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COVID-19: SMDHU Guidance for Emergency Childcare Settings

As child care owners and/or operators, you and your staff play a key role in protecting children from and minimizing the impact of infection and illness. This is especially important at this time as we work to prevent and minimize the spread of the novel COVID-19 virus. The Ministry of Health has developed a [guidance document](#) for Emergency Childcare Centres related to COVID-19. These requirements should be implemented in all emergency childcare settings in the Simcoe Muskoka District Health Unit. Plans must also be in place to respond should any staff, children, or parents/guardians be exposed to COVID-19.

ACTIVE SCREENING

- Parents/guardians will need to check their children’s temperature and ask staff to check their own temperature daily before coming to the childcare setting. This will need to be recorded on the screening form.
- Pick-up and drop-off of children should happen outside the childcare setting unless it is determined that there is a need for the parent/guardian to enter the setting.
- Screening should include questioning the parent/guardian and/or staff member if they have taken any fever-reducing medication in past 24 hours.
- All individuals, including children, parents/guardians and staff must be screened upon arrival using the criteria below. Deny entry to any person who meets the following criteria:
 - Signs or symptoms of respiratory infection, such as runny nose (not from environmental allergies) cough, shortness of breath, sore throat, or fever; OR
 - Signs or symptoms of gastroenteritis, such as vomiting and/or diarrhea; OR
 - Any person in the household of the child or staff member who has respiratory or gastroenteritis symptoms as described above; OR
 - Anyone who have travelled outside of Canada in the last 14 days.

If sick – stay at home.

- **All children and staff who are ill with fever, have cold-like symptoms or vomiting and/or diarrhea need to stay home for 14 days from symptom onset.** Staff and parents/guardians should be encouraged to use the Ministry of Health [online self-assessment tool](#) to determine if their (or their child’s) symptoms may be related to COVID-19.

ISOLATION/EXCLUSION

- Childcare centres must have protocols in place to notify parents/guardians if their child begins to show symptoms of COVID-19 while in childcare, including the need for immediate pick up.
- Children and staff who start to show symptoms of COVID-19 must be promptly separated from others and sent home.

- Where possible, anyone who is providing care to the child should maintain a distance of 2 metres.
 - If a 2-metre distance cannot be maintained from the ill child, staff should put on a surgical/procedure mask and goggles.
 - ❖ If appropriate PPE is not available, staff providing direct care for the ill child will need to be off for 14 days.
- Hand hygiene and respiratory etiquette should be practiced while the child is waiting to be picked up.
- Tissues should be provided to the child for proper respiratory etiquette, with proper disposal of the tissues and proper hand hygiene.
- Thermometers must not be used between children/staff without single-use protective covers or disinfecting between uses.
- Once the child has been removed from classroom, all high touch surfaces and toys will need to be cleaned/disinfected and remaining children in the room should perform hand hygiene.
- Once the child has been picked up, clean and disinfect the room the child was isolated in.
- Notify the SMDHU of a potential case and seek direction regarding what information should be shared with other parents/staff of the centre.

COHORT STAFFING

- Staff assigned to a room should remain in that room for the day.
- Staff should not be covering off lunches or breaks in other classrooms.
- There should be enough staffing to have multiple staff assigned to one room consistently over the day and not need to move to other rooms, particularly in the same day.
- There should be no mixing of rooms when ratios are lower (e.g. before/after work day).
- Food handlers should not be providing care to children, even for breaks/lunches.
- Staff should also maintain physical distancing in staff rooms, offices etc.

ROUTINE PRACTICES

Encouraging hand hygiene

Handwashing with soap and water is still the single most effective way to reduce the spread of illness.

- Make sure you are well-stocked with hand washing supplies at all times (i.e., soap, clean towels, paper towels and, if needed, 60% alcohol-based hand sanitizer).
- Children forget about proper hand washing so practice often and teach them to wash their hands properly in a fun and relaxed way. Everyone – all staff and children should wash their hands more often!

- When sinks for hand washing are not available, you may use alcohol-based hand rubs (ABHR) containing at least 60% alcohol. Know that this is not very effective when a child's hands are quite soiled. Read labels and wash hands with sanitizer the same way you would wash with soap and water.

Respiratory etiquette

Respiratory etiquette in childcare settings includes covering the mouth and nose during coughing or sneezing with a tissue or a flexed elbow, and disposing of used tissues in a plastic-lined waste container, followed by hand hygiene.

The use of masks

Masks in general are not recommended for those without symptoms to protect themselves from respiratory illnesses, including COVID-19. Children and staff who are experiencing symptoms of respiratory illness should stay home from the childcare setting. Surgical masks in childcare settings are not recommended for routine use, as these are not settings where people are typically trained on their use, and there is a potential risk of infection with improper mask use and disposal. In young children in particular, masks can be irritating and may lead to increased touching of the face and eyes.

ENVIRONMENTAL CLEANING & DISINFECTION

We don't yet know how long the virus causing COVID-19 lives on surfaces, but early evidence suggests it can live on objects and surfaces from a few hours to days. Regular cleaning and disinfecting of objects and high-touch surfaces is very important to help to prevent the transmission of viruses from contaminated objects and surfaces.

- Ensure all toys used at the centre are made of material that can be cleaned and disinfected (e.g. avoid plush toys);
- Increase the frequency of cleaning and disinfecting objects, toys and frequently touched surfaces;
- Frequently touched surfaces are most likely to become contaminated, including doorknobs, light switches, toilet handles, and tabletops, and must be disinfected at least twice a day;
- Only using disinfectants that have a Drug Identification Number (DIN).
- Checking expiry dates of products used and always following manufacturer's instructions;
- Cots and cribs should be disinfected after each use.
- Linens must be laundered between children.
- Stay on top of waste management. Empty your garbage containers often.
- Clean high-touch electronic devices (i.e., keyboards, tablets, and smartboards) with 70% alcohol (i.e., alcohol prep wipes) making sure your wipe makes contact with the surface for 1 minute for disinfection.

- Use water, household detergents and Health Canada approved disinfectants as this should be sufficient for cleaning and disinfection in childcare centres.

PROGRAMMING

- Keep enough toys out to encourage individual play.
- Do not use water or sensory tables.
- Offer toys that can be easily cleaned (i.e., no dress-up clothes or stuffed animals).
- Any natural play items used must be NEW every day. Please discard all items during or at end of day.
- Reinforce “no food sharing” policies.

PHYSICAL DISTANCING

Understandably, physical distancing is challenging in a childcare setting.

- Spread children out into different areas.
- Stagger, or alternate, lunchtime and outdoor playtime.
- Incorporate more individual activities or activities that encourage more space between children.
- Do not use community playgrounds; however outdoor play at licensed childcare sites is encouraged in small groups in order to encourage physical distancing.
- Increase the distance between nap mats, if possible. If space is tight, place children head-to-toe or toe-to-toe.

Use ideas that work for your setting

- Avoid close greetings like hugs or handshakes.
- Help children to learn about distancing by creating games. For example, put on some music and have children spread their arms side to side and spin around slowly trying not to touch their friends.
- Set up regular activities outside such as snack time, arts and craft time.
- Set up mini environments within your facility to reduce number of children in a group, for example set up 2 or 3 craft areas for colouring or doing crafts.
- Increase the space between children during activities such as snack and lunch by moving or separating tables and chairs so they are farther apart.
- Make use of all the space in your facility for napping to increase space between children.
- When children want to use the same area or do the same activity, redirect some children to another area.

- Eliminate group food preparation activities such as making a cake and each child taking turns to dump the flour in the mixing bowl.
- Reinforce and remind of the rule of “hands to yourself”.

ITEMS FROM HOME

- Bottles and pacifiers should be brought from home and left at centre with the centre taking responsibility for cleaning and disinfection.
- No books or toys from home should be allowed into the centre at this time.
- Children must not share soothers, bottles, sippy cups, toothbrushes, facecloths, etc. Label these items with the child’s name to discourage accidental sharing.

FOOD SERVICE

- Centres are required to maintain compliance with [Ontario Regulation 493/17 Food Premises](#).
- Reinforce “no food or drink sharing” policies.
- Family-style meal options are not permitted.
- If meals or snacks are provided, ensure each child has their own individual meal or snack.
- Multi-use utensils must be sanitized.

PROVIDE REASSURANCE, GOOD LISTENING AND MAINTAIN ROUTINES

Children hear and take in a lot of the talk that is going on around them, especially as they get older.

- Reassure children about their personal safety and health. Tell children that it is okay to be concerned and there is a lot we can do to stay safe and healthy. Make sure the information is suitable for their age level.
- Let them know they can ask questions. Answer questions honestly but make sure that the information is suitable for their age level.
- Maintain familiar activities and routines, as possible, as it can reinforce the sense of security of children. At the same time, build in physical distancing strategies into your play and activities.

OCCUPATIONAL HEALTH & SAFETY

- Childcare centres must have written measures and procedures for worker safety, including measures and procedures for infection prevention and control. Detailed guidelines for COVID-19 are available on the Ministry of Health COVID-19 website.
- If a childcare worker has symptoms consistent with COVID-19, the childcare worker must remain off work for at least 14 days if no COVID-19 testing is conducted. If COVID-19 testing is done and

is negative, they can return to work 24 hours after their symptoms have resolved. The SMDHU will need to approve the return to work for any childcare worker suspected or confirmed to have COVID-19.

- Childcare workers should report to their Employee Health/Occupational Health and Safety department prior to return to work.
- If the care provider's illness is determined to be work-related: In accordance with the Occupational Health and Safety Act and its regulations, an employer must provide a written notice within four days of being advised that a worker has an occupational illness, including an occupationally-acquired infection, or if a claim has been made to the Workplace Safety and Insurance Board (WSIB) by or on behalf of the worker with respect to an occupational illness, including an occupational infection, to the:
 - Ministry of Labour;
 - Joint health and safety committee (or health and safety representative); and
 - Trade union, if any.
- Any instances of occupationally acquired infection shall be reported to WSIB within 72 hours of receiving notification of said illness.