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PURPOSE

It is the goal of Caledon East Children's Place (CECP) to provide support and services to families and children in an environment that is as safe and healthy as possible. We will make every effort to continue to operate our services and protect employees and clients/families from emergency situations including pandemics. In the event of a pandemic our goal is to remain available as possible until authorities dictate otherwise. The purpose of this policy is to provide a framework for CECP to mitigate risk and prepare for the potential impacts of a pandemic from reduced services to potential closures.

WHAT IS A PANDEMIC

A pandemic is a global event. A flu pandemic starts with a new strain of virus to which people have little or no immunity. To be considered a pandemic, the new virus must be able to spread easily from person to person and cause illness in many of the people who are infected. When it spreads around the world, it is called a pandemic. The World Health Organization (WHO) sets the pandemic alert level globally. The pandemic level is set based on the spread of the virus, not the severity of the illness.

POLICY

CECP is required to follow guidelines set out by the Public Health Agency of Canada, Ontario Ministry of Health, and the Peel Regional Public Health/Medical Officer of Health for proper infection prevention. Our responsibility is to ensure infection prevention practices are carried out properly to prevent the spread of illness among employees, placement students, children, and volunteers. Policies and procedures are assessed and monitored to ensure our employees, placement students, and volunteers are consistently and carefully carrying them out.

CECP will ensure our pandemic plan and service continuity/interruption plans align with the Region of Peel plans.

IMPACT PLANNING

CECP will review and plan for the following:

- Sudden increase in employee and child absenteeism
- Maintaining staffing ratios

- Interruption of supplies and services (food, paper product, cleaning products)
- Regular program services and supplies scaled back or not available (transportation, field trips, etc.)
- Maintenance/cleaning services reduced or cancelled
- Administration activities are changed, reduced, or cancelled
- Cross training additional employees to ensure organizational stability in case the Executive Director is unable to be in charge (Supervisor, Assistant Supervisor, or designate)
- Reduction of outside supports (consultants, children's services etc.)
- Temporarily or permanently laying off employees
- Potential closure (short term and long term)
- Financial loss due to decreased revenue, funding, and increased or additional costs
- Potential changes or additional duties for employees
- Spread of the infection within the centre and within the community
- Communication of the plan with employees, families/clients, funders, and community
- Re-opening of the organization after a shutdown
- Occupational health and safety implications

INFECTION PREVENTION

CECP will take all steps required to ensure a safe and healthy environment in all our programs including:

- Early identification of ill employees and children
- Isolating children who become ill during the program until they are picked up
- Sending employees home should they become ill during the day
- Sending children home if they have been exposed to an identified contagion
- Sending staff home if they have been exposed to an identified contagion

- Following all governmental/public health recommendations related to removing staff, children, and parents from the program if they have been exposed to a potential health risk.
- Requiring an employee, placement student, or volunteer who has been placed in quarantine or has a contagious illness to acquire a fit for duty or medical clearance before they return to the organization
- Requiring an employee, placement student or volunteer has travelled or been in contact with someone who has travelled to areas deemed a health risk to follow government guidelines regarding self-isolation
- Requiring employees to sign a declaration stating they have not traveled during a pandemic or have been in contact with someone who has travelled to areas deemed a health risk or travel advisory.

EMERGENCY COMMUNICATION

The President of the Board of Directors, the Supervisor and the Executive Director oversee implementing the organizations emergency communication plan

Internal communication to all employees, families/clients will be by (phone, email, text, posted on all entrances/exits, Facebook, parent/client board, website etc.)

Internal contact lists are located in the centre's office for:

Employees

Families/clients

Board members

Placement students

Other volunteers

Information will be specific to the nature of the situation:

- Safety and well being of everyone at the centres/programs
- Reduction of services and programs
- Changes in delivery of services and programs
- Shutdown of the organization
- Refund/no refund/credit policy to be shared with clients
- Status updates
- Evacuation plan/location
- Reopening of the organization

External communication to the municipal, regional, licensing bodies, and the community (possibly media) will be by the Supervisor and the Executive Director.

The external contact information for the following agencies/individual are located/posted in the CECP office.

AUTHORITY TO SHUTDOWN THE ORGANIZATION

CECP will follow all directions and recommendations from public health officials and the Provincial/Federal Government should a pandemic be declared.

The Public Health Act and The Emergency Measures Act authorize all levels of government to order a shutdown of services during a pandemic

PROCEDURES

CECP will proactively develop a contact list of alternatives to provide supports and services to the organization. The list of names and contact information will be kept in the office and the licensing binder.

- Supply Staffing
- To deliver additional supplies (cleaning, program, personal protection equipment, etc.)
- To deliver food
- To provide cleaning services
- To authorize funds to acquire emergency supplies

If a pandemic is declared and the organization remains open:

- Secure staffing to maintain ratios and safety utilizing all available part time, supply, or an outside agency staff
- Ensure additional staff are available to provide relief where required
- Modify shifts where required
- Identify which programs can be modified to accommodate possible increased or decreased needs
- Ensuring shared spaces and structures can be cleaned and disinfected
- Consult emergency health and safety supply checklist provided by Peel Public Health
- Secure additional cleaning supplies, routine-care supplies, and program supplies
- Ensure extra personal protection supplies are available
- Ensure policies and procedures are updated including health and safety
- Ensure food service/delivery is secure
- Secure/access reserve funding for additional expenses
- Ensure families/clients are informed as per the organization's communication plan
- Ensure any other reporting requirements (licensing, municipal, etc.) are done

If the organization is ordered to close:

- If the centre is open all parents will be contacted immediately by phone to pick up their children
- Provide a letter or send out an email with specific details including refund/no refund policy
- Ensure families/clients who are absent are informed
- Inform the required regulatory bodies
- Inform all employees who are not present

- Initiate emergency closure plan
- Ensure all confidential information, records, and files are secured and locked
- Implement business continuity plan

PANDEMIC BUSINESS CONTINUITY PLAN

Pandemics will have an impact on the business continuity of the organization and may not be evident immediately however it is important to have a plan to deal with the financial losses due to decreased revenues and increased or additional costs.

It is important for CECP to continue to manage basic functions should the organization face reduced operations or complete closure. The purpose of developing a business continuity plan is to identify critical areas that require immediate decisions to reduce/minimize the financial risk to the organization. To ensure CECP will be able to carry on operations in the event of a disaster or pandemic.

The Board of Directors and the Executive Director will make the necessary decisions during a pandemic. These include what organizational functions are critical to maintain, and which services or programs can be postponed or cancelled.

The following areas will require decisions to be made in the best interest of the organization and its families/clients based on the length of limited services or complete closure.

- Operating Costs
- Payroll obligations (short-term)
- Temporary Layoffs (refer to Extended Closure/Layoff Policy)
- Depending on the financial circumstances of the organization at the time a mandatory closure is declared, CECP will assess whether it is economically feasible to continue paying staff for a limited period of time prior to laying them off
- Possibility of employees working from home (completing documentation, program plans, parent communication)
- Receiving grants and subsidies
- Collecting fees
- Payment of rent
- Payment of utilities (phone, internet, hydro etc.)
- Payment of suppliers and services (food, cleaning etc.)

PREPARING FOR POSSIBLE SHUTDOWN

In the case of a mandatory shutdown an off-site office will be set up by the Executive Director with the log-in and password to access information from the cloud along with a hardcopy of the data on (laptop, hard drive back-up discs).

A binder and an electronic file of essential services and contacts is ready to be taken off-site and includes:

- Written instructions on how to access essential services
- How to set up remote access to the organization's computer, emails, website, phone system
- Contact information for the Board Members, Licensing Advisor
- Contact information, account numbers, and passwords for Financial/Banking Institution
- Contact information and policy for the Insurance Company
- Contact information for the Accountant, Bookkeeper, Lawyer
- Ensuring continued access to payroll, finances, and accounting systems
- Current list of families/clients
- Current list of employees
- Current list of suppliers, services, and service agreements
- Keys, key fob, and passwords
- Any additional documents/records that are vital to the continuing functions the organization

SECURING RECORDS AND BACK-UP OF ALL INFORMATION

- Ensure all records, documents, and computer files are backed-up both to the cloud and to a hard drive
- Keep a back-up copy of the computer's operating system, and critical software off-site
- Ensure all filing cabinets are locked
- Ensure the office is locked down
- Ensure the facilities are locked down

COMMUNICATION AND MONITORING

CECP will establish the following system to communicate with employees and with clients/families:

CECP will provide timely updates regarding the status of the closure by email, social media and on our website.

CECP will monitor information and updates from the local Officers of Health, and the Provincial Government

RECOVERY

CECP will follow the directions of the Government and Peel Public Health regarding reopening the centre(s) once the shutdown has been lifted.

The Board of Directors and the Executive Director will meet regarding establishing priorities and assess what needs to be done to restore the premises, resume services and programs that were interrupted or affected by the pandemic.

CECP will review their Return to Work/Recall Policies including their Risk Assessment as programs and services may not return to their previous format and should consider:

- Possible changes in staffing/children ratios

- Clients/parents who do not return
- Changes in enrolment patterns
- Increase or reduction in space requirements
- Additional costs in requiring new personal protection equipment, sanitizing equipment, cleaning services etc.
- Developing procedures for drop off and pick up inline with physical distancing measures outlined by Public Health
- Reviewing policies and procedures to reflect any updating requirements under the Ministry of Health, Ministry of Labour, and the Ministry of Education

The Board of Directors and the Executive Director will ensure all updated policies are in place including the Human Resource Manual, the Employee Handbook, and the Parent Handbook.

Under the Health and Safety Act the obligation to provide a safe and health work environment includes:

- Ensuring the premises have been thoroughly cleaned and disinfected before reopening the centre(s)
- The Executive Director will confirm with the Board of Directors once the premises are ready to be opened
- Ensure critical supplies (cleaning products, disposable gloves, face masks etc.) are re-stocked to protect both staff and children
- Recall employees to review policies around changes in routines, cleaning protocols, ill children, necessary training and sick leave policy for staff
- Have employees read and sign return to work declaration stating they have not traveled during a pandemic nor have they been in contact with someone who has travelled to areas deemed a health risk or have a travel advisory

Staff Returning to CECP

- Staff will be notified and informed of any new policy changes/additions
- Staff will be provided with any necessary/required training
- Staff will be provided with time to prepare their classrooms before the children return to care
- Staff will have virtual weekly “Touch Base” meetings prior to reopening and after reopening

Families/Clients Returning to CECP

- A letter/email, welcoming families/clients and thanking them for their understanding during a very difficult and challenging time.
- The invitation to return will include specific details regarding start dates and what has changed
- Reassure families/clients regarding new practices that will be put in place regarding how suspected illnesses will be handled.
- Review updated policies in the Parent Handbook

- Have families/clients read and sign a return declaration Parent Agreement, stating they have not traveled during a pandemic or have been in contact with someone who has travelled to areas deemed a health risk or have a travel advisory

BEST PRACTICES

CECP WILL FOLLOW DIRECTION FROM THE REGION OF PEEL AND PEEL PUBLIC HEALTH DURING THE COVID-19 PANDEMIC.

Daily Active Screening for COVID-19 of Persons Entering Child Care Centres

POLICY

Every person arriving at the centre must be actively screened daily **PRIOR** to entering the centre. The screening information must be documented on the appropriate **COVID-19 Active Screening Forms for Staff, Households or Essential Visitors and Vendors** to facilitate contact tracing by Peel Public Health in the event of a confirmed COVID-19 case or outbreak.

There should be no volunteers or non-essential visitors permitted to enter the centre. Essential visitors who will be permitted may include professionals delivering supports for children with special needs, Ministry staff and other public officials such as the fire marshal, public health inspectors, etc. Essential visitors will be required to meet all daily active screening requirements prior to entering the centre.

Students completing post-secondary educational placements will be permitted to enter child care settings. Students will also be subject to the same health and safety protocols as other staff members such as screening.

In-person parent tours of the child care centre are currently not permitted at CECP. Potential and new families will be directed to our website, to view video tours of the classrooms, in lieu of in-person tours.

PROCEDURES

The daily screening should be done electronically via google forms prior to arrival at the child care setting. CECP will email the link to the form monthly or when the form is updated with required changes as per Peel Public Health/Ministry of Education. In the event the electronic screening is not possible CECP will conduct the screening over the phone. If screening over the phone please call 905-584-9189.

Daily screening for Households and Staff is done electronically using google forms prior to arrival at the child care setting. The centre may also conduct daily active screening over the phone when

electronic screening is not possible. A screening station will be available for individuals who are not able to complete the screening before arrival but electronic screening or over the phone screening are preferred by CECP. Every person entering CECP should take their own temperature prior to arrival to verify whether they have a fever (indicated by a temperature of 37.8 Celsius or higher). Parents/Guardians should check household members for symptoms and take the temperature of children attending child care prior to arriving at the child care centre to verify no fever is present. On-site temperature checks are available for families that do not have access to a thermometer at home. Parents/guardians will report the information to staff during the active screening process using any of the methods previously mentioned.

Individuals who were previously ill, whose symptoms have been improving for at least for 24 hours, and have tested negative for COVID-19 must complete additional screening using the **COVID-19 Re-entry Screening Form for Previously Ill Individuals**, this re-entry screening will be conducted over the phone **PRIOR** to also completing the electronic daily active screening process. Proof of the negative COVID-19 test result is not required. If a health care provider has conducted an assessment and has made an alternative diagnosis, a medical note is not required.

Individuals re-entering the centre (leaving the property and coming back on the same day such as staff running an errand during lunch break) must be screened again **PRIOR** to reentering the centre (self-screens are permitted). If staff are going to remain on the premises for a short break/lunch, then screening is not necessary.

Children/families and staff who go out for a community walk/excursion do not need to be rescreened. Staff should self-monitor for symptoms and continue to monitor children/household for symptoms through the day/program.

Screening Tool:

Designated staff will be trained on conducting the screening using the **COVID-19 Active Screening Forms for Staff, Households or Essential Visitors and Vendors**, as well as using the **COVID-19 Re-entry Screening Form for Previously Ill Individuals** in situations where previously ill individuals who have tested negative are returning to the centre.

When assessing for symptoms, the focus should be on evaluating if they are new, worsening, or different from an individual's baseline health status (usual state). Symptoms should not be chronic or related to other known causes or conditions (e.g. runny nose from being outside in cold weather).

These screening forms are based on the Ministry of Health's COVID-19 School and Child Care Screening, and also include an additional question required by Peel Public Health. Every individual entering an EYCC setting in Peel region must also answer this additional question: **"Did you (your child) have close contact with anyone (including household members) with COVID-19 symptoms in the last 14 days who has not been tested or is awaiting for test results?"**

CECP uses the paper screening forms provided by the Region of Peel for phone screening and electronic versions of those that do not change the screening questions from those from the Region of Peel for our online screening.

Screening Methods

1. **Screening Done Electronically**: The monthly electronic form of the COVID-19 Active Screening Forms to be sent to staff students, parents/guardians/caregivers to complete and submit prior to arrival. CECP must ensure the following:
 - The records of screening results are maintained on site for a minimum period of one month.
 - Attendance records are maintained separately from the records of screening results and retained in accordance with the Child Care and Early Years Act (2014) regulatory requirements for record keeping.
 - Privacy and confidentiality of the screening results is maintained. See the Confidentiality of Personal Health Information Collected for COVID-19 Screenings.
 - The screening results will be verified by the Screening staff prior to entry.
 - Contact information for the person completing it, including date, is captured. Screening staff must verify that any individual who arrives at CECP and has answered YES to ANY of the screening questions will be directed to not enter and to return home immediately.The parent/guardian/caregiver completes the screening using the COVID-19 Active Screening Form for Households. Staff completes the screening using the COVID-19 Active Screening Form for Staff daily.
2. **Screening by Phone**: Active screening questions may be asked over the phone by calling 905-584-9189 and will be documented by the screening staff.

Screening of Essential Visitors/Guests and Vendors:

- Any essential visitor/guest or third-party vendor (such as caterers or cleaning services) MUST also complete the daily active screening prior to entering the site using the COVID-19 Active Screening Form for Essential Visitors and Vendors. Entry into the CECP setting should only be permitted if there is a need to enter.
- Any third-party vendors (such as cleaning services) entering CECP after-hours must self-screen prior to entering by completing the COVID-19 Active Screening Form for Essential Visitors and Vendors. Third-party vendors must follow proper hand hygiene when entering the centre.
- Essential visitors/guests or third-party vendors must follow requirements for wearing PPE (see When to Wear Personal Protective Equipment (PPE) in the General Sanitary Precautions and Physical Distancing Measures Policy).

Screening Outcomes

Screen POSITIVE:

Any individual who answers **YES** to **ANY** of the questions on the screening form should not be permitted to enter the centre. This includes excluding any siblings of the child (or any other children living in the same household)

from attending the child care setting. If testing is strongly recommended for a symptomatic individual, the individual and their household members must self-isolate while waiting for test results. See the chart When a COVID-19 test is strongly recommended with a Screen POSITIVE and timeline for return for when the individual can return to the centre.

Note: If an individual is tested for COVID-19 and receives an “indeterminate” or “inconclusive” test result, the person should continue to self-isolate and get re-tested for COVID-19. When a COVID-19 test is strongly recommended with a Screen POSITIVE and timeline for return.

Screen positive scenario	Is COVID-19 test strongly recommended?	When to return to childcare
<p>Individual experiencing ANY COVID-19 symptoms that are new, worsening, or different from an individual’s normal (baseline) health status including:</p> <ul style="list-style-type: none"> • Fever and/or chills (>37.8°C or 100°F) • Cough or barking cough (croup) • Shortness of breath • Decrease or loss of smell or taste • Sore throat or difficulty swallowing • Runny nose or stuffy/congested nose • Unusual or long-lasting headache • Nausea, vomiting and/or diarrhea • Unusual or extreme tiredness or muscle aches • Conjunctivitis/pink eye (in adults) • Abdominal pain (in adults) 	<p>YES</p>	<p>If test is negative for COVID-19, the individual can return upon passing the re-entry screening and daily active screening.</p> <p>If test is positive for COVID-19, the individual will be required to continue self-isolation and Public Health will confirm when staff/child can return.</p>
<p>Symptomatic individual with: A pre-existing or alternate medical condition (e.g., asthma, tonsillitis,</p>	<p>NO</p> <p>Individual with pre-existing or alternate medical condition to be</p>	<p>Individual can return if symptoms are improving after 24 hours (if an infectious cause like a cold or flu</p>

recurrent ear infections, allergies) OR with an underlying cause of symptoms (e.g. runny nose from cold weather, transient vomiting from anxiety in children).	assessed by a health care provider for clearance. Parent self-report of an alternate diagnosis made by their health care provider, or of an underlying cause, is sufficient proof. A medical note is not required for clearance.	as an alternate medical condition), not experiencing fever and is feeling well enough to participate.
Individual who chooses not to have COVID-19 testing	N/A	If the individual has mild to moderate illness, exclude from the centre for 10 days, unless a health care provider has specifically not recommended COVID-19 testing or there is an alternate diagnosis. Household contacts (including any siblings of a sick child attending child care) must self-isolate for 14 days from last close contact with symptomatic individual.
International travel in the last 14 days.	YES (if symptoms develop in the 14-day isolation period)	Exclude from the centre for 14 days from the return of travel.
Individual is a close contact of a confirmed case of COVID-19.	YES (as per Public Health's recommendation)	Exclude from the centre for 14 days after their last exposure, regardless of a negative test or as per Public Health's recommendation.
Individual is a close contact of a person with COVID-19 symptoms in the last 14 days who has not been tested or is awaiting COVID-19 test results.	YES (if symptoms develop)	Exclude from the centre unless the symptomatic person tests negative or has an alternative diagnosis by a health care provider.
Individual has been directed by a health care provider or Public Health to isolate.	Follow the advice provided by Public Health.	Follow the advice provided by Public Health.

Where an individual does not pass screening and is not permitted to attend the program, this does not need to automatically be reported to Peel Public Health.

Screen NEGATIVE:

If screened negative (NO to ALL questions), staff and/or essential visitors may sanitize their hands upon entering the centre. Once the parent/guardian and child(ren) have all passed active screening, the child(ren) will be escorted into the centre by a staff member. Parents/guardians are not allowed to enter the centre. Pick-up and drop-off of child(ren) will be conducted outside the main gate unless it is determined by the CECP supervisor/designate that there is a need for a parent/guardian to enter.

When to Report to Peel Public Health:

- When there is a positive case of COVID-19, but CECP has not been contacted by Public Health.
- When there is an unusual amount of staff and/or children who become sick or screen positive including non-COVID related illnesses (see pg. 18 in the Preventing and Managing Illnesses in Child Care Centres guideline).
- When there is an unusual occurrence such as a flood, fire, sewage back-up, etc.

CECP Daily Wellness Check

CECP staff will conduct wellness checks on all children daily and self monitor for developing symptoms. As part of the daily wellness check a designated staff will conduct a middle of the day temperature check for children/staff/essential visitors (when applicable) in the centre at the time of the temperature check. Temperature will only be recorded if a fever is present. A fever is present when the temperature is equal or greater than 37.8Celsius.

Re-entry Screening of Previously Ill Individuals and/or Individuals that Previously Failed Screening

Previously ill children or parents/guardians or staff/students must pass re-entry screening in addition to daily active screening in order to return to CECP. Individuals that previously failed daily active screening because they were a close contact of someone with COVID-19 or COVID-19 symptoms must also pass re-entry screening before returning to the centre.

The Re-Entry Screening for Early Years and Child Care Settings will be used to conduct re-entry screening. Screening will be conducted over the phone with the individual (or parent/guardian/caregiver) by calling the centre (905-584-9189) before proceeding to complete the electronic daily active screening. The Re-Entry Screening form must be signed by the staff conducting the phone screening for the child/staff/student.

Confidentiality of Personal Health Information Collected for COVID-19 Screenings

It is important to note that Peel Public Health:

Is required by Ontario's Personal Health Information Protection Act (PHIPA) to respect and protect the privacy of the individuals being screened for COVID-19; and will only disclose a positive case to an EYCC setting if it is needed to manage the exposure risk to others. Service Providers are required to protect all personal health information collected for the COVID-19 screenings and/or information provided by Peel Public Health regarding a positive COVID-19 test result to reduce exposure. Parent and child privacy are most important; therefore, Service Providers are encouraged to treat families in a respectful manner which protects the privacy of their family. COVID-19 screening results must only be shared with Peel Public Health. All screening documents completed must be stored in a secure area (locked office and locked filing cabinet). Privacy is everyone's responsibility.

Attendance and Screening Records

- The daily screening for COVID-19 policy and forms will be updated as advised by Peel Public Health.
- Records of anyone entering the premises (e.g. name, contact information, time of arrival/departure, screening completion/result, etc.) must be kept up-to-date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak (i.e. records can be made available to Public Health within 24 hours of a confirmed COVID-19 case or outbreak).
- Attendance and screening records must be maintained on the premises and managed in accordance with the Service Provider's relevant privacy and document management practices. Screening records must be maintained for one month. Attendance records must be maintained as set out in Ontario Regulation 137/15 under the Child Care and Early Years Act, 2014.
- Where possible, contact information will be obtained by phone prior to arrival at CECP.

General Sanitary Precautions and Physical Distancing Measures to Prevent the Spread of COVID-19 for Licensed Child Care Centres

POLICY

Caledon East Children’s Place was thoroughly cleaned prior to re-opening our operations. CECP strictly maintains routine infection prevention and control practices (refer to the “[Preventing and Managing Illnesses in Child Care Centres](#)” guidelines), as well as adhere to **additional** sanitary precautions and physical distancing measures in all aspects of care to prevent the spread of COVID-19 as described in this policy.

CECP has communicated the requirements under this policy to any third-party vendors contracted for cleaning services at the child care centre (as applicable).

All persons in an EYCC setting are required to follow the requirements for wearing masks (see When to Wear Personal Protective Equipment (PPE) in this policy).

When to Wear Personal Protective Equipment (PPE)

Type	Description	Who	When to wear	Other considerations
Medical Mask (N95 masks are not to be used)	Often blue coloured masks commonly seen in doctor and dentist clinics	Staff, placement students, special needs resource staff	Always (unless eating – but time with masks off should be limited and physical distance should be maintained).	Discard mask when wet, visibly soiled, damaged or contaminated. Wash or sanitize hands before putting on and after taking off a mask. Exemptions*: <ul style="list-style-type: none"> • Those who have trouble breathing, unable to wear a mask due to medical conditions

				<p>or unable to remove a mask without assistance. Proof of a mask exemption is not required.</p> <ul style="list-style-type: none"> • Children under the age of 2. • When outdoors only if physical distancing can be maintained.
<p>Eye Protection (face shield, goggles or wrap around safety glasses)</p>	<p>Must protect the eyes from all angles including the front and sides (wrap around the eyes) to protect from direct splashes or sprays</p>	<p>Staff, placement students, special needs resource staff</p>	<p>Always (unless eating – but time with eye protection off should be limited and physical distance should be maintained).</p>	<p>Clean and disinfect after each use, or when contaminated. Wash or sanitize hands before putting on and taking off eye protection. A face shield is not a mask and cannot be used as a substitute for a mask. Prescription eye glasses are not a proper form of eye protection. Exemptions*: When outdoors only if physical distancing can be maintained</p>

<p>Non-Medical Masks/Face Coverings</p>	<p>Fully covering the nose, mouth and chin with no gaps</p>	<ul style="list-style-type: none"> • Essential Visitors/Vendors • Children in grades 1 to 3 • Children in kindergarten • Children aged 2 to kindergarten • Parents/Guardians/Caregivers 	<p>Always</p> <p>Always</p> <p>Strongly recommended to be always</p> <p>Encouraged but not required</p> <p>Always</p>	<p>Same considerations as medical masks. Parents/guardians are responsible for providing their child(ren) with a nonmedical mask(s) or face covering each day and should be reminded that if children are wearing masks, they will require a way to store their mask when not in use.</p>
<p>Gloves</p>	<p>Single-use gloves</p>	<p>Staff and placement students</p>	<p>Cleaning and disinfecting blood and bodily fluids spills Caring for a sick child</p>	<p>Glove use does not replace hand washing. Do not touch your face with gloved hands. Wash your hands after removing gloves.</p>
<p>Gowns</p>	<p>Single-use</p>	<p>Staff, and placement students</p>	<p>May be used when:</p> <ul style="list-style-type: none"> • Cleaning and disinfecting blood and bodily fluids spills • Caring for a sick child 	<p>Discard single-use gowns after use.</p>

PROCEDURES

Hand Washing

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

- When they arrive at the centre and before they go home
- Before and after breaks
- After using the toilet
- Before handling food, preparing bottles, feeding children
- Before and after eating and drinking
- Before and after touching their own or someone else's face
- After sneezing or coughing into hands
- Before and after giving or applying medication or ointment to a child or self
- Before and after diaper check or changing diapers, assisting a child to use the toilet, and using the toilet
- Before and after contact with bodily fluids (i.e. runny noses, spit, vomit, blood)
- After cleaning and handling garbage

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

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

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

- Wet hands
- Apply soap
- Lather for at least 20 seconds. Rub between fingers, back of hands, fingertips, under nails
- Rinse well under running water
- Dry hands well with paper towel or hot air blower
- Turn taps off with paper towel, if available

Staff should increase monitoring of hand washing supplies to ensure all sinks in washrooms, kitchens, and classrooms are well stocked at all times (i.e. soap, paper towels, waste receptacles). Ensure hand sanitizer or alcohol-based hand rub (containing 60%-90% alcohol) is available at the

entrances of the centre and throughout the centre. Ensure hand sanitizer is readily accessible in areas where hand washing facilities are not available. However, hand sanitizer dispensers should not be in locations that can be accessed by young children.

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

- Apply hand sanitizer (60-90% alcohol-based)
- Rub hands together for at least 20 seconds
- Work sanitizer between fingers, back of hands, fingertips, and under nails
- Rub hands until dry

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

Other personal hygiene measures include avoiding touching your eyes, nose or mouth and avoiding high-touch areas, where possible, or ensuring you clean your hands afterward.

Respiratory Etiquette

All individuals should cover coughs and sneezes with a tissue. If a tissue is not available, individuals should cough or sneeze into their upper sleeve or elbow, not their hands. Individuals should wash hands after coughing and sneezing. Individuals should replace damp or contaminated masks and eye protection.

Cleaning and Disinfecting

Cleaning and disinfecting reduce the spread of germs. Some germs can live for hours, days or weeks on toys, counters, diapering table, door knobs, computer key boards and other surfaces.

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

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

Only use disinfectants with a Drug Identification Number (DIN) and labelled as a broad-spectrum viricide. Low-level hospital grade disinfectants may be used. Check expiry dates and always follow the manufacturer's instructions. Particular attention should be paid to contact time, dilution, material compatibility, shelf-life, storage, first aid, and PPE.

Note that vinegar is not a disinfectant and should not be used for disinfecting in child care centres. Vinegar does not kill germs!

Fogging is not a recommended method of disinfection due to its lack of efficacy and potential adverse health effects on children and staff. Currently, Health Canada and Public Health Ontario are also discouraging the use of fogging for disinfection in healthcare settings, stating the use of no-touch disinfection systems do not replace the need for routine manual cleaning of environmental surfaces.

A schedule has been set up by the supervisor/assistant supervisor to ensure all cleaning and disinfecting duties are consistently completed and documented.

The 6 steps for cleaning and disinfecting are:

1. Clean with soap and water.
2. Rinse with clean water.
3. Apply the disinfectant according to the manufacturer's instructions on the label.
4. Allow the surface or object to soak in the disinfectant for the required contact time. Refer to the **Disinfection Chart for Child Care Centres in Appendix 1** for the required contact times when using household bleach and water. A disinfectant with a Drug Identification Number (DIN) can also be used.

rinse with clean water if required according to manufacturer's instruction on the label.

5. Rinse with clean water if required according to manufacturer's instruction on the label or according to the disinfection chart when using household bleach and water.
6. Let air dry.

Refer to Public Health Ontario's "[COVID-19 Cleaning and Disinfection for Public Settings](#)" guidelines for more information. Staff are strongly recommended to use disinfectants approved for use on COVID-19 on [Health Canada's website](#) or bleach water solution. Follow manufacturer's instructions for contact time. Staff are recommended to choose a disinfectant product with a shorter contact time.

In the kitchen, continue to use sanitizer that contains chlorine, quaternary ammonium or iodine (according to the [Ontario Food Premises Regulation](#)).

Toys and Equipment

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

- Group water/sensory tables must not be used. Only individual sensory play is permitted (i.e. each child has their own separate bin).
- Ensure each child's individual sensory play toys are cleaned and disinfected between use.
- If sensory materials (e.g., playdough, water, sand, etc.) are offered, they should be provided for single use (i.e. available to the child for the day) and labelled with child's name, if

applicable.

- Remove toys that cannot be easily cleaned and disinfected, such as plush toys.
- Toys and equipment should be cleaned and disinfected at a minimum between groups.
- Mouthed toys should be cleaned and disinfected immediately after child is finished using it.
- Shared spaces and structures that cannot be cleaned and disinfected between groups should not be used.
- Staff are encouraged to have designated toys and equipment (e.g., balls, loose equipment) for each room or group. Where toys and equipment are shared, they should be cleaned and disinfected prior to being shared.
- Items that are absorbent and cannot be easily cleaned and disinfected like books, puzzles and cardboard/boxboard are not recommended to be used unless:
 - o They are assigned to a specific child and not shared with others (children can bring their own books if not shared with others)
 - o They are shared items that are essential for curriculum use. These items should be stored in a sealed container for a minimum of 3 days before being used again.
- Follow provincial and municipal guidance or laws with respect to use of community playgrounds. As playgrounds re-open for public use, ensure hands are washed or sanitized prior to and after use of playgrounds.
- Outdoor play structures can only be used by one group at a time. Ensure hands are washed or sanitized prior to and after use of play structures.
- Easily cleanable toys and equipment may be brought outside for children/groups to play with and must be cleaned and disinfected prior to use by another group/cohort if shared.
- Tables and chairs being used are to be cleaned and disinfected before and after use and as often as needed.
- Should any child present with symptoms of COVID-19, all toys and equipment accessed by the child will be removed from the room to be cleaned and disinfected as soon as possible. All items that cannot be cleaned (such as paper, books, cardboard puzzles) should be removed and stored in a sealed container for a minimum of 7 days.

Cots

- o Children will have a cot assigned to them. Cots will be placed to support physical distancing practices (ideally 2 meters/6.5 feet spatial separation if feasible). If space is tight, place every other crib and mark the cribs that should not be used in order to support physical distancing.
- o Cots and cribs must be cleared and disinfected daily or more frequently as needed.
- o High touched surfaces on cots and cribs must be disinfected twice a day as often as necessary
- o Cot sheets and blankets must be changed between each user.
- o Sheets and blankets if used by the same user must be cleaned weekly or more frequently as needed.

- Ensure cots and blankets belonging to different children are labelled with the child's name and stored separately in bags or bins in clean dry areas to prevent mold growth and kept out of the way of everyday activities.
- Families will be permitted to bring their own blankets and or sleeping bags for children. The centre should strive as much as possible to launder these items before use. If not possible ensure parents/guardians launder all items prior to bringing them to the centre, and store them separately in a clean bag. Items must be laundered weekly or more frequently as needed.

Additional Infection Control Practices

- Regularly clean and disinfect high-touch surfaces including door knobs, light switches, faucet handles, hand rails, and electronic devices at **least twice daily (for 7am-6pm operations) to** prevent the transmission of viruses from contaminated objects and surfaces. Additional cleaning and disinfecting may be required based on daily need.
- High touch electronic devices (i.e. keyboards, tablets) may be disinfected with 70% alcohol (i.e. alcohol prep wipes) while ensuring the dilute solution makes contact with the surface for at least one minute.
- Ensure washroom facilities are frequently cleaned and disinfected, particularly between different group of children if washrooms are shared. Ensure children practice good hand hygiene after the use of the washroom
- Low-touch surfaces (any surfaces at the location that have minimal contact with hands), must be cleaned and disinfected daily (i.e. window ledges, doors, sides of furnishings, etc)
- Carpets are to be vacuumed daily when the rooms are available i.e. during outdoor play
- Ensure Garbage is kept in waterproof containers lined with plastic garbage bags. Staff must dispose of garbage daily. Any blood soiled item must be discarded in sealed bags.
- Personal belongings (e.g. backpacks, clothing, etc.) should be minimized. If brought, belongings should be labelled and kept in the child's cubby/designated area.
- Bottles, sippy cups, and pacifiers must be individually labelled and stored separately (not touching each other), they must not be shared among children. The plastic handle of the toothbrush and the pacifier must be washed in soap and water upon arrival to the centre.
- For creams and lotions during diapering, staff must never put hands directly into lotion or cream bottles. They must use a tissue or single-use gloves. Upon arrival to the centre, wipe the cream/lotion container with a disinfecting wipe.
- Children should bring their own sunscreen where possible and it should not be shared. Staff may provide assistance to apply sunscreen to any child requiring it and should exercise proper hand hygiene when doing so (for example washing hands before and after application).

- Reinforce messages with children to not share their food or drinks with others.
- Staff should change meal practices (if meals or snacks are provided) to ensure there is no self-serve or sharing of food at meal times.
- Utensils should be used to serve food.
- Meals should be served in individual portions to children
- There should be no items shared (i.e., utensils)
- There should be no food provided by the family/outside of the regular meal provision of the program (except where required and special precautions for handling and serving the food must be put in place).
- Avoid getting close to faces of all children, where possible.
- Singing is prohibited indoors to reduce the risk of COVID19 transmission but it is allowed outdoors (with physical distancing measures in place).
- Do not plan activities with exposure to animals or pets.

Physical Distancing Measures

Maintain physical distancing of at least 2 meters (6 feet) or more between persons, including staff, students, parents and children. Physical distancing may be difficult to maintain in the child care setting; however, additional steps should be taken to limit the number of people in close contact (i.e. within minimum 2-meters of each other).

The following physical distancing measures are in place at CECP:

- ☒ Staggering the children’s arrival and departure times, spreading out the use of the outdoor play area to allow smaller numbers of children to play together and thus avoid large groups.
- ☒ Eliminate large group activities.
- ☒ Make sure that the children are distanced from each other during meal time, dressing time, table work, and nap time, as much as possible.
- ☒ Ideally, try to avoid activities involving direct contact between the children as much as possible (i.e. holding hands or cuddling each other), as well as toy sharing (i.e. rather than playing a table game in which all the children touch the tokens or dice, it should be one child in the group who handles the material). Incorporate more individual activities or activities that encourage more space between children.
- ☒ Limit the number of children who are in the communal areas at the same time (i.e. alternate the groups of children in the activity rooms or cubby area).

- ❑ When in the same common space (e.g., entrances, hallways) physical distancing of at least 2 metres must be maintained between different groups and should be encouraged, where possible, between children within the same group by:
 - spreading children out into different areas, particularly at meal and dressing time;
 - incorporating more individual activities or activities that encourage more space between children; and
 - using visual cues to promote physical distancing.

- ❑ Each group must have their own assigned indoor space, separated from all other groups by a physical barrier. The purpose of the barrier is to reduce the spread of respiratory droplets that are thought to transmit COVID-19 and to reinforce physical distancing requirements between groups. The physical barrier must begin at the floor and reach a minimum height of 8 feet to ensure that it will always be 12 inches taller than the tallest person in the facility. It must be as wide as the space/room will allow.

- ❑ Shared washrooms are divided using a temporary physical barrier from the floor to a minimum height of 8 feet to divide the space between different groups. The barrier must be as wide as the space/room will allow. The type of material for the physical barrier should be easy to clean and disinfect and should be compliant with fire regulations. Child care providers should consult with their local Fire Service.

- ❑ Incorporate outside time in daily activities and open windows (weather permitting). Outdoor play is encouraged and should be offered in staggered shifts if possible. In shared outdoor space, groups must maintain a distance of at least 2 meters from other groups and any other individuals outside the group.

Additional information can be found from the Public Services Health and Safety Association's [guidelines](#) and the [Federal Guidance for School Bus Operations](#).

Staffing Considerations

- ❑ Staff and students should work at only one child care location to reduce the number of contacts they have with other groups of children and to facilitate contact tracing if required by Peel Public Health.

- ❑ Staff should be assigned to dedicated work areas as much as possible. Sharing phones, desks, offices and other tools and equipment are discouraged. Disinfect after each use.

- ❑ If documents must be exchanged, leave them on a clean surface while maintaining a two-meter distance.

- ☒ Limit the total number of workers onsite during child care centre hours and where they are assigned to work.
- ☒ Supervisors and/or designates should limit their movement between rooms, doing so only when absolutely necessary.
- ☒ Supply/replacement staff should be assigned to a specific group so as to limit staff interaction with multiple groups of children. It is the child care provider's responsibility to manage staff scheduling to ensure this.
- ☒ In situations where "floater" staff are required to move between rooms, such as providing coverage for staff breaks or lunches, they are permitted to do so. For example, floater staff could relieve a staff break in the infant room and then move to relieve a staff break in the preschool room. When doing so, they are required to:
 - maintain physical distancing as best as possible
 - when moving directly between different groups, change mask and eye protection if visibly soiled, damp, damaged or contaminated. Discard masks once removed.
 - wash their hands frequently
- ☒ The floater staff should be consistently assigned to the same groups as much as possible. For contact tracing purposes, a record of floater staff interactions with groups should be maintained.
- ☒ Classroom educators assigned to a group must remain consistently with the same group as much as possible and should limit their interaction with staff/children outside of their group.
- ☒ Classroom educators within an assigned group may clean their own classroom.
- ☒ In situations where non-classroom staff are assigned to functions such as screening, escorting children to classrooms after screening, food preparation or cleaning, providers are encouraged to keep all staff positions consistent, where possible.
- ☒ For contact tracing purposes, a record of staff positions should be maintained.
- ☒ All individuals in positions where they are not within an assigned group are required to:
 - maintain physical distancing as best as possible
 - change mask and eye protection if visibly soiled, damp, damaged or contaminated. Discard masks once removed.
 - wash their hands frequently
- ☒ Staff should consider implementing a process for containing and laundering work clothing.

Alternatively, staff should practice good laundry hygiene practices with their clothing as it could potentially be a source of contamination.

- Place possibly contaminated laundry into a container with a plastic liner and do not shake.
- Wash with regular laundry soap and hot water (60-90°C) and dry well.
- Clothing and linens can be washed with other laundry.

☒ CECF will conduct virtual and/or telephone consultations when and where possible.

- Non-essential face-to-face meetings (i.e Interviews) will be converted to virtual appointments.

☒ Alter the workplace layout of the floor by moving furniture or using visual cues such as tape on the floor to enhance physical distancing.

- Lunchrooms and break rooms must be arranged to follow physical distancing practices. Consider staggered lunch and break times to reduce the number of child care staff gathering
- Staff should avoid instances where physical distancing cannot be maintained, especially during periods where PPE is removed during lunch and break times. Peel Public Health strongly recommends that staff eat lunch alone and/or lunch and break times are staggered to reduce the number of staff gathering in small, enclosed spaces such as a small break room.
- o Lunch/break rooms must be arranged to follow physical distancing practices. Alter the workplace layout by moving furniture or using visual cues such as tape on the floor to ensure physical distancing of 2 metres or greater is maintained as much as possible.
- o Keep lunch/break room doors and windows open (weather permitting).

Outbreak Management for COVID-19 Related Symptoms

POLICY

To protect the health and well-being of children and staff within the child care centre, all children should be monitored while in care for emerging signs or symptoms of any illness, including COVID-19. Children or staff who become ill while at the child care centre must return home as soon as possible. The Supervisor must initiate the centre's illness management policies, including the following measures related to outbreak management for COVID-19.

PROCEDURES

Health Checks for Children in Care

Staff must ensure that all children in care are monitored for illness, with a temperature taken as necessary, including for the following signs and symptoms of COVID-19:

- Fever (temperature $\geq 37.8^{\circ}\text{C}$) and/or chills
- Cough or barking cough (croup)
- Shortness of breath
- Decrease or loss of sense of taste or smell
- Sore throat or difficulty swallowing
- Runny or stuffy/congested nose
- Headache that is unusual or long lasting
- Nausea, vomiting and/or diarrhea
- Unusual or extreme tiredness or muscle aches

Staff must ensure that hand hygiene is performed before and after each health check with each child. Staff are only required to conduct and document the health check or take a temperature if symptoms are noted. Staff must document any symptoms observed on the child's [Illness Tracking Form](#).

Children Who Display COVID-19-Related Symptoms During Care

If ANY ONE of the symptoms related to COVID-19 is present in a child or staff member, the individual must be immediately excluded from the child care setting and sent home.

If the child has ANY new or worsening COVID-19 symptoms not related to other known causes or medical conditions, all siblings (or any other children who live in the same household) who attend a child care or school setting should also be excluded and stay home.

Staff are required to:

- Isolate the child with symptoms immediately from other children and staff into a separate room. If a separate room is not available, the sick child should be kept separated from others at a minimum distance of 2 meters in a supervised area until they can go home.
- The child should be supervised by only one staff person until the child leaves while maintaining a physical distance of 2-meters if possible.
- Ensure the child wears a surgical/procedural mask (if tolerated) to cover the child's nose and mouth. Masks should not be placed on children under age 2 or on anyone who has trouble breathing, is unconscious, or otherwise unable to remove the mask without assistance. The staff caring for the ill child should wear a surgical/procedural mask and eye protection (i.e. safety glasses, goggles or face shield) and not interact with others. Hands must be washed before and after taking off a mask.
- In addition, staff should perform hand hygiene and attempt to not touch their face with unwashed hands. Disposable gloves should be used when there is close contact with the child. Staff must ensure that they wash their hands or use hand sanitizer (if hands not visibly soiled) immediately upon removal of the gloves. The most important measures are proper hand hygiene and maintaining a 2-meter distance as much as possible.
- Respiratory etiquette should also be practiced while the child is waiting to be picked up. Tissues should be provided to the child and disposed of properly after use in a lined, covered garbage container. Staff should avoid contact with the child's respiratory secretions.
- Increase ventilation if possible (e.g., open windows).
- Keep the child comfortable by providing a separate cot and toys. Clean and disinfect the cot and all toys after the child leaves the centre.
- Staff will notify the parent/guardian to arrange for immediate pick-up of the child (and siblings if applicable). If a parent cannot be reached, an emergency contact person will be contacted to pick up the child.
- Staff will document the symptoms observed, the date and time that symptoms occurred, and the program room the child attended on the [Illness Tracking Form](#).
- Once the child has been picked up, the Supervisor will ensure that the room/area where child was separated to and any other areas/surfaces that the child had contact with are thoroughly cleaned and disinfected. All items used by the child that cannot be cleaned (e.g. paper, books, cardboard puzzles) should be removed and stored in a sealed container for a minimum of 7 days.
- The child should be excluded from child care and self-isolate for 14 days (unless tested negative) from the start of symptoms and be tested for COVID-19 before returning to child care. If testing is refused and medical assessment by a health care provider is not sought, the Supervisor will advise the parent/guardian to contact Peel Public Health for an assessment and for advice on next steps.
 - **If tested negative**, and symptoms have been improving for at least 24 hours, the child must pass re-entry screening (refer to **COVID-19 Re-Entry Screening Form for Previously Ill Individuals**) to return to child care.
 - **If tested positive**, Peel Public Health will provide direction on when the child can return to child care.

When to Notify Peel Public Health, Parents/Guardians, Ministry of Education Peel Public Health

- There is a positive case of COVID-19 and the Service Provider has not yet been contacted by Peel Public Health.
- When there is an unusual amount of staff and/or children who become sick at the child care centre, including non-COVID related illnesses (see pg. 18 in the Preventing and Managing Illnesses in Child Care Centres guideline).
- When there is an unusual occurrence such as a flood, fire, sewage back-up, etc.

Ministry of Education

In accordance with the Ministry of Education’s Operational Guidance During COVID-19 Outbreak: Child Care Re-Opening document, child care licensees are required to submit serious occurrences for a confirmed case of COVID-19.

A serious occurrence is required to be submitted under the category “confirmed case of COVID-19” when one of the following individuals has a confirmed case of COVID-19 (i.e. a positive COVID-19 test result):

- (i) a child who receives child care at a home child care premises or child care centre;
- (ii) a home child care provider;
- (iii) a person who is ordinarily a resident of a home child care premises (e.g. the home provider’s child, the home provider’s spouse, etc.; for complete definition please refer to the Home Child Care Licensing Manual);
- (iv) a person who is regularly at a home child care premises (e.g. the home provider’s friend who visits the premises once a week, etc.; for complete definition please refer to the Home Child Care Licensing Manual);
- (v) a home child care visitor;
- (vi) a staff member at a child care centre;
- (vii) a student at a home child care premises or child care centre.

While Service Providers are no longer required to report a serious occurrence for suspected cases; if the local public health unit determines a full or partial closure is required, a serious occurrence report must be submitted under the “Unplanned Disruption of Service” category. Service Providers should refer to the Operational Guidance During COVID-19 Outbreak: Child Care Re-Opening regarding all serious occurrence reporting requirements.

When to report occupationally-acquired illness in Child Care

If the staff person's illness is determined to be work-related – in accordance with the Occupational Health and Safety Act and its regulations – Service Providers must provide a written notice within four days of being advised that the staff person has an occupational illness, including an occupationally-acquired infection, or if a claim has been made to the Workplace Safety and Insurance Board (WSIB) by or on behalf of the staff with respect to an occupational illness, including an occupational infection, to the: o Ministry of Labour; o Joint Health and Safety Committee (or health and safety representative); and o Trade Union, if any. Refer to Health and Safety Guidance during COVID-19 for Employers of Child Care Centres. COVID-19 Health and Safety Protocols for Early Years and Child Care Settings 51

What to Do When an Individual That Attended CECP Tests Positive For COVID-19 Illness

Peel Public Health is notified of all confirmed cases of COVID-19 by the testing laboratory. Peel Public Health follows up with all confirmed cases and exposure sites to provide direction. Public Health will contact the centre if a case, contact(s) or exposure is associated with the setting. If CECP is notified that an individual who attended the centre (e.g. staff person, child, parent/guardian/caregiver) has tested positive for COVID-19, the following steps will be immediately taken:

- CECP will determine whether the staff/child who tested positive was present in the child care setting when they were infectious. o If the person had symptoms of COVID-19, the period of infectiousness starts 2 days before the person started having symptoms OR 2 days before the person was tested for COVID-19, whichever is earlier, and ends 10 days after onset of symptoms. If the individual is immunocompromised or hospitalized, this period may be extended for up to 20 days. o If the person did not have COVID-19 symptoms, the period of infectiousness begins 2 days before the date they were tested for COVID-19 and ends 10 days after the date of their COVID-19 test. If the individual is immunocompromised or hospitalized, this period may be extended for up to 20 days. o If the staff/child who tested positive was present in the child care setting during the period of infectiousness.
- Any siblings of the children impacted by the classroom/group closure (or any other children living in the same household) should stay home and not attend school or child care.

Closure of the Centre

The decision to close the centre will depend on several factors and will be determined on a case-by-case basis in consultation with Peel Public Health. Case scenarios could include but are not limited to a case with an ill staff person with exposure to multiple children/households in different classrooms/programs.

Instructions for a Child or Staff with Confirmed COVID-19 Illness

If the Supervisor is notified that a staff person or child has tested positive for COVID-19, the following steps will be taken:

- Continue to exclude the confirmed case from the centre until further notice.
- Supervisor will call Peel Public Health to discuss the situation and necessary measures to be taken. Public Health will provide advice and steps necessary to prevent a large outbreak.
- Provide Peel Public Health with the most current [Illness Tracking Form](#).
- Notify cleaning staff to increase cleaning and disinfection practices. Refer to the **General Sanitary Precautions and Physical Distancing Measures to Prevent the Spread of COVID-19 Policy**.
- Use a disinfectant with a Drug Identification Number (DIN), check expiry date, and follow manufacturer's instructions.
- If using bleach, for the appropriate concentration of bleach and water, refer to the **Disinfection Chart for Child Care Centres** found in **Appendix 1** of this document.
- In consultation with Peel Public Health, CECP must consider a single, symptomatic, laboratory confirmed case of COVID-19 in a staff person or child as a confirmed COVID-19 outbreak. Outbreaks should be declared in collaboration between the centre and Peel Public Health.
- Consult with Peel Public Health to prepare and provide fact sheets and letters to parents/guardians and staff about the situation and the response measures taken by the child care centre.

Occupational Health and Safety for Staff

- When the Supervisor is notified that a staff person has tested positive for COVID-19, they should consult with Peel Public Health to determine when the staff can return to work. Staff should also report to their Employee Health/Occupational Health and Safety department prior to returning to work.
- If the staff person's illness is determined to be work-related – in accordance with the *Occupational Health and Safety Act* and its regulations – the Supervisor must provide a written notice within four days of being advised that the staff person has an occupational illness, including an occupationally-acquired infection, or if a claim has been made to the Workplace Safety and Insurance Board (WSIB) by or on behalf of the staff with respect to an occupational illness, including an occupational infection, to the:
 - Ministry of Labour;
 - Joint health and safety committee (or health and safety representative); and
 - Trade union, if any.

- Any instances of occupationally acquired infection shall be reported to WSIB within 72 hours of receiving notification of the illness.
- CECP should establish an infectious disease preparedness and response plan, which should consider and address levels of risk associated with the workplace and job tasks within the child care centre and any office staff. This includes how the child care centre will operate during and throughout the recovery phase following the pandemic including sanitization of the workplace, equipment and resources, how employees report illness, how to ensure physical distancing and how work will be scheduled.

Refer to [Health and Safety Guidance during COVID-19 for Employers of Child Care Centres](#).

Required Forms

- 🔗 [Illness Tracking Form](#)

Before and After School Programs

Limiting Interaction Between Different Groups

CECP will make efforts to limit interactions between children from different schools, to the greatest extent possible. Best practices to limit interactions between children from different schools and reduce transmission of COVID-19 may include:

- Making best efforts to group the before and after school program groups with children from the same school; and
- Making use of outdoor spaces as much as possible for the before and after school programs.

Use of Face Masks

On February 3, 2021 the provincial government announced that Before and After School Programs (BASP) in Peel are permitted to open on **February 16, 2021**. This means that elementary schools are also open for in-person learning on this date.

Peel Public Health has recommended that non-medical masks be made mandatory for children in Kindergarten once schools re-open. CECP is in alignment with this recommendation and now requires that our Kindergarten-aged and older children in our Before and After School Program wear a non-medical cloth face mask while in our care. Each family will be responsible for providing their child with a cloth face mask daily.

Communication with Families

- Providers must share with parents the policies and procedures regarding health and safety protocols for COVID-19, including requirements and exceptions related to masks.

Screening

- CECP must inform all parents/guardians whose children are placed in the program of the enhanced health and safety measures including the screening requirements in place in the core school program prior to the child beginning the program.
- An individual who has been screened for symptoms prior to the before school program would not need to be re-screened for the core day program. Similarly, an individual that has been screened prior to the before school program or core day program, would not need to be re-screened for the after-school program.
 - o Parents/guardians will be held accountable to complete the self-screen on children prior to their arrival.

Pick up and Drop off Procedures

- CECP will support physical distancing and separate groups of students as best as possible during transportation and entry into the program. The school agers will enter the centre using the main entrance and use the back exit for bus pick up and drop off.

Cleaning

- Shared spaces (i.e. classroom/washroom) should be cleaned and disinfected (high touch surfaces at a minimum) before children enter to prevent them from touching contaminated surfaces.
- Staff may consider scheduling outdoor play during the time that the cleaning and disinfecting takes place.

Reporting of Illness

- Staff must ensure that all children in care are monitored for illness, with a temperature taken as necessary, including for signs and symptoms of COVID-19 in accordance with the Outbreak Management for COVID-19 Related Symptoms Policy.
- To support contact tracing by Peel Public Health, CECP will maintain a list of schools attended by children enrolled in our before and after school program.
- If Peel Public Health is notified by the school board of a positive case in a child who also attends CECP, Peel Public Health will contact us to support outbreak management and communication with families if we have not already contacted Public Health.

Delivering Care on Professional Activity (PA) Days within Centre-Based Setting

- When delivering PA Day programming, children must be maintained within their regular before and after school program grouping, with physical distancing maintained in the shared room between groups as best as possible
- Children who do not normally participate in the before and after school program will not participate in PA Day care. Do not alter groups for the purposes of PA Day care.
- Children will spend as much time outdoors as possible.
- All children attending PA Day care must be actively screened in accordance with the daily active screening protocols in place for CECP.