

COVID-19 Guidance for Home Childcare Settings

As the Government of Ontario continues to implement its [Framework for Reopening the Province](#), childcare centres 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. Home care providers were never required to close; however, they must implement the same measures as the out-of-home centres as they continue to operate. 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, but that providers must follow the direction of local public health. 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.

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 home childcare setting, it is important that parents and home childcare providers 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 home childcare, there is an increased risk of the COVID-19 virus coming into the home childcare. 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 home childcare. This means that children can bring home an infection acquired in the home childcare and put other persons at risk. Although the childcare setting 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 home childcare settings 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](#). 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).

Do NOT operate if:

- The home childcare provider or any household member(s) are symptomatic.
- The home childcare provider or household member tests positive for COVID-19. The LGLDHU case manager will provide further direction to the confirmed case as needed.

Reopening of home childcare settings:

- If COVID-19 is confirmed, re-opening of the home childcare setting will be determined in consultation with a Case Manager
- If COVID-19 is ruled out, re-opening of home childcare setting 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).
- If not tested, the child, childcare provider and or household contacts 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**

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

Health & Safety Measures:

- At this time, it is recommended that only the children and childcare provider and their household contacts enter the home and that all others, such as parents/guardians of children and delivery persons, are met at the door.
- Only allow one point of entry and exit.
- All home childcare providers are responsible for maintaining daily records of anyone entering the home. 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 daily before coming to the childcare setting.
- Have the childcare provider and the childcare provider's household contacts check their own temperatures daily before opening the childcare setting.
- Parents should be actively informed (e.g., through sign-off of a consent form) of the possibility of exposure to COVID-19 in the home.
- COVID-19 Response Plan: Childcare providers must have a communication plan or protocol in place in the event that a child, parent, childcare provider and/or a childcare provider's household contact at the home 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. Childcare providers 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 home childcare providers are preparing food and for all individuals before and after eating. Children/other household members should not 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.
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- 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, Childcare Provider and Household Contacts of Childcare Provider

- Active screening is required for anyone entering the home childcare setting.
 - 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 (PPE) of a person(s) who may have COVID-19.
 - 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 childcare setting. 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:**
 - » Parent 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 (six feet) from those being screened, or being separated by a physical barrier (such as a plexiglass barrier or window), and wearing PPE if they must come within 2 meters without a barrier between them (i.e., surgical/procedure mask; 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 home childcare setting 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 smell 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
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- Atypical symptoms and signs - unexplained fatigue/malaise/myalgia, 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 (“COVID toes”), 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, or who has symptoms that started within 14 days of travel outside of Canada without appropriate Personal Protective Equipment.
- Childcare providers are to assess the temperature (as reported by the parent/guardian or taken by the childcare provider) of all children/themselves and household members during the screening and to maintain a log of all screening results. All records must be kept on the premises.
 - » Process for each individual temperature check (if required):
 - Childcare provider 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.
 - 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 the home childcare setting while infectious. Examples include infectious respiratory illnesses and gastrointestinal illnesses.

Childcare Providers

- Provide services according to provincial guidelines and maintain ratios set out under the CCEYA.
 - There are no changes to the maximum group size for home childcare setting which allows for a maximum of 6 children, not including the childcare provider’s own children who are four years or older
 - LGLDHU recommends, when possible, home childcare providers limit the number of families/households who attend the home childcare of one provider (but still respecting the current regulatory operating ratios and group size in the event that the one family/household has a large number of children; and subject to Ministry of Education approval) to reduce the likelihood of transmission to children of multiple families.
 - LGLDHU recommends families/households with multiple children needing care endeavour to send all such children to a single home childcare provider, when possible, to limit the number of children from multiple households that are in contact with each other (but still respecting the current regulatory operating ratios
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and group size in the event that the one family/household has a large number of children; and subject to Ministry of Education approval) to reduce the likelihood of transmission to children of multiple families. If possible, limit interactions with household contacts of the childcare provider.

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

Management of Child, Childcare Providers and household contacts of Childcare Provider with COVID-19 Symptoms

Please note: all children, childcare provider(s) and household contacts of the childcare provider who are symptomatic should be referred for testing.

1. Child, childcare provider and/or household contacts of childcare provider with symptoms:

- Symptomatic child(ren) and household contacts such as siblings must be immediately separated from others in a supervised area until they are able to leave the home childcare. Please be aware 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.
- The childcare provider, where possible, should maintain a distance of at least 2 meters while supervising an ill child. Appropriate PPE (mask and eye protection) should be worn by the childcare provider supervising the child. Childcare provider must properly discard PPE and perform hand hygiene after the child has left the home. If tolerated and the child is over the age of 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 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 as needed. Ask parents to please monitor the health of their child and to notify the home childcare provider if their child develops symptoms. As long as children remain symptom-free, they can continue to attend the home childcare.
- A childcare provider who develops symptoms during a shift should wash hands and put on a surgical/procedure face mask or 2-or-3-layer cloth mask and kept at a minimum of 2 meters from others. Family members of children should be contacted for pick-up.
- For additional information, visit [LGLDHU website](#).

2. Child, childcare provider and/or household contacts of childcare provider with symptoms and referred for COVID-19 testing:

- Child, childcare provider and/or household contacts must stay home and self-isolate while waiting for results of COVID-19 test. Please refer to the Self-isolation Instructions on LGLDHU website.
- Close contacts of the symptomatic child, childcare provider or household contacts at the home childcare over the past two days (48 hours prior to when their symptoms started) should be monitored for symptoms while results are pending. If the results are positive, LGLDHU will provide further guidance.

3. Child, childcare provider and/or household contacts of childcare provider that are symptomatic and have a negative COVID-19 result:

- Return to the home childcare may be based on usual policy and procedure (e.g., 24 hours symptom-
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free without fever-reducing medication, or 48 hours after resolution of vomiting and/or diarrhea).

4. Child, childcare provider and/or household contacts of childcare provider who have a positive COVID-19 test result:

- A single, symptomatic, laboratory confirmed case of COVID-19 in a home child care provider or child must be considered a confirmed COVID-19 outbreak, in consultation with the LGLDHU
- The child, childcare provider and/or household contact with a positive COVID-19 test must self-isolate and not attend the home childcare. Please refer to the Self-isolation Instructions on [LGLDHU website](#).
- All cases of COVID-19 are followed up by local public health*
- Complete a thorough environmental cleaning of the entire home once all of the children are no longer in care, using appropriate PPE (eye goggles, face mask, and disposable vinyl gloves) and cleaning and disinfecting products recommended for outbreaks;
- Ensure all garbage has been emptied and waste receptacles disinfected;
- Where a child or home childcare provider is suspected of having or has COVID-19, home childcare providers must report this to the Ministry of Education as a serious occurrence.

5. Child, childcare provider and/or household contacts of childcare provider who has been identified as a close contact of a confirmed or probable COVID-19 case:

- A child, childcare provider and/or household contact who has been identified as a close contact of a confirmed or probable COVID-19 case must self-isolate and not attend the home childcare.
- 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 by LGLDHU*.

* Contact the Leeds, Grenville & Lanark District Health Unit at 1-800-660-5853 extension 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.
 - Toys and equipment should be cleaned and disinfected at a minimum daily.
 - 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 home childcare setting and launder sheets and blankets.
 - The use of sensory materials (e.g., playdough, water, sand, etc.) should be avoided, however, Ministry of Education 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 childcare provider and children.
 - Clean and disinfect used spaces/kitchen regularly.
 - Home childcare providers should secure and sustain an amount of PPE and cleaning supplies that can
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support 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 Home Childcare Setting

- Where possible:
 - » Maintain physical distancing of at least 2 meters between children.
 - » Use visual cues to promote physical distancing.
 - » Spread children out into different areas, particularly at meal, transition and dressing times.
- Avoid singing activities indoors.
- Incorporate more individual activities or activities that encourage more space between children.
- Consider physical distance between cribs/playpens ensuring 2m distance is maintained.
- 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.
- When holding infants and toddlers, use blankets or cloths over childcare providers clothing and change the blankets or cloths between children.
- Extend outdoor play as much as possible as this will limit close contacts.

Supporting Each Other and Our Community

We understand that these enhanced measures place an additional burden on home childcare providers; 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 emergency 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