

Infection Prevention and Control in Child Care Centres (Health Policy)

Name of Child Care Centre: Kodomoen Childcare Centre

Purpose

The main objective of the policy is to minimize the spread of illness and disease. It is not the responsibility of the centre to care for sick children.

Definitions

Licensee: The individual or agency licensed by the Ministry of Education responsible for the operation and management of each child care centre it operates (i.e. the operator).

Staff: Individual employed by the licensee (e.g. program room staff).

For the purposes of this policy, the following definitions/acronyms apply:

- Child Care and Early Years Act, 2014 (CCEYA)
- Toronto Public Health (TPH)

Applicable Law

- *Child Care and Early Years Act, 2014, Ontario Regulation 137/15, 33*
- *Childcare Centre Licensing Manual, August 2016; pages 53 - 54*

Policy

The Kodomoen Childcare Centre health policy outlines the government regulations by the provincial Child Care Early Years Act (CCEYA) as well as the recommendations of Toronto Public Health. The policy also contains guidelines to ensure the smooth operation of the centre and the well-being of the children.

Infection Prevention and Control Measures

Surveillance:

Kodomoen Childcare Centre will strive to implement and maintain the highest standards of health and safety for our children and staff. Limited immune defense and ready transmission of infection, however, make young children in a group care setting susceptible to communicable diseases.

On arrival at the centre, the staff will initiate a brief medical check with the parent, to ensure that the child is healthy enough to participate in all aspects of the program. This will be recorded on the attendance sheet.

In case of illness, if a child will not be attending on the day, parents are to contact the daycare by 9 a.m. with details of the illness. It is important to know the specific illness or symptoms the child has, so that staff can be aware of potential symptoms developing in other children. In the best interest of all children in the daycare, a child should be kept at home should any of the following symptoms be evident:

- Not feeling well, tired or sore muscles
- sore throat
- cough
- difficulty breathing
- runny nose
- red eye
- loss of taste or smell
- earache
- discharge from eyes or ears
- swollen neck glands
- fever (38 degrees Celsius or higher)
- nausea
- vomiting
- diarrhea
- unexplained rash or skin eruption

If a child becomes ill while at the centre, he/she will be isolated from other children immediately, with supervision. The isolation area will be in front of the grey library bookcase. Parents will be notified to pick child(ren) up.

During a Pandemic or Outbreak:

- Parents and staff will be reminded that any child who is ill must not attend the program. They should also report any symptoms associated with the specific illness (I.e. COVID-19) to the supervisor.
- A screening station will be set up outside the outdoor playground fence.
- Parents/Guardians will be asked a series of questions regarding their recent activities and any signs or symptoms of illness prior to the entry of the program space. This includes a temperature check, as well as the above mentioned symptoms of illness.
- During a Pandemic, the following screening questions will be asked:
 - Do you/the child or *any member of your household* have any of the following symptoms: fever/feverish, new onset of cough, worsening chronic cough, shortness of breath, difficulty breathing, sore throat, difficulty swallowing, decrease or loss of sense of taste or smell, chills, headaches, unexplained fatigue/malaise/muscle aches, nausea/vomiting, diarrhea, abdominal pain, pink eye (conjunctivitis), runny nose/nasal congestion without other known cause?
 - Have you/the child tested positive for COVID-19 or had close contact with a confirmed case of COVID-19 without wearing appropriate PPE?

- Have you/the child travelled outside of Canada, including the United States, within the last 14 days?
- All screens will be recorded on the attendance sheet, and any symptoms will be recorded on a separate log. These records will be kept for 12 months.
- Hand sanitizer (70-90% alcohol concentration) will be available at the screening station for individuals who answered NO to all the screening questions. They must sanitize their hands prior to entering the centre.
- Staff will escort children into the playground (goodbye hugs will be outside the fence!) along with their strollers. Staff will store the strollers in the stroller parking space inside the building, along the wall of the entrance.
- Parents must not go past the screening area or enter the centre unless there is a specific need to do so and the parent passes the screening. They will be asked to wear a mask and sanitize hands prior to entry.
- **Enhanced Attendance Reporting Practices:**
 - Because we are located inside Knox Presbyterian Church, we do not have the capacity to maintain daily attendance records of all who enter and exit the building. However, Knox does maintain records at their reception. These records will be available upon request.
 - Attendance Records of all who enter the program space will be recorded, (staff and children) including screening and temperature results.
 - Any staff or child absent must be recorded on the attendance sheet.
 - The principal or supervisor will follow up on unplanned absences of staff or children and determine whether it is due to illness. We will make note of any symptoms (e.g. fever, sore throat, cough, etc.)
 - We will be encouraging ill staff and parents/guardians of ill children to talk to their primary health care provider. [Regarding COVID-19: We recommend COVID-19 testing at any assessment centre, and/or call Telehealth at 1-866-797-0000 if it is suspected that they may be positive for this virus.]
 - Non-essential visitors will not be permitted to enter the program space.
 - Staff will monitor attendance records for patterns or trends (e.g. if children and staff of the same cohort is absent at the same time, or over the course of a few days.)
 - Attendance records will be available on-site at all times.

Specifically during COVID-19:

- It is recommended that child care staff and children with symptoms of COVID-19 attend an assessment centre for testing as soon as possible, and to self-isolate at home until their result is available.
- We will have hand sanitizer available in the program room.
- We will have tissue available for the ill child or staff, to support respiratory etiquette.
- Opening windows to increase air circulation in the area will be done.
- We will encourage children older than two years to wear a mask (if tolerated) and they are able to use it properly (e.g. donning and doffing carefully, avoiding touching while on).
- Kodomoen staff supervising the ill child should maintain physical distancing as best as possible, and wear PPE, including surgical mask.

- If the ill child/staff gets tested for COVID-19 and their test result is **negative**, they can return to the centre after being symptom free for 24 hours and they pass the screening.
- We will clean and disinfect the area immediately after the child with symptoms has been sent home.
- Staff and children who were exposed to an individual who **became ill with symptoms** (i.e. suspected COVID-19 case) must continue to be grouped together (i.e. cohorted), and monitored for signs and symptoms of illness:
 - Supervisors must inform parents/guardians of children who were exposed to the ill child, and advise that they should monitor their child for symptoms.
 - Child care staff must not 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 persons.
- Kodomoen staff and children exposed to a **confirmed case of COVID-19** must be excluded from the child care setting for 14 days:
 - 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 as soon as any symptoms develop.
 - If asymptomatic, individuals who have been exposed are also encouraged to get tested any time within 14 days of the potential exposure. They will need to continue to self-isolate for 14 days even if the test is negative.
- Child care staff and children who are being managed by Toronto Public Health (TPH) (e.g. confirmed or probable cases of COVID-19, close contacts of cases) must follow TPH instructions to determine when to return to Kodomoen:
 - Staff must also report to their occupational health and safety department prior to return to work when applicable.
 - Clearance tests are not required for staff or children to return to the child care centre.

Hand Hygiene:

Hand hygiene is an important element of infection control at Kodomoen Childcare Centre. Cleaning thoroughly with soap and water (20 seconds) is ideal.

Hands are cleaned frequently. At a minimum, practice hand hygiene:

- before eating lunch or snacks
- before and after food preparation
- after using the toilet
- after sneezing or coughing
- after wiping a child's nose (or a child wiping their own nose)
- before and after using shared computers, sports equipment, toys, etc.
- upon entering and leaving the property

Where alcohol-based sanitizers (70-90% concentration) are provided, the following precautions are followed:

- Hand sanitizing is used when hands are not visibly soiled. (When visibly soiled, hand washing with soap and running water must be performed.)
- dispensing should occur only under the direct supervision of staff
- the sanitizer product should be kept in a secure location; exposure to open flames are avoided during and immediately after application.

During any outbreak or pandemic, hand hygiene is to be reinforced and practiced by staff, children, parents or alternates, and visitors. It is important to avoid touching the face, nose, and mouth with unwashed hands. Additional hand sanitizer will be provided during these times, with staff supervision. Staff will ensure proper hand hygiene is practiced often and when necessary by supervising and/or assisting each child.

*Note: Staff will monitor hand hygiene supplies to ensure adequate amounts of liquid soap, paper towel, hand sanitizer, tissues, and waste receptacles lined with plastic bags.

Glove Use:

Gloves are an excellent barrier device for reducing the risk of communicable diseases, when used properly. At Kodomoen, gloves are used for the appropriate type of activity and single-use only. Hand hygiene is practiced before and after the use of gloves.

Gloves must be promptly discarded into a waste receptacle after each use.

They are to be used when:

- It is anticipated that hand will be in contact with mucus membranes, broken skin, tissue, blood, body fluids, secretions, excretions, or contaminated equipment and environmental surfaces.

During a pandemic or outbreak, gloves must be additionally worn during the diaper routine, as well as during the serving of lunch and snacks.

*Note that the use of gloves does not replace the need for hand hygiene

Respiratory Etiquette:

Respiratory etiquette procedures (covering the mouth with a tissue, or with the inside of one's elbow when coughing or sneezing) should be practiced by staff, children, parents or guardians, and visitors to reduce the opportunity for transmission of any communicable disease. If tissue is used, throw the tissue in the garbage and wash hands.

Persons with respiratory illness should go home as soon as possible.

During a pandemic or outbreak, persons with any symptoms of illness upon screening will not be allowed on premise. Posters with directions on covering a cough, as well as social distancing measures will be posted throughout the building. Staff and children who are able will be asked to wear a mask as much as possible while on premise.

Diapering and Toileting

Parents will need to provide diapers and wipes for their own child. Guidelines outlining the procedure of diapering are posted above the changing tables in the washroom and must be followed.

When a child reaches the approximate age of two, a toilet training plan can be set up with staff.

Diapering Sequence:

Before getting the child:

1. Put diapering supplies within reach.
2. Place fresh paper beside the changing table.
3. Wear disposable gloves for protection (clean hands before and after you use gloves)
During a pandemic or outbreak, a mask must also be worn during the diapering routine.

Changing the diaper:

1. Put the child on the changing table.
2. Remove soiled diaper and put in plastic bag (to be disposed of into garbage).
3. Clean child from front to back with wipes.
4. Put a clean diaper on the child.
5. Remove disposable gloves and discard into waste receptacle.
6. Wash child's hands.
7. Pick child up and get him/her settled without touching anything.

Cleaning Up:

1. Throw the used paper in the garbage.
2. Clean and sanitize the surface of the changing table.
3. Wash hands thoroughly.

Environmental Cleaning and Disinfecting

These procedures are necessary to protect the health of both children and staff at Kodomoen Childcare Centre.

Cleaning Agents:

At Kodomoen, a bleach and water solution is primarily used. (Pre-mixed ammonia-based cleaners/disinfectants will be available for back up.) Bottles will be labeled with the concentration level. For visibly unsoiled hard surfaces, a solution of 1/100 ratio solution will be used. For soiled surfaces, (particularly bodily fluids) the area will be cleaned by 1) Removing excess substances 2) Cleaning area with soap and water 3) Disinfecting the area with bleach solution. Leaving the disinfectant for 1 minute then wiping to dry.

(During a pandemic or outbreak, a solution of 1/50 bleach solution will be used for all visibly unsoiled surfaces, in compliance with the Ministry of Health. [1 tsp or 5ml to every 1 cup or 250ml/ 4 tsp or 29ml for every litre or 1000ml]. Contact time will increase to 2 minutes minimum, then wiping to dry.)

There will be posters providing information regarding directions on how to make bleach solutions, how and when a product is to be used (ex. products used, contact times, proper dispensing and usage), the use of PPEs, how to properly manage blood and body fluids.

Washroom:

Note: Knox Presbyterian Church is primarily responsible for the cleaning of the washrooms the centre uses.

Disinfectants/sanitizing solutions are used, the contents must be changed daily in order to retain their disinfecting quality. Staff will ensure the recommended disinfectants are used for each area.

Faucets, sinks, toilet seats, toilet bowl rim, and toilet handle are disinfected daily along with the garbage can lid. Washroom floors are free of paper towels, toilet paper before child and/or teacher leaves the room.

During an outbreak or pandemic: In addition to the church maintaining and recording their regular cleaning schedule, Kodomoen staff will disinfect above mentioned areas after each cohort has used it. There will be a recording log for the times and areas cleaned.

Activity Rooms:

Surfaces:

Definitions of Surfaces (*IPAC, 2019 revised*)

High-touch surfaces include sinks, faucet taps, toilets, railings, high chairs, feeding tables, plastic bibs, cribs, doorknobs, light switches and electronic devices that are touched frequently by hands. These surfaces require frequent cleaning and disinfection.

Low-touch surfaces include floors, walls and windowsills that are touched less frequently.

Kodomoen is dedicated to keeping a clean and safe environment for the children in our program. Surfaces will be cleaned daily and as needed.

During a pandemic or outbreak:

- High touch surfaces will be cleaned and disinfected twice a day, and when they are visibly dirty.
- Table surfaces will be washed with disinfectant solution prior to and after serving snack and lunch. At other times, the tables should be washed regularly or as needed.
- Chairs should be wiped off if needed after serving food, or as needed.

- Electronic devices, toys, balls, and individual items that may be handled by more than one individual will be cleaned and disinfected.
- Routine cleaning and disinfection schedules for each room/area will be made, which indicates the surfaces, equipment and items to be cleaned and disinfected, the frequencies of cleaning and disinfection, and the person responsible for the task.

Carpets and Mats

Carpets in Kodomoen are professionally cleaned twice a year.

When there are spills or accidents on either the carpet or a mat, it is promptly cleaned and disinfected.

Mats are mopped daily, as we have two areas, one under a table, and one under the sensory table.

During a pandemic or outbreak: Mats (and tiled floor) will be included in the cleaning schedule check list to be completed daily.

Laundry

Due to the nature of the program having part-time and full-time children, parents/guardians are required to provide their children with their own cot sheet and blanket. The laundry items the centre is responsible for are dress up clothes, stuffed animals, and any centre blankets used if children have forgotten their own from home.

If a soft item becomes soiled, it is immediately removed from the activity area and placed in a plastic bag and taken home at the end of the day to be washed.

Parents/guardians are responsible to home their child's bedding at the end of each week, to have it washed before returning the following week.

During a pandemic or outbreak, parents/guardians will be asked to take home their child's bedding daily and provide fresh bedding the following day.

Sleep Equipment and Arrangement

At Kodomoen, we have a scheduled sleep/quiet time after lunch. Children who require sleep and/or is requested by parents to have a nap, will go to the nap room, located across the hall from the main program room. Cots are separated a minimum of 2 feet apart and children are placed in a head to toe pattern, to minimize the spread of respiratory infections.

For children who do not nap or have been requested by parents not to nap will remain in the main program room, where cots are placed 2 feet apart, and children lying down in the same head to toe pattern.

Cots are disinfected daily, by having a bleach solution (1/100 concentration) sprayed on them and left to dry for the following day.

As mentioned above, blanket and sheets are provided by the parents/guardians and laundered at home each week. When not in use, bedding will be placed in a bag and stored in the child's cubby.

During a pandemic or outbreak, cots will be included in the daily cleaning log, to confirm they have been disinfected. Increase the distance between cots/resting mats and cribs. Continue to practice placing children head-to-toe or toe-to-toe.

Sensory Play and Toys

Homemade playdough: Must be thrown out after use. Unused homemade playdough may be stored up to a week. Store bought playdough must be discarded according to manufacturer's recommendations.

GAK must be refrigerated and may be kept for up to two weeks.

Toys must be in good condition and will be inspected regularly to ensure its' safety. Any toy that has been mouthed or contaminated by body fluids must be removed immediately and disinfected before it is used again.

Schedule for washing toys to be done weekly. When washing toys, we use the commercial dish washer in the north kitchen of Knox Presbyterian Church.

Toy bins and shelves are washed and disinfected as needed.

For Sensory Tables: When there is dry material, it will be cleaned and disinfected after they are dumped and before replenishing. When liquid is used, it will be drained, cleaned, and disinfected daily. Children with cuts, sores etc. on their hands should not be permitted to use a communal water/ sensory table.

During a pandemic or outbreak:

- Shared sensory activities will be suspended. Alternatively, children may have an activity that does not require sharing (i.e. personal use playdough).
- All soft toys and items will be removed until further notice. This includes stuffed animals, dolls and puppets, and dress up clothes.
- Each cohort will have their own toy bins to play from. Once they are done, it will be cleaned by a designated person. We will use the dishwasher in the north kitchen of Knox.
- Large items that cannot be machine washed (such as a car ramp) will be wiped down with disinfectant before another cohort uses it.
- Items that cannot be readily cleaned and disinfected (e.g. books) will be batched. Batched items will be rotated on a weekly basis. Items should be taken out of rotation after use, placed in a sealed container and set aside for seven days before reusing.
- Avoid activities that involve shared objects or toys.
- Avoid activities involving singing, shouting, or speaking loudly indoors.

- Logs to track cleaning and disinfecting activities for each room/area will be maintained, including individual/play items and sleeping equipment such as cots and cribs.
- Where possible, a designated person will conduct environmental cleaning and disinfecting throughout the day.

Pest Control

Pests such as mice, rats, and cockroaches “pose a potential health risk as they are known to carry disease and can trigger or worsen asthma symptoms in individuals.” (*Guidance Document: Infections Prevention and Control in Child Care Centres, Toronto Public Health*)

Every effort is made to maintain the centre to be pest free.

Preventative measures include:

- Cleaning all rooms regularly.
- Knox Presbyterian Church is conducting regular inspections of the premises of the building, interior and exterior. They will inform us of any pest problem.
- Ensure clutter and accumulation is reduced inside and outside the facility.
- Ensure food and sensory play materials (i.e. rice) are stored in labelled plastic containers with tight fitting lids.
- Monitoring for pest activity such as live or dead rodents/vermin and/or their faeces
- Notify/consult the church immediately if any pest activity is observed. Record the date and location, as well as details of what was observed.

Occupational Health and Safety

Occupational health and safety involves health and safety aspects in the workplace. The Ministry of Labour (MOL) directly oversees and enforces all matters relating to occupational health and safety. As such, the MOL employs Infection Control Practitioners in order to review requirements and provide consultation on IPAC issues in the workplace. As a result, occasional audits of "Health Care Facilities" are conducted. (Excerpt from *Infection Prevention and Control in Child Care Centres: Requirements and Best Practices, 2019-Revised, p. 26*)

In compliance with occupational health and safety legislation, Kodomoen provides personal protective equipment (PPE) where required. This includes gloves, masks, and eye protection.

Gloves are provided and must be worn when diapering, making bleach solutions, cleaning and disinfecting blood and bodily fluids, and food preparation. They also 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 environmental surfaces.

During a pandemic, such as COVID-19:

Surgical Masks are provided and must be worn, along with eye protection:

- In the screening area, when screening or escorting children to childcare area.
- When cleaning and disinfecting blood or bodily fluid spills if there is a risk of splashing or droplets.
- When caring for a sick child or a child showing symptoms of illness.

Staff must wear a mask (medical or non-medical) or face covering at other times when physical distancing cannot be maintained, including, but not limited to:

- Providing direct care (e.g. feeding, assisting a child with hand hygiene, diapering).
- Consoling an upset child.
- Assisting a child with dressing or changing clothes.

The following information sheets will be posted:

- Bleach Solutions for Disinfecting
- Blood and Bodily Fluid Spills
- Cover Your Cough
- Diaper Routine
- Glove Use
- Hand Sanitizing (child and adult versions available)
- Hand Washing (child and adult versions available)
- Sensory Play Activities
- Toilet Routine
- Toy Cleaning and Disinfecting

Management of Gastrointestinal Outbreaks

Kodomoen Childcare Centre takes the health and well-being of each child very seriously, and strives to maintain a sanitary environment at all times. In the unforeseen event that an outbreak occurs, we would like to outline the policies and procedures to eliminate the outbreak and keep all families and staff safe.

An outbreak is when a greater than expected number of children and child care centre staff have similar symptoms of illness in a given period of time. Child Care Centres must report gastroenteritis outbreaks to the Medical Officer of Health. When an outbreak occurs, TPH will work with CCC staff to support the management of the outbreak.

Outbreaks of gastrointestinal illness in child care centres are most frequently caused by viruses such as noroviruses and rotaviruses; however, bacteria and other pathogens can also cause outbreaks. For additional information about common childhood communicable diseases and outbreaks of gastroenteritis see Section 5. (It will be attached to the end of this policy and procedure.)

Identifying an Outbreak

An **outbreak of gastroenteritis** is defined as: Two or more people (children or staff) with the same symptoms, in the same room within 48 hours. Symptoms include vomiting, diarrhea, abdominal cramps, and fever.

A **case** (child or staff) of gastrointestinal illness can be defined as:

- Two or more episodes of diarrhea within a 24-hour period
- Two or more episodes of vomiting with a 24-hour period
- One or more episodes of diarrhea AND one or more episodes of vomiting within a 24-hour period.

If more children or staff are experiencing gastrointestinal symptoms than expected:

- Review your surveillance data, communication books or daily log
- Identify similar symptoms of illness in children/staff
- Review recent child/staff absenteeism records
- Consider other possible reasons for symptoms (new medications or diet changes)

Report to Toronto Public Health (TPH) if two or more people have the same symptoms on the same day. The Communicable Diseases Surveillance Unit (CDSU) is 416-392-7411.

Provide the following information:

- Date and time of the first case
- Date and time of the most recent case
- Total number of children and staff per room
- Total number of ill children and staff per room
- Signs or complaints of symptoms of illness (i.e. vomiting, diarrhea, fever)
- The control measures that you have implemented to date

TPH can provide us with a form if needed. The TPH staff will review the information and determine whether or not an outbreak must be declared.

If an outbreak is declared, the centre will proceed with the following:

1. Communicate necessary information to the families of the children who attend the centre. TPH will provide a letter outlining the events.
2. Isolate ill children and staff until they are taken home. The isolation area will be in front of the grey bookcase beside the office area.
3. Notify parents or emergency contacts to pick up ill children as soon as possible.
4. Enhanced **cleaning and disinfecting**, as well as **hand hygiene** will be enforced. (Please see their respective sections, under the heading "during a pandemic or outbreak".) During a pandemic, follow any additional instructions outlined in each section of Kodomoen's IPAC policies and procedures.
5. TPH will provide a letter to inform parents/guardians of the outbreak and what actions are necessary should their child become symptomatic. TPH will provide an outbreak notice that should be posted at all entrances to inform parents, guardians and visitors of the outbreak.
6. A line list will be created and maintained for records. A line list is a table that summarizes information about staff and children associated with the outbreak.

- Information on ill children and staff should be collected, reviewed and documented each on the line list.
 - Maintain one line list for staff and one line list for children
 - A case is only listed once during the outbreak
 - New cases are added to the existing line list
 - TPH should be notified when:
 - CCC is aware of positive results from a stool specimen
 - Spread of illness to another group/room
 - Change in symptoms
 - Hospitalization/death of child care attendee/staff
 - Parental concern/difficult questions
 - Media interest
7. Obtain permission from parents to submit specimen samples to the Public Health Laboratory if needed. These samples can be stool samples or food samples. TPH will provide stool sampling kits and instructions to obtain food specimen samples as well. If an organism is identified in one case, TPH will obtain permission from parents prior to releasing information to the centre. If an organism is identified in multiple samples, the centre will be notified but not the case's identity.
8. Contacting ill staff and parents of ill children who were at home during the time before the outbreak was declared, to inform them of the outbreak and to determine if they are experiencing the same signs and symptoms (to add to line list).

Declaring the Outbreak Over:

As outlined by the Guidance Document from TPH, "The end of an outbreak of gastroenteritis must be declared by TPH. Generally, the outbreak is declared over 5 days from the onset of symptoms in the last case. This may change depending on the identification of a specific infection causing the outbreak.." (*Guidance Document: Infection Prevention and Control in child care centres*)

The centre will follow the recommendations and guidelines set out by TPH, and once TPH declares the outbreak over, the centre will communicate this to the families. Further recommendations to prevent future outbreaks will be followed.

Additional Policies and Procedures:

Outdoor Play:

The outdoor play space is an area where children can freely run and ride toy vehicles, as well as experience sensory activities such as sand and water.

All toys in the outdoor space will be in good condition, and cleaned when needed.

Wading Pools: warmer months, wading pools are filled with fresh water and sanitized/disinfected after each use. Children who are not fully toilet trained should wear diapers designed for swimming. Wading pools are stored inside the shed, in such a way that they don't collect rain water (to prevent mosquitoes, etc.). Child care staff will be present at all times beside the pool for supervision.

During a pandemic or outbreak: Shared outdoor sensory activities will be suspended. All toys such as balls and pylons will be disinfected after use by each cohort.

Assigning Staff and Children into Cohorts:

For the development, health and safety of each child, smaller groups (cohort) will be maintained for a part of the day. Groups will be determined according to age and developmental stage, by discretion of the staff. Two staff (one qualified RECE) will accompany each group. There will be no more than 12 children in one group.

During a pandemic such as COVID-19, Kodomoen staff and children will be assigned to designated cohorts or groups.

- Cohorts will be rotating from the main program room to outdoor playground by using the south staircase and/or elevator, and the playground entrance, which will be our designated entrance. Kodomoen families are not permitted to use other entrances at this time.
- The maximum cohort size for each room will be no more than 15 children if available space permits physical distancing. Staff is not counted in the cohort.
- Programming will be planned in a manner that prevents cohorts from mixing throughout the day and over the course of the child care program/session.

Immunization

Diphtheria, Tetanus, Polio, Measles, Mumps and Rubella (German Measles) are six serious childhood diseases. All enrolled children and staff (employees) must be immunized against these diseases unless they are legally exempt.

Below is a vaccination schedule for **children**:

Ontario's Publicly Funded Immunization Schedule

Vaccine	Diphtheria	Tetanus	Pertussis	Polio	Haemophilus B (Hib)	Pneumococcal-C-13	Rotavirus	Measles	Mumps	Rubella	Varicella (Chickenpox)	Meningococcal-C	Hepatitis B	Human papillomavirus (HPV)	Influenza
2 months	✓	✓	✓	✓	✓	✓	✓								
4 months	✓	✓	✓	✓	✓	✓	✓								
6 months	✓	✓	✓	✓			✓								
1 year					✓		✓	✓	✓		✓				
15 months										✓					
18 months	✓	✓	✓	✓	✓										
4-6 years	✓	✓	✓	✓			✓	✓	✓	✓					
Grade 7											✓	✓	✓		
14-16 years	✓	✓	✓												
Every autumn															✓

Boxes filled with the same colour are given as one needle.

The yellow record of immunization must be shown to the Supervisor/Director at the time of registration. It will be photocopied and kept on file. It is the parent's responsibility to inform staff when another immunization has been received.

Parents who cannot locate their child's immunization record, can check with their health care provider. For foreign immunization records, contact Toronto Public Health's – Immunization Centre at 416-392-1250 for free translation.

Staff are required to be vaccinated according to the recommendation made by the local medical officer of health (under Section 57 (1), O. Reg. 137/2015). Toronto's Medical Officer of Health's vaccine recommendations for staff of child care centres are listed below.

Kodomoen will collect and maintain the information on file. A form will be available to facilitate the collection of immunization information. Vaccination is not a requirement for students and volunteers, however, it is highly recommended for their personal protection.

Vaccine to Protect Against Diseases	Recommendations for Staff and Documentation Required *
<p>Hepatitis B vaccine</p> <p>Persons with hepatitis B may not show symptoms but can spread the virus through body fluids. For personal protection, all staff should be vaccinated.</p>	<p>Documented 2-4 dose series (as a child or adult) or Proof of Immunity <i>Some may have received this vaccine in infancy, or as a combination vaccine for travel – e.g., Twinrix®</i></p>
<p>Measles, Mumps, Rubella (MMR) vaccine</p> <p>Measles is very contagious and can spread through the air even after the infectious person has left the room.</p>	<p>Documented 2 doses or Proof of immunity (if born in 1969 or earlier or blood tests)</p>
<p>Diphtheria, Tetanus, Pertussis (Tdap) vaccine</p> <p>Tetanus is naturally occurring in the soil. Pertussis, also called the "100 day cough" is very dangerous to young infants.</p>	<p>Documented one dose of Tdap as an adult then Td vaccine booster every 10 years.</p>
<p>Varicella (chickenpox) vaccine</p> <p>Chickenpox can spread through the air, days before the rash is present. It can lead to severe complications.</p>	<p>Documented 2 doses given at least 6 weeks apart or Proof of immunity (self-reported history of chickenpox or a blood test)</p>
<p>Vaccine</p>	<p>Strongly Encouraged for Staff</p>
<p>Seasonal Influenza vaccine</p>	<p>Annual vaccination No documentation required</p>

Staff working with children under 5 years of age are strongly encouraged to receive this vaccine each year.	
---	--

Immunization Exemptions

Vaccinations are strongly recommended, however, parents who choose not to have their child vaccinated may submit an exemption for religious or philosophical reasons. Exemptions must be documented using approved ministry forms. Completed forms are to be kept in the child's or employee's file.

In the event of an outbreak or case of a vaccine preventable disease (e.g., measles), children and staff who are not immunized may be excluded from the child care centre. This is to minimize the risk of spreading the disease.

- Statement of Medical Exemption form, must be completed by a legally qualified medical practitioner.
- Statement of Conscience or Religious Belief Affidavit, must be notarized by a Commissioner of Oaths.

Understanding Risks

The following is an excerpt from the Infection Prevention and Control in Child Care Centres, Requirements and Best Practices:

Contagious diseases still spread in Ontario, though some can be prevented with vaccines. For child care registrants and/or employees who choose to delay or not vaccinate, there are some important responsibilities to consider.

1. Diseases can spread even when others are not showing symptoms.
2. Identify early signs and symptoms of diseases to know when to seek immediate medical assistance.
3. In the event of a contagious disease at the child care centre, the child or staff may need to go home, to prevent the spread of disease.
4. Follow recommended isolation procedures to protect other children, especially infants, young children, pregnant women and staff with poor immune systems.
5. When visiting a doctor, emergency room or medical clinic, let the medical staff know that the person is not vaccinated. This may assist the doctor to consider the possibility of vaccine preventable diseases. Medical clinics may also need to take precautions to prevent the spread of disease to others.
6. For staff and parents who are pregnant, advise they talk to their doctor about the risks and other ways to protect themselves and their baby from vaccine preventable diseases (e.g., whooping cough, congenital rubella).

Turberculosis (TB)

The following is an excerpt from the Infection Prevention and Control in Child Care Centres, Requirements and Best Practices:

TB is an infectious disease caused by TB germs. TB usually attacks the lungs and can affect any part of the body. It causes serious illness but is preventable, treatable, and curable with special antibiotics.

TB transmission

TB is spread from person to person through the air. TB is spread when someone sick with TB of the lungs coughs or sneezes the germs into the air. It is not highly contagious. Close, prolonged or regular contact with someone who is sick with TB disease is needed to spread this disease.

Signs and Symptoms

TB Infection

Most people who breathe in TB germs are able to stop them from growing. The immune system traps the TB germs and keeps them inactive. This is called TB infection. People with TB infection:

- Cannot spread TB germs to others
- Does not feel sick/has no signs and symptoms
- Have a positive skin test (people with weak immune systems may have a negative skin test even though they are infected with TB – speak with your doctor/nurse)
- Can go to work

TB infection can be treated with preventive medication which will reduce the risk of developing TB disease later in life.

TB Disease

TB germs become active when the body's immune system is unable to stop the germs from growing. The active TB germs begin to grow and cause damage to the body. This is called TB disease. TB disease of the lungs and throat can be spread to others. People with TB disease can feel sick with:

- New or worsening cough (lasting longer than 3 weeks)
- Fever/chills/night sweats
- Feeling tired/unexplained weight loss/loss of appetite
- If the TB disease is in a part of the body other than the lungs, the symptoms will depend on where the TB is growing. An example would be a swollen lymph node or joint pain.
- A person with infectious TB disease cannot go to work until a doctor confirms that this person cannot spread TB germs to others. People with TB disease must complete treatment to cure the disease.

TB Screening Recommendations

Toronto Public Health highly recommends that all staff and volunteers provide documentation of TB testing prior to employment. Child care centre staff and volunteers need TB skin testing to protect themselves, other staff, volunteers and children. (Volunteers include those who expect to work regularly during the next year – approximately one half-day per week or more.)

TB Testing for Staff and Volunteers Prior to Employment

If a new employee/volunteer does not know their TB status or has had a negative TB skin test result in the past, a single TB skin test is highly recommended. The skin test should be done anytime **within 6 months before the start of employment**. If the TB skin test is negative – no further testing is needed at this time. (People with serious medical conditions that weaken the immune system, such as HIV or cancer, may have a negative skin test even though they are infected with TB. If you are in this category please speak to your doctor.)

If the TB skin test is positive – a medical examination and chest x-ray is recommended. Sputum may also be collected. **The physician should provide documentation that the individual with a positive TB skin test is free of infectious TB disease before beginning work.**

If a new employee/volunteer has had a documented previous positive skin test, the skin test does not need to be repeated – it will always remain positive. However, a medical examination and chest x-ray within 3 months before starting work is recommended to ensure that child care staff and volunteers do not have TB disease. **The physician should provide documentation that the individual with a previous positive TB skin test is free of TB disease before beginning work.**

A TB skin test can be done by your family physician, a walk-in clinic or at a neighborhood community health centre. For employment purposes, you generally will have to pay for the TB skin test.

Repeat TB Testing

Employees/volunteers are **not** required to have annual or periodic skin tests or chest x-rays for TB. Any employee/volunteer who has a positive TB skin test should be aware of the signs and symptoms of active TB disease. If your skin test is positive and you develop signs and symptoms of active TB (cough > 3 weeks, fever/chills/night sweats, unexplained weight loss/loss of appetite/fatigue) see a doctor immediately. Should this occur, follow-up of the TB case and contacts will be coordinated by Toronto Public Health.

TB Testing for Children

Routine TB testing for children is not recommended.

If you have questions regarding TB, contact TPH's Tuberculosis program at **(416) 338-7600** or e-mail us at targettb@toronto.ca

TB medicines are free when a doctor orders them from Toronto Public Health.

TB is preventable, treatable and curable!

Policies and Procedures Specific to COVID-19:

- Stagger/alternate scheduling including:
 - Drop-off and pick-up times to prevent parents/guardians from gathering or grouping together. Visual markers will be used to indicate the 2m distance.
 - Snack times and lunch/meal times of each cohort.
 - Use of outdoor playgrounds and play spaces (dedicated to the child care) by different cohorts.

COVID-19: Practice Physical Distancing

Although challenging, staff will encourage physical distancing during a pandemic or outbreak.

Especially during COVID-19, the following will be enforced:

- Practice physical distancing (i.e. a two metre/six feet distance) as best as possible between children during activities while still permitting interaction and socializing to occur.
- As per the discretion of staff, physical distancing must not compromise supervision or a child's safety, emotional or psychological well-being.
- Encourage children to greet each other using non-physical gestures (e.g. wave or nod or an "Air Hug", "Air Touch") and to avoid close greetings (e.g. hugs, handshakes).
- 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.
- Limit the number and types of personal items that can be brought into the child care setting, and provide individual cubbies or bins for each child's belongings.
- Personal items must be clearly labelled with the child's name to prevent accidental sharing.
- Plan activities and games that increase spacing between children while promoting social interaction.

COVID-19: Modify Food Safety Practices for Snacks and Meals

During a pandemic or outbreak, Kodomoen will modify meal practices to ensure that there is no self-serving or sharing of food at meal times. We will ensure the following:

- Staff will serve individual portions to the children.
- Utensils must be used to serve food.
- Do not provide shared utensils or items (e.g. serving spoons, condiments).
- Children will not be allowed to prepare nor provide food that will be shared with others.
- No food will be 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 are put into place, such as bagged lunches for children with special dietary restrictions).
- Lunches and snacks that are provided by families under special circumstances: Containers are sent home for washing, there is no sharing of food, and food is packed in a manner that does not require staff to handle it. (Generally it is bento style.)

- Proper hand hygiene is practiced when staff are preparing food, and for all individuals before and after eating. We will be washing hands before meals, and using sanitizer (and wipes where necessary) afterwards.

COVID-19: Communicating with families/guardians and other stakeholders

- Communication will commence with parents during screening upon arrival and departure. We will also be communicating via email regarding updated policies and updated program information and protocols on health and safety measures (e.g. screening practices, physical distancing, staying home if you're sick).
- Use telephone or video conferencing when possible for meetings between child care staff and with parents/guardians.
- Government issued signs will be posted at all entrances instructing participants and their families not to enter if they are sick.
- We will be in communication with Knox Presbyterian Church to discuss logistics surrounding the use of which space and entrances. Kodomoen will be providing Knox with updated IPAC policies and procedures to ensure open communication and transparency, as well as align any gaps or concerns regarding IPAC practices.
- Toronto Public Health will provide further advice about information that should be shared with other staff and parents/guardians in the event there is a case or outbreak of COVID-19 in the setting.

COVID-19: Worker health and safety

- Written measures and procedures for staff safety, including for IPAC is available to all staff.
- The provincial government has general information on [COVID-19 and workplace health and safety](#) on employers' responsibilities and how to protect workers at work.
- Workers can also get information about [health and safety protections](#) at the workplace.
- Additional health and safety guidance for employers of child care centres is available from the Public Services Health & Safety Association website.
- For more information regarding COVID-19, visit our website at www.toronto.ca/COVID19 or call us at 416-338-7600.