, taking care not to tear or puncture glove
- If a gown is worn, the glove fits over the gown's cuff



3. Put on Mask/N95 Respirator

- Place mask over nose and under chin
- Secure ties, loops or straps
- Mould metal piece to your nose bridge
- For respirators, perform a seal-check



4. Put on Protective Eyewear

- Put on eye protection and adjust to fit
- Face shield should fit over brow

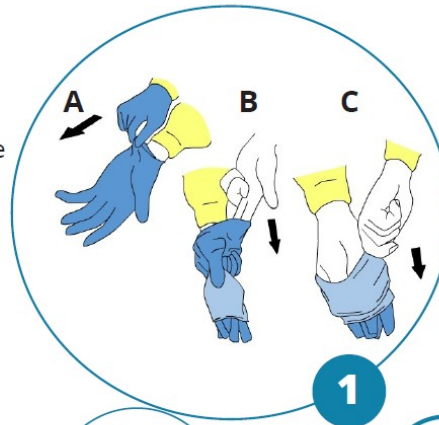


For more information, please contact Public Health Ontario's Infection Prevention and Control Department at ipac@oahpp.ca or visit www.publichealthontario.ca.

Taking off Personal Protective Equipment (PPE)

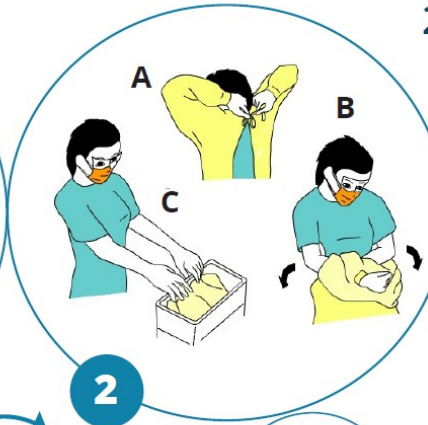
1. Remove Gloves

- Remove gloves using a glove-to-glove / skin-to-skin technique
- Grasp outside edge near the wrist and peel away, rolling the glove inside-out
- Reach under the second glove and peel away
- Discard immediately into waste receptacle



2. Remove Gown

- Remove gown in a manner that prevents contamination of clothing or skin
- Starting with waist ties, then neck ties, pull the gown forward from the neck ties and roll it so that the contaminated outside of the gown is to the inside. Roll off the arms into a bundle, then discarded immediately in a manner that minimizes air disturbance.



6. Perform Hand Hygiene



6

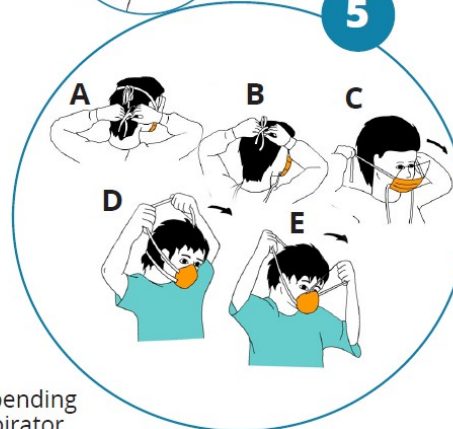
3. Perform Hand Hygiene



3

5. Remove Mask/ N95 Respirator

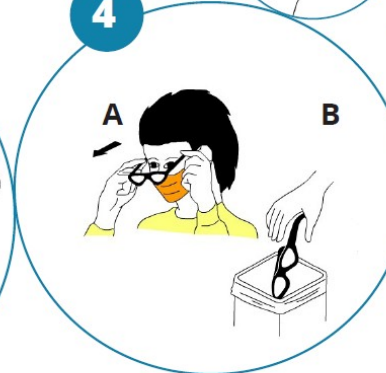
- Ties/ear loops/straps are considered 'clean' and may be touched with hands
- The front of the mask/respirator is considered to be contaminated
- Untie bottom tie then top tie, or grasp straps or ear loops
- Pull forward off the head, bending forward to allow mask/respirator to fall away from the face
- Discard immediately into waste receptacle



5

4. Remove Eye Protection

- Arms of goggles and headband of face shields are considered to be 'clean' and may be touched with the hands
- The front of goggles/face shield is considered to be contaminated
- Remove eye protection by handling ear loops, sides or back only
- Discard into waste receptacle or into appropriate container to be sent for reprocessing
- Personally-owned eyewear may be cleaned by the individual after each use



4

— This is an excerpt from Routine Practices and Additional Precautions In All Health Care Settings (Appendix L) and was reformatted for ease of use.

Covid-19 Daily Screening Survey

Name:

Arrival/Depart:

Phone Number:

| Question | Answer | | Comments |
|--|------------------------------|-----------------------------|----------|
| Question 1 – In the last 5 days (10 days if over 12 and unvaccinated) have you experienced any of these symptoms? Choose any/all that are new, worsening, and not related to other known causes or conditions you already have. | | | |
| Fever and/or chills Temperature of 37.8°C/100.0°F or greater | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Temp: |
| 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) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Shortness of breath Out of breath, unable to breathe deeply (not related to asthma or any other known causes or conditions) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Decrease or loss of taste of smell Not related to seasonal allergies, neurological disorders, or any other known cause or conditions) | | | |
| Question 2 – In the last 5 days (10 days if over 12 and unvaccinated) have you experienced any of these symptoms? | | | |
| Sore throat or difficulty swallowing Painful swallowing or difficulty swallowing | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Runny or stuffy/congested nose (nasal congestion and/or rhinorrhea) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Headache that is new and persistent, unusual, unexplained, or long-lasting (If the you received a COVID-19 vaccination in the last 48 hours and is experiencing a mild headache that only began after vaccination, select “No.”) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Nausea, vomiting and/or diarrhea | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Extreme Tiredness Unusual, fatigue, lack of energy (not related to depression, insomnia, thyroid dysfunction, sudden injury, or other known causes) (If you received a COVID-19 vaccination in the last 48 hours and is experiencing mild fatigue and/or mild muscle aches/joint pain that only began after vaccination, select “No.”) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Question 3 – In the last 5 days (10 days if over 12 and unvaccinated) have you tested positive for Covid-19 on a PCR or Rapid Antigen Test? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Question 4 – Do you live with someone who is currently; Isolating because of a positive Covid-19 test, isolating because of Covid-19 symptoms, and/or waiting on Covid-19 test results? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Question 5 – Have you been identified as a “close contact” of someone who currently has covid-19 and been advised to self isolate? If public health guidance provided to you has advised that you do not need to self-isolate, select ‘No’ | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

| | | |
|--|--|--|
| <p>Question 6 - Has a doctor, health care provider, or public health unit told you that you should currently be self isolating(staying home)? This can be because of an outbreak or contact tracing.</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | |
| <p>Question 7- Do any of the following apply? In the last 14 days, have you travelled outside of Canada and were told to quarantine? In the last 14 days have you travelled outside of Canada and were told to not attend school/childcare? In the last 14 days, someone you live with returned from travelling outside of Canada and is isolating while awaiting results of a Covid-19 test? If exempt from quarantine requirements (for example, an essential worker who crosses the Canada-US border regularly for work), select "No."</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> | |

PASS

FAIL

Signature of Educator doing the screening: _____



HAMILTON • WENTWORTH
Catholic Child Care Centres

ATTENTION

VISITORS, EDUCATORS AND CHILDREN
THERE HAS BEEN AN OUTBREAK OF

**PLEASE SEE THE LEAD SHOULD
YOU HAVE ANY QUESTIONS OR
CONCERNS**



COVID-19 Screening for children/students

Please complete before entering the child care/JK-12 school setting.

Updated Sept. 1, 2021

1. Does the child/student have any of the following new or worsening symptoms?***



Fever > 37.8°C and/or chills



Cough



Difficulty breathing



Decrease or loss of taste/smell



Nausea, vomiting or diarrhea

• If the child/student has a health condition diagnosed by a health care provider that gives them the symptom, select "No". If the symptom is new, different or getting worse, select "Yes".

If "YES" to any symptom:



Stay home & self-isolate



Get tested

Or



Contact a health care provider

2. Does anyone in your household have one or more symptoms of COVID-19 and/or are waiting for test results after having symptoms?

Yes

No

• If the child/student is fully vaccinated* or has tested positive for COVID-19 in the last 90 days and been cleared, select "No".

3. In the last 10 days, has the child/student tested positive on a rapid antigen test or a home-based self-testing kit?

Yes

No

• If they have since tested negative on a lab-based PCR test, select "No".

4. Has the child/student been notified as a close contact of someone with COVID-19 or been told to stay home and self-isolate?

Yes

No

• If the child/student is fully vaccinated* or has tested positive for COVID-19 in the last 90 days and been cleared or public health has said the child/student does not have to self-isolate, select "No".

5. In the last 14 days, has the child/student travelled outside of Canada AND been advised to quarantine per the [federal quarantine requirements](#)?

Yes

No

If "YES" to questions 2,3,4 or 5:



Stay home & self-isolate



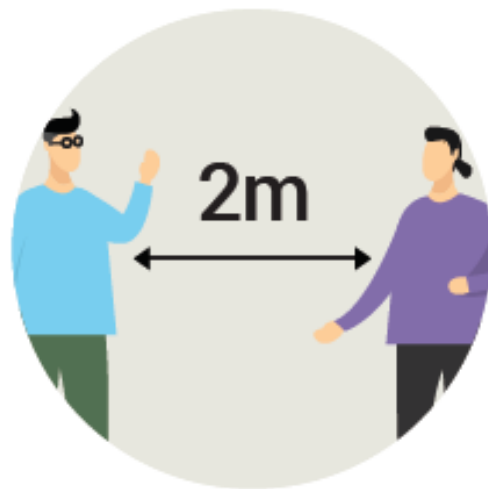
Follow public health advice



* Fully vaccinated means 14 days or more after getting a second dose of a two dose COVID-19 vaccine series or one dose of a single dose series.

** Anyone who is sick or has any symptoms of illness should stay home and seek assessment from their health care provider if needed.

HELP **STOP** THE SPREAD OF COVID-19



KEEP A 2M DISTANCE

between yourself and others
who don't live in your house.
If you can't keep your distance,
consider wearing a non-medical face mask.

Appendix D – Disinfectant Data Sheets

APPENDIX E – RISK ASSESSMENT AND CLEANING PROTOCOLS

Classroom Cleaning Checklist

This risk assessment is to be completed to ensure that the risk has been identified and the required prevention measures have been implemented. The primary purpose of addressing the safety concerns is to protect the health of Educators and Children. Directions

| Educator Name: | | | | Week: | | | |
|--|-----|----|----|-------|-------|--|--|
| Classroom Cleaning Checklist - Covid-19 High Touch Surface Areas | | | | | | | |
| Area and/or Item | Yes | No | AM | PM | Other | | |
| Classroom Doors | | | | | | | |
| Washrooms - Children | | | | | | | |
| Tables | | | | | | | |
| Chairs and Stools | | | | | | | |
| Cups | | | | | | | |
| Phones/Walkie Talkies (after every use) | | | | | | | |
| Floors (If spill) | | | | | | | |
| Light Switches | | | | | | | |
| Indoor Toys | | | | | | | |
| Outdoor Toys | | | | | | | |
| Sinks | | | | | | | |
| Cribs/Cots | | | | | | | |
| Shelves | | | | | | | |
| Soother | | | | | | | |
| iPads (After Every use) | | | | | | | |

| | | | | | | | |
|----------------------------------|--|--|--|--|--|--|--|
| Attendance List (wipe after use) | | | | | | | |
| Shed Doors | | | | | | | |
| Carts | | | | | | | |
| Security System/buzzer | | | | | | | |
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Common Area Cleaning Checklist

| Educator Name: | | | | Week: | | | |
|---|-----|----|----|-------|-------|--|--|
| Common Areas Cleaning Checklist - Covid-19 High Touch Surface Areas | | | | | | | |
| Area and/or Item | | | AM | PM | Other | | |
| | Yes | No | | | | | |
| Front Door | | | | | | | |
| Washrooms- Educators | | | | | | | |
| Microwave | | | | | | | |
| Coffee machine | | | | | | | |
| Cubbies | | | | | | | |
| Kitchen Counters | | | | | | | |
| Fridge | | | | | | | |
| Washing Machines | | | | | | | |
| Dryer | | | | | | | |
| Security System | | | | | | | |
| Staff Room Table | | | | | | | |
| Staff Room Chairs | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Administrative Office Cleaning Checklist

| Educator Name: | | | | Week: | | | |
|---|-----|----|----|-------|-------|--|--|
| Office Space Cleaning Checklist - Covid-19 High Touch Surface Areas | | | | | | | |
| Area and/or Item | Yes | No | AM | PM | Other | | |
| Printers | | | | | | | |
| Photocopiers | | | | | | | |
| Key Boards | | | | | | | |
| Tables | | | | | | | |
| Chairs | | | | | | | |
| Phones/Walkie Talkies (after every use) | | | | | | | |
| File Cabinets | | | | | | | |
| Desk | | | | | | | |
| Buzzer | | | | | | | |
| Light Switches | | | | | | | |
| Doorknobs | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Risk Assessment Tool

| Consideration | Action/Response | By Who | Suggestion |
|--|-----------------|--------|--|
| Remove of any toys that cannot be disinfected/cleaned thoroughly. | | | Assess each classroom and determine if there are any toys that cannot be cleaned thoroughly. Also remove any toys that are broken or damaged. |
| Ensure that all carpets, floor mats, couches, chairs can be cleaned daily | | | Carpets, floor mats, couches, chairs that cannot be thoroughly cleaned each day should be removed. |
| Cleaning schedule for carpet | | | Determine how often carpets will be washed |
| Identify Isolation room for sick children or Educators. Ensure PPE is available out (Stored in plastic bin) of room and appropriate supplies are placed in room. | | | <p>Room should have:</p> <ul style="list-style-type: none"> • Chair and Cot to make Child comfortable • Kleenex • Water • Thermometer • Cleaning and disinfecting supplies (including extra garbage bags to dispose of waste) • Phone to contact parent and public health, or Walkie Talkie to speak with Lead |
| Outside area designated for Covid-19 screening before entering Centre | | | <ul style="list-style-type: none"> • Only ONE entrance/exit is to be used, to ensure that each person is screened • Pylons or lines must be setup to create 2m distancing measures • Screening tool and pens must be available • Thermometers must not be used between children/staff without single-use protective covers or disinfecting between use. • Place front entrance signage identifying symptoms and the screening process outside and directly inside Child Care Centre doors |

| | | | |
|---|--|--|--|
| | | | <ul style="list-style-type: none"> Place 60% (70% if available) concentrated hand sanitizer at the screening table. Ensure it is visible to Educators/clients entering the building Screening Binder |
| Ensure that safety posters are placed throughout the Centres, and that staff have received training on them | | | <ul style="list-style-type: none"> Social Distancing Coughing etiquette Proper Mask Use PPE Proper glove use Hand washing |
| Create disinfecting areas where Educators can wipe down any personal belongings they are brought into the Centre | | | <ul style="list-style-type: none"> Cleaning solution To wipe down cell phones, cups, and other items Storage Bins for Educators belongings |
| Determine where the hand washing area will be for everyone entering the Centres | | | Designate the closest sink to the entrance for hand washing |
| Ensure that cubbies are spaced to encourage social distancing | | | Every other cubby should be used |
| Ensure that each child has a bin or bag to place personal belongings like bedding in between use. | | | Bedding should be stored individually between use to avoid cross contamination |
| Determine if there are any shared spaces that go through a classroom | | | If so, can a barrier or plexiglass be used to separate the areas. |
| Determine if there are any reusable cups in the classroom | | | Reusable cup must be kept out of children's reach, they cannot touch other cups when stored and must be disinfected at the end of each day |
| One Educator per classroom should be designated to complete daily health checks and communication log (Daily Log) for the week. | | | Each classroom will need their own log books. |

| Consideration | Action/Response | By Who | Suggestion |
|--|-----------------|--------|--|
| Do you have rules in place to have workers sanitize their work areas as often as needed? If yes, do you have enough supplies to allow workers to sanitize the work area? | | | This would include sanitizing equipment (phones/printers/photocopiers/pens/desks) before work begins (beginning of the day and after each break, and end of the day) |
| If workers are required to work closely together, what kind of controls can you put in place? | | | <p>This is a problem if workers are required to talk to each other as part of the work process. Is there a way of changing the way we communicate? Let's get creative!! Consider:</p> <ul style="list-style-type: none"> • Physical barriers between workers (plex glass, panels etc.) • Workers wear face shields, face masks and latex gloves • No talking to each other <p>Do not use fans to blow air away from workers!</p> |
| Can workers eat their meals, coffee breaks and maintain the 2 M distance? (remove seats, have designated sitting areas?) Can scheduling breaks minimize worker contact with each other? | | | If workers are sharing things like microwaves, sinks, tables and chairs, disinfecting these must happen often. Who will be responsible for doing this? |
| Washrooms (Educators)- Are washroom single occupancy, or can they become single occupancy? Are there disinfectants available to clean after each use? | | | Provide cleaning materials as well as directions for Educators to clean, toilet, sink, soap dispensers, and taps after each use. |
| Cleaning supplies and guidelines for each classroom. | | | See high touch surface list. |

| | | | |
|--|--|--|---|
| Each educator should have their own pen (on a lanyard if available) | | | |
| When there are two Educators in a classroom, one should be designated as an engagement educator and the other is cleaner for the week | | | The designated cleaner should remain inside while children go outside to clean, they will then go outside after the children return to the classroom to clean the outside toys. They will also clean washrooms after each use. When only one educator is present in the room during opening and closing that educator will be responsible for cleaning. |
| Disposable paper napkins and sanitizing wipes are available for use in eating areas | | | Self-explanatory |
| Trash cans are placed near toilet exit doors | | | Self-explanatory |
| Disinfectant wiping products are available and distributed widely around common areas | | | Self-explanatory |
| Leads to ensure safety protocols are in place | | | Leads should create a daily checklist to monitor that all Educators are implementing protocols. |
| Have you Spoken to Educators to find out what their feelings are about what is going on? What do they think HWCCCC should be doing? How they feel about the safety measures that are being put in place? | | | Giving Educators a heads up about new safety measures can make implementing those controls easier/ smoother. If you ask the question, “what do you think if we were to do.....” And they answer in a positive manner; it may be a smoother transition. |