

# HWCCCC COVID-19

**Policies and Procedures** 

March 2022

#### Contents

Sick Policy During Covid-19	3
Screening Protocols	4
Covid-19 Daily Records	5
Communication with Families	5
Personal Protective Equipment (PPE)	6
Entering/Exiting the Centre	6
Social Distancing	8
Common Areas/Washrooms	8
Indoor Activities	8
Outdoor Play	9
Cooks/Food guidelines	
Isolation Space Protocols	11
Serious Occurrences	12
Ratios	12
Prioritization	13
Shifts	13
Cleaning and Disinfecting Protocols	
Laundry	14
Sleep Equipment and Arrangement	14
Floats/Supply Educator	15
Training Requirements	16
Appendix A – PERSONAL PROTECTIVE EQUIPMENT	
Guidance for wearing non-medical masks	17
Hand Washing Procedures	20
Coughing Etiquette	23
Steps to Put on and Remove Gloves and PPE	25
Putting on Personal Protective Equipment	26
Taking off Personal Protective Equipment (PPE)	27
APPENDIX B - Covid-19 Daily Screening Survey	
APPENDIX C - SIGNAGE	

Appendix D – Disinfectant Data Sheets	32
APPENDIX E – RISK ASSESSMENT AND CLEANING PROTOCALS	
Classroom Cleaning Checklist.	33
Common Area Cleaning Checklist	35
Administrative Office Cleaning Checklist	36
Risk Assessment Tool	37

# **PROTOCALS 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 form 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), <u>and</u> symptoms are improving household members who do not have any symptoms are not required to isolate. If you have tested positive (PCR or RAT test) in the last 90 days you 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.

In cases where a child shows symptoms of Covid-19 while in program. Parents will be called immediately, and the child (and any siblings who have **not** had Covid-19 in the last 90 days) 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 theday 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.

#### Travel

Unless otherwise instructed by boarder services or Public Health, fully vaccinated individuals are no longer required to quarantine. Unvaccinated children, <u>under the age of twelve</u>, who return from travel outside of Canada with a **fully vaccinated** adult, are exempt from quarantine requirements and do not need to isolate upon return. The only exception to this would be if the individual or someone in the household is symptomatic, or they have been instructed by immigration to isolate.

#### 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 (notrelated 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/googles/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/googles/glasses)
- When in contact with any body fluids such as saliva, urine, stool, vomit, mucus, blood (gloves, gowns, mask and face shield/googles/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/googles 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 much 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
- Face masks and eye protection (e.g. face shield or goggles) are required for individuals working in close contact with children who are not wearing face protection
- Eye protection is not required for individuals working with children who wear face protection, as long as the Educator is fully vaccinated. During lunch and snack times both mask and eye protection are required
- 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 to 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
- Eye protection is not required outdoors as long as children are fully masked and the educator is fully vaccinated. Physical distancing is strongly encouraged between cohorts. If you are not fully vaccinated, you must continue to wear both mask and face shield/goggles 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/goggle 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 if a Child, Educator, or Visitor to the centre has a confirmed case of COVID-19. A serious occurrence is no longer required for reported positive cases.

A Serious Occurrence will be filed if a 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 been 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	□ Watched	□ Demonstrated
Putting on Gloves	https://www.publichealthontario.ca/en/videos/ipac- gloves-on	□ Watched	□ Demonstrated
Putting on Mask and Eye Protection	https://www.publichealthontario.ca/en/videos/ipac- maskeyes-on	□ Watched	□ Demonstrated
Taking off Mask and Eye Protection	https://www.publichealthontario.ca/en/videos/ipac- maskeyes-off	□ Watched	
Taking off a Gown and Gloves	https://www.publichealthontario.ca/en/videos/ipac- gowngloves-off	□ Watched	□ Demonstrated
Taking off Full Personal Protective Equipment	https://www.publichealthontario.ca/en/videos/ipac- fullppe-off	□ Watched	□ Demonstrated
Putting on Full Personal Protective Equipment	https://www.publichealthontario.ca/en/videos/ipac- fullppe-on	□ Watched	□ Demonstrated
Putting on and Taking off Flat Folding and Cone N95 Respirators	https://youtu.be/9Wki4GGU62U https://youtu.be/lqKCeyjjg9o https://youtu.be/iHGFaVrq8SQ https://youtu.be/0hYA0IcYZSc	□ Watched	□ Demonstrated
Sick Policy & Isolation Room	Sick policy, Screening Protocols, Isolation Room, Removal from program	□ Read	□ Demonstrated
Cleaning Protocols	Laundry, Classrooms, Common Areas, Outdoors, how to use disinfectants, High touch/low touch surface areas	□ Read	□ Demonstrated
Play Protocols	Play protocols	□ Read	□ Demonstrated
Social Distancing	Common areas, Outside and in the classroom	□ Read	□ Demonstrated
Sleep Protocols	Bedding, head-to-toe placements, storage of personal items, cleaning	□ Read	
Eating Protocols	Spacing, Individual servings, cleanup, utensils	□ Read	□ Demonstrated
Covid-19 Vaccination Policy	Vaccination Policy	□ Read	□ 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 snuggly 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

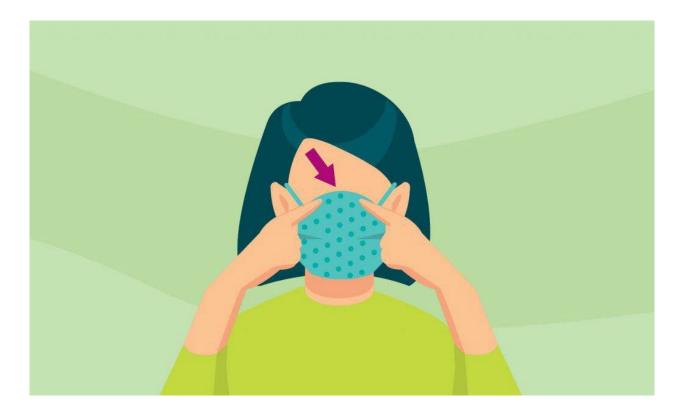
#### Using your mask

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 your 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...

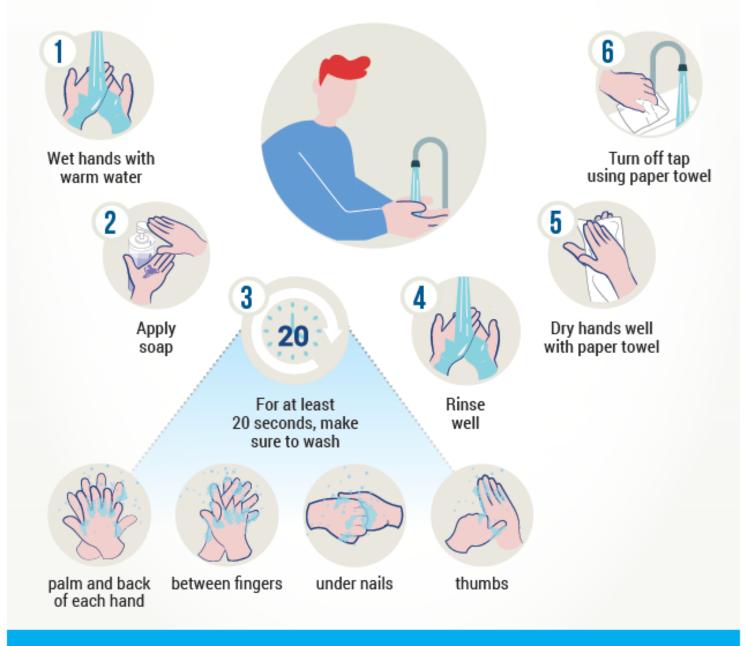
- When they arrive at the centre and before they go home
- Before handling food, preparing bottles, feeding children
- Between handling raw and cooked food cross contamination is a risk
- Before giving or applying medication or ointment to a child or self
- After changing diapers, assisting a child to 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



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# **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.



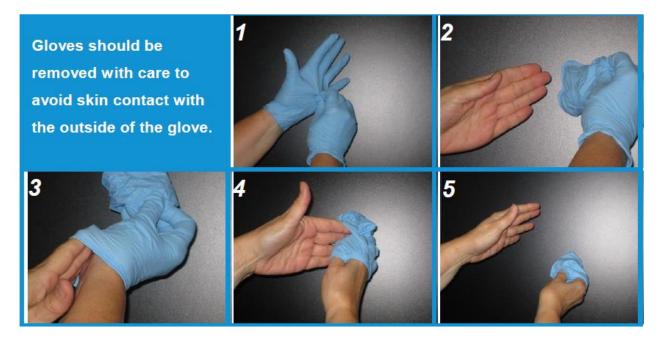




For more information please contact Public Health Ontario's Infection Prevention and Control Department at ipac@oahpp.ca\_or\_visit\_www.publichealthontario.ca

Agency for Health Protection and Promotion Agence de protection et de promotion de la santé

## **Steps to Put on and Remove Gloves and PPE**



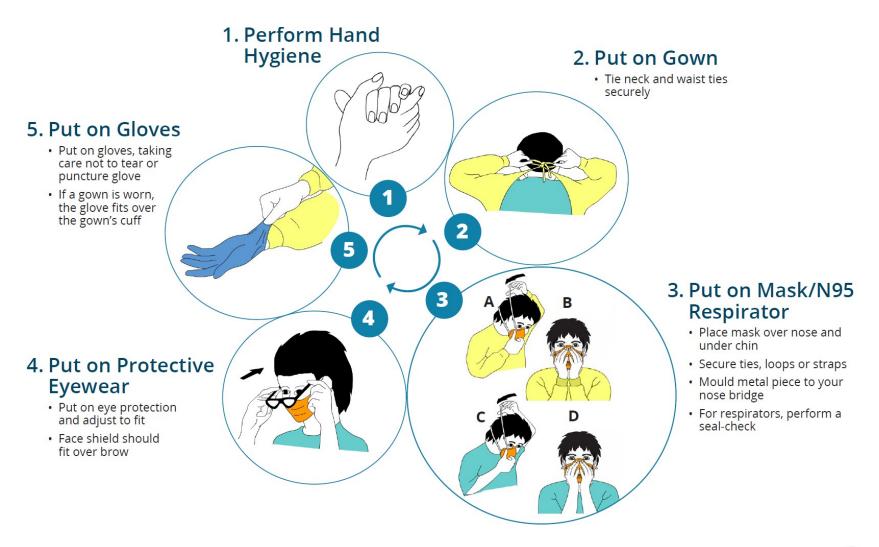
#### Using disposable gloves

- 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 where 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**



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)**

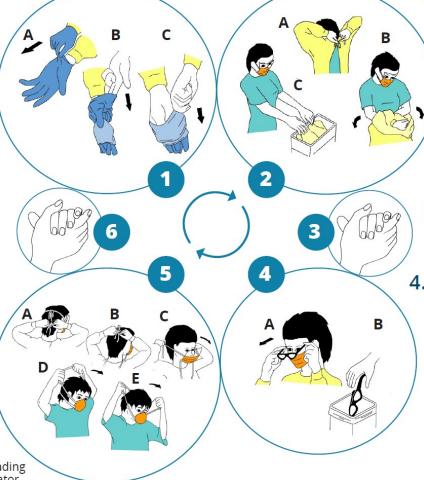
#### 1. Remove Gloves

- 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

#### 6. Perform Hand Hygiene

#### 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



#### 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.

#### 3. Perform Hand Hygiene

#### 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

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







Staff, students, children, and visitors must screen for COVID-19 every day before going to school or child care. Parent(s)/guardian(s) can fill this out on behalf of a child/student..

Contact Number:

Visitor Name:

Date (mm-dd-yyyy)

# **Screening questions**

- 1. In the last [5, 10] days have you experienced any of these symptoms?
  - If you are fully vaccinated AND/OR 11 years old or younger, use 5 days
  - If you are 12 years old or older and not fully vaccinated OR if you are immunocompromised, use 10 days.

Anyone who is sick or has any new or worsening symptoms of illness, including those not listed below, should stay home until their symptoms are improving for 24 hours (or 48 hours for nausea, vomiting, and/or diarrhea) and should seek assessment from their health care provider if needed. Household members of individuals with any of the below symptoms should stay home at the same time as the person who is sick, regardless of vaccination status.

If you are symptomatic and tested negative for COVID-19 on a single PCR test or rapid molecular test, or two rapid antigen tests (RATs) taken 24-48 hours apart, you do not have a fever, and symptoms have been improving for 24 hours (or 48 hours for nausea, vomiting, and/or diarrhea), you may answer "no" to all 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 degrees Celsius/100 degrees Fahrenheit or higher and/or chills	□ Yes	□ No
<b>Cough or barking cough (croup)</b> Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, or other known causes or conditions they already have)	□ Yes	□ No
Shortness of breath	Yes	No
Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions they already have)		
Decrease or loss of taste or smell	Yes	No
Not related to seasonal allergies, neurological disorders, or other known causes or conditions they already have		

#### 2. In the last [5, 10] days have you experienced any of these symptoms?

- If you are fully vaccinated AND/OR 11 years old or younger, use 5 days
- If you are 12 years old or older and not fully vaccinated OR if you are immunocompromised, use 10 days.

You may select "No" to all symptoms if you tested negative for COVID-19 on a PCR test, a rapid molecular test, or two rapid antigen tests taken 24 to 48 hours apart AND you do not have a fever and your symptoms have been improving for 24 hours (48 hours if you have nausea, vomiting, and/or diarrhea).

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

<b>Sore throat or difficulty swallowing</b> Painful swallowing (not related to seasonal allergies, acid reflux, or other known causes or conditions you already have)	□ Yes	□ No
Runny or stuffy/congested nose Not related to seasonal allergies, being outside in cold weather, or other known causes or conditions you already have	□ Yes	□ No
Headache Unusual, long-lasting (not related to tension-type headaches, chronic migraines, or other known causes or conditions you already have)	□ Yes	□ No
If you received a COVID-19 and/or flu vaccination in the last 48 hours and are experiencing a mild headache that only began after vaccination, select "No."		
<b>Extreme tiredness</b> Unusual, fatigue, lack of energy (not related to depression, insomnia, thyroid disfunction, sudden injury, or other known causes or conditions you already have)	□ Yes	□ No
If you received a COVID-19 and/or flu vaccination in the last 48 hours and are experiencing mild fatigue that only began after vaccination, select "No."		
Muscle aches or joint pain If you received a COVID-19 and/or flu vaccination in the last 48 hours and are experiencing mild muscle aches/joint pain that only began after vaccination, select "No."	□ Yes	□ No
Nausea, vomiting and/or diarrhea Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions they already have	□ Yes	□ No
In the last [5, 10] days have you tested positive for COVID-19? This includes a positive COVID-19 test result on a lab-based PCR test, rapid molecular test, rapid antigen test or home-based self-testing kit.	□ Yes	□ No
<ul> <li>If you are fully vaccinated AND/OR 11 years old or younger, use 5 days</li> <li>If you are 12 years old or older and not fully vaccinated OR if you are immunocompromised, use 10 days.</li> </ul>		
<ul> <li>Select "No" if you have already completed your isolation period of [5, 10] days because your symptoms started before your positive test result AND:</li> <li>your symptoms have been improving for 24 hours (48 for nausea, vomiting, and/or diarrhea) AND</li> </ul>		
<ul> <li>you do not have a fever</li> </ul>		

3.

4.	Do any of the following apply?	□ Yes	□ No
	<ul> <li>You live with someone who is currently isolating because of a positive COVID-19 test</li> </ul>		
	• You live with someone who is currently isolating because of COVID-19 <b>symptoms</b> (any one or more symptoms from question 1 above or any two or more symptoms from question 2 above)		
	<ul> <li>You live with someone who is waiting for COVID-19 test results</li> </ul>		
	Select "No" if you completed your isolation after testing positive in the last 90 days (using a rapid antigen, rapid molecular, or PCR test).		
5.	In the last [5, 10] days, have you been identified as a "close contact" of someone who currently has COVID-19 or has symptoms of COVID-19 (any one or more symptoms from question 1 above or any two or more symptoms from question 2 above)?	□ Yes	□ No
	<ul> <li>If you are fully vaccinated AND/OR 11 years old or younger, use 5 days</li> </ul>		
	<ul> <li>If you are 12 years old or older and not fully vaccinated OR if you are immunocompromised, use 10 days</li> </ul>		
	Select "No" if any of the following apply:		
	<ul> <li>You are fully vaccinated, not immunocompromised, and you do not live with the person who has COVID-19</li> </ul>		
	<ul> <li>You completed your isolation after testing positive in the last 90 days (using a rapid antigen, rapid molecular, or PCR test)</li> </ul>		
	<ul> <li>Contact with the person who has COVID-19 or symptoms of COVID-19 only occurred within a school or child care setting.</li> </ul>		
	<b>Note:</b> Given the multiple protective strategies in place, contacts who are only exposed at school or child care are not generally considered close contacts requiring isolation		
6.	Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)? This can be because of an outbreak or contact tracing.	□ Yes	□ No
7.	Do any of the following apply?		
	<ul> <li>In the last 14 days, you travelled outside of Canada and were told to quarantine.</li> </ul>	□ Yes	□ No
	<ul> <li>In the last 14 days, you travelled outside of Canada and were told to not attend school/child care.</li> </ul>		
	<ul> <li>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.</li> </ul>		

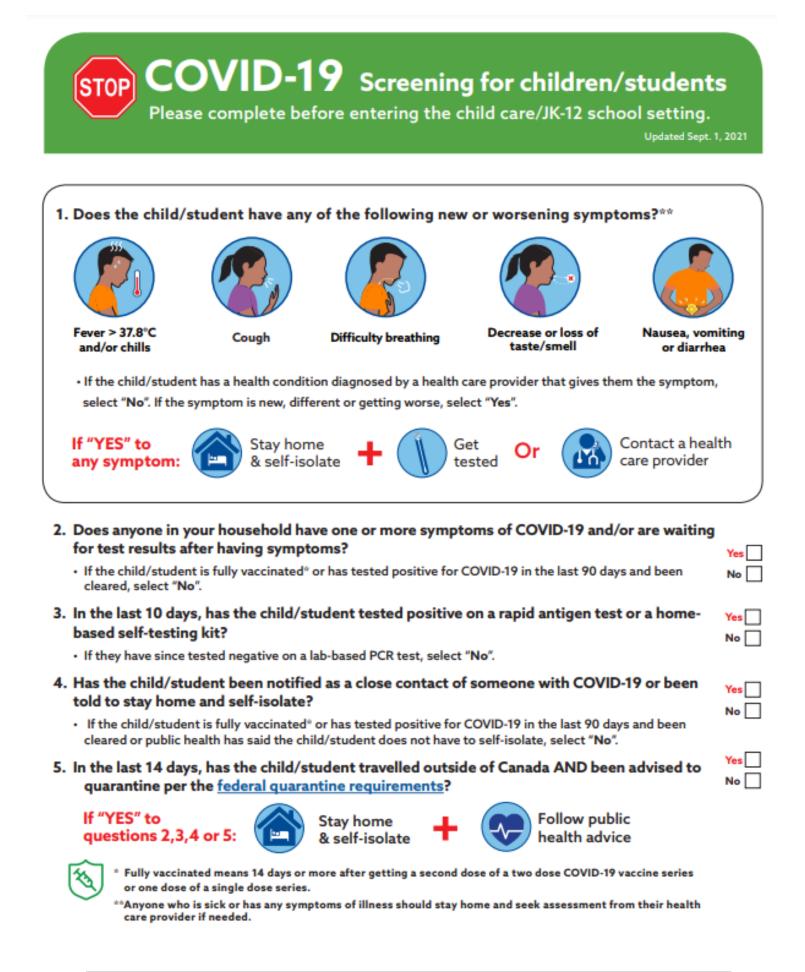
## **Results of screening questions**

If you answered "YES" to ANY question, you cannot go to school or child care. Contact your school/child care provider to let them know that you will not be attending school today. See below for isolation and testing requirements.

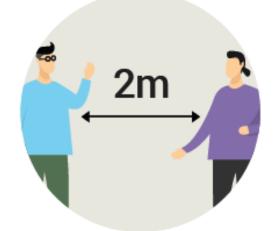
#### NOTE: When the option of [5, 10] days is listed:

- If you are fully vaccinated AND/OR 11 years old or younger, use 5 days
- If you are 12 years old or older and not fully vaccinated OR if you are immunocompromised, use 10 days





# 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.

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# **Appendix D – Disinfectant Data Sheets**

# **APPENDIX E – RISK ASSESSMENT AND CLEANING PROTOCALS**

# **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:				
		Class	room Cleaning Checkl	ist - Covid-19 H	ligh Touch Surface	Areas		
Area and/or Item	Yes	No	AM	PM		0	ther	
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				

# **Common Area Cleaning Checklist**

Educator Name:			W	eek:					
	Common Areas Cleaning Checklist - Covid-19 High Touch Surface Areas								
Area and/or Item	Yes	No	AM	PM		Ot	her		
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:				V	Veek:				
	Office Space Cleaning Checklist - Covid-19 High Touch Surface Areas								
Area and/or Item	Yes	No	AM	PM		0	ther		
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 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.			Determine how often carpets will be washed Room should have: 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> <li>Only ONE entrance/exit is to be used, to ensure that each person is screened</li> <li>Pylons or lines must be setup to create 2m distancing measures</li> <li>Screening tool and pens must be available</li> <li>Thermometers must not be used between children/staff without single-use protective covers or disinfecting between use.</li> <li>Place front entrance signage identifying symptoms and the screening process outside and directly inside Child Care Centre doors</li> </ul>

	<ul> <li>Place 60% (70% if available) concentrated hand sanitizer at the screening table. Ensure it is visible to Educators/clients entering the building</li> <li>Screening Binder</li> </ul>
Ensure that safety posters are place throughout the Centres, and that staff have received training on them	<ul> <li>Social Distancing</li> <li>Coughing etiquette</li> <li>Proper Mask Use</li> <li>PPE</li> <li>Proper glove use</li> <li>Hand washing</li> </ul>
Create disinfecting areas where Educators can wipe down any personal belongings they are brought into the Centre	<ul> <li>Cleaning solution</li> <li>To wipe down cell phones, cups, and other items</li> <li>Storage Bins for Educators belongings</li> </ul>
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?			<ul> <li>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!!</li> <li>Consider:</li> <li>Physical barriers between workers (plex glass,</li> </ul>
			panels etc.)
			<ul> <li>Workers wear face shields, face masks and latex gloves</li> </ul>
			No talking to each other
			Do not use fans to blow air away from workers!
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.