PRESENTATION OBJECTIVES

• COVID-19 disease
• Operational Guidance for Child Care Centres in COVID-19
• Health and Safety Protocol
• COVID-19 Infection Prevention and Control Measures
• Outbreak Management
COVID-19 DISEASE
COVID-19 DISEASE

- Coronaviruses are common and often associated with mild illnesses like the common cold
- New coronavirus (COVID-19) can cause mild to severe respiratory infections
- WHO declared pandemic on March 11, 2020

How it spreads:
- An infected person can spread it to others 2 or more days before their symptoms start (note: an infected person can be asymptomatic)
- Infected person can spread it to others for 9 days or longer after symptoms started (this period of communicability can depend on the severity of the illness)
- There is limited evidence that an infected person can spread it without symptoms
- The people who have symptoms are causing the majority of virus spread.
COVID-19: SYMPTOMS

• Symptoms to look for include:
  o Fever (>37.8C)
  o Cough
  o Shortness of breath
  o Sore throat
  o Runny nose
  o Nasal congestion (when not known to be caused by such as seasonal allergies, post nasal drip, etc.)
  o a general feeling of being unwell.

• Children in particular should be monitored for atypical symptoms such as nausea, vomiting, abdominal pain unexplained fatigue/malaise, delirium, chills, croup (barking cough), pink eye/conjunctivitis, sluggishness/loss of appetite (for no known reason)

• For a full list of signs and symptoms, refer to the ‘COVID-19 Reference Document for Symptoms’
OPERATIONAL GUIDANCE FOR CHILD CARE CENTRES DURING COVID-PANDEMIC
As we prepare to reopen more businesses and services, it’s critical that we ensure supports are in place so people can return to work knowing their children will be cared for in a safe and healthy environment,” said Premier Ford. “Our child care plan sets out strict protocols that must be followed to prevent the spread of COVID-19. We have made great progress to contain the virus, but we must be mindful that there is still a public health risk.”

As the province continues to implement its framework for reopening the Province, child care centres and home care providers across Ontario will be able to reopen with strict safety and operational requirements in place, similar to the safety guidelines required for emergency child care centres. Centres will be required to adopt specific rules, including:

- **Contacting —** providing contact information of 10 or less days after closing;
- **COVID-19 response plan —** all child care settings will be required to have a plan in place to prevent the spread of COVID-19;
- **Screening —** all staff and children must be screened prior to entry to the child care setting. Anyone feeling unwell must stay home;
- **Daily attendance records —** child care settings must keep daily records of all attendees;
- **Cleaning —** child care settings must be thoroughly cleaned before opening and maintain protocols;
- **No visitors —** only essential visitors are permitted entry into the child care setting;
- **Implementing drop-off and pick-up procedures in a way that facilitates physical distancing;”
LICENSING REQUIREMENTS

Cohort Size and Ratio

• Cohort is defined as “a group of children and staff members assigned to them, who stay together throughout the duration of the program for a minimum of 7 days”

• Maximum cohort size for each room will be 10 individuals (“a cohort”), space permitting; includes both staff and children.

• Maximum capacity rules do not apply to Special Needs Resource staff on site; they are counted in the child/staff ratios

• Each cohort must stay together throughout the day (and throughout the duration of the program for a minimum of 7 days); there must be no mixing with other cohorts.
 LICENSING REQUIREMENTS 

Cohort Size and Ratio

• Maintain staff to child ratio set out under the CCEYA; can increase staff to child ratio as long as the cohort does not exceed the maximum of 10 individuals.
• Mixed age grouping is permitted where approval has been provided by Ministry of Education
• Reduced ratios are permitted provided that cohorts are not mixed with other cohorts.
• Reduced ratios are not permitted at any time for infants.
LICENSING REQUIREMENTS

Staffing

• Staff should work at only one location.
• Supervisors and/or designates should limit their movement between rooms as much as possible
• Supply/replacement staff should be assigned to specific cohorts.
• Qualified Staff
  • Licensees are required to ensure each group has the required number of qualified staff as set out in the CCEYA
  • Certification in Standard First Aid Training, including Infant and Child CPR
  • Vulnerable Sector Checks (VSCs)
HEALTH AND SAFETY PROTOCOL FOR COVID-19
HEALTH AND SAFETY POLICY AND PROCEDURES

• Child care operators are required to develop policies and procedures outlining health and safety protocols for COVID-19:
  • Direction set out by York Region Public Health for infection control measure and outbreak management
  • Parent/guardian drop off and pick up procedures
  • Physical distancing requirements
  • Cleaning and disinfection of the centre including toys and frequently touched surfaces equipment etc.
  • How to report illness
  • Re-scheduling of group events and in person meetings
  • How shifts will be scheduled where applicable
• Staff are trained and follow the policy
• Copy of the health and safety policy and procedure is shared and accessible to all staff, parents/guardians and emergency contacts
HEALTH AND SAFETY PROTOCOL FOR COVID-19

• COVID-19 Protocol must be developed prior to re-opening centre
• Centre must sign an “attestation form” and submit it to the Ministry of Education Program Advisor
• Staff must be trained and follow the Health and Safety Protocols
• Health and Safety Protocols should be shared and accessible to all staff, parents/guardians and emergency contact
HEALTH AND SAFETY PROTOCOL FOR COVID-19

• The symptomatic child at the centre is immediately separated from others and is supervised by a staff member in a designated room/space; parent/guardian is contacted immediately for pick-up

• The symptomatic child should be provided with tissues and reminded of hand hygiene, respiratory etiquette, and proper disposal of tissues.

• Designated room should be supplied with a hand sink with hot and cold running water, liquid soap and single-use paper towels and or hand sanitizer with 60% alcohol content

• Staff should wear a surgical/procedure mask and eye protection at all times while supervising symptomatic child. If tolerated and above the age of 2, the child should wear a surgical/procedure mask; staff does not interact with others
HEALTH AND SAFETY PROTOCOL FOR COVID-19

Contacting Public Health
• Centre should contact York Region Public Health for advice:
  1 (877) 464-9674 ext. 73588 (7 days a week, 8 am to 8pm )
  (905) 953-6478 (after hours)
• For home-based programs: if a person who resides in the home becomes symptomatic and/or tests positive for COVID-19, York Region Public Health should be notified and they will advise on next steps should be followed.
• This may include closing the program and notifying all families if necessary
Communication with Staff and Parents/Guardians

• Parents/guardian are made aware of the facilities COVID-19 Plan and the importance to adhering to self-monitoring of COVID 19 symptoms and hand hygiene prior to bringing child to centre.

• COVID-19 specific information visibly posted and available to staff and parents/guardians (e.g., COVID-19 fact sheets, hand hygiene, physical distancing, self-monitoring).

• Communication plan is provided that will include the information that will be shared with other parents of children in the childcare centre when exposures have been identified.
Cleaning and Disinfection

- Environmental cleaning and disinfection procedures should be developed.
- All rooms where the symptomatic child was present must be immediately cleaned and disinfected.
- Cleaning and disinfection required for:
  - high traffic areas (e.g., bathrooms, corridors)
  - frequently touched surfaces (e.g., rails, door knobs, light switches, tables)
- All items that cannot be cleaned (paper, books, cardboard puzzles) should be removed and stored in a sealed container for a minimum of 7 days.
- Staff to wear appropriate PPE during cleaning and disinfection.
HEALTH AND SAFETY PROTOCOL FOR COVID-19

Toys

• All toys within the centre, where the symptomatic child was present must be cleaned and disinfected (outbreak level disinfection) immediately.

Laundry

• Contaminated articles belonging to the symptomatic child (including soiled clothing) are sent home immediately for cleaning. Do not rinse or launder at the centre, roll and place items separately in a sealed plastic bag (take care not to contaminate the surrounding environment).

• Gloves should be worn when handling dirty laundry.

• All linens touched/used by the symptomatic child at the centre must be laundered immediately.

• Staff must use appropriate PPE when handling laundry (e.g. gloves, eye protection apron etc.).
COVID-19 INFECTION PREVENTION AND CONTROL MEASURES
COVID-19 INFECTION PREVENTION AND CONTROL MEASURES

- Screening
- Physical distancing
- Enhanced cleaning and disinfection
- Hand hygiene and respiratory etiquette
- Proper use of PPE
- Food preparation
SCREENING

- Check case definition on Ministry of Health COVID-19 website
ACTIVE SCREENING — STAFF, CHILDREN, PARENTS/GUARDIANS AND ESSENTIAL VISITORS

• Should occur at entrance

• Staff conducting screening should stand 2 metres or 6 feet away from the individual being screened; separated by a physical barrier

• If this is not possible, screeners should don appropriate PPE i.e., surgical/procedural mask, eye protection (goggles/face shield), gowns and gloves

• Hand sanitizer should be available
SCREENING – STAFF AND CHILDREN

• Symptoms include:
  • Fever (37.8C or greater)
  • New or worsening cough
  • New or worsening shortness of breath
  • Sore throat
  • Difficulty swallowing
  • Nausea/vomiting, abdominal pain
  • Runny nose, nasal congestion (in the absence of seasonal allergies)
  • Muscle aches
  • Headache
SCREENING — STAFF AND CHILDREN

• Atypical symptoms should be considered especially for children including:
  • Unexplained fatigue/malaise/myalgias
  • Delirium (acutely altered mental status and inattention)
  • Unexplained or increased number of falls
  • Acute functional decline
  • Exacerbation of chronic conditions
  • Chills
  • Headaches
  • Croup
  • Conjunctivitis
  • Multisystem inflammatory vasculitis in children

• Equipment and supplies provided at screening station (e.g. alcohol based hand sanitizer, thermometer, single-use covers, disinfectant, PPE); thermometers must be covered with single-use protective covers (which is disposed after each use), or cleaned and disinfected before re-use.
SCREENING — STAFF AND CHILDREN, PARENTS/GUARDIANS AND ESSENTIAL VISITORS

• All individuals (staff, children, parents/guardians and essential visitors) are screened upon arrival.

• Staff, parents/guardians essential visitors are educated on the signs and symptoms of COVID-19

• Staff and children should be monitored for symptoms daily

• If symptoms develop at home, staff, parent/guardian and essential visitors must report illness to the centre

• Home child care providers and residents must be screened each day before the arrival of children in their care
SCREENING RESULTS

• All daily active and passive screening results must be recorded in a log and maintained.

• Each record should include:
  • name
  • contact information
  • time of arrival and departure
  • screening results

• Children, parents/guardians, essential visitors and staff who are symptomatic or fail the screening are not allowed to enter the centre.
PHYSICAL DISTANCING

- Keeping a distance of at least 2 metres or 6 feet (approximately 2 arms length) from other people inside and outside the child care setting.
- Includes staff when on break, meal times, administrative work in office.
PHYSICAL DISTANCING: DROP OFF AND PICK UP PROCEDURES

• Procedures should be in place that support physical distancing at the centre (i.e., staggered entrance times).
  o Parents maintain physical distancing at drop off and pick up and should not go past the screening area.
  o If drop off and pick up area is in an enclosed space and physical distancing cannot be maintained, parents/guardians and staff/providers may want to use face coverings
  o All entrances should have hand sanitizer
  o Use signage /markings on the ground to direct families
  o Bringing in personal belongings (e.g., backpack, clothing, etc.) should be minimized
  o Items should be labelled and kept in a designated area.

• Procedure for stroller storage should be developed that includes: a designated space outside of the centre so that parents do not need to enter the building.
When setting up the play space, physical distancing of at least 2 metres must be maintained between cohorts and should be encouraged, where possible, between children within the same cohort:

- spreading children out into different areas, particularly at meal and dressing time;
- incorporating more individual activities or activities that encourage more space between children; and
- using visual cues to promote physical distancing.
PHYSICAL DISTANCING: SET UP IN CENTRE

- Where two cohorts are using the same indoor space (e.g. gym), centre must ensure that a floor to ceiling temporary physical barrier is in place to ensure that physical distancing of at least 2 meters between cohorts is maintained.
- In shared outdoor space, cohorts must maintain a distance of at least 2 metres between groups and any other individuals outside of the cohort.
- Centre and home child care providers are encouraged to increase the distance between cots/resting mats/playpens or place the children head to toe or toe to toe if the space is limited.
PHYSICAL DISTANCING: SET UP IN CENTRE

• Shared spaces and structures that cannot be cleaned and disinfected between cohorts **should not be used.**
• Physical distancing is difficult with small children and infants, additional suggestions include:
  o Planning activities that do not involve shared objects or toys;
  o When possible, moving activities outside to allow for more space;
  and
  o Avoiding singing activities indoors.
EQUIPMENT AND TOY USAGE
EQUIPMENT, TOY USAGE AND OUTDOOR PLAY

• Toys and equipment should be made of materials that is easy to clean and disinfect (e.g., avoid plush toys).
• Toys and equipment must be cleaned and disinfected between cohorts.
• Mouthed toys must be cleaned and disinfected immediately after use.
• Designate toys and equipment for each room or cohort e.g., balls, loose equipment
• Shared toys and equipment must be cleaned and disinfected immediately after use.
• If sensory materials (e.g., playdough, water, sand, etc.) are offered, they should be provided for single-use and dedicated for same child all day and labelled with child’s name, if applicable.
• On-site play structures can only be used and must be used by one cohort at a time; all touch surfaces must be cleaned and disinfect immediately after use.
OUTDOOR PLAY

• Outdoor play should be scheduled by cohort to facilitate physical distancing.
• Where the outdoor play area is large enough to accommodate multiple cohorts, the space can be divided with physical markers to ensure 2 metres separation of cohorts.
• Where there are challenges in securing an outdoor play space, to meet physical distancing requirements, plan alternate outdoor activities e.g., community walk.
• Children should bring their own sunscreen where possible; it should not be shared.
• Staff may provide assistance to apply sunscreen to any child requiring it; proper hand hygiene must be followed and staff must clean hands before and after application.
INTERACTIONS WITH INFANTS AND TODDLERS
INTERACTIONS WITH INFANTS AND TODDLERS

• When holding infants and toddlers use blankets or cloths over clothing and change the blankets or cloths between children.
• Increase distance between sleeping equipment (e.g., cots and mats) or placing children head-to-toe or toe-to-toe if space is limited.
• Centre should consider removing cribs or placing infants in every other crib, and mark the cribs that should not be used in order to support physical distancing.
• No sharing of soothers, bottles, sippy cups, etc.
• All items should be labelled with the child’s name to avoid accidental usage
HAND HYGIENE & RESPIRATORY ETIQUETTE
HAND HYGIENE

• Proper and meticulous hand hygiene is an important preventative measure to stop the spread of germs and infections including COVID-19
• Removal of visible soil and germs from the hands
• Can be achieved by using soap and water or an Alcohol-based Hand Rub (ABHR)
WHEN TO WASH HANDS

- Before and after preparing food;
- Before and after eating;
- After using the toilet;
- After disposing of waste or handling dirty laundry;
- After blowing your nose, coughing, or sneezing;
- After interacting with other people at a distance of less than 2 metres/6 feet;
- Whenever hands look dirty or are visibly soiled;
- Donning and doffing personal protective equipment
How to correctly use hand sanitizer

1. Apply one squirt
2. Rub hands together
3. Rub until dry

1. WET your hands
2. SOAP your hands
3. RUB your hands
4. RINSE your hands
5. DRY your hands
6. Use paper towels to TURN OFF tap
RESPIRATORY ETIQUETTE

• Child care operator should encourage the practice of proper respiratory etiquette practice amongst staff and children, this includes
  • Cough or sneeze into your sleeve
  • Cover your mouth and nose with a tissue and throw the tissue out immediately. Wash your hands afterwards.
• Avoid touching your eyes, nose and mouth with unclean hands.
ENSURING HAND HYGIENE AND RESPIRATORY ETIQUETTE

• Educate staff/children/essential visitors
  • Frequent reminders throughout the day
• Post signage throughout centre
  • Especially in washrooms, food preparation/eating areas, and other commonly shared spaces
• Ensure adequate supplies are available:
  • Liquid soap, paper towels/air dryers
  • Alcohol-based hand sanitizer (60% alcohol)
  • Tissues and hands-free garbage cans
PERSONAL PROTECTIVE EQUIPMENT (PPE)
PERSONAL PROTECTIVE EQUIPMENT (PPE)

- Equipment worn to protect the staff member from infection this include the use of:
  - Mask as a form of source control
  - Eye protection protects the eyes from splashes, sprays and infected droplets
  - Long-sleeved cuffed gown protects clothing from becoming contaminated
  - Gloves protect hands from becoming heavily soiled
  - Mask fit tested N95 respirators are only used for specific procedures that are not likely to take place in the centre
  - Staff must be trained on the proper use of PPE including how to don and doff PPE
PERSONAL PROTECTIVE EQUIPMENT (PPE)

• PPE is used at child care centres:
  • When conducting screening of children during drop off and pick up
  • When taking care of a symptomatic child at the centre prior to pick up
  • When a staff member becomes sick at work
  • When coming in contact with blood or body fluids
• The PPE used would include a surgical mask, eye protection, gown and gloves
• When using PPE, it is important to follow proper donning and doffing sequence to ensure staff are properly protected
• Single-use PPE should be discarded after use and should not be saved for re-use
DONNING PPE

1. Perform hand hygiene
2. Gown
3. Mask
4. Eye protection e.g., goggles or face shield
5. Gloves
DOFFING PPE

1. Gloves
2. Gown
   → perform hand hygiene
3. Eye protection (e.g., goggles or face shield)
4. Mask
   → perform hand hygiene
DONNING AND DOFFING PPE

Play Donning and Doffing videos

https://www.youtube.com/watch?v=AbsTAW9KT8Y&feature=youtu.be
**Personal Protective Equipment**

Personal Protective Equipment (PPE) should be worn to prevent the spread of germs. By protecting your skin and face (mouth, eyes and nose) with PPE you minimize your chance of getting germs into your body.

**Put on** Personal Protective Equipment in this order:

1. **Perform Hand Hygiene**
2. **Gown**
3. **Mask**
4. **Goggles**
5. **Gloves**

**Take off** Personal Protective Equipment in this order:

1. **Gloves**
2. **Gown**
3. **Perform Hand Hygiene**
4. **Goggles**
5. **Mask**
6. **Perform Hand Hygiene**

If PPE is not removed carefully, germs can spread to skin or face.

---

**Link**
PERSONAL PROTECTIVE EQUIPMENT (PPE)

- Centre must secure and sustain an adequate supply of PPE available for use which supports their current and future operations.

- Refer to Centre of Disease Control PPE Burn Rate calculator to assist with maintaining a sufficient supply of PPE.

- Ontario Together Portal has a Workplace PPE Supplier Directory that lists Ontario businesses that provide personal protective equipment.
ENVIRONMENTAL CLEANING, DISINFECTION AND LAUNDRY
GENERAL CLEANING AND DISINFECTING PRINCIPLES

- Follow 2-step method to clean and disinfect
  1. Clean with detergent and water, use friction
  2. Apply disinfectant, following instructions
- Only use disinfectant with a Drug Identification Number (DIN)
- Follow manufacturer’s instructions: contact time, expiry date
- Start from clean area and move to dirty area
- Wear appropriate PPE is (e.g., gloves, eye protection, gown/apron), especially when cleaning body fluid spills
- Ensure all chemical products are labelled and locked away from children
CONSIDERATIONS FOR CLEANING AND DISINFECTING

• Environmental cleaning and disinfection policy is developed and ensure staff are fully trained
• All common areas and high touch surfaces (e.g., door knobs, hand rails, light switches, toilet handles, on-site playground equipment) must be cleaned at a minimum of **twice** daily
• Child care centre must develop a schedule and ensure the policy is followed
• Use new cleaning cloths for each room
• Garbage cans should be easily accessible, lined with plastic, hands free and emptied regularly
• Centre must keep a cleaning and disinfection log to track and demonstrate daily cleaning
• Clean and disinfect sleeping equipment (e.g. cribs, cots, mats) between children
Select products

Cleaners
- Break down grease and remove organic material from the surface.
- Used separately before using disinfectants.
- Can be purchased with cleaner and disinfectant combined in a single product.

Disinfectants
- Have chemicals that kill most germs.
- Applied after the surfaces have been cleaned.
- Have a drug identification number (DIN).

Disinfectant Wipes
- Have combined cleaners and disinfectants in one solution.
- May become dry due to fast drying properties. Should be discarded if they become dry.
- Not recommended for heavily soiled surfaces.
ENVIRONMENTAL CLEANING

Clean frequently touched surfaces twice per day

- In addition to routine cleaning, surfaces that have frequent contact with hands should be cleaned and disinfected twice per day and when visibly dirty.
- Examples include doorknobs, elevator buttons, light switches, toilet handles, counters, hand rails, touch screen surfaces and keypads.
- In addition to routine cleaning, check with your organization for any specific protocols for cleaning for COVID-19.
ENVIRONMENTAL CLEANING

- Non-outbreak: use 100 ppm bleach & water recipe
- Outbreak: use 5,000 ppm bleach & water recipe

Proper Cleaning & Disinfection Chart
PROPER CLEANING AND DISINFECTION PRACTICES

Cleaning:
- Cleaning must always be the first step to remove dirt and debris from a surface and is necessary for a disinfectant to be effective.
- Clean surfaces with detergent, water, and then rinse and dry to leave surfaces clean and shiny.

Disinfection:
- Disinfectants are applied to a dry surface in order to kill disease-causing germs.
- Disinfectants must be a drug identification number (DIN) as approved in Canada (common household bleach and isopropanol alcohol are the only approved disinfectants for use in Canada).
- Always follow manufacturer’s instructions for use. Readable directions on disinfecting, personal protective equipment (PPE) needed (e.g., gloves, gowns, surfaces). Always wear disposable gloves when handling disinfectants.
- There are a variety of disinfectants on the market. Choose a disinfectant compatible with your surfaces and work against the test in your needs.
- Position the product in the room to be disinfected. This may require the use of a fan or a heat gun to ensure the disinfectant is applied properly.
- Ensure the concentration of disinfectant is correct before use as some test strips
- Test for the disinfectant to be used with water after disinfection.
- Test the disinfectant with other products intended for use (e.g., alcohol-based hand sanitisers on surfaces).

Cleaning and disinfecting wipes:
- Follow manufacturer’s recommendations.
- Wipes may become dry (improper storage or drying) due to the drying of properties before contact time is achieved.
- Wipes may not be effective as a routine cleaning solution, especially for heavy soil contamination.
- Ensure the surface is free of residue with the product for the requisite contact time (additional uses may be needed).
- Wipes must be kept neat and should be discarded if they become dry.

Read and body fluid spills:
- Wipes spills immediately: disposable towels to remove most of the organic matter, then use an disinfectant sheet on the spill area.
- See the chart below for examples of disinfectants that can be used depending on volume of blood body fluid spill.

<table>
<thead>
<tr>
<th>When to Clean and Disinfect</th>
<th>Example of Active Ingredients (Disinfectant)</th>
<th>Contact Time (minutes)</th>
<th>Where to Clean and Disinfect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air or fume should avoid</td>
<td>Airborne Microorganisms</td>
<td>10</td>
<td>Surfaces</td>
</tr>
<tr>
<td>2% Hydrogen Peroxide</td>
<td>10</td>
<td>MFU</td>
<td></td>
</tr>
<tr>
<td>6% Hydrogen Peroxide</td>
<td>25</td>
<td>MFU</td>
<td></td>
</tr>
<tr>
<td>Enhanced Active Formulation</td>
<td>MFU</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: York Region Community and Health Services above is intended only for an example of some products that are described below.

Bath (Sodium Hypochlorite) Solution:
- Use undiluted household bleach (1.25% or 5000 ppm) when cleaning the solution in the chlorinated water.
- If the solution is not used, add bleach to water in chlorinated water is bleach.
- Chlorine solutions are most effective when exposed to sunlight.
- Chlorine should be present in solution that is not used.
- Chlorine should be present in solution that is not used.

References:

Community and Health Services
Public Health
1-877-468-5275
TTY 1-866-575-4228
york.ca

York Region
LAUNDRY

• All laundry should be handled in a manner that minimizes possibly spreading the disease/virus
• Gloves and gown should be worn when doing laundry
• Wash with regular laundry soap and hot water (60°C - 90°C) and dried thoroughly
• Clothing and linen from an unwell/infected child can be washed with other laundry
• Linens and children’s clothing soiled with fecal material should be washed separately.
LAUNDRY

- Clean and disinfect laundry hamper/container that comes in contact with heavily soiled laundry
- Disposable contaminated items including used PPE should be placed in a closed bag and discarded with other household waste
- Towels and linens must not to be shared between children
- Launder on a regular schedule
FOOD PREPARATION AND PROVISION
FOOD PREPARATION

• Food Premises regulation Ontario Regulation 493/17
• Limit the number of staff in the kitchen – one at a time
• Maintain physical distance in the kitchen
• Food handlers:
  o Must be in good health
  o Practice hand hygiene and respiratory etiquette
• Dedicate staff for kitchen duties; ideally, do not assign housekeeping staff to be involved with food preparation or food service
FOOD PROVISION

- No self-serve or sharing of food and utensils (e.g., serving spoon, water jugs) at meal times.
- Meals should be individually portioned for each child (i.e., no family style service)
- No food provided by the family/outside of the regular meal provision of the program (except where required and special precautions for handling and serving the food must be put in place).
- Children should not prepare food or provide food that could be shared with others
- Proper hand hygiene is practiced during food preparation and before and after eating
- Children and staff should practice physical distancing while eating, if possible
- Tables and chairs must be cleaned and disinfected after each use
COVID-19 RESPONSE: OUTBREAK MANAGEMENT
SYMPTOMATIC CHILD

- Symptomatic children must be separated from others in a supervised area until they are picked up.

- The child and staff member should wear a mask (if tolerated and if child > 2 years old), physical distance while waiting for the child to go home. Eye protection should also be worn by the staff.

- They are to go for COVID-19 testing and advised to remain home until they are known to be COVID-19 negative and 24 hours symptom free. The symptomatic child’s sibling is also to be excluded until this time.

- Further direction about isolation and/or testing of others will be provided by YRPH if the child is COVID-19 positive
SYMPTOMATIC STAFF

• Symptomatic staff are to leave work, go for COVID-19 testing and advised to remain home until they are known to be COVID-19 negative and 24 hours symptom free.

• Further direction about isolation and/or testing of others will be provided by YRPH if the staff is COVID-19 positive.
OUTBREAK STATUS
RESPIRATORY OUTBREAKS
(under investigation for COVID19)

Reportable to YRPH: 1-877-464-9675 x 73588

• Suspect status: Two or more symptomatic people in the child care
centre within 48 hours
• Confirmed status: case by case basis—call for consultation

1 confirmed COVID case = COVID outbreak
**SYMPTOMATIC CHILD**

- Symptomatic children must be separated from others in a supervised area until they are picked up.

- The child and staff member should wear a mask (if tolerated and if child > 2 years old), physical distance while waiting for the child to go home. Eye protection should also be worn by the staff.

- They are to go for COVID-19 testing and advised to remain home until they are known to be COVID-19 negative and 24 hours symptom free. The symptomatic child’s sibling is also to be excluded until this time.

- Further direction about isolation and/or testing of others will be provided by YRPH if the child is COVID-19 positive.
OUTBREAK STATUS

RESPIRATORY OUTBREAKS

(UNDER INVESTIGATION FOR COVID-19)

Reportable to YRPB: 1-877-464-9675 x 73588

• Suspect status: Two or more symptomatic people in the child care centre within 48 hours
• Confirmed status: case by case basis—call for consultation

1 confirmed COVID case = COVID outbreak
TESTING AND ISOLATION:

Symptomatic staff and children should be sent for testing: local COVID 19 assessment centres have convenient locations and hours of operation. They are to self-isolate and be excluded from the child care centre pending test results and can return once known to be COVID19 negative and symptom free for 24 hours.
CONTACT FOLLOW

• Further risk assessment of close contacts will be further assessed by YRPH once a person in the child care centre is known to be COVID positive.
OUTBREAK DOCUMENTATION

• In the event an outbreak is declared, YRPH will provide an outbreak line list template and instructions for daily submission to YRPH. An outbreak number will be assigned to the child care centre.
RETURNING TO CHILD CARE: TESTED NEGATIVE

• Symptomatic people who test negative for COVID-19 can return to child care once they are 24 hours symptom free. Close contacts can also return if they were excluded.
RETURNING TO CHILD CARE: TESTED POSITIVE

• Those who test positive for COVID-19 must be excluded for 14 days after the onset of symptoms.

• One confirmed /positive COVID case is considered a confirmed COVID outbreak in the child care centre.

• Children or staff who have been exposed to a confirmed case of COVID-19 should be excluded from the child care setting for 14 days.

• YRPH will provide ongoing support for a confirmed COVID outbreak including providing direction on child care operations and outbreak management.
Declaring an outbreak over

- YRPH will provide direction regarding the length/duration of an outbreak depending on laboratory findings (if an organism is identified), evidence of continued spread and resolution of illness.
York Region Health Connection
1-800-361-5653
TTY: 1-866-252-9933
Health.Inspectors@york.ca
york.ca/covid19
THANK YOU