

COVID-19 Guidance for Childcare Centres

As the Government of Ontario continues to implement its Framework for Reopening the Province, childcare centres and home care providers in Leeds, Grenville and Lanark are now permitted to re-open provided they have specific rules, enhanced health and safety, as well as strict operational requirements in place. When developing health and safety protocols, childcare providers are responsible for adhering to the advice set out in the [Ministry of Education's Operational Guidance](#) document as well as that provided by Leeds, Grenville and Lanark District Health Unit (LGLDHU) in this Guidance Document. The Ministry of Education has indicated that childcare providers do not require local public health units to sign-off on health and safety protocols. As such, LGLDHU is providing operators with this Guidance Document, to be used in concert with the Ministry of Education's guidance, to ensure they have the information they need to protect themselves, their households, and children.

With community transmission of COVID-19 in LGL, there is a risk that transmission from both symptomatic and asymptomatic persons may occur. While measures to attempt to control these risks may be implemented in a childcare centre, it is important that parents and staff are made aware of, and understand, the risks. Please see the Notice of Risk below:

Notice of Risk

When children from multiple families attend a single childcare centre, there is an increased risk of the COVID-19 virus coming into the centre. Children who are infected with the COVID-19 virus are more likely than adults to have very mild infections or to have no symptoms at all, but these children can still transmit the infection to other children and to adults in the centre. This means that children can bring home an infection acquired in the centre and put other persons at risk. Although a childcare centre has a screening process to help detect infections when there are symptoms; however, this screening process will not detect infected children or adults who do not have symptoms at the time of screening.

The risk of serious COVID-19 infection increases with age, which older childcare providers should consider in terms of the risk to themselves personally, particularly if working in childcare centres with children from multiple families.

The following recommendations have been developed in conjunction with the Provincial documents: [COVID-19 Guidance: Emergency Childcare Centres](#), [COVID-19 Provincial Testing Guidance Update June 2, 2020](#), and [Operational Guidance During COVID-19 Outbreak - Child Care Re-Opening](#). Advice of the Public Health Unit must be followed, even in the event that it contradicts the Ministry's recommendations in their guidance document. The information found within this guidance document is meant to support childcare providers in meeting requirements set out under the Child Care and Early Years Act, 2014 (CCEYA).

Please note - If a child or staff tests positive for COVID-19, please immediately contact LGLDHU Outbreak (OB) Reporting Line at 613-345-5685 or 1-800-660-5853 ext. 2222, 7 days a week between 8:30 a.m. to 4:30 p.m., or outside business hours and ask to speak with the on-call Manager for further guidance.

LGLDHU recommends all childcare centres have the following measures in place to avoid the spread of COVID-19 to multiple persons and families:

Health and Safety Measures

- At this time, it is recommended that only staff and children enter the centre and that all others, such as parents/guardians of children and delivery persons, be met at the door.
- Only allow one point of entry and exit.
- Childcare centres should develop procedures that support physical distancing and separate groups as best as possible (i.e., children of one room enter door A and children of another room enter door B, or staggered entrance times).
- All entrances should have hand sanitizer and if in an enclosed space and physical distance of 2 meters cannot be maintained, parents/guardians and staff/childcare providers should wear a cloth mask upon entry until they have been cleared through screening.
- All childcare providers are responsible for maintaining daily records of anyone entering the centre. Daily records should include their first and last name, contact number and/or email, and the approximate length of their stay (such as cleaners, people doing maintenance work, people providing support for children with special needs, those delivering food). Records must be kept on the premises.
- Clearly communicate to parents/guardians to check their children's temperature and ask staff to check their own temperature daily before coming to the childcare centre.
- Parents should be actively informed (e.g., through sign-off of a consent form) of the possibility of exposure to COVID-19 in the centre.
- COVID-19 Response Plan: Childcare centres must have a communication plan or protocol in place in the event that a child, parent or staff member at the site is exposed to COVID-19.
- Personal belongings (e.g., backpack, clothing, etc.) should be minimized. If brought, belongings should be labeled and kept in the child's cubby/designated area.
- Children should bring their own sunscreen where possible and it should not be shared. Staff may provide assistance to apply sunscreen to any child requiring it and should exercise proper hand hygiene when doing so.

Food Provision:

- Ensure proper hand hygiene is practiced when staff are preparing food and for all individuals before and after eating. Children should not help prepare food.
- Change meal practices to ensure there is no self-serve or sharing of food at meal times. Utensils should be used to serve food.
- Meals should be served in individual portions to the children.
- There should be no items shared (i.e., serving spoon or salt shaker).
- There should be no food provided by the family/outside of the regular meal provision of the program (except where required and special precautions for handling and serving the food must be put in place).
- There should be no sharing of utensils.

Active Screening of Children and Staff

- Active screening is required for anyone entering the childcare centre.
 - Active screening is the process of proactively checking for symptoms (e.g., temperature checks and asking questions), travel history and contact (without appropriate Personal Protective Equipment of a person(s) who may have COVID-19).
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- Parents should be reminded of this before registration and through visible signage at the entrances and drop-off areas.
 - Screening and temperature checks should be conducted whenever possible before individuals arrive at the centre. Parents/guardians who are unable to do this at home must wait on site, until their child has had their temperature checked and is clear to participate in the day.
 - **Temperature Check Guidance:**
 - » Parents and or guardian take the child(s) temperature at home and report it at sign in.
 - » If temperature not done at home, the parent/guardian is asked to take the child(s) temperature while the childcare provider maintains 2-meter physical distance and monitors. The childcare provider will also need to ensure that the thermometer is properly cleaned following each use and that general infection prevention practices are followed between individuals.
 - » In exceptions, the childcare provider may need to take the child's temperature in lieu of the parent/guardian. In these cases, the childcare provider should take appropriate precautions when screening, including maintaining a distance of at least 2 meters (6 feet) from those being screened, or being separated by a physical barrier (such as a plexiglass barrier), and wearing personal protective equipment (PPE) (i.e., surgical/procedure mask and eye protection (goggles or face shield)).
 - Alcohol-based sanitizer containing at least 60% alcohol content should be placed at all screening stations. Dispensers should not be in locations that can be accessed by young children. When possible, hand washing with soap and water is preferred over alcohol-based hand rub for children.
 - For guidance on when children can return to childcare with illnesses other than COVID-19, please refer to [LGLDHU website](#).
 - For COVID-19 specifically, anyone who fits the criteria below will not be allowed into the childcare centre and will need to self-isolate for a period of 14 days or as directed below related to management of symptoms:
 - » If you have any of the symptoms outlined below, from the Ministry of Health's '[COVID-19 Reference Document for Symptoms](#)':
 - Fever (temperature of 37.8 degrees C or greater), new or worsening cough, shortness of breath.
 - Other symptoms – sore throat, difficulty swallowing, new olfactory or taste disorder(s), nausea, vomiting, diarrhea, abdominal pain, runny nose, or nasal congestion (in absence of underlying reason for these symptoms such as seasonal allergies, post nasal drip, etc.)
 - Other signs – clinical or radiological evidence of pneumonia.
 - Atypical symptoms and signs - unexplained fatigue/malaise/myalgias, delirium (a serious medical condition that involves confusion, changes to memory, and odd behaviours), unexplained or increased number of falls, acute functional decline, worsening of chronic conditions, chills, headaches, croup, conjunctivitis, multisystem inflammatory vasculitis in children, unexplained tachycardia (heart rate over 100 beats per minute), including age specific tachycardia for children, decrease in blood pressure, unexplained hypoxia (even if mild i.e. O2 sat <90%), lethargy and difficulty feeding in infants (if no other diagnosis).
 - » If you or your child(ren) have symptoms compatible with COVID-19 and in whom laboratory diagnosis of COVID-19 is inconclusive.
 - » If you have travelled outside of Canada in the last 14 days.
 - » If you live with, or provided care for, or spent time with someone who has tested positive for COVID-19, is suspected to have COVID-19, has an inconclusive laboratory diagnosis of COVID-19,
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or who has symptoms that started within 14 days of travel outside of Canada without appropriate Personal Protective Equipment.

- Childcare centres are to assess the temperature (as reported by the parent/guardian or taken by the childcare provider) of all children/staff during screening and to maintain a log of all screening results. All records must be kept on premise.
 - » Process for temperature checks (if required):
 - Screener must complete hand hygiene (handwashing or hand sanitizing), then put on a surgical/procedure mask and eye protection (goggles or face shield).
 - Take the temperature using a thermometer as per the manufacturer's instructions for use. If the temperature is equal to or greater than 37.8 degrees Celsius or if the child/children have any of the above symptoms, they must stay home.
 - Disinfect the thermometer and wait appropriate disinfectant contact time as per the manufacturer's instructions for use.
 - Complete hand hygiene (hand washing or hand sanitizer).
 - Record the temperature in screening results log.
 - In the event that a second screener is documenting, glove use would not be required by the screener who is documenting.
 - Remove eye protection and mask once screening of all children is complete and perform hand hygiene (hand washing or hand sanitizer).

At any time, children who have an infectious illness that may be communicable must not enter a childcare facility while infectious. Examples include infectious respiratory illnesses and gastrointestinal illnesses.

Staffing

- Provide services according to provincial guidelines and maintain ratios set out under the CCEYA. Maximum cohort size for each room in a childcare centre (including each family age group) will consist of no more than 10 individuals ("a cohort"), space permitting. This includes both staff and children.
 - Maximum capacity rules do not apply to special needs resource staff (consultants and enhanced staff) on site (i.e. they are not counted towards staff to child ratios).
 - Reduced ratios are permitted as set out under the CCEYA provided that cohorts are not mixed with other cohorts. Reduced ratios are not permitted at any time for infants.
 - Cohort staff and children:
 - » A cohort is defined as a group of children and staff that stay together throughout the duration of the program for a minimum of 7 days.
 - » LGLDHU recommends when possible, children of the same family be put together in a group (as per current regulatory operating ratios and group size; and subject to Ministry of Education approval) to reduce the likelihood of transmission to children of multiple families. Mixed age grouping is permitted as set out under the CCEYA and where director approval has been obtained.
 - » Limit cohorts to one room and avoid interaction with children and staff in other rooms. Cohorts are not permitted to mix with other cohorts.
 - Staff should stay within their designated role and not cover off other role(s). Staff assigned to a cohort of children should remain with the same cohort when covering breaks.
 - Staff should only work at 1 location.
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- Food trolleys/bins should be delivered just outside the door to each room, to avoid staff entering multiple rooms.
- Maintain physical distancing of >2m between people in staff/lunchrooms. If physical distance cannot be maintained, only one (1) person at a time should be in the room. If physical distancing cannot be maintained and staff must be in the same room, all staff should wear masks. Information on face coverings, including correct use, can be found on the [LGLDHU COVID-19 webpage](#).
- Routine COVID-19 prevention strategies should be observed, refer to staff guidelines for more details.

In order to decrease transmission of COVID-19 in the community, LGLDHU recommends that all residents practice physical distancing. For more details, visit the [LGLDHU COVID-19 webpage](#).

Ensure that training is provided to all childcare staff/providers on the health, safety and other operational measures outlined in this document plus any additional local requirements in place prior to re-opening.

Management of Child(ren) and Staff with COVID-19 Symptoms

Please note: all children and staff who are symptomatic should be referred for testing and reported to the Health Unit.

1. Child and/or staff with symptoms:

- Symptomatic child(ren) and staff must be immediately separated from others in supervised area until they are able to leave the childcare centre. Please be beware that the first symptom of a COVID-19 infection in children can be gastrointestinal, including diarrhea.
 - Parent/guardian should be notified to come pick up the child(ren) as soon as possible.
 - Staff, where possible, should maintain a distance of at least 2 meters while supervising the ill child. Appropriate PPE (mask and eye protection) should be worn by the staff member supervising the child. Staff should follow procedures in place on what PPE is required as it is dependent on type of symptoms the child is experiencing. Ensure staff properly discard PPE and perform hand hygiene after the child has left the facility. If tolerated and the child is over age 2, the child should wear a surgical/procedure mask.
 - Environmental cleaning and disinfecting of the space in which the child was separated should be conducted immediately after the child has been picked up. All items used by the sick person should also be disinfected. Anything that cannot be cleaned should be removed and stored in a sealed container for a minimum of 7 days.
 - Inform parents/guardians of other children that a child has developed a symptom and has been sent home pending testing and further assessment is needed. Ask parents to please monitor the health of their child(ren) and to notify the childcare provider if their child develops symptoms. As long as children remain symptom-free, they can continue to attend the childcare centre.
 - If the childcare program is located in a shared setting, follow public health advice on notifying others using the space of the suspected illness.
 - Staff who develop symptoms during a shift must be separated from others, wash their hands and put on a surgical/procedure face mask or a 2- or 3-layer cloth mask until they can leave the childcare facility. Refer to Management of Symptomatic Staff Flowchart (see Appendix A) for next steps.
 - Staff who report feeling unwell before coming onto a shift must stay home and refer to Management of Symptomatic Staff Flowchart (see Appendix A) for next steps.
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- Contact the LGLDHU Outbreak Reporting Line at 613-345-5685 or 1-800-660-5853 ext. 2222 for further guidance.
- 2. Child and/or staff with symptoms and referred for COVID-19 testing:**
- Child and/or staff must stay home and self-isolate while waiting for results of a COVID-19 test. Please refer to the Self-isolation Instructions on the [LGLDHU COVID-19 website](#).
 - Close contacts of the symptomatic child or staff at the centre over the past two days (48 hours prior to when their symptoms started) should be monitored for symptoms and cohorted while results are pending for the staff /child. If the child / staff results are positive, additional testing may be required as directed by the local public health unit.
 - If not tested, the child and/or staff member must stay home and self-isolate:
 - » For 14 days from the first day of symptoms
 - OR
 - » Until 24 hours AFTER symptoms have FULLY resolved, whichever is longer
 - Determining when the child and/or staff member can return to the centre will be done in consultation with LGLDHU's Infection Prevention and Control (IPAC) team.
 - Determining closure and re-opening of the classroom and/or facility will be done in consultation with LGLDHU's IPAC team.
- 3. Child and/or staff who are symptomatic and have a negative COVID-19 result:**
- Return to the centre may be based on usual policy and procedure (e.g., 24 hours symptom-free without fever-reducing medication, or 48 hours after resolution of vomiting and/or diarrhea). Consult with OB Reporting Line as needed.
- 4. Child and/or staff who have a positive COVID-19 test result:**
- The child and/or staff with a positive COVID-19 test must self-isolate and not attend the centre. Please refer to the Self-isolation Instructions on [LGLDHU COVID-19 website](#).
 - Determining when the child and/or staff member can return to the centre will be done in consultation with LGLDHU.
 - Determining closure and re-opening of the classroom and/or facility will be done in consultation with LGLDHU.
 - Where a child or staff is suspected of having or has COVID-19, childcare centres must report this to the Ministry of Education as a serious occurrence.
- 5. Child and/or staff who has been identified as a close contact of a confirmed or probable COVID-19 case:**
- A child and/or staff who has been identified as a close contact of a confirmed or probable COVID-19 case must self-isolate and not attend the centre. Discontinuing self-isolation depends on whether or not they are still in contact with a confirmed or probable case of COVID-19 and will be determined in consultation with LGLDHU OB Reporting Line at 613-345-5685 or 1-800-660-5853 ext. 2222.

Cleaning and Disinfecting

The following enhanced cleaning practices are recommended to support infection prevention and control:

- Clean and disinfect high touch surfaces at least twice a day, using an enhanced cleaner/disinfectant used for outbreaks.
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- Toys and equipment should be cleaned and disinfected at a minimum between cohorts. Childcare providers are encouraged to have designated toys and equipment (e.g. balls, loose equipment) for each room or cohort
- Mouthed toys should be cleaned and disinfected immediately after the child is finished using it.
- Clean and disinfect ill children's cots/cribs when excluded from the centre and launder sheets and blankets.
- The use of sensory materials (e.g., playdough, water, sand, etc) should be avoided, however, Ministry guidance states that if sensory materials (e.g., playdough, water, sand, etc.) are offered, they should be provided for single use (i.e. available to the child for the day) and labelled with child's name, if applicable.
- Remove shared items such as toys that cannot be easily cleaned and disinfected daily (e.g. plush items);
- Reduce clutter and limit toys to those that can be disinfected daily.
- Enhance hand hygiene practices for both staff and children.
- Clean/disinfect staff/lunchrooms regularly; It is recommended that childcare centres keep a log to track and demonstrate cleaning schedules.
- Childcare centres should secure and sustain an amount of PPE and cleaning supplies that can support their current and ongoing operations. For more information on PPE inventory and how to obtain a supply, visit the [Provincial webpage on workplace PPE supplier](#).

Physical Distancing

Strategies within the Childcare Centre

- Physical distancing of at least 2 meters must be maintained between cohorts and should be encouraged, where possible, between children within the same cohort.
 - Use visual cues to promote physical distancing.
 - Spread children out into different areas, particularly at meal and dressing times.
 - Stagger or alternate lunchtime and outdoor playtime.
 - Where two cohorts are using the same indoor space (e.g. gym), childcare providers must ensure that a floor to ceiling temporary physical barrier is in place to ensure that physical distancing of at least 2 meters between cohorts is maintained.
 - Shared spaces and structures that cannot be cleaned and disinfected between cohorts should not be used.
 - Avoid singing activities indoors.
 - Incorporate more individual activities or activities that encourage more space between children.
 - Consider removing cribs or placing infants in every other crib, and mark the cribs that should not be used in order to support physical distancing.
 - Increase the distance between nap mats. If space is tight, place children head-to-toe if lying parallel to each other or toe-to-toe if two are lying in a line.
 - Children must not share food (e.g. communal food platters), feeding utensils, soothers, bottles, sippy cups, etc. Label these items with the child's name to discourage accidental sharing.
 - Extend outdoor play as much as possible as this will limit close contacts.
 - Play structures can only be used by one cohort at a time. Play structures must be cleaned and disinfected after use by each cohort.
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- Where the outdoor play area is large enough to accommodate multiple groups, childcare centres may divide the space with physical markers to ensure cohorts remain separated by at least 2 meters. When holding infants and toddlers, use blankets or cloths over childcare providers clothing and change the blankets or cloths between children.

Supporting Each Other and Our Community

We understand that these enhanced measures place an additional burden on childcare centres and staff; however, measures like this are needed to ensure that the spread of COVID-19 in our community is reduced. We appreciate all the efforts to help protect the employees who are providing child care. We thank you for the service that you provide to our community.

It is important to recognize that the COVID-19 situation continues to change. Please visit [Leeds, Grenville and Lanark District Health Unit - Coronavirus, COVID-19 & Businesses](#), [LGLDHU Childcare Providers](#), and [LGLDHU Child Care Infection Control Manual](#) for up to date information.

Adapted from Ottawa Public Health: COVID-19 Guidance for Childcare Centres.