Table of Contents

Introduction .....................................................................................................................................................................1
Hand Hygiene ..................................................................................................................................................................3
Cleaning and Disinfecting ...........................................................................................................................................5
Infection Control Considerations for the Pedagogical Learning Approach ..........................................................6
Diapering and Toileting ...............................................................................................................................................8
Animals in Child Care Centres ..................................................................................................................................9
Monitoring Health/ Illness Tracking ..........................................................................................................................12
What to do if Children are Sick ................................................................................................................................14
Managing Outbreaks ..................................................................................................................................................16

Appendices:

Cleaning and Disinfecting Schedule
Cleaning Spills
Diapering Procedure
Toileting Procedure
Outbreak Signs
Childhood Disease Poster
Reportable Disease List
Hooray for Handwashing
Wash your Hands Poster
Illness Tracking Form
Cloth Diapers: Infection Control Considerations

Leeds, Grenville and Lanark District Health Unit
1-800-660-5853
3466 April 2019
What This Manual is About

Children are particularly susceptible to illnesses for several reasons. They have not been exposed to many common germs, their immune systems are still developing, and let’s be honest, they usually have poor hygiene habits!

Child care centre owners and staff play an important role in protecting children from, and minimizing the impact of, infection and illness. This manual will help you strengthen your child care centre’s infection control program and assist child care staff to:

- Prevent infections from occurring and spreading
- Identify and control illnesses and outbreaks
- Know when to contact the Health Unit about an illness or outbreak
- Communicate with parents about an illness or outbreak

This manual also contains useful forms, schedules and posters to help you implement appropriate infection controls. Please share this manual with all staff and keep it handy for quick reference.

How the Health Unit plays a role:

The Leeds, Grenville and Lanark District Health Unit ensures infection control programs are in place in child care centres. The Infectious Disease team will help you with:

- Infection control inspections to assess the use of appropriate infection prevention and control practices in licensed child care centres
- Food safety inspections (to comply with Ontario Food Premises Regulation 562)
- Developing written child care infection control policies and procedures
- Infection control education materials
- Managing an outbreak and/or emergency situation

Immunization Requirements

Child care staff should ensure that before a child is admitted to a child care centre, the child is immunized according to the Ontario Immunization Schedule.

Staff immunization should also follow the Ontario Immunization Schedule.

Preventing Illnesses

Child care centres need good controls to help reduce the number of infections. A good infection control program is one that everyone follows all the time, all the way. Well-trained and educated child care centre owners, staff and children work together to ensure that a consistent approach becomes normal routine.

This manual provides helpful information to child care staff so they can:

• Create and follow written policies and procedures
• Practice and promote hand hygiene
• Follow routine practices when cleaning blood and body fluids
• Practice proper diapering and toileting
• Maintain a clean centre
• Ensure that immunization for child care staff and children is up to date
• Observe and document child care staff and children for signs of illness, and share concerns and information with parents and the Health Unit

Policies and Procedures

Well written and accurate policies and procedures promote an effective, efficient and consistent approach to infection prevention and control.

The Leeds, Grenville and Lanark District Health Unit requires your child care centre to have policies and procedures in place for:

1. Health Evaluation for signs and symptoms of communicable disease
2. Excluding, re-admitting and cohorting ill children and child care staff
3. Hand washing
4. Reporting communicable diseases and suspected outbreaks to the Health Unit
5. Communicating illnesses and outbreaks to parents or guardians
6. Diapering and toileting
7. Cleaning and disinfecting
8. Managing animals in child care centres

Adapted with permission of Public Health, Region of Peel
Little and big hands pick up germs from anything they touch, and they can spread those germs to objects, surfaces, food and people. Handwashing with soap and water is still the single most effective way to reduce the spread of germs.

**Encouraging hand hygiene**

Teach children how to wash their hands properly in a relaxed and fun way, e.g., sing the ABC’s while washing their hands for a more thorough hand wash. Everyone – owners, staff and children should wash their hands more often when an illness or infection is identified in the centre.

Refer to [Hooray for Handwashing](#) poster.

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**Six steps to proper handwashing**

1. Wet hands with warm running water.
2. Apply a small amount of liquid soap. Antibacterial soap is not required.
3. Rub hands together for at least 15 seconds. Rub palms, backs of hands, between fingers and under nails/creating a lather.
4. Rinse off all soap with running water.
5. Dry hands with a clean, disposable towel.
6. Discard the used towel in the waste container.

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**Children should wash their hands:**

- When they arrive at the centre and before they go home
- Before eating, drinking, using water tables
- After a diaper change, using the toilet
- After playing outside, handling pets, cages or other pet objects
- After sneezing or coughing into hands
- Whenever hands are visibly dirty
- After playing with sand

**Child care staff should wash hands:**

- When they arrive at the centre and before they go home
- Before handling food, preparing bottles, feeding children
- Between handling raw and cooked food – cross contamination is a risk
- Before giving or applying medication or ointment to a child or self
- After changing diapers, assisting a child to use the toilet, using the toilet
- After contact with body fluids (e.g., runny noses, spit, vomit, blood)
- After handling pets, pet cages or other pet objects
- After cleaning, and after removing gloves
- After handling garbage
- Whenever hands are visibly dirty
Refilling hand soap
Hand soap and hand sanitizer containers should never be refilled. Dispose of used containers and use a new one to prevent contamination.

Using disposable gloves
- Disposable gloves do not replace handwashing
- Child care staff must wash their hands before gloves are put on and immediately after gloves are removed
- Child care staff should wear disposable gloves to clean up blood, vomit, urine and stool
- Child care staff should wear disposable gloves when changing diapers

Five steps for putting on and taking off disposable gloves
1. Wash your hands.
2. Put on gloves. Be careful not to tear or puncture the glove.
3. Remove gloves by using a glove-to-glove and skin-to-skin technique. Grasp the outside edge near the wrist and peel away, rolling the glove inside out. Reach under the second glove and peel away.
4. Discard gloves immediately into the garbage.
5. Wash your hands.

Alcohol-based hand rubs
It is not recommended to use alcohol-based hand rubs when hands are visibly soiled or for routine use. However, hand rubs are useful when a sink or running water is not available. Be sure to choose a product that is alcohol-based, with 60-90% alcohol content (keep in mind studies suggest Norovirus requires alcohol content of 70% to be killed). Products that are not alcohol-based will not kill germs. Always have child care staff help children use alcohol-based hand rubs as they are a fire hazard and can be harmful if swallowed by children.

Correct way to clean hands with alcohol-based hand rub
1. Squirt a small amount (1 to 2 full pump or a “loonie” sized amount) onto the palm of one hand.
2. Swirl the fingertips of your other hand into the product on your palm.
3. Switch the product to the palm of your other hand.
4. Swirl the fingertips of your other hand to clean them too.
5. Scrub all surfaces of your hands – wrists, between fingers, backs of hands, thumbs – until your hands are dry at least 15 seconds.

Adapted with permission of Public Health, Region of Peel
Cleaning and Disinfection

Keeping a regular cleaning and disinfecting routine can help your child care facility reduce the spread of infections. It is important to remember that you must clean AND disinfect surfaces to remove germs. The first step is always cleaning and the second step is disinfecting (sanitizing). Refer to the Cleaning and Disinfecting Schedule for the minimum frequency of cleaning items in your child care centre.

**Cleaning:**
- Use soap or detergent with water to remove dirt from surfaces
- Clean from the least dirty area, to the most dirty area

**Disinfectants:**
- Applied to a clean surface in order to kill germs
- Must have drug identification (DIN) number if approved for use in Canada (bleach is the only exception)
- Always follow manufacturer’s instructions. Read the labels for direction on: dilution and mixing, using personal protective equipment (PPE), surfaces appropriate for use, contact time and rinsing requirements
- Check the expiry date. Do not use expired products
- Ensure the correct concentration of disinfectant before using. Mix fresh bleach daily and use chlorine test strips to check the concentration
- Mouthed toys should be rinsed thoroughly with water following disinfection

**Cleaning and disinfecting wipes:**
- Follow manufacturer’s instructions
- Not recommended as a routine cleaning/disinfecting tool
- Use for items that cannot be soaked and for small items that must be disinfected between uses
- Ensure the surfaces or items remain wet for the required contact time (additional wipes may be needed)
- Wipes must be kept wet and should be discarded if they become dry

**Bleach solutions:**
- Use undiluted household bleach (5.25% or ~50,000ppm) when making the solutions in the chart below
- When making bleach solutions, add bleach to water - do not add water to bleach
- Do not add any other products or chemicals to bleach and water solution
- Store bleach solutions in closed, properly labelled containers, away from heat and light

*Adapted with the permission of York Region Community and Health Services*
<table>
<thead>
<tr>
<th>Low-Level Disinfection</th>
<th>High-Level Disinfection</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>When to Use</strong></td>
<td></td>
</tr>
<tr>
<td>Disinfecting toys, diapering surfaces and high touch surfaces</td>
<td>Disinfecting blood and body fluid spills</td>
</tr>
<tr>
<td><strong>Solution strength</strong></td>
<td></td>
</tr>
<tr>
<td>2 teaspoons of bleach to 4 cups of water or 10ml of bleach to 1 L of water</td>
<td>½ cup of bleach to 4 cups of water or 125 ml of bleach to 1 L of water</td>
</tr>
<tr>
<td><strong>Contact time</strong></td>
<td></td>
</tr>
<tr>
<td>2 minutes</td>
<td>2 minutes</td>
</tr>
</tbody>
</table>

Reference: Well Beings A Guide to Child Care, Canadian Paediatric Society, 3rd edition

See the Infection Control Considerations for the Pedagogical Learning Approach fact sheet for more information on group sensory play, using natural items and using absorbent/plush items or item’s brought in from a child’s/staff’s home.
Infection Control Considerations for the Pedagogical Learning Approach

The Leeds, Grenville and Lanark District Health Unit routinely inspects licensed child care facilities for infection prevention and control (IPAC) measures to ensure basic principles are followed in preventing the spread of germs. Recently, a philosophical shift has occurred in teaching practices to support and enhance children’s early learning in many more ways. The Leeds, Grenville and Lanark District Health Unit supports these new practices, while focusing on maintaining infection prevention and control practice.

The following IPAC measures attempt to provide the flexibility to introduce various types of items/materials and types of play, etc. into the child care facility. This document is specific to the changes in practices to absorbent/plush items, group sensory play, and natural items and item’s brought in from a child’s/staff’s home. It is important to remember that situations in child care are often complex and may need to be assessed on an individual basis by the area Public Health Inspector.

Children may have access to and share absorbent/plush items as long as:
- the facility is not in outbreak
- items are removed immediately to be laundered/cleaned/discarded if contaminated with blood or body fluids e.g., mouthed, drooled on, sneezed/coughed on
- absorbent/plush items are routinely laundered/cleaned/discarded weekly, at a minimum

Children may participate in group sensory play as long as:
- the facility is not in outbreak
- hand hygiene is practiced before and after
- items are removed immediately to be cleaned/discarded if contaminated with blood or body fluids e.g., mouthed, drooled on, sneezed/coughed on
- sensory items are routinely cleaned /discarded weekly (exceptions may apply), at a minimum

Natural items (e.g., pine cones, bird’s nests, sticks, stones, leaves, honeycomb) may be brought in as long as:
- the facility is not in outbreak
- items are not visibly contaminated and washable items are cleaned prior to use
- non-washable items are enclosed in a case, plastic jar, etc. if they are suspected of being contaminated e.g., bird’s nest
- items from outdoor areas should be obtained away from garbage/waste, animal feces, bird droppings, chemical contamination, etc.
- items are removed immediately to be discarded/cleaned if contaminated with blood or body fluids e.g., mouthed, drooled on, sneezed/coughed on
- natural items are routinely discarded/cleaned weekly, at a minimum

Items may be brought in from child’s/staff’s home for shared use as long as:
- the items are cleaned/laundered by the child care staff prior to use as per the facility’s policy/procedures

Important notes:
1. Sufficient staff supervision is required to ensure that contaminated items are not shared and are immediately removed when the child is finished with the item.
2. Ensure that safety risks have been considered for all items used by the children such as exposure to allergens, choking hazard risks, poisonous seeds, etc. Staff are expected to conduct a risk assessment to determine if items are appropriate and safe.

Adapted and reproduced with permission from Durham Region Health Department
Diapering and Toileting

Child care staff need to be very careful when diapering or helping a child use the toilet. The diapering area and toilet need to be kept clean and the proper equipment and materials should be on hand and readily accessible.

**Diapering location and surface**
- Separate diapering area from feeding and food preparation areas
- Use a diapering surface that is smooth, non-absorbent and easy to clean
- Do not rinse or wash cloth diapers or soiled clothing. Refer to the infection control considerations for cloth diapers resource for recommendations on cloth diaper use
- Discard disposable diapers using a foot activated garbage receptacle with a disposable liner
- Post and follow appropriate diapering procedure

**Creams, ointments and wipes**
- Prevent contamination of creams and ointments. Use squirt or squeeze containers, a new single use applicator or a new pair of disposable gloves when applying creams and ointments. Use cream/ointment only if requested by the parents, and only for the designated child
- Label creams, ointments and wipes for each child

**Hand sink**
- Provide a designated hand sink with hot and cold running water adjacent to diapering table
- Provide liquid soap and paper towels in dispensers

**Cleaners and disinfectants**
- Provide appropriate cleaner and disinfectant at or near the diapering table. Label the spray bottle with the disinfectant name. Ensure disinfectant is accessible, but stored away from children's reach

Refer to diapering procedure and toileting procedure.

*Adapted with permission of Public Health, Region of Peel*
Animals in Child Care Centres

Animals can offer a valuable learning experience but can also expose children and staff to infections, injuries and be a source of allergens. Children are vulnerable to infections from animals due to their immune systems not being fully mature.

**Animals Not Recommended for ANY Child Care Centre**

- Stray animals with unknown health and vaccination history (e.g. stray dogs/cats)
- Ill animals or animals under medical treatment
- Young animals (e.g. puppies and kittens less than 1 year old)
- Animals that have been fed raw or dehydrated (but otherwise raw) foods, chews, or treats of animal origin within the past 90 days
- Animals from shelters/pounds unless they have been in a stable home for at least 6 months
- Birthing or pregnant animals
- Inherently dangerous animals (e.g. lynx, lions, bears, cougars, tigers, etc.)
- Predatory birds (e.g. hawks, eagles, owls, etc.)
- Venomous or toxin- producing animals (e.g. venomous or toxin-producing spiders, insects, reptiles and amphibians)
- Aggressive animals (e.g. animals that have demonstrated aggressive behavior in the past)
- Animals in heat
- Exotic animals (e.g. hedgehogs, chinchillas, etc.) and non-human primates (e.g. monkeys, lemurs, etc.)
- Wild animals (e.g. squirrels, chipmunks)
- Rabies reservoir species (e.g. bats, skunks, raccoons, foxes)

**Animals Not Recommended for Facilities with Children <5 years of age**

- All animals listed above
- Reptiles (e.g. turtles, snakes and lizards such as bearded dragons and geckos)
- Amphibians (e.g. frogs, toads, salamanders)
- Live poultry (e.g. chicks, ducklings, goslings), including hatchery equipment
- Ferrets
- Farm animals (e.g. calves, goats, sheep)

**Protecting Children and Staff from Infection**

- Children should only handle animals under close adult supervision
- Wash hands before and after handling or feeding animals
- Keep animals inside their enclosures and never allow animals to run at large
- Animals must not be located in food preparation, storage, eating or sleeping areas
- Remove sick animals from the centre immediately
- Report all animal bites/scratches to the Health Unit immediately
Cleaning and Disinfecting Animal Enclosures

1. Assemble all required cleaning and disinfecting supplies.
2. Put on gloves and protective outer garments (e.g. apron)
3. Remove animal to a temporary holding area.
4. Dispose of food, droppings, bedding material, etc. in a garbage bag.
5. Clean animal enclosures, food containers, toys, etc. with soap and water, using a scrub brush to remove dirt. Rinse thoroughly with fresh water. Do not use food preparation sinks for cleaning animal enclosures or related items.
6. Disinfect items with appropriate product, following manufacturer’s instructions.
7. Rinse items thoroughly, if needed, to remove chemical residue and dry.
8. Use fresh bedding material, food, water etc., when preparing the enclosure and before returning the animal to its enclosure.
9. Clean and disinfect areas surrounding the enclosure and the animal’s temporary holding area.
10. Cleaning sinks must also be cleaned and disinfected after use.
11. Discard single-use gloves or clean and disinfect reusable rubber gloves.
12. Wash hands.

Adapted with permission from Durham Region, information from the Guidance Document for the Management of Animals in Child Care Centres, 2018
Animals in Child Care Centres Supporting Resource

Appropriate Child Interaction with Animals (Box 8*)

• Always treat animals gently and calmly. Never hurt, tease, frighten, surprise or corner an animal
• Avoid chasing and kissing animals
• Never disturb an animal that is eating or sleeping
• Always perform hand hygiene (wash hands or used alcohol based hand rub) after touching animals, their food bowls, toys, bedding, etc.
• Avoid touching animal food and feces
• Avoid touching their face after animal contact until hand hygiene is performed

Animal Food and Treats (Box 12*)

• For resident animals, food and treats should be stored off the floor, in a latched cupboard and kept away from where human food is stored, prepared, served or consumed
• Animal food and treats should always be inaccessible to children
• Children should not feed animals directly from their hands
• Do not use human food items (e.g. ice cream cones) to feed animals
• Raw pet food should not be served to resident animals and visiting animals should not have received raw pet food in the preceding 90 days before a visit to a child care centre
• Animal food and treats may contain allergens (e.g. peanuts). Operators of child care centres should follow their anaphylactic policy (as per Ontario Regulation 137/15 under the CCEYA) that includes a strategy to reduce the risk of exposure to anaphylaxis-causing agents potentially present in animal food and treats
• Hand hygiene should be performed after handling animal food and treats

Visiting Animals (Box 16*)

Some municipalities may have by-laws restricting exotic animal ownership. Child care centre operators should be aware of any by-laws restricting animals in their municipality.

Record-keeping for visiting animals:

• Date of the visit
• Name of the animal(s) owner
• Owner contact information
• Animal(s) name and species
• Proof of animal health documentation, including up-to-date rabies vaccination (see Appendix 2.B Veterinary Care Statement for Animals Visiting Child Care Centres)
• Description of the group of children/room(s) visited
• Any additional guests in attendance
It is recommended that these records are kept on-site for one year and made available to public health unit staff or parents/guardians who may request to see them.

**Resident Animal Care Plan (Box 17*) Should Include:**

- Staff members responsible for the resident animal including times when the child care centre is closed
- The animal’s daily requirements, including feeding and exercise
- Daily health screening of the animal for signs of infection/injury
- Animal bathing and cleaning requirements
- Cage/tank cleaning/disinfection schedule and procedure
- Contact number for the resident animal’s veterinarian
- Annual completion of Veterinary Care Statement for Resident Animals in Child Care Centres (see [Appendix 2.A](#))

*Refer to Guidance Document for the Management of Animals in Child Care Centres, 2018, Ministry of Health and Long-Term Care

*Used with permission from Durham Region*
Monitoring Health/ Illness Tracking

How Do I Know When There Is An Illness?
Child care staff play an important role in identifying early signs and symptoms of illness in children and staff. You should observe every child for signs or symptoms of illness at the start of every day and throughout the day.

Seven signs and symptoms of illness to look for:

1. Unusual behaviour
2. Runny nose, cough or difficulty breathing
3. Vomiting
4. Diarrhea
5. Change in skin colour
6. Rash
7. Fever (Temperature above 37.5°C)

Child care staff need to document all symptoms and signs of illness. Use the Illness Tracking Form to record all symptoms accurately on one piece of paper. Keep copies of this form available for your use. This will help capture and maintain information as well as keep an eye on trends in illness.

Five steps for illness tracking

1. Keep one Illness Tracking Form in every classroom.
2. Use the form to record any symptoms of illness and any absences due to illness.
3. Write the date and child’s name, and check off the applicable symptoms on the form. Indicate if the child is absent or has been sent home.
4. If the child is absent or sent home, record the date when the child returns to the centre.
5. Record the child’s name only once for each occurrence of illness. Make sure all required dates, symptoms, other observations and notes are completed.

Staff should consider:
If you suspect an outbreak (see outbreak definitions on page 16) or if a child has one of the communicable disease listed on the Reportable Disease list, immediately report it to the Health Unit.

Parents can help
Child care staff and parents working in partnership can help prevent illness and outbreaks. Child care staff should communicate with parents to obtain information on the child’s health and well-being.

Parents need to:

- Inform the centre when the child is sick
- Describe the symptoms the child is experiencing
- Keep the child away from the centre when they are sick. If child is not well enough to participate comfortably in all activities, the child should not be at the centre and must be excluded

Adapted with permission of Public Health, Region of Peel
What Should I Do If Children Are Sick?

Child care centres have certain responsibilities when it comes to sick children. According to the Child Care and Early Years Act, child care centres are required to:

- Separate sick children from well children
- Note symptoms of illness in the child’s record
- Contact a parent or guardian to take the sick child home

The Health Unit requires that all child care centers have and follow written policies and procedures on:

- Excluding, re-admitting and cohorting sick children and child care staff
- Reporting communicable diseases and suspected outbreaks to the Health Unit

Exclude a child who has any of the following symptoms:

- Fever AND a combination of other symptoms (e.g., nausea, vomiting)
- Fever AND a body rash
- Diarrhea – two or more liquid stools or a change in the normal pattern of bowel movement (e.g., runny, watery or bloody stools)
- Vomiting – two or more times in the last 24 hours
- Eye discharge – watery or yellowish
- Severe cough
- Yellowish skin or eyes (jaundice)
- Irritability, continuous crying or requires more attention than can be provided

Seven steps for exclusion

1. Separate sick children from well children. Symptomatic children should be placed in the designated isolation area (e.g., sick room).
2. Keep sick children comfortable by providing separate cots and toys. Clean and disinfect cots and toys after use. Do not allow sick children to participate in group water or sensory play activities.
3. If possible, designate specific staff to care for sick children. Ideally, child care staff should not care for sick and well children at the same time.
4. Contact parents to pick up sick children and remind them of the exclusion policy.
5. Follow policies and procedures for exclusion periods. Refer to the Childhood Diseases poster.
6. Update the Illness Tracking Form.
7. If necessary, prepare and provide fact sheets or letters to parents.

Call the Leeds, Grenville and Lanark District Health Unit 1-800-660-5853 to report a communicable disease or an outbreak.
DO NOT exclude a child who has the following illnesses or conditions and is feeling well enough to participate in regular activities:

- Chickenpox (unless child has a fever)
- Cold Sores (unless child is drooling and has extensive mouth lesions)
- Common Cold
- Diaper rash/Thrush (Candida)
- Ear infections
- Hand, Foot and Mouth disease
- Pinworm
- Ringworm

What to do if a child is sick, but does not need to be excluded:

If a child has an illness, but is well enough to stay in the child care facility or does not have symptoms or an illness that requires exclusion, child care staff must ensure:

- Child washes hands more frequently
- Child care staff wash hands more frequently
- Child does not participate in group water play
- Child care staff clean and disinfect play areas and toys more often

Exclusion for Ill Staff

Ill staff should not be at work. In fact, exclusion guidelines for ill staff are the same as those for sick children. The child care centre should provide staff with the policy for sick employees, which should include when they are expected to stay at home. As well, staff absences and exclusions should be recorded according to the centre’s policy.

When staff are well enough to work during an illness, they:

- Must wash hands more frequently
- Should be assigned duties that require less contact with children

Adapted with permission of Public Health, Region of Peel
What Should I Do When There Is An Outbreak?

Definition of an outbreak

An outbreak is when a greater than expected number of children and child care staff at the facility have similar symptoms (e.g., fever, diarrhea, vomiting, rash, respiratory symptoms) in a given period of time.

Some diseases (e.g., measles) should be treated like an outbreak even if there is only one case. If you are unsure whether one case of an illness is an outbreak, call the health unit and ask to speak to a nurse or public health inspector on the Infectious Disease team.

Early awareness and action is critical in managing an outbreak at your child care centre. The Illness Tracking Form will help you track and monitor illness in your centre.

Gastrointestinal Outbreaks

Gastrointestinal and respiratory outbreaks are the most common types of outbreaks that occur in child care centres.

Child care centres must report to the Health Unit when they have three or more children or staff with gastrointestinal symptoms within a 48 hour period. These symptoms include; diarrhea, vomiting, nausea, stomach cramps, headache or weakness. Germs that can cause gastroenteritis are Norovirus, Rotavirus, Salmonella, E. coli 0157 and others.

Respiratory Outbreaks

Child care centres must report to the health unit when greater than 10% of children or staff are experiencing respiratory symptoms within a 48 hour period. These symptoms include; fever, headache, cough, sore throat, runny nose, sore muscles and tiredness. Germs that can cause respiratory illness include rhinovirus (common cold), influenza, RSV and others.
Ten steps to managing outbreaks

1. Call the Health Unit (during office hours call 613 345 5685 or 613 283 2740, outside of office hours call 1-800 660-5853 and leave a message on answering machine) who will provide advice and help you control the outbreak and fax the Illness Tracking Form to 613-345-5777 or 613-283-1679.

2. Separate sick children and staff at the child care centre from well children and staff. If possible, have a designated staff person care for only ill children, and other staff care for only well children.

3. Instruct parents or guardians to take sick children home and to a Health Care Provider if necessary. Remind everyone, including parents, of the exclusion policy at the child care centre.

4. In an outbreak of gastroenteritis, save 200g of leftover food for analysis, as it may be a source of illness. Keep food samples in the refrigerator. Your Public Health Inspector can arrange to have the food tested.

5. Give frequent handwashing reminders to all children and child care staff.

6. Clean and disinfect toys and environmental surfaces thoroughly and more often, paying special attention to infant and toddler areas.
   - Notify cleaning staff that extra cleaning is necessary
   - Use a disinfectant effective against common outbreak pathogens (Norovirus, rotavirus, etc.)
   - Refer to Cleaning and Disinfection page for instructions on preparing bleach solutions

7. Stop all group water and group sensory play for the duration of the outbreak.

8. Post the Red Outbreak Sign or a similar notification at the front entrance of the child care centre to inform parents and visitors. Prepare and provide fact sheets or letters to parents.

9. The Leeds, Grenville and Lanark District Health Unit will provide stool kits to parents if necessary during a gastrointestinal outbreak.

10. Regular communication is recommended for discussing the line listing, changes in symptoms, lab results, the need for on-site meetings, etc.

Declaring an outbreak over

A nurse or public health inspector on the Infectious Disease team will consult with you to determine if your outbreak can be declared over.

Leeds, Grenville and Lanark District Health Unit
1-800-660-5853

Adapted with permission of Public Health, Region of Peel
# Child Care Centre Cleaning and Disinfecting Schedule

Listed below is the minimum frequency for cleaning surfaces in your facility:

<table>
<thead>
<tr>
<th>Play Areas/Surfaces</th>
<th>What to Do</th>
<th>After Each Use</th>
<th>Daily</th>
<th>Weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mouthed toys</td>
<td>Clean and disinfect</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infant and Toddler Toys</td>
<td>Clean and disinfect</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preschool toys</td>
<td>Clean and disinfect</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Items made from absorbent materials (e.g., dress up clothes and plush toys)*</td>
<td>Launder</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water play toys and water play tables</td>
<td>Clean and disinfect</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play dough</td>
<td>Discard</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dry food used in sensory play</td>
<td>Discard</td>
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<tr>
<td>Sand used in sensory play</td>
<td>Discard</td>
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<tr>
<td>Sensory play tables*</td>
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<tr>
<td>Activity table tops/high chairs</td>
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<tr>
<td>Carpets</td>
<td>Vacuum</td>
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<tr>
<td>Floors</td>
<td>Clean and disinfect</td>
<td></td>
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<tr>
<td>Shelves</td>
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<td></td>
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</tr>
<tr>
<td>Fabrics</td>
<td>Launder</td>
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<tr>
<th>Sleep Areas**</th>
<th>What to Do</th>
<th>After Each Use</th>
<th>Daily</th>
<th>Weekly</th>
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<tr>
<td>Crib rails</td>
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<tr>
<td>Crib mattresses</td>
<td>Clean and disinfect</td>
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<tr>
<td>Cots</td>
<td>Clean and disinfect</td>
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<tr>
<td>Bedding/linens</td>
<td>Launder</td>
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<tr>
<td>Vinyl mats</td>
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<th>Washrooms</th>
<th>What to Do</th>
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<td>Potty chairs</td>
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<td>Toilet seat inserts</td>
<td>Clean and disinfect</td>
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<td>Toilets</td>
<td>Clean and disinfect</td>
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<td>Handwashing sinks</td>
<td>Clean and disinfect</td>
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<td>Garbage containers</td>
<td>Clean and disinfect</td>
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<tr>
<td>Diaper Change Pads</td>
<td>Clean and disinfect</td>
<td>x</td>
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*See the [Infection Control Considerations for the Pedagogical Learning Approach Fact Sheet](#) for more tips on how to prevent illness when using these items

** If cots are not designated to individual children, cleaning and disinfection must be done after each use

Adapted with the permission of York Region Community and Health Services.

For more information, please call the Health ACTION Line at 1-800-660-5853 or visit our website at www.healthunit.org
Cleaning-Up Spills

Protect your eyes, nose and mouth from blood or body fluids when cleaning up spills. Wear gloves, as well as a face mask and eye protection if you think you might get splashed.

1. Isolate the area and gather supplies.
2. Put on disposable rubber gloves.
3. Soak up the spill with paper towels and throw in a plastic-lined garbage container.
4. Wash the area with detergent and water using disposable towels and allow it to dry. Disinfect the area with a strong (1:10) bleach solution. Mix ½ cup of bleach into 4 cups of water and allow it to sit on the area for 2 minutes.
5. Wipe up the area again with water and paper towel.
6. Safely discard all paper towels and gloves in garbage.
7. Wash hands with soap and water.

For more information, call the Health Action Line 1-800-660-5853 or visit www.healthunit.org
Diapering

1. Collect supplies.
2. Wash your hands.
4. Remove diaper, fold it closed and put it out of the child's reach.
5. Use disposable wipes to wipe child from front to back. Apply cream/ointment if requested by the parent*.
6. Discard the dirty diaper and wipes into plastic lined garbage container **.
7. Remove gloves and wash hands (use hand sanitizer if hands aren't soiled).
8. Diaper and dress the child.
9. Wash your hands and help the child wash theirs too. Move child to a safe place.
10. Clean and disinfect the diaper changing surface.
11. Wash your hands again.

Safety reminder: Keep one hand on child at all times
*Use cream/ointment only if requested by the parents, and only for the designated child. Skin care products should be labelled with the child’s name and dispensed using a disposable applicator.
** See Preventing and Managing Illnesses in Child Care Centres manual for information on managing cloth diapers and soiled clothing.
Toileting Quick Reference

1. Gather supplies.
2. Wash your hands, then put on disposable gloves.
3. Assist child to remove diaper or pull-up and help them onto the toilet or potty.
4. Wipe child from front to back and teach child to do the same.
5. Flush toilet. Remove gloves and wash hands (or use hand sanitizer if hands aren’t visibly soiled).
6. Diaper and dress the child.
7. Wash your hands and help child do the same.
8. Return child to safe area.
9. Clean and disinfect toilet daily and as required, and potty after each use. To empty potty:
   - Put on gloves
   - Empty contents into the toilet carefully, to avoid splashing
   - Clean potty with soapy water and empty into toilet, flush toilet
   - Disinfect potty using appropriate contact time (see chart)
   - Remove gloves and wash your hands
   - Let potty air dry
   - Store in clean area

For more information, call 1-800-660-5853 or visit www.healthunit.org

3489 Dec 2017 Adapted and reproduced with permission of Durham Health and Public Health, Region of Peel
Be Aware

We are currently experiencing:

- Abdominal Pain
- Chills
- Coughing
- Diarrhea
- Fever
- Headache
- Nausea
- Skin Rash
- Sneezing
- Vomiting
- __________
- __________

Wash your hands frequently
Report symptoms of your child’s illness to staff
Keep sick children at home

Do your part!
STOP the spread of illness
KEEP OUR CENTRE HEALTHY

Wash your hands  Cover your cough and sneeze

Keep sick children at home

Do your part! STOP the spread of illness
We Have An OUTBREAK

We are currently experiencing:

- Abdominal Pain
- Chills
- Coughing
- Diarrhea
- Fever
- Headache
- Nausea
- Skin Rash
- Sneezing
- Vomiting
- __________
- __________

Wash your hands frequently
Report symptoms of your child’s illness to staff
Keep sick children at home

Do your part!
STOP the spread of illness
**Designated Reportable Diseases** - Click here for the [Reportable Disease Form](http://www.health.gov.on.ca) or call the Health Action Line 1-800-660-5853

### Childhood Diseases

#### How it Spreads

- **Chickenpox (varicella virus)**: This disease is vaccine preventable. *Fact Sheet*
  - contact with blister fluid or saliva of an infected person
  - virus is spread through the air
  - pregnant woman can pass it on to her baby before birth

- **Diarrhea and Vomiting (Gastroenteritis)** (staphylococcal or streptococcal): This disease is vaccine preventable. *Fact Sheet*
  - germs are found in vomit and stool (poop) of an infected person and can spread to another person’s mouth usually through unclean hands
  - vomiting, diarrhea (unformed or watery stool), fever, loss of appetite, stomach pain, fatigue, headache

- **Ear Infection (Otitis Media)** (bacterial or viral): *Fact Sheet*
  - usually follows a cold (viral upper respiratory infection)
  - sometimes germs travel from the throat to the ear through a damaged Eustachian tube (connects the ear to the throat)
  - if related to a cold, may have runny nose, cough, sneezing, or fever

- **Fifth Disease (Parvovirus B19)**: *Fact Sheet*
  - contact with secretions from the nose and mouth of an infected person (i.e. sneezing)
  - can spread from a pregnant woman to her unborn child

- **Hand, Foot & Mouth Disease (Herpangina)** (staphylococcal or streptococcal): *Fact Sheet*
  - contact with secretions from the nose and mouth of an infected person (i.e. sneezing)
  - contaminated hands or objects (i.e. surfaces, toys, doorknobs) exposed to droplets from an infected person

- **Impetigo (Staphylococcal or Streptococcal Bacteria)**: *Fact Sheet*
  - usually follows a scratch or an insect bite
  - contact with rash, contact with bedding, towels, or clothing that have touched an infected person's skin

- **Influenza** (flu virus): This disease is vaccine preventable. *Fact Sheet*
  - contact with secretions from the nose or mouth of an infected person (i.e. sneezing, coughing)
  - contaminated hands or objects (i.e. surfaces, toys, doorknobs) exposed to droplets from an infected person
  - fever, headache, sore throat, loss of energy, vomiting and/or diarrhea, small, painful ulcers in the mouth

- **Measles** (measles virus): This disease is vaccine preventable. *Fact Sheet*
  - contact with secretions from the nose or mouth of an infected person (i.e. sneezing, coughing)
  - contact with objects that have been exposed to droplets or saliva from an infected person

- **Meningitis** (meningococcal): *Fact Sheet*
  - bacterial: direct contact with secretions from nose or throat of an infected person (sharing dishes, toothbrushes, mouth guards)
  - viral: contamination of surfaces (the virus can remain active in the air or on surfaces for at least 2 hours)

- **Mononucleosis (Epstein-Barr Virus)**: *Fact Sheet*
  - spreads person-to-person through saliva (i.e. laughing, sharing beverages)

- **Mumps** (infectious Parotitis): *Fact Sheet*
  - contact with secretions from the nose or mouth of an infected person

- **Pink Eye (Conjunctivitis)** (bacterial/viral): *Fact Sheet*
  - contact with eye secretions through contaminated fingers or arteries (i.e. wash clothes or towels)

- **Rubella** (German Measles): *Fact Sheet*
  - contact with secretions from the nose or mouth of an infected person

- **Strep Throat/Scarlet Fever** (group A Streptococcal bacteria): *Fact Sheet*
  - contact with secretions from the nose or mouth of an infected person (i.e. sneezing, coughing)

- **Whooping Cough** (pertussis): *Fact Sheet*
  - sharing close airspace (less than 1 meter)

#### How to Recognize

- **Chickenpox**: begins with a fever, then an itchy red rash develops and quickly turns into blisters.

- **Diarrhea and Vomiting**: bilious and scab over usually within 5 days

- **Ear Infection**: if related to a cold, may have runny nose, cough, sneezing, or fever

- **Fifth Disease**: low grade fever, headache, cold-like symptoms, stomach upset, red rash on cheeks

- **Hand, Foot & Mouth Disease**: fever, headache, sore throat, loss of energy, vomiting and/or diarrhea, small, painful ulcers in the mouth

- **Impetigo**: rash with a cluster of red bumps or blisters around the mouth, nose, or other exposed parts of the skin

- **Influenza**: sudden fever, chills, headache, fatigue, muscle aches, cough, and sore throat

- **Measles**: runny nose, cough, sore throat, red eyes

- **Meningitis**: fever, rash appears, the virus is no longer contagious

- **Mononucleosis**: white blood cells (WBCs) are usually high

- **Mumps**: fever, redness, pain in the parotid glands

- **Pink Eye**: redness in whites of eye, scratchy feeling or pain in eye

- **Rubella**: mild fever, headache, fatigue, runny nose, red eyes, rash (small red spots)

- **Strep Throat/Scarlet Fever**: fever, sore throat, headache, swollen glands, trouble swallowing, nausea, sore stomach. If scarlet fever, can have sandpapery like rash

- **Whooping Cough**: respiratory symptoms followed by persistent repetitive cough ending in gagging/vomiting (may or may not have characteristic “whoop”), fever is mild or absent

#### How to Recognize

- **Chickenpox**: begins with a fever, then an itchy red rash develops and quickly turns into blisters.

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#### When to Report/Exclude

- **Chickenpox**: for schools, report to the health unit if there is a chickenpox outbreak.

- **Diarrhea and Vomiting**: child is too sick to attend school is given and child feels well enough to participate in normal activities (regardless of the state of rash)

- **Ear Infection**: pregnant and immunocompromised individuals should be informed of possible exposure and advised to consult with a health care provider.

- **Fifth Disease**: if scarlet fever, can have sandpapery like rash

- **Hand, Foot & Mouth Disease**: for schools, report to the health unit via health unit’s Chickenpox Reporting Form

- **Impetigo**: child is too sick to attend school is given and child feels well enough to participate in normal activities (regardless of the state of rash)

- **Influenza**: pregnant and immunocompromised individuals should be informed of possible exposure and advised to consult with a health care provider.

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- **Meningitis**: child is too sick to attend school is given and child feels well enough to participate in normal activities (regardless of the state of rash)

- **Mononucleosis**: child is too sick to attend school is given and child feels well enough to participate in normal activities (regardless of the state of rash)

- **Mumps**: child is too sick to attend school is given and child feels well enough to participate in normal activities (regardless of the state of rash)

- **Pink Eye**: patient should consult their doctor promptly.

- **Rubella**: pregnant women or pregnant contacts should be advised to consult with their doctor promptly.

- **Strep Throat/Scarlet Fever**: child is too sick to attend school is given and child feels well enough to participate in normal activities (regardless of the state of rash)

- **Whooping Cough**: respiratory symptoms followed by persistent repetitive cough ending in gagging/vomiting (may or may not have characteristic “whoop”), fever is mild or absent

#### References


#### FACT SHEETS

- [http://healthunit.org/health-information/infectious-diseases/fact-sheets/](http://healthunit.org/health-information/infectious-diseases/fact-sheets/)
REPORTABLE DISEASES

Timely reporting of diseases of public health significance as soon as a suspect case is identified is essential to monitor the health of the community and to provide the basis for preventive action. Click here for an Introduction to the new Toolkit.

The following diseases are designated as a disease of public health significance under the authority of the Health Protection and Promotion Act, Ontario Regulation 135/18 and Regulation 569.

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<tr>
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<th>Cholera</th>
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<tr>
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<td>Creutzfeldt-Jakob Disease, all types</td>
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<tr>
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<td>Cryptosporidiosis</td>
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<td>Blastomycosis</td>
<td>Cyclosporiasis</td>
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<td>Diphtheria</td>
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<td>Echinococcus multilocularis infection</td>
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<td>Food poisoning, all causes</td>
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<td>Gastroenteritis, outbreaks in institutions and public hospitals</td>
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<td>Chickenpox (Varicella)</td>
<td>Giardiasis, except asymptomatic cases</td>
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<tr>
<td>Chlamydia trachomatis infections</td>
<td>Gonorrhoea</td>
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<tr>
<td>Cholera</td>
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<td>Haemophilus influenzae disease, all types, invasive</td>
</tr>
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To report a disease or for more information, please contact: The Infectious Disease Program

**Tel: 1-800-660-5853 • Fax: 613-345-5777**

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Reportable Disease Notification Form | Public Health Lab General Test Requisition

http://healthunit.org/for-professionals/health-care-dental/
Hooray for Handwashing

1. WET your hands
2. SOAP your hands
3. RUB your hands for 15-20 seconds
4. RINSE your hands
5. DRY your hands
6. Use paper towels to TURN OFF tap

For more information, call the Health ACTION Line 1-800-660-5853 or visit www.healthunit.org

Adapted with the permission of York Region Community and Health Services
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For more information, call the Health ACTION Line 1-800-660-5853 or visit www.healthunit.org
WASH YOUR HANDS

1. Wet Hands
2. Soap
3. Lather
4. Rinse
5. Towel Dry
6. Turn Taps Off With Towel

The Leeds, Grenville & Lanark District Health Unit
Call Brockville 613-345-5685 or Smiths Falls 613-283-2740 or 1-800-660-5853
www.healthunit.org
# CHILD CARE ILLNESS TRACKING FORM

Please complete and fax to the Leeds, Grenville and Lanark District Health Unit by 10:00 a.m. each day.

Brockville Office 613-345-5777 and Smiths Falls Office Fax # 613-283-1679

<table>
<thead>
<tr>
<th>CHILD CARE CENTRE:</th>
<th>ROOM:</th>
</tr>
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<tbody>
<tr>
<td><strong>DATE</strong></td>
<td><strong>SYMPTOMS</strong></td>
</tr>
<tr>
<td>Date</td>
<td>Child’s Name</td>
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**COMMENTS:**

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Cloth Diapers: Infection Control Considerations

Requirements for Child Care Centres
It is strongly recommended that used diapers and diaper pail/bag be sent home with each family on a daily basis for cleaning/washing at home.

Storage:
- Provide adequate storage space for used cloth diapers awaiting pick-up by parents
- Used diapers must be stored in a diaper pail with a childproof lid or leak-proof bag, and away from food storage/preparation/service areas and play areas and must not be accessible to children.
- Label the parent supplied diaper pail/bag (one per child) designated for storage of used diapers. Cloth diapers should not be laundered at the child care centre.
- Used cloth diapers (outer covering and liner) must be handled as little as possible to limit and prevent exposure to body fluids. Do not shake, scrape, or rinse the cloth diapers.
- Store clean cloth diapers in a sanitary manner and separately from used diapers

Hand Hygiene:
- Staff must wash hands using liquid soap and warm running water before and after assisting with toileting/diapering. Alcohol based hand rub should not be used as hands may be soiled.
- Single use disposable gloves must be worn when handling used diapers. Staff must wash their hands before and after putting on disposable gloves.

Requirements for Parents:
- Parents should supply a diaper pail/bag with a tight fitting lid or one that is able to be covered/closed to prevent access.
- Diaper pails must be:
  » Childproof (e.g., have a locking lid, stored out of reach of children)
  » Able to be cleaned and disinfected – items that are porous or absorbent are not acceptable
  » Leak-proof to prevent exposure of body fluids and minimize contamination of the environment
- Diaper bags ("wet bags") must be:
  » Able to be stored out of reach of children
  » Able to be laundered. Items that are porous or absorbent are not acceptable
  » Water/leak-proof – made of nylon or laminated (polyurethane laminate (PU) waterproof fabric with laminate applied to the back to prevent contents from leaking)
  » Intended for the purpose of holding used cloth diapers (plastic grocery or non-waterproof bags are not acceptable)
- Parents should clean and disinfect the diaper pail/bag at least daily once the used diapers have been removed and laundered.