

	PROGRAM POLICIES	GENERAL SANITARY PRECAUTIONS – COVID 19	SUBJECT	COVID-19
	SANITARY PROCEDURES AND PRACTICES		DATE	January 2022
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POLICY

In addition to routine practices for dealing with blood/body fluids and blood/body fluids by-products, all staff must strictly adhere to sanitary precautions in all aspects of the program.

PROCEDURES

Refer to [Public Health Ontario](#), Health Department Wee Care Manual, Public Health Ontario’s Environmental [Cleaning and Disinfection fact sheet](#), the Public Services Health and Safety Association’s Child Care Centre [Employer Guideline](#), and the [Reopening Tool Kit](#) for information and best practices for cleaning and disinfecting.

Centres will be cleaned thoroughly prior to re-opening and daily on an ongoing basis. In addition, frequently touched surfaces should be cleaned and disinfected at least twice daily as a suggested at a minimum. However, more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soilage. Cleaning and disinfecting should be logged to track and demonstrate cleaning schedules.

Cleaning

- Use detergent and warm water to clean visibly soiled surfaces
- Rinse the surface with clean water (warm to tepid temperature preferred) to ensure detergent is removed
- Let the surface dry

Disinfectant/Sanitizer

The use of an approved disinfecting product from the [List of hard-surface disinfectants and hand sanitizer](#) COVID-19 is required.

Clean and disinfect upon ENTRY to child care (for staff):

- Any hard surfaces such as water bottles, travel mugs, cell phones, lunch containers

Clean and disinfect upon children's ENTRY to child care:

- Any hard surfaces such as water bottles, containers

Disclaimer: This document is a sample template that has been prepared to assist operators in understanding the minimum requirement for Health and Safety policies and practices related to offering child care services in the Region of Durham. The information in this sample template has been reviewed by the Health Department, as the Medical Officer of Health. It is the responsibility of the operator to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates.

Please be advised that this document does not constitute legal advice and should not be relied on as such. The information provided in this document does not impact the Ministry’s authority to enforce the CCEYA and its regulations or the Local Medical Officer of Health’s authority to enforce Health related regulations. Health Department staff will continue to enforce legislation, regulations and Health department requirements based on the facts as they may find them at the time of any inspection or investigation. It is the responsibility of the operator to ensure compliance with all applicable legislation and guidance documents. If the operator requires assistance with respect to the interpretation of the legislation, guidance documents and their application, the operator may wish to consult legal counsel.

Disposable Gloves

Gloves must be worn in the following circumstances and disposed after use:

- Administering first aid
- Cleaning and disinfecting blood and body fluid (e.g. vomitus spills)
- Rinsing wet clothing or linen
- Contact with diarrhea including cleaning and disinfecting contaminated surfaces, diaper changing
- During active screening and in the case of an isolation of an ill child

Medical or N95 Masks and Eye Protection

- All staff and students completing post-secondary placements are required to consistently wear either medical or N95 masks while inside the centre, including in hallways and staff rooms (unless eating -but time with masks off should be limited and physical distancing should be maintained).
- A medical or N95 mask must be worn at all times by anyone who has received their COVID-19 vaccination or flu shot in the past 48 hours and are experiencing what may be post-vaccine symptoms (i.e., mild headache, fatigue, muscle aches, and/or joint pain) that only began after vaccination.
- Medical masks are required to be worn outdoors by all staff and students completing a post-secondary placement if two metres of distance from others cannot be maintained. To protect the longevity of N95 masks, these masks should be restricted to indoor use only.
- Eye protection (i.e., face shields or goggles) is required for all staff and students completing post-secondary placements if they come within two metres of an unmasked individual both indoors and outdoors.
- All children in grades one and above are required to wear a non-medical mask or face covering while inside the centre, including in hallways. It is recommended that children wear three-ply masks when possible. Masks or face coverings may be removed for the purposes of eating, drinking, and sleeping.
- Children are not required to wear masks outdoors.
- Parents/guardians are responsible for providing their children with a mask and should be reminded that their child will require a way to store their mask when not in use.
- All younger children (aged two to SK) are encouraged but not required to wear a non-medical mask or face covering while inside the centre, including in hallways.
- Masks are recommended for children in kindergarten.
- Masks are not recommended for children under the age of two.
- Medical masks should be replaced when they become damp or visibly soiled.
- N95 masks should be replaced when:
 - When it is no longer tolerated or accepted;
 - When the filtering part of a fitted N95 mask is wet;

- When the mask has lost some of its integrity (relaxed elastic, damaged filter); and
- When there were potentially infectious droplets splashing onto the mask.
- Children must be supported to wear masks to the greatest extent possible. [Resources](#) are available that can be shared with parents/guardians on supporting children in wearing masks. Children and families with masking issues can also be supported by discussing, in consultation with the child's healthcare provider, whether other types of face coverings might work for their child.
- Reasonable exceptions to the requirement to wear masks are expected although should be rare in circumstance (e.g., medical conditions). Requirements and exemptions related to masks must be documented. A letter from the parent or health provider may be requested. A [tip sheet](#) on health and safety practices for children who cannot wear masks can be shared with families.
- Staff members with exceptions to wearing a mask would not be admitted into the centre if they have received their COVID-19 vaccination or flu shot in the past 48 hours and are experiencing what may be post-vaccine symptoms, as a medical mask must be worn at all times in that circumstance.

Transportation

- All Individuals are required to wear medical or N95 masks when providing transportation for children.
- Eye protection for drivers should not interfere with the safe operation of vehicles and is intended to protect drivers during close contact, such as during boarding and exiting.
- The use of non-medical masks or face covering for children grades 1 and above will be required on vehicles. It is recommended that children wear three-ply masks when possible. Children below grade 1 should be encouraged to wear masks on transportation.
- Licensees should support accommodations for immunocompromised and otherwise medically vulnerable children, and children with special transportation needs.

Gowns

Gowns must be worn in the following circumstances:

- Cleaning and disinfecting bodily fluids
- While caring for child in isolation

Hand Washing

- Appropriate hand hygiene is one of the most important protective strategies. It is suggested that home care providers and visitors should be trained and able to assist children on appropriate hand hygiene, including the use of alcohol-based hand rub (ABHR), and reinforcing its use.
- It is suggested that ABHR with a minimum 60% alcohol concentration be available (60-90% recommended, ideally at the entry point to each child care room) and/or plain liquid soap in dispensers, sinks and paper towels in dispensers. ABHR is most effective when hands are not visibly soiled. It is recommended that ABHR only be used for children ages two and up, and with adult supervision.

- Proper hand hygiene should be conducted by anyone entering the child care setting and incorporated into the daily schedule at regular intervals during the day, above and beyond what is usually recommended (e.g., before eating food, after using the washroom, etc.)
- Soap and water are preferred as the most effective and safest method for hand hygiene.

Centres will perform and promote frequent and proper hand washing.

Staff must wash their hands with soap and warm water in the following situations:

- Before handling food
- Before and after eating
- Before and after diaper check and change
- Before and after toileting
- Before and after contact with bodily fluids
- After handling toxic materials
- Before and after using gloves
- Before and after touching theirs or someone else's face
- When hands are visibly soiled

Children must wash their hands with warm soapy water:

- Before handling food
- Before and after eating
- Before and after toileting
- Before and after wiping their own nose
- When hands are visibly soiled

Food Provision

- Family style meals are permitted to operate provided that food handlers use adequate food handling and safety practices.
- Children must practice proper hand hygiene before self-service of food during family style meals and snacks. Staff must observe children to ensure that they don't pick up items and set them back.
- Where possible, children should practice physical distancing while eating.
- No outdoor food provided by family outside of the regular meal provision except where required and special precautions for handling and service food are in place.
- Children should neither prepare nor provide food that will be shared with others.

Cots and Cribs

Children will have a cot or crib assigned to them. Cots and cribs will be placed to support physical distancing practices.

- Sheets and blankets must be changed between each user
- Cots and cribs must be cleaned and disinfected weekly if designated to one child
- Sheets and blankets must be changed weekly if designated to one child
- Staff must record all these tasks on the Cleaning Schedule for Linens and Cots

Whole Centre, Toys and Equipment

Staff must ensure that all toys and equipment are in good repair, clean and sanitary. The supervisor or designate must be advised of any concerns regarding toys and equipment.

- All toys used at the centre must be made of materials that can be cleaned and disinfected easily. Avoid absorbent materials like plush toys.
- Activities should be planned to avoid the sharing of objects or toys.
- If sensory materials (e.g., playdough, water, sand, etc.) are offered, emphasis should be placed on hand hygiene before and after the use of materials.
- Standard cleaning protocols will be followed when a child in care is asymptomatic.

Cleaning and disinfection when a child or staff become ill during care

- When a child or staff becomes ill during care, steps must be taken to clean and disinfect all areas and items that the ill person may have been in contact with as soon as possible.
- The isolation room or area is to be cleaned and disinfected immediately after the child has been sent home.
- All toys and equipment must be immediately removed from the room to be cleaned and disinfected. Any items that cannot be cleaned (e.g., books, cardboard puzzles) should be removed and stored in a sealed container for seven days before they can be put back into rotation.
- If possible, remove children from potentially contaminated area until cleaning and disinfection is complete.

Clean and disinfect frequencies for other surfaces and items:

Cleaning and disinfecting routines **must** be increased as the risk of environmental contamination is higher:

- **Tables and countertops:** used for food preparation and food service must be cleaned and sanitized before and after each use
- Children must not share food, feeding utensils, soothers, bottles, sippy cups. Other tables and chairs being used are to be cleaned and disinfected twice daily and more often as needed.
- **Spills** must be cleaned and disinfected immediately
- **Washrooms and Handwash sinks:** One cohort should access the washroom at a time. Public Health recommendation is that washroom areas must be cleaned in between each use, particularly if different cohorts will be using the same washroom. Washrooms should also be cleaned as often as necessary (e.g., when visibly dirty or contaminated with body fluids).
- **Floors:** cleaning and disinfecting must be performed as required (i.e., when spills occur) and throughout the day when rooms are available (i.e., during outdoor play)
- **High-touch surfaces:** any surfaces at your location that has frequent contact with hands (e.g., light switches, shelving, containers, hand rails, door knobs, sinks, toilets, toilet handles) should be cleaned and disinfected at least twice per day at

minimum, but as often as necessary (e.g., when visibly dirty or contaminated with body fluids)

- **Other shared items:** any shared items (e.g., phones, IPADs, IPODs, attendance binders) must be disinfected between users
- All toys must be cleaned and disinfected:
 - weekly when in use by the same cohort.
 - between each cohort's use.
 - daily if in outbreak.
- Mouthed toys must be cleaned and disinfected after every use
- Large equipment and shelving must be cleaned and disinfected every week
- If sensory materials (e.g., playdough, water, sand, etc.) are offered, emphasis should be placed on hand hygiene before and after the use of materials.
- Dramatic play clothes must be laundered after each use
- Floors must be kept clean and dry throughout the day. They must be swept and mopped as necessary by staff.
- Children's cubbies are to be kept neat and checked weekly by staff.
- If outdoor toys and equipment is accessed (e.g., balls, ride-on toys), it is encouraged that items are cleaned and disinfected on a regular basis and when visibly soiled.
- Outdoor play structures (e.g., slides, climbers) do not require cleaning in between cohort use; instead, the focus should be on exceptional hand hygiene before and after outdoor play.
- The Cleaning Schedule for Toys and Equipment must be posted in playrooms.

Daily Cleaning

The [Ministry of Health's process for cleaning surfaces](#) will be followed by all staff.

Centre cleaners will thoroughly clean and disinfect bathrooms, sweep, and mop floors, spot clean glass, vacuum carpets, dust furniture and shelves, empty garbage and disinfect containers daily.