

Northview Heights Early Learning Centre – North York

Northview Heights Early Learning Centre | Northview Advent Child Care

Pandemic Policy--COVID 19 Health and Safety Procedures

PURPOSE

It is the goal of **Northview Heights Early Learning Centre – North York** 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.

WHAT IS A PANDEMIC

A pandemic is distinguished as an infectious disease/illness that becomes a worldwide epidemic. It spreads easily and rapidly through many countries and regions of the world affecting a large percentage of the population. A pandemic occurs when an infectious disease emerges to which the population has little or no immunity. It may spread easily from person to person and may cause serious illness and death.

Pandemics are unpredictable and can affect any age group differently and with varying severity. During a pandemic, infectious diseases or illnesses can be prevented through appropriate hygiene, sanitation, and infection prevention/control practices. Provisions of daily health screenings for children/staff and heightened disinfecting are put in place to protect the health, safety, and well-being of children and staff.

POLICY

Northview Advent Child Care must adhere strictly to the guidelines and practices set out to us by the Public Health Agency of Canada, Ontario Ministry of Health, and Toronto Public Health/Medical Officer of Health for proper infection prevention in order to reduce the risk of contracting or transmitting an infectious disease or illness during a pandemic.

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. The Pandemic Policy and Procedures are required to be reviewed with employees, before they begin their employment and reviewed annually thereafter

PANDEMIC PROCEDURE

The Supervisor will review and train all staff the Pandemic policy and procedure.

Staff will make themselves aware of the pandemic by:

- Partaking in all required training to maintain current information on health and safety related to the pandemic. Supervisors must ensure that training is provided to all staff on the Health and Safety protocols (Policy and Procedures)
- Reading all memos/emails posted and emailed out; in particular; Toronto Public Health Guidelines for childcare centres, Toronto Children Services webinars, Ministry of Education Guidelines.
- Reading the centre's communication logbook daily and initial.
- Reply back to supervisor to acknowledge receipt of all emails sent.
- All staff and students must review training modules developed by Toronto Children Services, and collaborate with Toronto Public Health, prior to opening of the centre.

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- Centre must keep a record of staff and students that have reviewed the training modules, policies and procedures (asking staff to sign and acknowledge that they have reviewed applicable training modules and Covid-19 related policies and procedures)
- Staff meeting will be done in person (if applicable) or on Zoom
- Staff shifts will be schedule and emailed out bi-weekly
- Lunch breaks— in staff room Max 3 staff
- All childcare staff will be expected to wear masks (i.e. medical mask) and eye protection (e.g. face shields, safety glasses and safety goggles) while inside in the childcare centre, including hallways.

INFECTION PREVENTION *NEW*

Northview Heights Early Learning Centre – North York 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 a staff, children or an essential visitor who has been placed in quarantine or has a contagious illness to acquire a medical clearance before they return to the centre

AUTHORITY TO SHUT DOWN THE ORGANIZATION *NEW*

Northview Heights Early Learning Centre – North York will follow all directions and recommendations from Toronto Public health, Ministry of Education, City of Toronto and the Provincial/Federal Government when a pandemic/state of emergency is declared.

MAXIMUM COHORT SIZE AND RATIO

We will maintain operations with a maximum program occupancy and class sizes that are given to us to follow by the Ministry of Education. Note these numbers may be subject to change on advice from Toronto Public Health, Ministry of Education and/or Toronto Children Services.

For the purposes of this document, a cohort is defined as a group of children and the staff members assigned to them, **who stay together throughout the duration of the program for minimum 7 days** (therefore if deemed necessary due to maintain ratios cohort grouping can change and then must remain together for a minimum of 7 days).

As of September 1, 2020, child care settings may return to maximum group sizes as set out under the CCEYA (i.e., licensed age groups prior to the COVID-19 outbreak).

- Staff and students are not included in the maximum group size, but will be assigned to a specific group where possible.
- Maximum capacity rules do 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).

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- Each cohort must stay together throughout the day and are not permitted to mix with other cohorts.
- We will continue to maintain ratios as set out under the CCEYA. Childcare centre can increase child number, but remain ratio as long as the cohort does not exceed the maximum of 15 individuals
- Mixed age grouping is permitted as set out under the CCEYA where a director approval has been granted on the license.
- Reduced ratios are permitted as set out under the CCEYA provided that cohorts are not mixed with other cohorts. Reduced ratios are not permitted at any time for infants
- All group events have been canceled, until further notice.

PRACTICE PHYSICAL DISTANCING *NEW*

- Practice physical distancing (i.e. a two metre/six feet distance) between children, staff/students that are **assigned to different cohorts** as best as possible in common areas and shared spaces
- Use visual markers/cues spaced two metres/six feet apart (e.g. tape on the floor, pylons, signs in common areas such as entrances and corridors)
- Physical distancing must not compromise supervision or a child's safety, emotional or psychological well-being
- Recognizing that physical distancing is difficult with small children and infants, additional suggestions include:
 - Encourage children to greet each other using non-physical gestures (e.g. wave or not or a verbal "Hello") and to avoid close greetings (e.g. hugs, handshakes).
 - Refer to Toronto Public Health's <https://www.toronto.ca/wp-content/uploads/2020/09/8fbf-10-Ways-to-Greet-From-6-Feet.pdf>
 - Regularly remind children to keep "hands to yourself"
 - Reinforce "no sharing" policies and procedures. This includes the current practice of not sharing food, water bottles or other personal items.
 - Avoid activities involving singing, shouting or speaking loudly indoors
 - Plan activities and games that increase spacing between children while promoting social interaction
 - Avoid activities that involve shared objects or toys
- Increase the distance between cots/resting mats and cribs. If space is limited, place children head to toe.

STAFFING

- Staff will be scheduled to work at only one location.
- Centre Supervisor or designates will limit their movement between rooms, doing so when absolutely necessary.
- Supply/replacement staff will be assigned to a specific group so as to limit staff interaction with multiple groups of children.
- Staff will be scheduled to work based on the needs of the centre including the arrival and departure times of children.
- Certification in Standard First Aid Training, including Infant and Child CPR.
 - Staffs that are included in ratios are required to have a valid certification in first aid training including infant and child CPR, unless exempted under the CCEYA or the certification has been extended by WSIB.

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- WSIB has indicated that ALL certifications that expire after March 1, 2020 are automatically temporarily extended until December 31, 2020
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- Students (from local colleges/universities) on field placement should be assigned to a specific cohort.

VISITORS

Northview Heights Early Learning Centre – North York will maintain daily attendance records of all individuals entering the childcare centre. This includes, but is not limited to, maintenance workers, cleaning/environmental staff, food and government agency employees (e.g. public health inspectors, fire inspectors).

- Records will be updated when a child, staff or student is absent.
- Will follow-up with all individuals to determine the reason for any unplanned absences, and determine if the absence is due to illness to note any symptoms (e.g. fever, sore throat, cough).
- Will encourage parents/guardians of ill children, and ill child care staff to communicate with their Telehealth or their primary care provider to determine if further care is required.
- Non-essential visitors will not be permitted in the centre; unless there is an emergency repair required to be done for the centre to operate. Then all precautions will be followed.
- The Supervisor/Director will monitor attendance records for patterns or trends (e.g. children and child care staff in the same group absent at the same time or over the course of a few days).
- Students completing post-secondary educational placements will be permitted to enter child care settings and should only attend one child care setting and will be assigned to one group of children.
- Students will also be subject to the same health and safety protocols as other staff members such as screening, and the use of PPE when on the child care premises, and must also review the health and safety protocols.
- The provision of special needs services will continue. Should questions arise in respect of which service providers are permitted to enter the premises, please consult with Toronto Public Health.
- Use of video and telephone interviews will be used to interact with families where possible, rather than in person.
- Ministry staff and other public officials (e.g. fire marshal, Toronto Children Services Consultant, public health inspectors) are permitted to enter and inspect the child care centre at any time.
 - They must be screened prior to entering the premises
 - Wear personal protective equipment
 - Follow any other protocols requested by the centre
- Parents will not go past the screening area; unless there is an emergency and they require entering the building. Prior to entering they must complete the screening
- Volunteers will not be permitted in the centre at this time.
- A daily record (Visitor's Log) will be maintained of anyone entering the centre and the approximate length of their stay (such as catering, cleaners, maintenance work, supply staff, resource consultant, and deliveries).
- Records are to be kept in the childcare centre office.
- Records (e.g. name, contact information, time of arrival/departure, screening completion/result, etc.) will be kept up-to-date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak
- Attendance records will be available on-site at all times.

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TOURS *NEW*

Use of video and telephone interviews to conduct centre tours will be used to interact with families where possible, rather than in person.

PERSONAL BELONGING AND STROLLERS *NEW*

- Personal belongings (e.g. back packs, clothing, etc.) should be minimized, belongings should be labeled and it will be kept in your child's cubby.
- Personal items must be clearly labeled with the child's name to prevent accidental sharing.
- Strollers will be left in the front entrance outside. We strongly encourage our families to please take their stroller home or not bring one to the centre.

SCREENING SET-UP

All individuals including children, staff, and essential visitors must be screened each day before entering the childcare centre, including daily temperature checks.

Daily screening will be done electronically by all staff, families and student placements prior to arrival at the child care setting. The screening information must be documented on the appropriate screening form.

- Identify/set up the location and staffing of the screening table:
 - Place at the front entrance door, visually blocking entrance into the centre
 - Only **ONE** entrance/exit is to be used, to ensure that each person is screened
 - Maintain a minimum of 2 metres/6 feet distance between staff conducting screening and the person being screened
 - Provide visual guides to assist with physical distancing (e.g., pylons) in the event that a line-up forms while parents and their children are waiting to be screened prior to entering into the child care centre
- Place front entrance signage identifying the screening process outside and directly inside child care centre doors
- Place hand sanitizer at the screening table. Ensure it is visible to staff/clients entering the building and they are asked to hand sanitize
 - Alcohol based hand sanitizer (70-90%alcohol) is provided in all the rooms/program areas/main entrance way (wipes are available for infants)
- Ensure Toronto Public Health resources are available for anyone who does not pass the screening
- Ensure the health screening area is disinfected regularly throughout screening and the day
- Health screening questions are for the parent/guardian to answer on their and their child's behalf, and for staff
- Parents/guardians are not permitted past the health screening line to ensure physical distancing. Only one parent/guardian is permitted into the screening area
- Staff are not permitted past the health screening line until they have been cleared to enter the child care centre
- Only the children and staff will have their temperature taken, not parents/guardians
- Parents/guardians are not permitted into the child care centre

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SCREENING PROCESS

For the purpose of active screening

Close contact is considered to be anyone who provided care for, or who had close physical contact. i.e., 2 metres/6 feet for any amount of time, to a person with COVID 19 and/or symptoms consistent with COVID 19, without using consistent and appropriate personal protective equipment.

Screening of Centre Staffs

Screening should occur before or when staffs enter the workplace at the beginning of their day or shift, or when an essential visitor arrives at the child care setting.

Electronic screening questionnaire is completed by all staff prior to arrival for their shift. The supervisor or designate confirms and verifies each submission.

The supervisor or designate who is first on site will conduct self-screening at home to ensure they are well enough to report to work and document the results on the appropriate form.

Screen all staff/students and any other adult visitors prior to entry; follow the **Ministry of Health COVID-19 screening tool for workplaces.**

Required Screening Questions:

1. Do you have any of the following new or worsening symptoms or signs? *Symptoms should not be chronic or related to other known causes or conditions.*
 - a. Fever or chills
 - b. difficulty breathing or shortness of breathe
 - c. cough
 - d. sore throat, trouble swallowing
 - e. runny nose/stuffy nose or nasal congestion
 - f. decrease or loss of smell or taste
 - g. nausea, vomiting, diarrhea, abdominal pain
 - h. not feeling well. Extreme tiredness, sore muscles
2. Have you travelled outside of Canada in the past 14 days?
3. Have you had close contact with a confirmed or probable case of COVID-19?

If the individual answers **NO to all the questions from 1 through 3**, they have passed and can enter the workplace.

If the individual answers **YES to any questions from 1 through 3**, they have not passed and **should be advised that they should not** enter the workplace (including any outdoor, or partially outdoor, workplaces). They should go home to self-isolate immediately and contact their health care provider or Telehealth Ontario (1 866-797-0000) to find out if they need a COVID-19 test.

Screening of Children

Daily screening will be done electronically prior to arrival at the child care setting.

- We will require only ONE parent/guardian enters the screening area with the child, and request they both use hand sanitizer (if the child is over 1 years of age). As you are aware COVID-19 continues to

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evolve, as a result we are conducting active screening for potential risks of COVID-19 for everyone who enters the location. The screening will ensure the safety and well-being of staff, children and families.

- Staff designate or Supervisor will take the temperature of the child/ren and another staff will escort the child/ren to their classroom.
- Prior to families starting at the childcare centre discussing the expectations for screening and arrangements in advance with the child's parent/guardian and staff

Screen ALL child attendees prior to entry; following the **Ministry of Health COVID-19 Screening tools for Children in School and Childcare**

Required Screening Questions:

1. Does your child have any of the following new or worsening symptoms? *Symptoms should not be chronic or related to other known causes or conditions.*
 - a. Fever and/or chills (temperature of 37.8 C/100.0 F or greater)
 - b. Cough (more than usual if chronic cough) including croup (barking cough, making a whistling noise when breathing)
 - c. Shortness of breath (dyspnea, out of breath, unable to breathe deeply, wheeze, that is worse than usual if chronically short of breath)
 - d. Decrease or loss of smell or taste (new olfactory or taste disorder)

If you answered “YES” to any of the symptoms included under question 1:

- Your child should stay home to isolate immediately.
- Contact your child's health care provider for further advice or assessment, including if your child needs a COVID-19 test or other treatment.

2. Does your child have any of the following new or worsening symptoms? *Symptoms should not be chronic or related to other known causes or conditions.*
 - a. Sore throat (painful swallowing or difficulty swallowing)
 - b. Stuffy nose and/or runny nose (nasal congestion and/or rhinorrhea)
 - c. Headache that is new and persistent, unusual, unexplained, or long-lasting
 - d. Nausea, vomiting and/or diarrhea
 - e. Fatigue, lethargy, muscle aches or malaise (general feeling of being unwell, lack of energy, extreme tiredness, poor feeding in infants) that is unusual or unexplained

If you answered “YES” to only one of the symptoms included under question 2:

- Your child should stay home for 24 hours from when the symptom started.
- If the symptom is improving, your child may return to school/child care when they feel well enough to do so. A negative COVID-19 test is not required to return.
- If the symptom persists or worsens, contact your child's health care provider for further advice or assessment, including if your child needs a COVID-19 test or other treatment.

If you answered “YES” to two or more of the symptoms included under question 2:

- Your child should stay home to isolate immediately.

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- Contact your child's health care provider for further advice or assessment, including if your child needs a COVID-19 test or other treatment.

3. Has your child travelled outside of Canada in the past 14 days?
4. Has your child been identified as a close contact of someone who is confirmed as having COVID-19 by your local public health unit (or from the COVID Alert app if they have their own phone)?
5. Has your child been directed by a health care provider including public health official to isolate?

If the individual answers “YES” to question 3, 4 or 5

- Your child should stay home to isolate immediately and follow the advice of public health.
- If your child develops symptoms, you should contact your local public health unit or the health care provider for further advice

Evaluating children who present symptoms during screening or while in care ***NEW***

Symptoms (e.g. runny nose, congestion) may be evaluated by child care staff (in consultation with the centre supervisor or designate) to determine if isolation and exclusion is required.

The following information may be considered when evaluating a child's symptoms:

- Daily screening results.
- Information provided by the parents/guardian about the child's baseline health and other known underlying conditions (e.g. allergies, anxiety, asthma).
- Daily observations made by staff that care for the child (e.g. identifying a new or worsening cough, or distinguishing between a runny nose that is persistent as opposed to one that subsides and is likely caused from returning inside from the cold).
- Alternative assessments by a physician or a health care practitioner regarding symptoms (if available).
- Refer to the “COVID-19 Decision Tool for Child Care” for further information.

Isolate children and staff/students that become ill ***NEW***

- It is recommended that child care staff/student and children with symptoms of COVID-19 go to an assessment centre for testing as soon as possible, and self-isolate at home until their result is available.
- If a child becomes ill with symptoms associated with COVID-19 while in care, immediately separate them from the rest of their group in a designated room (or space in a home child care setting), and supervise the child until they are picked-up.
- Notify parents/guardians or emergency contacts to pick up the ill child as soon as possible.
- The designated room/space must have a hand washing sink or hand sanitizer (70-90% alcohol concentration) available.
- Provide tissues to the ill child to help support respiratory etiquette.
- Open outside doors and windows to increase air circulation in the area if it can be done so safely.
- Children older than two years should wear a medical mask (if tolerated) and they are able to use it properly
- Child care staff supervising the ill child should maintain physical distancing as best as possible, and wear PPE, including a surgical/procedure mask (i.e. medical mask) and eye protection (e.g. face shield, safety glasses and goggles).

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- Clean and disinfect the area immediately after the child with symptoms has been picked-up. Items that cannot be cleaned and disinfected (e.g. paper, books, and cardboard puzzles) should be removed from the program and stored in a sealed container for seven days.
- Child care staff and children who have been exposed to an individual who became ill with symptoms must continue to be grouped together (i.e. cohorted), and monitored for signs and symptoms of illness:
 - Child care staff/students must not be assigned to other groups/cohorts or work in other child care settings. They must also be advised to avoid being in contact with vulnerable person or settings where there are vulnerable people.
 - Child care staff must ensure that mixing of children is prevented.
 - Supervisors must inform parents/guardians of children who were exposed to the ill individual, and advise that they should monitor their child for symptoms.
 - Supervisors/home child care providers may consult with Toronto Public Health as necessary.

INDIVIDUALS WITH A LABORATORY CONFIRMED POSITIVE COVID-19 TEST *NEW*

- Child care staff/students and children must stay home and self-isolate for 10 days from the day their symptoms first appeared.
- They may return to the child care setting after 10 days if they do not have fever (without use of medication) and their symptoms have been improving for 24 hours or longer.
- Child care staff/students and children who are being managed by TPH must follow TPH instructions to determine when to return to the child care centre/home:
 - Staff/students must also report to their occupational health and safety department prior to return to work when applicable.
 - Clearance tests are not required for staff/student or children to return to the child care centre.

CLOSE CONTACTS OF SOMEONE WITH COVID-19 *NEW*

Child care staff/students and children (i.e. contacts) exposed to a confirmed case of COVID-19 must be excluded from the child care setting for 14 days from the day of their last exposure:

- These individuals must self-isolate at home and monitor for symptoms for the next 14 days. Individuals who have been exposed to a confirmed case of COVID-19 should get tested.
- Staff/students and children who were exposed to a confirmed case of COVID-19 will need to continue to self-isolate for 14 days even if their test is negative.

RETURN TO CARE FOR CHILDREN WITH SYMPTOMS WHO TESTED FOR COVID-19 *NEW*

If an ill child who has not been exposed to someone with COVID-19 has a negative test result, they can return to the setting 24 hours after their symptoms start improving, the child is well enough to participate in program activities and they pass screening.

RETURN TO CARE FOR CHILDREN WITH SYMPTOMS WHO ARE NOT TESTED FOR COVID-19 *NEW*

For children who do not go for testing and do not have an alternative diagnosis (i.e. a new or worsening symptom not related to an existing medical condition), if they have:

- One of the following symptoms: fever, cough, difficulty breathing or loss of taste/smell

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Or

- One of the following symptoms that does not improve in 24 hours: sore throat, stuffy/runny nose, headache, nausea/vomiting/diarrhea, muscle ache/fatigue.

Or

- Two of the following symptoms: sore throat, stuffy/runny nose, headache, nausea, vomiting, diarrhea, muscle ache/fatigue

The parent/guardian should ensure that the symptomatic child self-isolates for 10 days from the date their symptom(s) started, and contact a health care provider for further advice or assessment, including if the child needs a COVID-19 test or other treatment.

The child may return to child care setting after 10 days if they do not have a fever (without taking medication), their symptoms are improving for 24 hours and the individual is well enough to participate in program activities.

Child care operators may allow children that have not been tested to return to care based on an alternative assessment made by a physician or health care practitioner regarding symptoms or the determination that COVID-19 testing is not required. Medical notes may be required to return back to the child care centre. Parents can complete a "Return to Child Care Confirmation Form" to provide to the child care operator to confirm the child is well and may return to the centre.

<https://www.toronto.ca/wp-content/uploads/2020/10/8fec-Attestation-for-Return-to-Child-Care.pdf>

REPORT LABORATORY-CONFIRMED CASES OF COVID-19 TO TORONTO PUBLIC HEALTH *NEW*

Child care centre supervisors must immediately report laboratory-confirmed cases in child attendees, child care staff, early childhood education students that attend the child care setting to Toronto Public Health by completing the Toronto Public Health (TPH) COVID-19 Notification Form for Child Care Settings.

Additional support can be accessed by calling TPH at 416-338-7600 during work hours (8:30 a.m. to 4:30 p.m., Monday to Friday) or 3-1-1 after hours or by emailing publichealth@toronto.ca

OUTDOOR PLAY

Northview Heights Early Learning Centre – North York will incorporate outside time in daily activities (weather permitting). Outdoor play is encouraged and will be offered in staggered shifts if possible.

- Only one class to use a playground space at a time. No mixing of cohorts/groups to occur.
- Child care centres are encouraged to have designated toys and equipment (e.g., balls, loose equipment) for each room or cohort. Where toys and equipment are shared, they will be cleaned and disinfected prior to being shared.
- Child care centres encouraged find alternate outdoor arrangements (e.g. community walk), where there are challenges securing outdoor play space.
- Children will bring their own sunscreen where possible and it will not be shared. Staff may provide assistance to apply sunscreen to any child requiring it and will exercise proper hand hygiene when doing so (for example washing hands before and after application). Parents are encouraged to apply sunscreen on their child Prior to their arrival in the morning daily
- Community Playgrounds are not to be used.

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EQUIPMENT AND TOY USAGE AND RESTRICTIONS

Frequencies and Toy Cleaning Schedules:

The disinfection of toys is vital to ensuring the health and safety of children as it reduces and mitigates the potential spread of germs and viruses among children and those who may come into contact with them.

All toys that are plush must be removed and not used in play, these include, stuffed animals, hand puppets, cloth toys etc. In addition, all sensory play is suspended following Toronto Public Health Guidelines, this includes (playdough and slime). All cloth toys or materials that cannot be effectively cleaned and disinfected must be removed and not used in play.

- Toy cleaning schedules will be posted in each area and updated completed daily by the staff in their rooms
- Toys, including large toys equipment and high touch items will be cleaned and disinfected at least two times per day and as often as necessary i.e., when toys/items are visibly soiled or when toys/items have been contaminated with body fluids.
- Toys and items such as electronic devices will be cleaned and disinfected between users prior to redistributing.
- Crib mattresses must be cleaned and disinfected when contaminated (Soiled or wet).
- Cots must be cleaned and disinfected daily and as necessary (when soiled).
- Refer to the Environmental Cleaning and Disinfecting Policy and Procedures for more guidance.

HANDLING USED TOYS

- Toys that have become visibly dirty or that have come into contact with body fluids (e.g., toys that have been mouthed) will be taken out of circulation immediately and cleaned and disinfected immediately.
- Toys that cannot be cleaned and disinfected immediately will be placed in a designated dirty toy bin. The bin will be clearly labeled and inaccessible to children.

HAND HYGIENE

Ensure that employees and children are always practicing good hand hygiene when hands are visibly dirty and/or after:

- Sneezing, coughing, or blowing your nose
- Using the washroom
- Handling garbage
- Handling raw foods
- Outdoor play
- Toileting/diapering routine
- Handling soiled laundry or dishes
- Handling soiled toys or other items
- Coming into contact with bodily fluids
- Coming into contact with any soiled/mouthed items
- Gardening

Hands will be cleaned using soap and water or hand sanitizer before and after:

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- Preparing, handling, serving and eating food
- Handling animals
- Touching a cut or open sore
- Changing diapers
- Glove use
- Dispensing/handling expressed breast milk
- Before and after giving medication
- Communal sensory play activity

When hands are visibly soiled, follow these steps for cleaning hands:

- Wet hands
- Apply soap
- Lather for at least 15 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

When hands are not visibly soiled, follow these steps for cleaning hands:

- Apply hand sanitizer (70-90% alcohol-based)
- Rub hands together for at least 15 seconds
- Work sanitizer between fingers, back of hands, fingertips, and under nails.
- Rub hands until dry

HAND HYGIENE MONITORING

To ensure that employees are using proper hand hygiene methods, supervisors will review hand hygiene practices on a regular basis and provide feedback to employees as required.

HAND SANITIZING INFORMATION

When your hands are not visible dirty, a 70-90% alcohol based hand sanitizer can be used. Hand sanitizers can only be used on children who are over the age of two and must always be used under adult supervision. Adults must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity.

Parent consent is required to use hand sanitizer on children. Children under the age of 1 are not permitted to have hand sanitizer applied, instead perform hand washing frequently and gently.

GLOVE USE

Gloves shall be worn when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment or environmental surfaces. Vinyl gloves are single use only.

GLOVES AND HAND HYGIENE

Hand hygiene shall be practiced before applying and after removing gloves. Gloves shall be removed and discarded after use.

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To reduce hand irritation related to gloves:

- Wear gloves for as short as time as possible
- Ensure that hands are clean and dry before wearing gloves
- Ensure gloves are intact, clean and dry inside
- Gloves are single use only, and must be task specific such as nitrile gloves for diaper changes

GLOVES WHEN CLEANING/DISINFECTING

Employees must wear these gloves when immersing toys in diluted disinfectant when toy washing.

COVERING YOUR COUGH PROCEDURE

Germs, such as influenza and cold viruses, are spread by coughing and/or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs. Keep your distance (preferably more than 2 metres/6 feet) from people who are coughing or sneezing.

Follow these steps to stop the spread of germs:

- If you have a tissue, cover your mouth and nose when you cough, sneeze or blow your nose
- Put used tissues in the garbage
- If you don't have a tissue, cough or sneeze into your sleeve, not in your hands
- Clean your hands with soap and water or hand sanitizer (70-90% alcohol-based) regularly and after using a tissue on yourself or others

GUIDANCE ON THE USE OF MASKS AND PERSONAL PROTECTIVE EQUIPMENT (PPE) *UPDATE*

- Child care operators must provide personal protective equipment (PPE) for use by staff when necessary.
 - It is strongly recommended that operators maintain a one to two week supply of PPE at all times.
 - All adults in a child care setting (i.e. child care staff and students) are required to wear a surgical/procedure mask (i.e. medical mask) and eye protection (e.g. face shields, safety glasses and goggles) while inside in the child care premises, including in hallways.
 - The use of masks and eye protection is not required for staff/students or children when outdoors if physical distancing can be maintained.
- Gloves must be worn when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment or surfaces (e.g., diaper change pads and surrounding counter tops).

Exceptions related to wearing masks and personal protective equipment (PPE):

Exceptions to wearing a mask and eye protection indoors may include medical conditions that make it difficult to wear a mask or eye protection (e.g. difficulty breathing, low vision, headaches); cognitive condition or disability that prevents wearing a mask or eye protection; hearing impairments or when communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication; and when performing duties in which a staff member is separated from their cohort and other staff/students (e.g. working alone in an office or during meal preparation in the kitchen).

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In situations where a staff/student is not wearing a mask due to an approved exemption, a face shield may be required as an alternative measure of protection.

INTERACTIONS WITH INFANTS/TODDLERS

- Childcare centres will continue to encourage staff to supervise and hold bottles for infants not yet able to hold their own bottle to reduce the risk of choking.
- All childcare staff will be removing home clothing and wearing scrubs daily at the centre
- When holding infants and toddlers we are no longer require the need to use blankets or clothes over our clothing.
- Infants will be placed in their own crib to rest head to toe
- Toddlers will be placed in their own cots head to toe to rest
- Recognizing that physical distancing is difficult with small children and infants, suggestions to support physical distancing include:
 - planning activities that do not involve shared objects or toys; and,
 - when possible, moving activities outside to allow for more space.
- Children in the infant room must not share food, feeding utensils, soothers, bottles, sippy cups, etc.
- Mouthed toys must be removed immediately for cleaning and disinfecting and must not be shared with other children. Label these items with the child's name to discourage accidental sharing.
- Label these items with the child's name to discourage accidental sharing.

FOOD PROVISION

Food is catered by Wholesome Kids Catering and designated staff in the centre distributes the food and takes temperature upon arrival and serving. If the staff is not available another certified food handler will prepare meals.

- Childcare centres will change meal practices to ensure there is no self-serve or sharing of food at meal times.
 - Utensils will be used to serve food
 - Meals will be served in individual portions to the children by a staff in the room
 - There will be no items shared (i.e., serving spoon, tongues, or salt shaker)
 - There will be no food provided by the family (except where required (infant children) and special precautions for handling and serving the food must be put in place)
 - Children will neither prepare nor provide food that will be shared with others
 - Ensure proper hand hygiene is practiced when staff are preparing food and for all individuals before and after eating
 - Children will practice physical distancing while eating
 - There will be no sharing of utensils

Furthermore, the following will be adhered to:

- Kitchens will not be accessed by children/non-essential visitors;
- There will be no common food items (e.g. shared snack bowl). Meals will be served directly to children and shared food containers will be removed from dining areas (e.g., shared pitchers of water, milk, etc.);
- Activities involving child participation in food preparation will not be permitted;
- Blankets/sheets will be washed weekly or more often when needed

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

DROP-OFF AND PICK-UP PROCEDURES

AM Drop-Off

- AM drop/health screening will be conducting by the main entrance way.
- Pylons and marking on the floor will be clearly visible for families to wait. Parents will not be able to go past the screening table
- If it is busy we encourage families to wait in their car for their turn
- AM drop off parents are encouraged to stagger their time of arrival. Emailing thru HiMama or calling to provide your estimate time of drop off will encourage stagger times off arrival
- AM drop off once the screening is completed the designate staff will take your child to their room
- All entrances will have hand sanitizer for the adults to use on themselves and the children.
- If in an enclosed space and physical distance of 2 meters cannot be maintained, parents/guardians and staff must use face coverings (PPE).
- Personal belongings (e.g., backpack clothing, etc.) MUST be minimized. Belongings must be labeled and kept in a knapsack that the staff will place in your child's cubby.
- Strollers are encouraged to be taken home with the parent after the child has arrived to the centre, however if the strollers will be left at the centre please park it in outside where labelled "Stroller Parking".

PM Pick up

- Families are encouraged to email thru HiMama or call the centre with the time you are arriving. The staff designate will pick up your child from their room and bring them to you upon your arrival.
Doors will be locked.

SERIOUS OCCURRENCE REPORTING *UPDATE*

A Serious Occurrence is required to be submitted under the category "suspected/confirmed case of COVID-19" when one of the following individuals has a confirmed case of COVID-19 OR a suspected case involving the individual exhibiting 1 or more symptoms AND the individual has been tested, or has indicated that they will be tested for COVID-19:

- 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 parent of a child mentioned in sub clause (i), or
- vii. a staff member at a child care centre
- viii. a student at a home child care premises or child care centre

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REFERENCES ***UPDATE***

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I, the undersigned, acknowledge receipt of Pandemic Policies and Procedures that have been provided to me by **Northview Heights Early Learning Centre-North York**.

I have read and understand the following policy, and agree to comply with them.

Dated: _____ day of _____, 202____.

Staff/Parent Print Name: _____ Staff/Parent Signature: _____

Supervisor Signature: _____