



**Kids' Campus Child Care Centre
COVID – 19 Pandemic Policies
and Procedure Manual**



Kids' Campus Child Care Centre

COVID – 19 Pandemic Policies and Procedure Manual

Table of Contents

Section 1	COVID – 19 Pandemic Procedures
1.1	Purpose of the Kids' Campus Child Care Centre COVID – 19 Pandemic Procedures
1.2	COVID – 19 Personnel Responsibilities
1.3	Daily Active Screening / Health Checks * Updated
1.4	General Sanitary Precautions COVID – 19 * Updated
1.5	Personal Protective Equipment (PPE) Procedures COVID – 19
1.6	When staff and children become ill at the child care centre
1.7	Supervision and Physical Distancing of Children * Updated
1.8	Best Practices during COVID -19 * Updated
1.9	Curriculum and Program Documentation
Section 2	COVID – 19 Appendix
1	Policy Sign off Statement
2	Re-opening Checklist
3	Re-opening Newsletter
4	Ill Health Form
5	Active Screening Surveillance Form
6	Screening Poster and PPE Poster
7	Self – Isolation Tracking Sheet
8	Hand Washing Sign
9	Cleaning Schedule
10	Cleaning Sign off
11	Toileting Procedure Poster
12	Diapering Procedure Sign
13	Record of Visitors
14	Hand Sanitizer Sign
15	COVID – 19 Information Posters

Section: COVID – 19 Pandemic Procedures	Policy: Purpose of the Kids’ Campus Child Care Centre COVID – 19 Pandemic Procedure Manual
Policy Number: 1.1	Approved Date:

Purpose

The purpose of this document is to provide clear direction for all staff to follow when dealing with COVID – 19, to reduce the risk of transmission and to support and ensure that children, families, and staff remain healthy. The policies and procedures will be implemented in addition to already established policies and procedures.

Procedures

- 1.0 All staff will review the Kids’ Campus Child Care Centre COVID – 19 Pandemic Policies and Procedures upon return to employment.
- 2.0 All staff will review the Kids’ Campus Child Care Centre COVID – 19 Pandemic Policies and Procedures carefully and refer to it whenever questions arise. Questions or clarifications arising from the manual should be directed to your Supervisor, Program Manager and Executive Director. All staff will be provided the opportunity to discuss this manual to obtain any necessary clarification.
- 3.0 Each staff will be required to sign a statement (**Appendix 1**) indicating that he/she has read and understood the Kids’ Campus Child Care Centre COVID – 19 Pandemic Policies and Procedures
- 4.0 The Kids’ Campus Child Care Centre COVID -19 Pandemic policies and procedures may be changed or updated as new guidance and direction is given from the Province of Ontario, Ministry of Education, and the Local Health Department. All staff will be given copies of the amended changes forthwith.
- 5.0 The Supervisor and staff will complete the re – opening checklist (**Appendix 2**) the Supervisor will ensure that all areas are completed prior to re-opening the child care centre.
- 6.0 All families will receive a reopening newsletter (**Appendix 3**) that outlines the following:
 - Inform families of the new COVID – 19 health and safety measures and expectations.

- Share any updated / new policies with families
- Explain that all parents and children will be screened daily and how screening will be done.
- Request that parents try to have the same adult drop-off/pick-up their child as much as possible.
- Inform parents that Kids' Campus Child Care Centre considers an adult to be anyone over 18 years of age for pick up.
- Remind parents to label all items with child's name.
- Explain updated exclusion procedure for ill children.
- Provide center contact information
- Explain importance of an emergency pick-up person other than immediate family child lives with.
- Inform families of what items can be brought into the child care centre
- Explain how parents will pick-up their child at the end of the day. (i.e. call center number provided and staff will bring child to the entrance door for pick up)

7.0 The Kids' Campus Child Care Centre Pandemic Policies and Procedures will be posted on the Kids' Campus Website and will be update as changes are made.

Section: COVID – 19 Pandemic Procedures	Policy: COVID – 19 Personnel Responsibilities
Policy Number: 1.2	Approved Date:

Purpose

To identify the procedural expectations of the personnel (both Supervisors and staff) during the COVID – 19 pandemic.

Procedures

1.0 All staff are responsible for adhering to the policies and procedures of the organization and the COVID – 19 Pandemic Procedures.

2.0 Role of a Supervisor:

- Complete all regular duties, tasks, responsibilities
- Offer support to staff as required ensuring that all safety protocols are being followed
- Ensure a copy of the COVID -19 Pandemic Procedures are posted on staff information board.
- Supervisor will be working 9:15 A.M. to 6:15 P.M.
- Supervisor must limit their entry into program spaces or cohorts and only do so when necessary. Personal Protective Equipment must be worn upon entry.
- Supervisors will not care for ill children in isolation.
- Ensure they know how to use personal protective equipment (PPE) correctly. As PPE is required when entering program spaces or coming into contact with cohorts.
- Post posters from public health and ensure postings are up where PPE is commonly used.
- If families are arriving at the same time and the COVID Supervisor calls for assistance, the supervisor will designate a staff member to assist
- Immediately report to Public Health if a child, parent, or staff is suspected/confirmed positive for COVID-19 or if they have the symptoms of COVID-19 (presumptive/probable case). Follow all directions of Public Health.
- Orientate staff new to the center. Review the fire/emergency plan, all children's emergency health information and Individual Support Plans.

- Track all child and staff absences and the reason for absence/symptoms of ill health and record in the day book and on Ill health form **(Appendix 4)**.
- Report any issues to head office
- **Forward all media requests to headoffice@kidscampus.ca**

3.0 Role of COVID Supervisor:

- COVID Supervisor will be the first person on site and work 6:45 A.M. to 3:45 P.M
- COVID Supervisor will be screening all parents, children, staff, and essential visitors
- Offer support to all staff as required ensuring that all safety protocols are being followed.
- COVID Supervisor may enter each cohort wearing Personal Protective Equipment throughout the day.
- COVID Supervisor will not care for ill children in isolation.
- Will ensure they know how to use personal protective equipment (PPE) correctly. As PPE is required when screening and entering program spaces or coming into contact with cohorts
- If families are arriving at the same time, the COVID supervisor will use the walkie and call for assistance
- Will monitor symptoms of ill health for all staff throughout day, ensure to have Personal Protective Equipment on when entering program spaces.
- Will monitor that staff are implementing policies and procedures throughout the day, ensure to have Personal Protective Equipment on when entering program spaces
- Assist in tracking all child and staff absences and the reason for absence/symptoms of ill health and log in day book and on Ill health form **(Appendix 4)**.
- Assist with cleaning and disinfecting as needed
- Support Supervisor when needed
- Report any issues to head office
- **Forward all media requests to headoffice@kidscampus.ca**

4.0 Role of Staff:

- Welcome children and assist them to wash their hands when entering the classroom and help them to their cubby to store their personal belongings. Wipe all children's belongings with hard surfaces with a disposable disinfecting wipe.
- Designated RECE or designate will give all prescription medications

- Will ensure they do not mix groups of children, especially at opening and closing times. The same group of children should be kept together with the same staff as much as possible. (this is called cohorting)
- Staff are not permitted to enter other cohorts
- Ensure attendance is taken for all children.
- Track and record child and staff absences and the reason for absence/symptoms of ill health in the day book and ill health form.
- Show newly enrolled children around classroom, washrooms, introduce them to the other children, and staff and help them to engage in an activity.
- Provide play-based activities based on children's age and interests.
- Complete program tasks – Programming Sheet,
- When holding infants and toddlers, use blankets or cloth over your clothing and change the blanket/cloth between children.
- Assist with cleaning and disinfecting.
- During lunch breaks observe social distancing and wash hands before starting work again.

Section: COVID – 19 Pandemic Procedures	Policy: Daily Active Screening / Health Checks
Policy Number: 1.3	Approved Date:

Purpose

Every person arriving at the childcare centre must be actively screened including temperature checks, the information must be documented on the Active Screening Surveillance form **(Appendix 5)**.

Procedures

- 1.0 All families will be informed of the screening process prior to returning to child care and upon registration
- 2.0 Prior to active screening all staff must complete training on how to properly wear personal protective equipment.
- 3.0 Prior to beginning active screening at the child care centre, set up is required. The Supervisor and COVID Supervisor are required to ensure that the following steps are completed:
 - Post sign provided by Durham Region that identifies the screening process on the exterior door **(Appendix 6)** and PPE Poster **(Appendix 6)**.
 - Identify and set up the screening station and assign additional staff to conduct the screening if required.
- 4.0 Set up screening area:
 - Place screening table at the front entrance of the foyer, visually blocking the entrance into the center (if possible).
 - Only ONE entrance/exit is to be used for access to the center to ensure that each person is screened.
 - Set up markings on the ground to indicate where individuals are to stand if more than one family, staff or adult is waiting in the screening area to ensure they are maintaining a physical distance of at least 2 meters (6 feet) from one another or kindly ask them to go back to their vehicle and wait until they are directed by the COVID screener to approach.

- Screeners must take appropriate precautions when screening, including maintaining a distance of at least 2 meters (6 feet) from those being screened, and wearing personal protective equipment (i.e. surgical/procedure mask, gown, gloves, eye protection (goggles or face shield)).
- Staff must be trained on conducting the screening and using the active screening surveillance form.
- Place hand sanitizer of at least 60 % at the screening table. Ensure it is visible to every person. Dispensers should not be in locations that can be accessed by young children.
- A waste container must be available at the screening table to dispose of any materials, these materials can be disposed of in the regular garbage afterward.

5.0 All staff, parents/guardians, children and essential visitors or inspectors will be actively screened in the front entrance to the child care centre.

6.0 If school staff arrive at the school and try to enter through the child care entrance screener must call the custodian on duty to allow entry.

7.0 The screener must follow the screening checklist for each person and record the outcome on the Active Screening Surveillance form.

8.0 Screening Procedure Process:

- Staff, parents/guardians, children, essential visitors, or inspectors upon arrival will go to the screening station where they will be greeted in a friendly manner.
- Ensure that no more than ONE family, staff, essential visitor, or inspector is at the screening table
- If more than ONE family, staff, essential visitor, or inspector tries to approach the screening area kindly ask them to stand on the markers or kindly ask them to return to their vehicles and wait until they are directed by the COVID screener to approach.
- The screener will also do a visual check on anyone entering the facility. When a child or adult is ill, vomiting, diarrhea, fever, runny nose, sore throat, the screener must refuse entry into the child care centre.

9.0 Thermometers

- A bin will be on the table with the thermometer in it - Adults will be directed to take the thermometer from the bin and place it back in the bin after use.
- Screener will disinfect the thermometer and bin by using disinfectant spray or wipe between each use.
- Screener must follow the directions for contact time of disinfectant

- Thermometer will be placed back in the bin
- A temperature is considered anything higher than 37.8 C or 100 F.

10.0 Screening of Parent/ guardian and children:

- The screener will ask all the questions on the screening form and record the answers.
- The screener will refuse to allow anyone who answers YES or refuses to answer any of the COVID – 19 screening questions. This includes not accepting any child whose parent/ guardian has answered YES or refuses to answer any of the COVID – 19 screening questions.
- Then the screener will ask each parent / guardian to take their own temperature and the temperature of their child and show the screener the results between each temperature taking. The screener will record the results on the active screening surveillance form.

If Parent / guardian and child answers **NO** to **ALL** active screening questions and passes the temperature check

- A designated staff member will take each child into the child care centre. No parents are allowed into the child care centre.

If parent / guardian or child answers **YES** to **ANY** of the active screening questions or fails the temperature check

- The COVID Supervisor or Supervisor must refuse entry to the parent and child. This includes not allowing a child into the program whose parent and/or sibling have answered YES to any of the active screening questions, even if the child has no symptoms.

Ontario's self-assessment tool to assess symptoms <https://covid-19.ontario.ca/self-assessment/#q0>

The COVID Supervisor or Supervisor will:

- Inform the Program Manager
- Contact local Public Health unit to notify them of a potential case and seek advice regarding the information that should be shared with other staff and parents of children in the center.
- Create a list of other children and staff in the center who came into contact with the symptomatic staff or child, so that they can be identified as a close contact, cohort (i.e. grouped together) and monitored for symptoms until testing is confirmed. Continue to monitor for symptoms of any children or staff that have been in close

contact with the suspected case until laboratory tests, if any, have been completed or until directed by Public Health.

- Complete the Kids' Campus Child Care Centre Self-Isolation Tracking Sheet (**Appendix 7**)

11.0 Screening of Staff

- Staff will be screened upon entry or re-entry to the child care centre
- The screener will ask all the questions on the screening form and record the answers.
- If any individual answers YES to any of the screening questions, or refuses to answer, then they have failed the screening and cannot enter the building.
- Then the screener will ask each staff to take their own temperature and show the screener the results of the temperature taking. The screener will record the results on the active screening surveillance form.

If any staff answers **NO** to **ALL** active screening questions and passes the temperature check

- The staff will now be able to enter the center.
- Staff will log their arrival time on the staff log in sheet as well as log when they leave the centre at the end of the day

If any staff answers **YES** to **ANY** of the active screening questions or fails the temperature check

- They are not permitted to enter the child care centre and will be sent home.

Ontario's self-assessment tool to assess symptoms <https://covid-19.ontario.ca/self-assessment/#q0>

The COVID Supervisor or Supervisor will:

- Inform the Program Manager who will ensure a backup staff is called into work.
- Contact local Public Health unit to notify them of a potential case and seek advice regarding the information that should be shared with other staff and parents of children in the center.
- Create a list of other children and staff in the center who came into contact with the symptomatic staff or child, so that they can be identified as a close contact, cohort (i.e. grouped together) and monitored for symptoms until testing is confirmed. Continue to monitor for symptoms of any children or staff that have been in close contact with the suspected case until laboratory tests, if any, have been completed or until directed by Public Health.

- Complete the Kids' Campus Child Care Centre Self-Isolation Tracking Sheet

12.0 Screening of essential visitors or inspectors:

- The screener will ask all the questions on the screening form and record the answers.
- If any individual answers YES to any of the screening questions, or refuses to answer, then they have failed the screening and cannot enter the building.
- Then the screener will ask the essential visitor or inspector to take their own temperature and show the screener the results of the temperature taking. The screener will record the results on the active screening surveillance form.

If the essential visitors or inspector answers **NO** to **ALL** active screening questions and passes the temperature check

- The essential visitor or inspector will be able to enter the child care centre
- The Supervisor or COVID Supervisor will ensure the essential visitor or inspector has filled out the record of visitor form which includes their name, contact info, organization, date, arrival time, departure time and reason for visit

If the essential visitors or inspector answers **YES** to **ANY** of the active screening questions or fails the temperature check

- The COVID Supervisor or Supervisor must refuse entry to any essential visitor or inspector who answers YES to ANY of the active screening questions or fails the temperature check.

Ontario's self-assessment tool to assess symptoms <https://covid-19.ontario.ca/self-assessment/#q0>

The COVID Supervisor or Supervisor will:

- Inform the Program Manager
- Contact local Public Health unit to notify them of a potential case and seek advice regarding the information that should be shared with other staff and parents of children in the center.
- Create a list of other children and staff in the center who came into contact with the symptomatic staff or child, so that they can be identified as a close contact, cohort (i.e. grouped together) and

monitored for symptoms until testing is confirmed. Continue to monitor for symptoms of any children or staff that have been in close contact with the suspected case until laboratory tests, if any, have been completed or until directed by Public Health.

- Complete the Kids' Campus Child Care Centre Self-Isolation Tracking Sheet

13.0 Screening of COVID Supervisor or COVID Screener:

- The COVID Supervisor or COVID Screener will self-screen at home using the active screening surveillance form and complete their temperature check, to ensure they do not have symptoms of COVID-19.
- The COVID Supervisor or COVID Screener will be the first person to arrive at the center.

If COVID Supervisor or COVID Screener answers **NO** to **ALL** active screening questions and passes the temperature check

- Once the COVID Supervisor or COVID Screener has completed the self-screening at home, he/she will proceed to work and will complete active screening for the second staff to arrive at the site. Once screened, the second staff to arrive will confirm the written screening completed by the COVID Supervisor or COVID screener by initialing the form and taking their temperature .

If COVID Supervisor or COVID Screener answers **YES** to **ANY** active screening questions or fails the temperature check

- If the COVID Supervisor or COVID Screener answers YES to ANY of the active screening questions or fails the temperature check, they are not permitted to report to work.

Ontario's self-assessment tool to assess symptoms <https://covid-19.ontario.ca/self-assessment/#q0>

The COVID Supervisor or COVID Screener will:

- Inform the Program Manager who will ensure a backup screener is called into work.

Executive Director or Program Manager will:

- Contact local Public Health unit to notify them of a potential case and seek advice regarding the information that should be shared with other staff and parents of children in the center.

- Create a list of other children and staff in the center who came into contact with the symptomatic staff or child, so that they can be identified as a close contact, cohort (i.e. grouped together) and monitored for symptoms until testing is confirmed. Continue to monitor for symptoms of any children or staff that have been in close contact with the suspected case until laboratory tests, if any, have been completed or until directed by Public Health.
- Complete the Kids' Campus Child Care Centre Self-Isolation Tracking Sheet

14.0 When contact with local Public Health is made they will:

- Refer symptomatic staff and children for testing.
- Report results of testing to the centre.
- Provide any further direction on isolation of close contacts to the symptomatic staff or child.
- If required, declare an outbreak, and then determine when the outbreak is deemed over.
- Arrange for any further required testing of asymptomatic staff and children.

Those who test negative for COVID-19 must be:

- Excluded until 48 hours after symptom resolution (i.e. symptoms end) or other isolation recommendations made from the Health Department

Those who test positive for COVID-19 must be:

- Excluded for 14 days after the onset of symptoms and clearance has been received from Public Health.
- Immediately contact Executive Director or Program Manager for more information about reporting to the Ministry of Labour, and to discuss their return to work for staff.

Close Contacts:

- Can continue to attend the center if they are asymptomatic (i.e. no symptoms), unless otherwise directed by Public Health. They should be monitored for symptoms, and if they become symptomatic, they should be excluded.

15.0 Regional Contacts for Reporting:

Durham Health Connection Line at 1-800-841-2729 and press "3" to speak to a **Health Inspector** (not the public health nurse) and leave a message there for them to call back during business hours – 8:30am-6:00pm.

- After hours you can call (905) 576 9991.

Please also contact:

- Julie Gaskin, Durham Region, Children's Services at (905) 434-0313

- 16.0 Executive Director or Program Manager must report any suspected or confirmed cases of COVID -19 to Ministry of Education Program Advisor by submitting a Serious Occurrence – Suspected/confirmed case of COVID -19. A Serious Occurrence is required when one of the following individuals has a confirmed case of COVID -19 or a suspected case involving the individual exhibiting 2 or more symptoms and the individual has been tested or has indicated that they will be tested for COVID – 19 :
- A child who received child care at a home child care premises or a child care centre,
 - A home child care provider,
 - A home child care visitor,
 - A parent of a child
 - A staff member at a child care centre
- 17.0 Executive Director or Program Manager must report a room, centre or premise closure due to COVID – 19 to Ministry of Education Program Advisor by submitting a serious occurrence report in CCLS.
- 18.0 Supervisors must post the serious occurrence notification form unless local public health advises otherwise.
- 19.0 Active Screening Forms will be kept for 3 years

Section: COVID – 19 Pandemic Procedures	Policy: General Sanitary Precautions COVID – 19
Policy Number: 1.4	Approved Date:

Purpose

In addition to routine sanitary practices and cleaning protocols all staff must increase cleaning and disinfecting routines during COVID – 19 Pandemic as the risk of environmental contamination is higher. Local Public Health advice, and guidelines will be followed for cleaning and disinfecting.

Cleaning, Disinfecting and Sanitizing

Cleaning – removing all visible dirt from the surface of an object. Use detergent/soap and water and do not forget to rinse off detergent/soap residue with water before disinfecting.

- Use detergent and warm water to clean surfaces including ones that are visibly soiled
- Rinse surface with clean water to ensure detergent is removed
- Let surface dry

Disinfecting – reduces germs on a surface. Done after cleaning. Use the regular public health recommended concentration of disinfectant (Enviro Solutions 65) for the task (2000ppm). Before using, ensure that the disinfectant(Enviro Solutions 65) is not expired, and that you are leaving disinfectant (Enviro Solutions 65) to remain on surfaces for the correct contact time 5 minutes (I.e. don't wipe disinfectant off immediately after spraying, wait until it dries). Use a disinfectant with a Drug Identification Number (DIN).

- Use soap and warm water to clean surfaces including ones that are visibly soiled
- Rinse surface with clean water to ensure detergent is removed
- Use Enviro Solutions 65 on surfaces that was just cleaned by spraying the solution on a cloth or paper towel
- Wipe the surface area and let sit for correct contact time 5 minutes
- Rinse surface with clean water to ensure disinfectant is removed
- Let surface dry

Disinfecting for Blood and Bodily Fluids– reduces germs on a surface. Done after cleaning. Use the regular public health recommended concentration of disinfectant (Oxivir TB Wipes) for the task. Before using, ensure that the disinfectant(Oxivir TB Wipes) is not expired, and that you are leaving disinfectant (Oxivir TB Wipes) to remain on surfaces for the correct contact time 1

minute (I.e. don't wipe disinfectant off immediately after spraying, wait until it dries). Use a disinfectant with a Drug Identification Number (DIN).

- Use soap and warm water to clean surfaces including ones that are visibly soiled
- Rinse surface with clean water to ensure detergent is removed
- Use Oxivir TB Wipes on surfaces that was just cleaned
- Wipe the surface area and let sit for correct contact time 1 minute
- Rinse surface with clean water to ensure disinfectant is removed

Sanitizing - is used for food contact surfaces and tables where food is being served. Done after 4 step disinfecting procedure. Use the regular public health recommended concentration of sanitizer for the task (400 ppm in spray bottle and 200ppm in sink). Before using, ensure that the sanitizer is not expired and that you are leaving sanitizer to remain on surfaces for the correct contact time (I.e. do not wipe sanitizer off immediately after spraying, wait until it dries).

- Use soap and warm water to clean surfaces
- Rinse surface with clean water to ensure detergent is removed
- Use Food Service 2000 on surface that was just cleaned by spraying the solution on a cloth or paper towel
- Wipe the surface and let sit for correct contact time 1 minute
- Rinse surface with clean water to ensure sanitizer is removed

Procedures:

1. Clean and disinfect upon ENTRY to the child care centre for all staff, essential visitors, or inspectors:
 - Any hard surfaces such as water bottles, travel mugs, cell phones and lunch containers.
2. Clean and disinfect upon ENTRY to the child care classrooms for every child:
 - Any hard surfaces such as water bottles, containers, electronic devices, backpacks, diaper sleeves, diaper wipe containers, Ziploc bags with extra clothing etc.
3. Staff must ensure that all toys and equipment are in good repair, clean and sanitary. The Supervisor or designate must be advised of any concerns regarding toys and equipment.
4. All toys used at the centre must be made of materials that can be cleaned and disinfected easily. Avoid absorbent materials like plush toys, sponges, dress up clothes, as well as any

porous items and toys that take in water when being cleaned such as toys with squeakers and play food that fills with water.

5. 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.
6. When possible do cleaning and disinfecting when children are outside (to avoid children breathing in sprayed chemicals).
7. Clean and disinfect toys in a 4 bucket or sink system. Toys must be cleaned and rinsed prior to disinfecting. Alternatively, toys can be cleaned and disinfected in a mechanical dishwasher. Only use the dishwasher in the kitchen when it is not being used for any other purpose (i.e. washing dishes or food preparation)
8. Whole centre, toys and equipment cleaning and disinfecting frequencies

Classrooms

- Before re-opening the childcare centre.
- Before eating clean and disinfect tables & then clean and sanitize tables
- After eating, clean and disinfect tables.
- Other tables and chairs being used are to be cleaned and disinfected at a minimum x2 a day and more often when needed.
- Spills must be cleaned and disinfected immediately
- Floors must be kept clean and dry throughout the day. They must be swept and mopped, as necessary at least a minimum of every 2 hours.
- Clean, and disinfect all high touch areas (light switches, shelving, containers, hand rails, door knobs, sinks. These surfaces should be cleaned and disinfected a minimum x2 a day, or when visibly dirty, or after contact with body fluids/saliva from mouth, mucus from sneezing, etcetera.
- After all children have left for the day and before you close-up clean and disinfect all cubbies.
- Books and cardboard puzzles can be available, but after use by a single child the book or puzzle needs to be place in a bucket for 72 hours before being available to another child.
- After a child puts a toy in their mouth, sneezes, or coughs on toys, take toy out of rotation and place in the mouth toy bucket to be clean and disinfected.
- Infant toys must be cleaned and disinfected daily when in use.

- Toddler toys must be cleaned and disinfected daily when in use
- Preschool toys must be cleaned and disinfected daily when in use.
- Kindergarten and School Age toys must be cleaned and disinfected daily when in use
- No shared sensory play is permitted. Only individual sensory play is permitted e.g. each child has their own separate bin or playdough that is cleaned and disinfected or disposed of after each use.
- Shared equipment such as phones, IPADS, attendance binder etc. must be disinfected between each user.
- Electronics should be disinfected with alcohol prep wipes or disposable disinfectant wipes. Ensure disinfectant is allowed to sit for the correct contact time.
- Vinyl mats are to be cleaned and disinfected at a minimum x2 a day.
- Cots and cribs must be cleaned and disinfected between each use.
- Sheets and blankets must be changed between each use and laundered.
- Empty garbage's throughout the day and disinfect the container daily.

Outdoors

- Outdoor toys must also be cleaned and disinfected between each group (cohort). **Have disposable disinfectant wipes outdoors for this purpose if possible.**
- Sandbox is to be closed at all times.
- Outdoor toys and equipment that cannot be cleaned and disinfected between each group(cohort) must be taken out of rotational play.

Kitchen

- Before re-opening the childcare centre.
- Spills must be cleaned and disinfected immediately.
- Clean, and disinfect all high touch areas (light switches, cupboards, handles on fridge, stove, freezer, dishwasher, door knobs, sinks. These surfaces should be cleaned and disinfected a minimum every 2 hours, or when visibly dirty, or after contact with body fluids/saliva from mouth, mucus from sneezing.
- Clean and disinfect all trolleys after each use.
- All dishware, cutlery, serving utensils will be cleaned and sanitized after each use.

- Floors must be kept clean and dry throughout the day. They must be swept and mopped, as necessary and at least a minimum x2 a day.
- Empty garbage's throughout the day and disinfect the container daily.

Washrooms

Classroom Washrooms

- Washrooms, including sink faucets, toilet flush handle, mirrors and soap dispensers should be cleaned and disinfected frequently throughout the day, especially after every group washroom routine or after any child uses the washroom (minimum) x2 a day, if visibly dirty, or after contact with body fluids, urine, stool, mucus from sneezing, etcetera.
 - Washroom floors should be cleaned and disinfected at a minimum x2 a day

Staff Washrooms

- Washrooms, including sink faucets, toilet flush handle, and soap dispensers should be cleaned and disinfected by staff after each use and frequently throughout the day (minimum x2 a day).
- Washroom floors should be cleaned and disinfected at a minimum x2 a day

9. Cleaning and Disinfecting Body Fluids:

- Treat all body fluids (e.g., saliva, urine, stool, vomit, mucus, blood), as potentially infectious.
- Wear disposable gloves, a surgical procedure mask, eye protection and a gown as there may be contact with another person's body fluid such as when cleaning cuts or scrapes, cleaning up blood, vomit and/or stool from surfaces or contaminated linens, and changing diapers with diarrhea.
- In addition to the above should wear gloves, gown, eye protection and a surgical procedure mask when cleaning up stool or vomit from a contaminated surface if there is a chance of body fluid splashing.

10. How to Clean and Disinfect Body Fluids:

1. Wash hands.
2. Put on disposable gloves, eye protection, gown and surgical procedure mask.
3. Clean up body fluids using a disposable absorbent cloth (e.g., paper towel).

4. Clean the area with soap and warm water, then rinse off detergent/soap with water.
5. Disinfect the area using Oxivir TB Wipes the manufacturer recommended concentration and contact time of the disinfectant.
6. Contaminated clothing will be placed in a plastic bag and then tied closed and sent home for cleaning. Normal detergent and laundry cycles are effective.
7. Discard contaminated paper towels, gloves, mask, etcetera. in a plastic bag. Tie bag closed and place with regular trash. Place reusable gown in a separate plastic bag and tie (the gown will need to be laundered before next use)
8. Wash hands after removing gloves.

11. Hand Hygiene/Washing

- Hand washing is the best way to prevent the spread of illness for staff and children. Ensure an adequate supply of liquid soap and paper towels or a hot air hand dryer is in every washroom.
- Staff are responsible for supervising children to ensure they are hand washing correctly.
- Monitor all sinks in classroom, washrooms, kitchen/food preparation area to ensure there is an adequate supply of soap and paper towels if applicable.

When staff must hand wash	When children must wash hands
<ul style="list-style-type: none"> • After arriving to work, & before leaving. • Before & after using gloves. • Before & after handling food, preparing bottles, feeding children, & eating/drinking. • Before & after handling breast milk. • After coughing, sneezing, • Before and after blowing your nose or helping a child. • Before and After touching own or someone else's face. • After using the toilet or helping each child to use the toilet. • Before and after each child's diaper check/change. • Before and after contact with bodily fluids 	<ul style="list-style-type: none"> After arriving at the center, & before leaving. Before & after eating/drinking. After coughing, sneezing Before and after wiping their nose. After using toilet. After diaper change. After playing outside. When hands are dirty. After handling shared toys/items.

<ul style="list-style-type: none"> • Before & after administering medication, lotions, creams, to self or child etc. • Before and after cleaning/bandaging cut, scrape, wound. • After cleaning & disinfecting. • After handling toxic materials • After taking a toy that has been put in child's mouth, sneezed, or coughed on out of rotation. • When hands are dirty. • After playing outside. • After changing garbage bags, taking out garbage. 	
---	--

12. Steps for Handwashing

1. Wet hands with warm water.
2. Apply liquid soap.
3. Lather for at least 15-20 seconds.
4. Rub between fingers, back of hands, fingertips, under nails.
5. Rinse well under warm running water.
6. Dry hands well with paper towel or hot air blower.
7. Turn taps off with paper towel, if available.
8. Ensure Hand Washing Sign is posted (**Appendix 8**).

13. The cleaning schedule (**Appendix 9**) and cleaning sign off (**Appendix 10**) must be posted in the classroom

14. Ensure the following additional protocols are in place when Toileting and Diapering

- Provide a basket for each diapered child to store their diapers, creams, etc.
- Clean and disinfect bins at the end of each day.
- Purchase back-up diapers in case a family is not prepared.
- Use a tissue or disposable glove to apply creams, lotions, etc.

- Wash hands before and after using gloves.
- Use a new pair of gloves to diaper each child.
- Assist child to wash hands after toileting and each diaper change.
- Clean and disinfect diaper change table after each child.

- Increase frequency of cleaning and disinfecting toilets, sinks, and after each toileting routine.
- Provide a garbage can with lid, lined with a garbage bag, and take garbage outside after every round of diaper changes.
- Ensure Toileting Procedure (**Appendix 11**) and Diapering procedure is posted (**Appendix 12**).

Section: COVID – 19 Pandemic Procedures	Policy: Personal Protective Equipment (PPE) Procedures COVID – 19
Policy Number: 1.5	Approved Date:

Purpose

Kids' Campus Child Care Centre is committed to providing a safe and healthy environment for children, families, and staff. Kids' Campus Child Care Centre will take every reasonable precaution to prevent the risk of communicable diseases within our location.

Personal Protective Equipment

Personal protective equipment (PPE) is designed to protect the user from coming into contact with harmful chemicals, body fluids, and the germs that spread illness. PPE includes items like disposable vinyl gloves, gowns, face shields/ goggles, surgical masks and medical grade masks.

Wearing masks or gloves at all times is not recommended by Public Health for either the children or staff in the childcare centre. Both masks and gloves represent false security, particularly if they are not used properly. Individuals may contaminate themselves when putting masks on and taking them off if not handled correctly.

PPE must be worn as per routine practices such as when cleaning up body fluids or disinfecting surfaces and must be disposed of, after use.

Procedures

1.0 Personal protective equipment is to be worn to protect the from infected droplets and contaminated surfaces. PPE used in the child care centre can include:

- Masks – protects around the nose and mouth
- Eye protection – protects the eyes from splashes, sprays, and droplets
- Gloves – gloves and good hand hygiene protect you and others
- Gowns – Long-sleeved own protect clothing from becoming contaminated

2.0 Masks

Wearing a mask can help to prevent the spread of some respiratory illnesses, but it can also become a source of infection if not worn or discarded properly. If you need to wear a mask, you should also be sure to clean your hands frequently with soap and water or 60% - 90% food grade

alcohol-based hand sanitizer. Masks can also be worn to prevent spread from an infected person to others by containing infected droplets (source control). Cloth mask can not be worn in the child care centre

Masks must be worn when:

Surgical Procedure Mask

- Working within screening area
- When entering program space or coming into contact with a cohort that you are not assigned to (Cook, Supervisor, COVID Supervisor, Inspector)
- Escorting children from the screening area into a program room
- In the exclusion room with ill children
- When cleaning blood and bodily fluid spills if there is a risk of splashing
- When changing diapers with diarrhea

Reminders:

- Masks must be worn properly at all times, without exception. This includes:
 - o on the face properly covering the mouth and nose
 - o Not lifted or dropped to the chin or around the neck
 - o All straps must be securely fastened
- Once the mask is secure. DO NOT touch or move it.
- No Cloth Masks
- Masks are single use
- Change your mask if it becomes moist or dirty.

To put on the Mask:

1. Wash or sanitize your hands.
2. Check the mask for tears or faulty straps.
3. The stiff bendable edge is the top.
4. Holding the mask by the upper strings, tie in a bow near the crown of your head, or if the mask has bands, loop over your ears.
5. Holding the mask by the bottom strings, pull the bottom of the mask over your mouth and chin, and tie in a bow near the nape of your neck.
6. Ensure the mask covers your mouth, nose and chin.
7. Press and mold the upper bendable edge to the shape of your nose and cheeks.
8. Wash or sanitize your hands.

To Remove the Mask:

1. Wash or sanitize your hands.
2. Only touch the straps; avoid touching the front of the mask as it is contaminated.
3. Untie the bottom strings and then the upper strings.
4. Dispose of the mask directly into the garbage.
5. Wash or sanitize your hands.

3.0 Gloves

Types of gloves used are:

- General nitrile gloves
 - o Used for tasks other than handling blood and bodily fluids and/or mixing disinfecting chemicals
- Medical nitrile or vinyl gloves
 - o Used for tasks that include anticipated handling of blood and bodily fluids (for examples, screening and temperature checks)
- Nitrile dishwashing style gloves
 - o Used for general cleaning, mixing disinfectant or immersing hands in sanitizer/disinfectant

Gloves must be worn when:

- When conducting in-person screening and temperature checks
- When entering program space or coming into contact with a cohort that you are not assigned to (Cook, Supervisor, COVID Supervisor, Inspector)
- When Administering First Aid: broken skin, tissue, blood
- When dealing with bodily fluids, secretions, excretions
- When dealing with contaminated equipment or environmental surfaces.
- When dealing with a sick child
- Diapering Changes
- Cleaning and Disinfecting as per Material Safety Data Sheets

Reminders:

- Hand hygiene must be practised before applying and immediately after removing gloves
- Nitrile gloves are single use only, and must be task specific (i.e. gloves must be changed, and hand hygiene practiced whenever changing tasks)
- Gloves shall be removed and discarded after each use.
- Using gloves does not replace the need for hand hygiene
- Hands must be clean and dry before putting on gloves

- Ensure gloves are intact, clean, and dry inside
- Ensure artificial nails are removed and consider removing jewelry which could tear/puncture the gloves

Putting on Gloves

1. Clean your hands
2. Put on gloves. Be careful not to tear or puncture the glove

Taking off Gloves

1. Remove gloves using a glove to glove /skin to skin technique.
2. Grasp outside edge near the wrist and peel away, rolling the glove inside-out.
3. Reach under the second glove and peel away.
4. Discard gloves immediately into the garbage.
5. Perform hand hygiene.

5.0 Eye Protection

Eye protection is used to protect the eyes. In the child care centre, this includes safety goggles or face shields. These are reusable and must be cleaned after each use. Prescription eye glasses alone are not acceptable eye protection.

Staff must wear eye protection:

- When in the exclusion room
- While performing the health screening
- When entering program space or coming into contact with a cohort that you are not assigned to (Cook, Supervisor, COVID Supervisor, Inspector)
- When changing diapers with diarrhea

6.0 Gowns

Wearing a gown can help with protecting clothes from becoming contaminated. Gowns will have long sleeves and tie at the back. If gowns are disposable they will need to be discarded after each screening shift or use when cleaning blood and bodily fluids. If gowns are cloth and reusable, they must be laundered after each screening shift or when used for cleaning blood and bodily fluids.

Staff must wear gowns when:

- Working in the screening area as the health screening staff
- When entering program space or coming into contact with a cohort that you are not assigned to (Cook, Supervisor, COVID Supervisor, Inspector)
- When cleaning blood or a bodily fluid spill

- When in the isolation room with an ill child
- When changing diapers with diarrhea

Donning (Putting on) and Doffing (taking off) PPE

The following procedure will need to be followed if wearing more than one item of PPE.

Donning:

1. Perform hand hygiene
2. Put on gown
3. Put on mask
4. Put on eye protection
5. Put on gloves

Doffing:

1. Remove gloves
2. Remove gown
3. Perform hand hygiene
4. Remove eye protection
5. Remove mask
6. Perform hand hygiene

Section: COVID – 19 Pandemic Procedures	Policy: When staff and children become ill at the child care centre
Policy Number: 1.6	Approved Date:

Purpose

To ensure the health and well – being of all staff and children within the child care centre. Staff and children who become ill while at the child care centre will be immediately isolated and required to leave the centre. Staff must consistently assess the health of all children in care.

Procedures

- 1.0 If COVID – 19 or any other infectious disease is suspected, the parent must be contacted immediately, and the child must be isolated from other children and supervised until the parent arrives.
- 2.0 The Public Health Department will be consulted regarding any COVID – 19 suspected cases and recommended protocols will be implemented.
- 3.0 The Public Health Department is to be notified of symptoms of ill health as required.
- 4.0 Supervisors will follow the recommendations of the Health Department and share with parent (i.e. 48 hours symptom free, self – assessment required).
- 5.0 If there are suspected cases of COVID -19 or a confirmed case COVID – 19 a note (serious occurrence notification form) will be posted at the centre for at least 10 days notifying parents of the situation (i.e. there is ONE confirmed case of COVID -19 at the centre, specific date the child and staff are in 14-day isolation for and that the environment has been cleaned and disinfected)
- 6.0 Information regarding the sanitary procedures will be provided to parents to reassure families of all follow up precautions in place to ensure the well – being of others in the centre.

7.0 Staff must ensure that all children in care are monitored for illness, with their temperature taken as appropriate, including for the following symptoms of COVID-19:

- Fever (temperature of 37.8°C / 100°F or greater), OR
- Any new/worsening symptoms, examples include:
 - Cough
 - Shortness of breath (dyspnea)
 - Sore throat
 - Skin Rash
 - Pink Eye
 - Runny nose or sneezing
 - Nasal congestion
 - Hoarse voice
 - Difficulty swallowing
 - New olfactory or taste disorder(s)
 - Nausea/vomiting
 - Diarrhea
 - Abdominal pain, OR
 - Clinical (diagnosed or radiological (x-ray) evidence of pneumonia.

Atypical symptoms of COVID-19 should be considered, particularly in children, older persons, and people living with a developmental disability. Atypical symptoms and signs include:

Symptoms

- Unexplained fatigue/malaise
- Delirium (acutely altered mental status and inattention)
- Falls
- Acute functional decline (decline in physical or cognitive functions)
- Exacerbation (worse) of chronic conditions
- Chills
- Headaches
- Croup

Signs

- Unexplained tachycardia (fast heartbeat), including age specific tachycardia for children
- Decrease in blood pressure
- Unexplained hypoxia (low level of oxygen in blood)
- Lethargy, difficulty feeding infants (if no other diagnosis)

8.0 Any Child who develops symptoms of ill health including symptoms related to COVID – 19 must leave the child care centre

9.0 Staff must ensure that hand hygiene is performed before and after each health check with each child. If thermometers with disposable single use tips are used, the tips must be discarded after each use. Infrared thermometers may be disinfected with 60% alcohol (i.e. alcohol prep wipes), ensuring the solution sits for the correct contact time.

10.0 Staff are only required to document the health check or take a temperature at lunch time or if symptoms are noted. Staff must document any symptoms observed on the child's Ill health form, day book and the Health Department line listing form.

11.0 Children Who Display COVID-19-related Symptoms During Care (If a child needs immediate medical attention, call 911.):

- Ensure a room is designated for isolation and is stocked with masks, eye protection, gloves, gowns, hand sanitizer, a garbage bin with lid, lined with garbage bag, cot/mat, extra sheets, and a few toys that can easily be disinfected.
- If ANY ONE of the symptoms related to COVID-19 are present in a child, the child must be immediately excluded from the childcare centre and sent home. If the child has a sibling who attends the same childcare centre, the sibling must also be excluded.

12.0 Staff are required to:

- Immediately isolate the child with symptoms from other children into a designated exclusion room (e.g. sick room), if a separate room is not available the sick child must be kept at a minimum of 2 meters from others.
- While waiting for the child to be picked up, the child must be supervised by only one staff person until the child leaves while maintaining a physical distance of 2 meters (6 feet) if possible.
- Move the cohort of children who were in the program room with the symptomatic child to the vacant program room or outside and immediately clean and disinfect the impacted room.
- Increase ventilation in the exclusion room 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 center. If the items cannot be cleaned and disinfected (paper, books, cardboard puzzles) should be removed and stored in a sealed container for a

minimum of 7 days. ENSURE A LABEL IS PLACE ON THE CONTAINER WITH DATE THAT ITEMS CAN BE REMOVED.

- The staff caring for the child should also wear a surgical-type face mask, gloves, gown and face shield. In addition, staff should perform hand hygiene and attempt to not touch their face with unwashed hands. Although not required, disposable gloves may be used when there is close contact with the child. Staff must ensure that they wash their hands or use hand sanitizer (if hands are not visibly soiled) immediately upon removal of the gloves. The most important measures are proper hand hygiene and maintaining a 2-meter (6 feet) distance as much as possible.
- If tolerable and above the age of 2 years old, the child should wear a surgical mask.
- The Supervisor or designate will notify the parent(s) to arrange for immediate pick-up of the child. If a parent cannot be reached, an emergency contact person will be contacted to pick up the child.
- Staff will document the symptoms observed, the date and time that symptoms occurred, and the program room the child attended on the Illness health Form.
- Once the child has been picked up, the Supervisor will ensure that the custodian is notified that the exclusion room (i.e. room where child was separated to) was used and ensure that it is thoroughly cleaned and disinfected.
- Supervisor or designate will immediately contact Public Health to report.

13.0 Staff who Display COVID-19-related Symptoms While at Work (If a staff needs immediate medical attention, call 911.):

- In the event that a staff person becomes ill while at the child care centre, the staff should isolate themselves as quickly as possible until they are able to leave the centre.

14.0 Any staff who suspects they have an infectious disease should follow common sense precautions and should not attend the child care centre if they are not well, particularly if their symptoms include any outlined in the COVID – 19 screening. All staff must pass the active screening process to enter the child care centre.

15.0 A staff who presents with symptoms of ill health must notify their Supervisor. The Supervisor will contact the Health Department and staff will follow the direction of public

health which may include further isolation, monitoring of symptoms, completing the self assessment, and testing.

16.0 Children can return to program from exclusion due to illness based on the recommendations from the Health Department. This may include symptom free for 48 hours, after confirmed negative testing or other isolation recommendations.

17.0 Staff and children who are being managed by Durham Public Health (i.e. confirmed case, or household contacts of cases) should follow instructions from Durham Public Health to determine when to return to the facility.

Section: COVID – 19 Pandemic Procedures	Policy: Supervision and Physical Distancing of Children
Policy Number: 1.7	Approved Date:

Purpose

To ensure all staff are aware of the expectations regarding supervision of children and ways to promote physical distancing. The Child Care and Early Years Act (2014) identifies the following reference for supervision of children to include every licensee shall ensure that every child who receives care at the child care centre it operates or at a premise where it oversees the provision of home care is always supervised by an adult , whether the child is on or off the premise.

Procedure

1.0 The maximum group size (cohort) for each classroom in the child care centre is no more than 15 children. Staff are not included in this number

2.0 A cohort is defined as a group of children and the staff assigned to them, who stay together throughout the duration of the program for a minimum of 7 days.

3.0 Each cohort of children and staff must stay together throughout the day and are not permitted to combine with other cohorts. (i.e. at opening and closing)

4.0 Ratio set out under the CCEYA must be maintained.

- Infant 1:3
- Toddler 1:5
- Preschool 1:8
- Kindergarten 1:13
- School Age 1:15

5.0 Reduced ratio are permitted as set out under the CCYEA, if cohorts are not mixed with different age groups. Reduced ratio are not permitted at anytime for infants

6.0 Maximum group size does not apply to Special Needs Resource staff on site (i.e. if they are not counted towards staff to child ratios they are not included in the maximum capacity rules.)

7.0 Mixed age grouping is permitted as set out under the CCYEA where a director approval is given on the licence.

8.0 While in ratio staff are responsible for the safety of all children at all times.

9.0 Communication is essential part of working as a team. Staff must ensure that they have informed each other if they are leaving the room or area with children or of the arrival and departure of children.

10.0 Children's attendance must be recorded immediately upon arrival or departure from the program. Attendance must also be check during routine transitions during the day.

11.0 Staff must ensure that children are safely released to their parent or guardian. All children must be released to an approved adult over the age of 18.

12.0 All team members are required to count the number of children in their care before and after the movement of children from within the centre, when outside, when moving from inside to outside and vice versa.

13.0 All team members must be constantly aware of what is happening in the environment around them, by listening carefully and monitoring for any potential conflicts or safety hazards that may be prevented

14.0 To supervise an area effectively, staff must position themselves to achieve visual supervision of the children, indoors and outdoors.

15.0 Physical distancing may be challenging to maintain in a child care classroom; however, steps should be taken to limit the number of people in close contact (i.e. within 2 meters of each other)

16.0 Ways to promote physical distancing in child care centre:

- 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.

- Spread out children throughout the classroom during indoor time including
 - Mealtime
 - Dressing for outdoors
 - Sleep time, children's cots will be placed head to toe or toe to toe
 - Infants to be placed in every other crib allowing for 2-meter distance (unused cribs will be identified with a sign)
- Remove extra chairs, tables, and furniture to increase space in the area to allow children to spread out where possible.
- When appropriate give children knee hugs to offer comfort
- No community walks which includes no infant stroller walks
- Individual activities will be set up and encourage more space between children and planned to ensure that they do not involve shared objects or toys.
- Visual cues will be used to promote physical distancing.
- Outdoor play time will be scheduled to ensure that only 1 cohort is in a designated play area at one time
- Children must not share food, soothers, sippy cups, facecloths. Label personal items with child's name to discourage accidental sharing
- Children's personal items to be kept separate and labelled
- When holding infants and toddlers, use blankets or cloth over your clothing and change the blanket/cloth between children.
- 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).
- Avoid getting close to faces of all children, when possible.
- Avoid singing activities indoors
- Limit the number of children who are in the communal areas at the same time (i.e. cubby area).
- Large rooms can be divided into multiple spaces. When dividing a room create a clear barrier with cones, chairs, and tables to ensure a minimum 2 meters (6 feet) distance between the groups.
- Incorporate outside time in daily activities and open windows (weather permitting). Outdoor play in small groups is encouraged and should be offered in staggered shifts if possible.
- Small groups rotate through available space indoors and outdoors and rooms are cleaned and disinfected after each group's use.
- Set up activities and spread around the classroom

- Avoid gathering/grouping in one area (cubbies, outside).
- When playing outdoors with kindergarten and school age children, be careful not to mix with community members who may be and school yards.

Section: COVID – 19 Pandemic Procedures	Policy: Best Practices during COVID -19
Policy Number: 1.8	Approved Date:

Purpose

To maintain safe and healthy environments during COVID -19, staff will implement the following best practices in addition to already established policies and procedures.

Procedure

- 1.0 Group events and in person meetings are postponed and can be replaced with phone calls, zoom meeting and conference calls.
- 2.0 All staff will be trained on proper use of Personal Protective Equipment.
- 3.0 All staff will be trained on how to use cleaning and disinfecting products.
- 4.0 All staff will be trained on how to recognize sign and symptoms of COVID – 19.
- 5.0 Maintain daily attendance records of all individuals entering the child care centre. This includes but is not limited to maintenance workers, food service workers, government agency employees. These records should include the following: name, company, contact information, date, time of arrival/ departure, reason for visit and should be filled out on the record of visitor form **(Appendix 13)** .
- 6.0 Non-essential visitors are not permitted into the child care centre this includes students, volunteers, parents.
- 7.0 Cough and Sneeze Etiquette (Respiratory Etiquette):
 - Cover mouth and nose when you cough or sneeze with a tissue (use enough tissue so that fingers do not touch mucus).
 - Immediately dispose of tissue in a bin lined with a garbage bag and with a lid.
 - Wash hands with soap and warm water.

- Keep hands away from face.

8.0 Rest/Sleep Periods:

- Prepare to give reassurance and offer alternate activities if a child does not want to lay down.
- Children will have a cot assigned to them.
- Cots will be placed to support physical distancing practices (ideally 2 meters/6 feet spatial separation if feasible). If space is tight, place children head-to-toe or toe-to-toe.
- Only every other crib will be used to support physical distancing. Unused cribs will be identified with a label.
- Families will be permitted to bring their own sleeping sacs for children, but they must be labelled and laundered by the childcare center prior to use and weekly or more frequently as needed.

9.0 Administration of Medication:

- RECE staff or designate will be responsible for administering medication except for emergency medication (I.e. epi pens, puffers).
- Ensure all medications are sent home at the end of each day.

10.0 Anaphylaxis

- Follow the regular procedure for anaphylaxis.

11.0 Food Handling:

- Designate one staff with a current Food Handler Certificate to be responsible for handling snacks/lunch. This person must not be the same person assigned to look after ill children.
- Designated an area for catering driver to do drop off food bins outside near the screening area.
- Catering delivery driver will contact designated staff and advise them that they are arriving.
- Ensure Catering containers are cleaned and in the pick up area for the driver to pick up when they arrive.
- Catering delivery driver will not be required to be screened as the driver is not entering the centre.
- Catering driver will drop off food bins in designated area for cook to unpack.
- Catering containers will be wiped down with disinfectant prior to them entering the centre and going into the oven.

- Utensils or items should not be shared between cohorts (serving spoons, condiments)
- Label alternate food items with child's name for those children with allergies or food restrictions.
- No food provided by the families
- Staff will serve food to children. Children will have their own individual meals and snacks
- Monitor children so no sharing of food is taking place.
- Food must be covered when not being served.
- All dishware, serving utensil and cutlery will be cleaned and sanitized after each use
- Provide a bin with lid, that is lined with a garbage bag to discard food. Take outside after each snack/lunch.
- Children must not prepare or handle food, therefore no cooking activities.

12.0 Children's Belongings

- Must be labelled and non absorbent (no blankets, plush toys etc.)
- Extra clothing for children will need to be brought in to the centre in a sealed Ziploc bag which is labelled
- Diapers and wipes need to be in original packaging. Diapers will need to be in sealed plastic sleeves instead of individually

13.0 Drop off and Pick up

- Families must use the front entrance to the child care location where the screening area is set up
- Entrance area will have hand sanitizer for parental use
- Parents / Guardians are screened outdoors and are not permitted into the childcare centre
- When parents arriving at their scheduled time in the morning they are required to stay in their vehicle and to text the centre cell phone letting the screener know they have arrived and wait for a reply text back before they can approach the screening area
- If you are walking to the child care centre parents need to text the centre phone before approaching the child care centre and wait for a text back before entering the screening area
- Parents / Guardians must use the markings on the ground to maintain a physical distance of 2 meters when dropping off and picking up their children.
- If there is a family in the screening area we ask that you wait in your vehicle to receive the reply text message to approach the screening area. If you walked to the

location please ensure to maintain a 6 feet distance from the screening area and wait to receive a reply text before approaching the screening area.

- Parents must adhere to scheduled pick up and drop off times to avoid close contact with other families, if changes need to be made to scheduled times they must call the child care centre and speak with the Supervisor or COVID Supervisor
- Parents must call the centre prior to pick up and inform the staff that they are on there way this will allow time for the staff to prepare their children.
- When parents arrive at the child care centre for pick up they will need to text the centre cell phone with the name of their child and the program room their child is in and a staff member will bring the child to the door.

14.0 Scheduling Staff

- Supervisor or COVID Supervisor are required to be on site during hours of operation, and should limit their movement between rooms, doing so only when necessary.
- Staff shifts will be implemented to minimize the risk of COVID 19
 - Staff will be schedule to work with 1 cohort
 - Set shifts to ensure staggered entry into the building
 - Supply staff will be required to wear full PPE if required to enter a cohort
- Additional staff will be assigned to ensure proper ongoing cleaning and disinfection. When possible, these staff will not be included in ratio.
- Supply staff will be made available in the event a staff is unable to report to work and will be assigned to a specific cohort for 7 days.
- Staff will not be permitted to work at more than one center and should be kept with the same group of children for a minimum of 7 days.
- When choosing small groups, focus on keeping the same children and staff together as much as possible to reduce the spread of illness.

15.0 Staff Personal Belongings

- Bring only what is necessary into centre
- Indoor Shoes
- Staff are not permitted to have artificial nails (Nails that need to be filled - Acrylic, Gel, Press on etc.) during the pandemic
- Each staff member when they arrive to work will clean and disinfect any of their personal belongings with hard surfaces such as water bottles, travel mugs, cell phones, lunch containers
- Each staff is designated a space to store personal items that is separate from other staff. Each staff member is responsible for cleaning and disinfecting their area at the end of each shift.

- Staff room/washroom – each staff member is responsible for cleaning and disinfecting after each use.
- Office – each staff member is responsible for cleaning and disinfecting after each use including - desk, phone, computer, chair arms, door handles, and light switches.

16.0 Hand Sanitizer

- Limit the use of hand sanitizer to adults only. Children under 2 must not use hand sanitizer. Older children must be supervised when using hand sanitizer, so they do not put their hands in their eyes, nose or mouth.
- Using soap and warm water is the best method of cleaning hands. Use hand sanitizer when soap and water are not available.
- If hands are dirty, they must be washed with soap and warm water before using hand sanitizer.
- Minimum concentration of alcohol in hand sanitizer is 60%, the maximum is 90%.
- Use enough hand sanitizer to wet hands for 15-20 seconds.

Steps for Hand Sanitizer

1. Apply hand sanitizer.
2. Rub hands together for at least 15-20 seconds.
3. Work hand sanitizer between fingers, back of hands, fingertips, and under nails.
4. Rub hands until dry
5. Post Hand Sanitizer Poster (**Appendix 14**)

17.0 Staff will ensure to take the temperature of children at lunch time each day.

18.0 Post all COVID – 19 information posters (**Appendix 15**) at the front entrance and around the child care centre.

19.0 All documents will be retained for 3 years

Section: COVID – 19 Pandemic Procedures	Policy: Curriculum and Program Documentation
Policy Number: 1.9	Approved Date:

Purpose

Staff will continue to implement our Program statement and offer an Emergent Curriculum approach to learning as best as possible during the COVID – 19 Pandemic. The Emergent Curriculum approach practice builds on our understanding of how young children learn and develop. Educators will present children with opportunities to discover the world around them through active and quiet exploration both indoors and outdoors where they are invited to make predictions, test out their ideas and plan for further investigations. The curriculum is child-led and self-directed.

Procedure

- 1.0 Develop a routine and schedule as it helps children feel safe and comfortable.
- 2.0 Plan activities that support the interests and needs of the children.
- 3.0 A Web of curriculum possibilities will be completed
- 4.0 The Learning outcome sheet will be filled out daily along with skills
- 5.0 Room capacities have been lowered; therefore, you may be flexible with the number of activities provided at one time. For example:
 - Some toys will be taken out of rotation and disinfected, as long as there is enough variety and toys for the children in attendance.
 - Set-up enough table activities for the children in attendance.
- 6.0 Ensure you are supporting and engaging in children’s play.
- 7.0 Connect with each child individually.
- 8.0 Provide regular daily opportunities to be physically active outdoor, encouraging physical distancing.
- 9.0 Provide single – child learning stations that include open-ended materials.
- 10.0 Stay attuned to the physical and emotional states of children and respond in a warm manner.

11.0 Foster the development of self – help skills.

12.0 Provide individual art kits to children so that they can demonstrate expression in a safe way.

13.0 When choosing small groups, focus on keeping the same children and staff together as much as possible to reduce the spread of illness.