COVID-19 Pandemic Response Plan and Operational Practice Edition 2021-22

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INTRODUCTION

Purpose

Lee Wiggins Childcare Centre’s (LWCC/the Centre) goal is to provide support and services to families and children in an environment that is safe and healthy. We will make every effort to continue to operate our services and protect employees and clients/families from emergency situations including pandemics.

In the event of a pandemic our goal is to remain available until authorities indicate otherwise.

The purpose of this document is to provide a framework for LWCC to mitigate and prepare for the potential impacts of a pandemic from reduced services to potential closures. This document also outlines what to do in the event of exposure to COVID-19 by a child, parent or staff member at the facility.

What is a Pandemic?

A pandemic is a global event. A flu pandemic starts with a new strain of virus to which people have little or no immunity. To be considered a pandemic, the new virus must be able to spread easily from person to person and cause illness in many of the people who are infected. When it spreads around the world, it is called a pandemic. The World Health Organization (WHO) sets the pandemic alert level globally. The pandemic level is set based on the spread of the virus, not the severity of the illness.

Response to COVID-19

This document was created in response to the COVID-19 pandemic. Part of the requirements to re-opening our facility after emergency closures were ordered in Ontario (March 13, 2020) was to establish a pandemic response plan. This Pandemic Response Plan and Operational Practice adheres to the advice of Toronto Public Health Pandemic Plan and the Ministry of Education Operational Guidance During COVID-19 Outbreak/Childcare Re-Opening.

This document will lay out the changes as we enter the next phase from the COVID-19 pandemic. This situation is unprecedented and is constantly evolving, so what is included in this document will remain as the “new normal” until further notice.

While the Ministry of Education (the ministry) is providing guidance on how to operate childcare during the COVID-19 outbreak, Consolidated Municipal Service Mangers (CMSMs), District Social Service Administration Boards (DSSABs), licensees, and home childcare providers must follow the advice of the local public health unit when establishing health and safety protocols, including how to implement any provincial or local public health unit direction on health and safety guidance.
The ministry recognizes that this may result in regional differences in these protocols, but given
the different impact of COVID-19 in different communities, it is important to follow the advice of
local public health officials to keep children and families safe in their respective communities.

LWCC is dedicated to protecting the health and safety of your children, our staff, partners, and
the community. We are closely monitoring COVID-19 and base our response and actions on
guidelines set out by Health Canada, Ontario Ministry of Health, Toronto Public Health (TPH)
and additional relevant authorities. Our responsibility is to ensure infection prevention and
control (IPAC) practices are carried out properly to prevent the spread of illness among
employees, placement students, children and essential visitors. Policies and procedures are
assessed and monitored to ensure our employees, placement students, and volunteers are
consistently and carefully carrying them out.

In addition, LWCC will adhere to any policies and guidelines related to health and safety
regulations released by York University or York University Student Centre for COVID-19.

While IPAC has always been an integral part of our childcare culture, we have adapted and
enhanced our policies and procedures in response to COVID-19, to mitigate risk and ensure the
health and safety of all.

The following practices will be in place:

- Staff will complete a health screening by online form submission (Google Docs) prior to
  arriving at the Centre to begin their shift. This will be reviewed by the Coordinator
  before their arrival and staff will have their temperature checked in the foyer.
- Parents/guardians will complete a health screening by online form submission (Google
  Docs) right before their child(ren) is to attend LWCC. This will be reviewed by the
  Coordinator prior to their arrival and the children will have their temperature checked in
  the foyer. They will be monitored throughout the day for COVID-19 related symptoms.
- Parents/Guardians will complete the YK University screening form prior to arrival. The
  screening link will be emailed to parents/guardians daily.
- The screening area is the 2nd floor elevator room of the LWCC located inside the First
  Student Centre building. This is the only entrance/exit that will be used to ensure
effective screening practices. Should the elevator room not be accessible or in an
  emergency, the main foyer entrance of LWCC would be used as the screening area.
- Only the Coordinator will be able to grant access for all individuals to enter the
  childcare based on health screening submissions. Although the Centre continues to
take temperatures, it is no longer a requirement by TPH.
- Staff, children and essential visitors must use the carpeted path leading from the
  colonnade entrance to the elevator. There is no access on the stairs unless in an
  emergency.
- Only one parent/guardian is to be at the screening area with their child/children.
- Children will be excluded from care if they develop symptoms related to COVID-19.
• Policies and procedures have been developed specific to COVID-19 in order to increase the health and safety of children, staff and families.
• Staff will monitor children throughout the day to ensure social distancing and IPAC practices are prioritized.
• Staff will receive thorough enhanced IPAC, and health and safety training. Training will be frequently updated and provided to ensure best practices and consistency.
• Regular communication on health and safety and IPAC practices will be shared with families for use at the Centre.
• Procedures will be updated and revised regularly to ensure best practices in accordance with Public Health authorities.

Although new procedures are in place for all of our safety, we want to note that every effort will continue to be made to uphold the inclusive and caring environment that LWCC provides for children and families. It is our goal to draw out and inspire the best in the children in our care as we provide them with opportunities to create, explore, and learn.

These procedures apply to all persons entering the LWCC – including children, parents/guardians, placement students, staff, and essential visitors (i.e., resource consultants, essential maintenance worker(s), ministry staff and other public officials (e.g., fire marshal, public health inspectors).

We request that all childcare employees, placement students and parents/guardians please read and sign off on the policies and procedures in this document and return the last page electronically prior to returning to LWCC. Please see Error! Reference source not found..

Please feel free to contact the Coordinator if you have any questions about the policies and procedures that are outlined in this document. They are in place to ensure that LWCC is a safe and enjoyable place for staff and families.

**Definitions/Acronyms**

**CCEYA:** Child Care and Early Years Act
**Cohort:** For this document, a cohort is defined as a group of children and staff members assigned to them, who stay together throughout the program for a minimum of 7 days consecutive.
**COVID-19:** a disease caused by the 2019 novel coronavirus
**IPAC:** Infection Prevention and Control
**MOH:** Medical Officer of Health
**PPE:** Personal Protective Equipment
**The Centre/LWCC:** Lee Wiggins Childcare Centre
**The ministry:** Ministry of Education
**TPH:** Toronto Public Health
Operation of the Corporation

LWCC is a non-profit Corporation that consists of the general membership, represented through the Board of Directors, which subdivides into an Executive Committee and other working committees. The business of the Corporation is taken care of through regular Board meetings. At these meetings the Directors are presented with information by the Coordinator of the Centre and the Executive Committee members and have the opportunity to vote on the matters that are put forward. The Executive and other committees meet more frequently and are in direct consultation with staff and external members of the community while taking care of the daily management of the Centre.

Members at large may attend Board meetings, although they may not vote. As well, members may put forward items for discussion and consideration at Board meetings by speaking to a member of the Board or by writing, usually to the Chair.

The general membership meets semi-annually or when special circumstances dictate the necessity. All members are eligible and are encouraged to attend and participate. The main duties of LWCC members are twofold. First, members are expected to attend annual general meetings in order to review and approve the audit of the previous year and the budget for the upcoming fiscal term. Second, they must be cognizant of and conduct themselves in accordance with the regulations and policies of the Corporation.

If you would like more detailed information about the LWCC Corporation, please see the Constitution and Bylaws of the Corporation, as well as the Board of Directors Handbook. These are available from the Centre’s Coordinator.

Board of Directors

Members of the LWCC are encouraged to stand for election to become a Board member, which is the Centre’s highest decision-making body. Having member representation is critical to the sustainability and success of the Centre.

Annual General Meeting (AGM)

This is the major financial meeting of the membership and is normally held in October. At this time, members are presented with the previous year’s audit for discussion and approval. Auditors for the current year must also be approved. The Centre’s operating budget is presented, along with any other information and business such as upcoming fundraising. If the Board of Directors decides that there is need for additional meetings of the membership, a special or general meeting can be called. At any time, the membership itself has the means to request that a general meeting be called by presenting a written requisition to the Board supported by at least one-third of the membership body. In this requisition a rationale for the meeting and any motion(s) that will be raised must be stipulated. Under regular operations, the Board is then responsible for ensuring that such a meeting is held within forty-five days from the
time that the request is received. At this time, the Ontario Government has extended AGMs to be delayed by ninety days after the state of emergency is ended. Membership will be notified of this upcoming general meeting by email.

**Quorum**

At each meeting of the members, be it annual or general, quorum must be obtained. Quorum refers to the minimum number of officers and members that must necessarily be present for the valid transaction of Corporation business. It is thus important that members try to attend such meetings, or if that is not possible, to find a member who is attending and send their proxy vote. Each member of the Corporation has the right to one vote which can be exercised in person or in absentia, by proxy. To vote by proxy the absentee member must submit in writing to the Secretary of the Corporation or of the meeting authorization for appointment of a proxy voter. This proxy voter must be a member of the Corporation and may not hold more than one proxy at a time.

Retroactive to March 17, 2020, the Ontario Corporations Act introduced an important change to temporarily suspend certain legislative provisions regarding AGMs during COVID-19. This applies to all non-profit and charitable corporations. It allows organizations to hold virtual meetings even if childcare centres By-laws do not allow for it.

Therefore, LWCC’s AGM for 2020 will be held via online video conference in a way to allow for all attendees to communicate with each other simultaneously and instantaneously.

**Our Team**

Our team of professionals includes a Coordinator who is a Registered Early Childhood Educators (RECE) and a member of the Ontario College of Teachers (OCT) and an Assistant Coordinator who is an RECE. They are responsible for developing and implementing planned and responsive programs implemented by a skilled and caring team of staff. Our staff team includes RECEs, Early Childhood Assistants (ECA) and a Resource Consultant who work together to ensure your child's needs will be met while they are in our care. Our lunch is catered by Wholesome Kids Catering who will ensure your child receives adequate nutrition throughout their time in our Centre.

Our staff have current Standard First Aid Training and Infant/Child CPR Certification and complete Vulnerable Sector Checks prior to their employment and on regular intervals after employment begins. RECEs are in good standing with the College of Early Childhood Educators. Each person on our team receives training and development on an on-going basis.

If supply/replacement staff are required, they will be assigned to specific roles for a minimum of 7 consecutive days (i.e., runner, cleaner, with the children).
Maximum Cohort Size, Ratio and Staffing

Given the strict health and safety measures in place and the advice of local public health units, LWCC has decided to temporarily operate with one mixed age group (“cohort”) consisting of both toddler and preschool children. There is a maximum of 15 children in attendance at any given time between the age of 18 months – 6 years. LWCC is licensed to accept children between the age of 13 – 18 months as long as they are independently walking and can generally feed themselves. In addition, only 3 of these underaged children are permitted to be on the attendance at any given time.

Ratio is 1 staff with 8 children with a maximum of 2 staff with 15 children. If there are 3 or more toddlers present at any given time, the ratio changes to 1 staff with 5 children with a maximum of 3 staff with 15 children. This ensures that we maintain effective health and safety, infection prevention and control practices.

Staff and placement students are not included in the maximum group size, but will be assigned to a specific role/location as much as possible. Therefore, staff specifically assigned with the children, routine cover-offs, check-in/check-out or disinfector should be supported by the same staff. The check-in, check-out designate and Coordinator and/or designate will limit their movement between rooms and doing so when absolutely necessary.

Currently, there will be two designated full-time staff on the floor with the children, two designated disinfectors (one a.m. shift, one p.m. shift) and one designated screener (Coordinator).

LWCC are required to obtain Vulnerable Sector Checks (VSCs) in accordance with the CCEYA from staff and other persons who are interacting with children at the childcare, including post-secondary students. If an individual is unable to obtain a VSC in a reasonable amount of time due to significant backlogs, they must ensure the individual has applied for a VSC and put in place additional measures.

Operating Hours

Part-time and full-time care will be offered Monday to Friday between 7:30 a.m. – 6:00 p.m. LWCC will be open 30 minutes after operational hours (6:00 p.m. – 6:30 p.m.) specifically to disinfect the Centre.
ENHANCED HEALTH AND SAFETY PROCEDURES

Every licensee must ensure that there are written policies and procedures outlining their health and safety protocols. These policies and procedures must be consistent with any direction from local public health units and include information on how childcares will operate to prevent and minimize the impact of COVID-19 in childcare settings, including, at a minimum, the following:

- how cleaning and disinfecting the space, toys and equipment will be conducted;
- how to report illness;
- how physical distancing will be encouraged;
- requirements on the use of medical masks and eye protection, and personal protective equipment (PPE), including information on exemptions or exceptions;
- how shifts will be scheduled, where applicable;
- how attendance records will be organized and maintained in order to facilitate contact tracing;
- a communication plan in the event of a case/outbreak;
- rescheduling of group events and/or in-person meetings; and,
- parent drop-off and pick-up procedures.

Daily Screening

Screening must be completed for every child, childcare staff and essential visitor prior to entry/arrival to the childcare setting. Daily health screening may be completed and submitted electronically via online form using Google Docs prior to arrival at the childcare.

In the event that an individual is not screened prior to arriving at the childcare, active (in-person) screening is available when necessary. The screener is to take appropriate precautions when screening and escorting children to the program, including maintaining a distance of at least 2 metres/6 feet from those being screened. At this time, the Coordinator is the designated screener.

Individuals who do not pass the screening are not permitted to attend the program and must stay home. If symptoms are not COVID-19 related and present as enteric and respiratory the individual must remain away for 24-hours and be symptom-free before entering the facility.

Please refer to the Screening Poster for Child Care and the COVID-19 Decision Tool for Child Care (child attendees) for further information.

In addition, we suggest reviewing the self-assessment tool on the Ministry of Health website if you were exposed to COVID-19 or have symptoms.

Although no longer a requirement by TPH, LWCC takes extra precaution by conducting a temperature check of anyone first entering the childcare’s foyer. Fever is considered a temperature of 37.8C or greater.
Children’s temperature is recorded onto a HiMama application. For our reference, placement students and essential guests’ temperature are recorded onto a digital spreadsheet.

We understand that this may be unsettling for parents/guardians to not be permitted into the Centre at this time; however, this will ensure that the childcare setting remains free of infection. Staff will provide photos of themselves so you can see who is caring for your child.

Refer to **Screening Station** for further information about drop-off and pick-up procedures.

**Health Screening Form**

The [COVID-19 School and Child Care Screening Tool](#) is available to support parents/guardians, staff/providers and essential visitors to help you decide if you should or should not go to childcare today. This is an optional tool and separate from the health screening form (via Google Docs) the Centre requires to be submitted daily prior to arriving at the childcare.

A health screening form via Google Docs is automatically emailed to staff and parents/guardians at 6 a.m. during our days of operation. This form must be completed and submitted back to the Centre prior to your arrival at the facility.

- [COVID-19 Child Health Screening Form](#)
- [COVID-19 Staff/Essential Worker Health Screening Form](#)
- [York University Screening Form](#)

The health screening forms via Google Docs will be kept updated to align with TPH’s [health-screening questionnaire for child care centres](#) and the [staff health-screening questionnaire](#).

The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival. A QR code is a type of matrix barcode that contains data for a locator or tracker that points to a website or application.

**How to scan the QR code:**

1. On your phone or tablet, open the built-in camera
2. Point the camera at the QR code
3. Tap the banner that appears on your phone or tablet
4. Follow the instructions on the screen before submission

If you were unable to complete the screening prior to your arrival, the screener will conduct an in-person health screening using a tablet.

Anyone who is symptomatic, does not pass screening, or has been advised to self-isolate by the local public health unit are not be permitted to attend the program and should stay at home (this includes children, childcare centre staff, placement students and essential visitors).
If excluded from the Centre, children, placement students and staff are expected to report their absence and any symptoms associated with COVID-19 to the Coordinator (416) 736-5959. LWCC recommends that the individual who is ill go to a COVID-19 assessment centre as soon as possible. Also call TPH: (416) 338-7600 or Telehealth Ontario 1-866-797-0000. Please remain home and follow instructions from TPH to determine when to return to the facility.

Refer to TPH’s COVID-19 Decision Guide for Child Care and TPH’s Screening Tool for further procedural clarification.

If the individual answers no to all questions on the health screening form, admittance into the Centre will be allowed.

The Coordinator uses Google Sheets to view all the submitted health screening form results on one auto-generated spreadsheet. All staff are to ensure that they have answered and submitted the health screening questions via Google Docs. The first staff to arrive in the facility each day will take the temperature of the second staff entering the building.

Health screening questions may change as more information about the virus becomes available. Screening posters, checklists and forms will be updated as advised by TPH.

Refer to Symptoms of Illness if developed while the individual is on-site.

**Documentation of the Health Screening Form**

At the time of arrival each day, the Coordinator is responsible for ensuring that documentation of the information received from the individual's health screening form must be kept and is accessible to the child’s cohort throughout each day of operation. If a child presents COVID-19 symptoms at any time, this information must also be documented in the child's personal file.

The aforementioned Health Screening Procedures is directly from the attached Appendices #1 Health Screening Procedure.

**Protecting Yourself from COVID-19**

To prevent and control the transmission of micro-organisms, staff must focus on the following principles:

1. Risk Assessment
2. Hand Hygiene
3. Use of Personal Protective Equipment (PPE)
4. Management of the Environment
5. Administrative Controls (Operational and In Program Considerations)
Risk Assessment

Perform a risk assessment before each child interaction:
- What you will be doing? Is there a risk of exposure to the COVID-19 virus?
- Does the child have symptoms of a respiratory infection?
- What kind of contact/interaction will you be having with the child?
- Is there a way to maintain a 2-metre/6 feet distance with the child during the interaction?
- Is there a way to avoid contaminating your hands during the interaction?

Hand Hygiene

LWCC is committed to providing a safe and healthy environment for children, families, and employees. The Centre will take every reasonable precaution to prevent the risk of communicable diseases within our childcare facility.

Hand hygiene is an important element of IPAC in childcare centres. During a pandemic, hand hygiene should be reinforced and practiced by staff, children, parents/guardians, and visitors.

Increased hand washing monitoring will be implemented at the Centre. The handwashing procedure will be reviewed immediately with staff or children not following the appropriate handwashing procedures.

Hand hygiene posters (handwashing and hand sanitizing) from TPH will be posted at the entrance/exit and in areas where they are likely to be seen to remind everyone to practice hand hygiene frequently.

Definitions

Hand hygiene is a general term referring to any action of hand cleaning. Washing hands with plain soap and water are recommended as the mechanical action is effective at removing visible soil as well as microbes. In instances where handwashing sinks are not available, supervised use of alcohol-based hand sanitizers (70% - 90% alcohol concentrated) will be used on children over the age of 2 years with parent/guardian consent.

Two ways to perform hand hygiene:
- Handwashing
- Alcohol-Based Hand Sanitizer

Procedures

Hands carry and spread germs. Touching your eyes, nose, mouth, or sneezing or coughing into your hands may provide an opportunity for germs to get into your body or spread to others.

Keeping your hands clean through good hygiene practice is one of the most important steps to avoid getting sick and spreading germs.
Ensure that individuals are always practicing good hand hygiene when visibly dirty and/or after:
- Coming into contact with any soiled/moutherd items
- Coming into contact with bodily fluids
- Gardening
- Handling garbage
- Handling raw foods
- Handling soiled laundry or dishes
- Handling soiled toys or other items
- Outdoor play and before and after using shared play structures
- Sneezing, coughing, or blowing your nose
- Toileting/diapering routine
- Using the washroom

Hands should be cleaned frequently. At a minimum, practice hand hygiene:
- After contact with body substances, mucous membranes of the eyes, nose, and mouth and non-intact skin (sneezing, coughing)
- After touching 'regularly touched' items such as doorknobs, toilets and sink taps
- After using the washroom
- Before and after child contact
- Before and after going outside
- Before and after preparing, handling, serving and eating food
- Before and after using shared computers, tablet, sorting equipment, toys, etc.
- Before putting on and after taking off PPE
- Upon entering or leaving the childcare centre
- Whenever there is a chance that your hands may have been contaminated!

Additionally, hands should be cleaned using soap and water or hand sanitizer before and after:
- Before and after giving medication
- Changing diapers
-Dispensing/handling expressed breastmilk
- Glove use
- Handling animals
- Preparing, handling, serving, and eating food
- Sensory play activity
- Touching a cut or open sore

When hands are visibly soiled, follow these steps for cleaning hands:
1. Wet hands
2. Apply soap
3. Lather for 15-30 seconds. Rub between fingers, back of hands, fingertips, under nails
4. Rinse well under running water
5. Dry hands well with a paper towel
6. Turn taps off with a paper towel
When hands are not visibly soiled and are using hand sanitizer, follow these steps for cleaning hands:

1. Apply hand sanitizer (70-90% alcohol-based)
2. Rub hands together for 15-30 seconds
3. Work sanitizer between fingers, back of hands, fingertips, and under nails
4. Rub hands until dry

**Hand Hygiene Monitoring**
As soon as children arrive to the room, they will wash their hands properly with the supervision of a staff. Hand washing visual posters from TPH are posted by every sink. Hands will be washed more frequently throughout the day with soap and water for at least 15 seconds.

To ensure that employees and children are using proper hand hygiene methods, the Coordinator and/or designate will observe and review hand hygiene practices on a regular basis and provide feedback to employees and children as required. If the proper handwashing method is not observed, the observer will demonstrate the proper method and request handwashing is repeated.

**Hand Sanitizing Information**
When your hands are not visibly dirty, a 70-90% alcohol-based hand sanitizer can be used. Hand sanitizers can only be used on children who are over the age of two and must always be used under adult supervision. Adults must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity. **Parent/guardian consent is required to use hand sanitizer on children.**

**Glove Use**
Staff must wear gloves when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment, or environmental surfaces. Gloves are single use only.

**Gloves and Hand Hygiene**
Hand hygiene shall be practiced before applying and after removing gloves. Gloves shall be removed and discarded after use.

To reduce hand irritation related to gloves:
- Ensure that hands are clean and dry before wearing gloves
- Ensure gloves are intact, clean and dry inside
- Gloves are single-use only and must be task-specific such as gloves for diaper changes
- Wear gloves for as short a time as possible

LWCC will ensure:
- Additional tissue supplies and waste receptacles are made available
- Alcohol-based hand sanitizers are provided to supplement handwashing facilities. They are placed in areas children cannot access independently
• Staff will ensure Safety Data Sheets and product labels that provide additional information regarding placement, storage, and warnings associated with alcohol-based hand sanitizers are available on-site
• Written permission from parents/guardians permitting the use of an alcohol-based hand sanitizer on their child/children is completed

Respiratory Etiquette
To prevent the spread of respiratory infections, proper respiratory etiquette will be taught to the children and regularly practiced by staff, placement students and essential visitors. Respiratory etiquette posters are posted at the entrance/exit and in areas where they are likely to be seen to remind individuals to practice proper respiratory etiquette.

Germs, such as influenza and cold viruses, are spread by coughing and/or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs.

Respiratory etiquette includes keep your distance (preferably more than 2 metres/6 feet) from people who are coughing or sneezing. Follow these steps to stop the spread of germs:
1. With a tissue, cover your mouth and nose when you cough, sneeze or blow your nose
2. Put used tissues in the garbage
3. If you don't have a tissue, cough or sneeze into your sleeve, not in your hands
4. Clean your hands with soap and water or hand sanitizer regularly and after using a tissue on yourself or others

The aforementioned is directly from Appendices #2

Hand Hygiene and Respiratory Etiquette Policy and Procedure

Personal Protective Equipment (PPE) Policy and Procedure
All children in grades 1 and above are required to wear a non-medical mask or face covering while inside a childcare setting. All children (senior kindergarten and below) are encouraged but not required to wear a non-medical mask or face covering, including in hallways. Masks are not recommended for children under the age of two as it cannot be guaranteed the child will reliably not touch their mask and keep the mask on.

Parent(s)/guardian(s) are required to wear a face covering or non-medical mask upon drop-off and pick-up of their child(ren). Should a parent/guardian request their child wear a non-medical mark or face covering while at the Centre, they are responsible for providing their mask(s) or face coverings each day. In addition, they are required to provide a way to store their child’s mask when not in use (i.e., labelled paper bag).

Essential visitors (maintenance, resource consultant, licensing inspectors, etc.) are required to wear a medical face mask upon arrival and throughout the duration of their stay at LWCC. Disposable medical face masks are provided should the visitor not have one on hand.
addition, disposable shoe covers are provided and we request visitors wear them over their outdoor shoes while inside the Centre.

Staff in addition to wearing a medical face mask are required to wear a face shield or goggles. Each staff are supplied with their own personal face shield to use while at the Centre. There is a supply of goggles for each staff should they request to wear goggles instead. Reusable masks are currently not permitted to be used by staff while at the Centre.

To support healthy and safe operation of childcare programs, a supply of disposable medical masks and eye protection (i.e., face shields) is procured and delivered through the Ministry of Government and Consumer Services to licensed childcare centres on a monthly basis. A back-up supply of non-medical or cloth masks are also provided for school age children in childcare in case they cannot bring one from home.

Extra supply of PPE is provided by the Centre. When possible, LWCC will attempt to secure and sustain a one to two-week supply of PPE (including but not limited to face shields or goggles, medical masks, gloves, etc.) and cleaning supplies that can support the Centre’s current and ongoing operations at all times.

All staff and placement students are required to wear medical masks and eye protection (i.e., face shield or goggles) while inside LWCC, including in hallways and staff rooms (unless eating – but time with masks off should be limited and physical distance of 2 metres/6 feet should be maintained). Masks are to be replaced when they become damp or visibly soiled.

Exemptions or exceptions to wearing a face mask or eye protection may include medical conditions that make it difficult to wear a mask or eye protection (e.g., difficulty breathing, low vision); a cognitive condition or disability that prevents wearing a face mask or eye protection; hearing impairments or when communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication; and when performing duties in which a staff member is separated from their cohort and other staff/children (e.g., working alone in an office or during meal preparation in the kitchen).

The use of masks is required outdoors for adults and children regardless of physical distancing of at least 2 metres/6 feet being maintained between individuals.

The use of medical masks and eye protection is for the safety of staff and the children in their care. This is important when working with young children who may not be wearing face coverings (i.e. under two years). Staff are to keep in mind that it may be difficult to put on a mask and eye protection properly (i.e. without contamination) after having removed them, given the frequent and spontaneous need for close interactions with young children in a childcare.
Please refer to Public Health Ontario for how to properly wear and take off masks and eye protection and a helpful video on how to properly put on and take off masks and eye protection.

All staff at the Centre are required and responsible to perform and promote frequent, proper hand hygiene (including supervising or assisting participants with hand hygiene). Hand washing using soap and water is recommended over alcohol-based hand rub when hands are visibly soiled and for children. Refer to Public Health Ontario’s How to Wash Your Hands fact sheet.

The following PPE is available at the Centre and may be used if there is an identified risk of exposure to the COVID-19 virus:

- Disposable medical face mask
- Disposable shoe cover
- Face shield
- Gloves
- Goggles
- Gown

Unless specified use of PPE is required, deciding to use PPE is based on your risk assessment of the situation

- Ask yourself: What you will be doing, is there a risk of exposure to the COVID-19 virus?
- Social distancing at 2 metres/6 feet and proper hand hygiene will be the most important way to protect yourself from the COVID-19 virus
- Improper use of PPE can create a false sense of confidence, increase chances of infection and waste supply
- Proper use of PPE is an effective part of IPAC, however, it is not a stand-alone method
- Proper hand hygiene must be exercised before putting on and after taking off PPE including gloves, medical face masks, and eye protection.

Strategies for Educators Wearing Medical Face Masks
Language, speech, and social development are so dependent on face-to-face interaction between adults and children. When wearing a medical face mask, facial expressions become more difficult to read, it is more difficult for an adult to show their interest in what a child is doing or saying, and speech may be muffled.

Strategies to use as educators are required to wear a medical face mask in our program:

- **Speak loudly and clearly** to avoid the muffling effect of a face mask.
- **Lower yourself to the child’s physical level** even though you may be distanced.
- **Exaggerate your intonation** in the absence of being able to use facial expression to augment and clarify your message.
- **Exaggerate your gestures** which will help get a child’s attention and provide visual cues in the absence of the child being able to fully see your facial expression.
• **Consider wearing a badge or photo of yourself** or having photos in the classroom of educators and children with and without medical face masks. This is a great opportunity to make a ‘homemade’ book involving the children in the process.

• **Use gestures to encourage a child to take another turn** in an interaction or conversation e.g. hold out your arm, lean your body toward the child.

• **Aim to convey your message with your eyes** as much as possible such as using wide eyes when surprised, smiling eyes when happy, etc.

• **Make explicit comments to draw children’s attention to your feelings**, e.g., ‘Look how happy my eyes look! “Look how surprised I am. My eyes are so wide!”

• **Encourage parents/guardians to play with face masks on with their children** so children become more comfortable when seeing face masks at childcare. Play by putting them on and taking them off so children understand that the person wearing them is the same friendly person they have always known even if part of their face is hidden. Face mask play can turn into a game where educators reveal a smile, frown, surprised look, etc. make comments such as “Even though you couldn’t see my mouth, I was smiling and happy to see you!”

The aforementioned is directly from *Appendices #3 Personal Protective Equipment (PPE) Policy and Procedure.*
MANAGEMENT OF THE ENVIRONMENT

Symptoms of Illness in the Centre

Ensuring that all environmental conditions are constantly monitored is essential in prevention and reducing illness. Employees must monitor for an increase in the above-normal amount of illnesses among other employees and children by looking at the normal occurrence of illness at the childcare and during the specific time period.

Staff will complete a basic health check and screening to ensure your child is asymptomatic when they arrive. Your child will also be monitored throughout the day. The following information may be considered when evaluating a child’s symptoms:

- Daily screening results
- Information provided by the parents/guardians about the child’s baseline health and other known underlying conditions (e.g., allergies, anxiety, asthma)
- Daily observations made by staff that care for the child (e.g., identifying a new or worsening cough, or differentiating between a runny nose that is persistent as opposed to one that subsides and is likely caused from returning inside from the cold)
- Record symptoms of illness for each child including signs or complaints the child may describe (e.g., sore throat, stomach ache, headache, etc.)
- Record the date and time that the symptoms occur
- Record the room the child attends (e.g., room number/description)
- Record attendances and absences
- Alternative assessments by a physician or a health care practitioner regarding symptoms (if available)

Refer to the COVID-19 Decision Tool for Child Care (child attendees) for further information.

If Symptoms Develop in Staff During the Day

In the event that a staff member develops any symptoms of illness (respiratory or otherwise) while at the Centre, the staff member must be immediately excluded from the program and sent home.

If the staff member is experiencing respiratory symptoms, ensure the staff member immediately performs hand hygiene, is wearing a medical face mask, and leaves the childcare centre.

All items used by the staff who is symptomatic will be cleaned and disinfected immediately after they leave the Centre. All items that cannot be cleaned (e.g., paper, books, cardboard puzzles) will be removed and stored in a sealed container for a minimum of 7 days.

The Coordinator will inform parents/guardians of children and staff via email who were exposed to the ill staff and advise that they should monitor their child for symptoms.
If Symptoms Develop in Children During the Day

If a child appears to be sick or displays symptoms of COVID-19 while at LWCC, we will notify the parent(s)/guardian(s) or emergency contacts to immediately pick-up the child within one hour of notification. It is recommended that the person go to an assessment centre for testing as soon as possible and to self-isolate at home until their result is available.

The child will be immediately separated from the rest of the cohort in a designated room (i.e., isolated room). If a separate room is not available, the child who is symptomatic will be kept at minimum of 2 metres/6 feet from others. The child will be encouraged to lie down on a cot while waiting for the parent/guardian or emergency contact person to arrive. Outside doors and windows will be opened to increase air circulation in the area if it can be done so safely.

The symptomatic individual will be provided with tissues and both supervising staff and child are to practice hand hygiene, respiratory etiquette and proper disposal of tissues while awaiting to be picked up. Should a sink not be readily available, hand sanitizer of at least 70% alcohol concentration will be provided for children above the age of 2 and with parental/guardian consent. If tolerated and above the age of 2, the child should wear a medical mask if they are able to use it properly (e.g., avoiding touching while on).

One staff will remain with the symptomatic child until a parent/guardian arrives.

Staff supervising the ill child should maintain physical distancing as best as possible. We recognize that physical distancing may not always be possible (e.g., if a young child needs comfort). Staff are to wear PPE, including a medical mask, eye protection (e.g., face shield or goggles), disposable gloves and a gown at all times and not interact with others. All staff are properly trained on donning and doffing PPE. Disposable shoe covers are available and optional to wear over indoor shoes. Staff will avoid contact with the child’s respiratory secretions.

Upon pick-up, the ill individual and/or their parent/guardian are advised to use the online self-assessment tool and follow instructions which may include seeking medical advice or going for testing for COVID-19. Note that individuals do not require a medical note or proof of negative test to return back to the program.

Household members (i.e., siblings) must be excluded from the program. Please see TPH Screening Tool for further guidance.

All items used by the child who is symptomatic and within 2 metres/6 feet of the ill person will be cleaned and disinfected immediately after they have been picked-up/left the Centre. This includes hallways and rooms where the individual has passed through. Staff will wear full PPE (i.e., disposable gloves, disposable shoe covers, face shield/goggles, gown, medical face mask) while cleaning and disinfecting, ensuring that appropriate contact time is used. Disposable cleaning equipment, such as disposable paper towels and wipes, will be used where possible. Waste will be disposed in a fresh garbage bag, tied to seal the contents and tossed into a garage bin that has a lid and out of children’s reach.
All items that cannot be cleaned (e.g., paper, books, cardboard puzzles) will be removed and stored in a sealed container for a minimum of 7 days. Refer to Appendices #6 Environmental Cleaning and Disinfecting Procedure for additional information regarding cleaning products and contact time.

The Coordinator will update and inform necessary stakeholders within the childcare community via email while maintaining confidentiality of the ill individual (e.g., Student Centre building management, service system manager and/or the ministry through a Serious Occurrence Report as applicable). In addition, the Coordinator will inform parents/guardians of children and staff via email who were exposed to the ill child and advise that they should monitor their child for symptoms.

Regular childcare operation can continue unless directed otherwise by TPH.

Suspected COVID-19 Cases at LWCC

Symptomatic staff and children will be excluded from the Centre and referred for testing. While awaiting test results, symptomatic staff and children will be directed to self-isolate.

If the symptomatic child is tested for COVID-19, follow the guidance of TPH for isolation and returning to the program. If there are other siblings or members of the household that attend the childcare, TPH will provide any further direction on returning to the program.

Childcare staff and children who have been exposed to an individual who became ill with symptoms must continue to be cohorted and monitored for signs and symptoms of illness:

- Staff and placement students must not be assigned to other cohorts or work in other childcare settings. They must also be advised to avoid being in contact with vulnerable persons or settings where there are vulnerable persons (i.e., long-term care homes).
- Staff must ensure that mixing of children is prevented
- The Coordinator will inform parents/guardians of children who were exposed to the ill individual, and advise that they should monitor their child for symptoms

Refer to COVID-19 Interim Decision Guide for Child Care Operators to Direct Cohorts to Self-Isolate.

If you have symptoms of COVID-19, and were not a close contact of someone with COVID-19:

- Stay home and self-isolate. Please see the most updated Screening Posters and Questionnaires for more information
- Contact Telehealth 1-866-797-0000 or your health care provider
- Find out how to get tested and what you need to do
Child or Staff Has Been Excluded Due to COVID-19 Symptoms (Suspected COVID-19)

- The Coordinator will inform the Board of Directors and Student Centre building management immediately
- Parents/guardians of “close contacts” (staff and children who were in the same room) are contacted, cohorted and monitored for symptoms
- Symptomatic staff and children will be referred for COVID-19 testing
- As of October 2020, TPH no longer requires the reporting of symptomatic persons
- As of November 2020, the ministry no longer requires to report a serious occurrence for suspected cases

Exposure to Someone with COVID-19

We ask that all parent(s)/guardian(s) and staff let us know of any potential COVID-19 exposure immediately. A potential exposure means being a household contact or having close contact within 2 metres/6 feet of an individual with confirmed or suspected COVID-19 for at least 15 minutes. The timeframe for having contact with an individual includes the period of 24-hours before the individual became symptomatic. If there is a positive case of COVID-19 in a child or an adult who has been present in LWCC, we will inform the ministry, TPH, York University Student Centre (YUSC) management, LWCC Board of Directors, parents/guardians and staff.

LWCC staff, placement students and children exposed to a confirmed case of COVID-19 must be excluded from the childcare setting:

- Individuals must self-isolate at home and monitor for symptoms. Please see the most updated Screening Posters and Questionnaires for more information
- Contact Telehealth 1-866-797-0000 or your health care provider
- Individuals who have been exposed to a confirmed case of COVID-19 should get tested
- If you do get tested, you must self-isolate while you wait for your results.
- If your test result is positive, you must stay home and self-isolate for 10 days if you have mild/moderate illness, or 20 days if you have severe illness or are immune compromised
- If you develop symptoms and do not get tested, you must self-isolate for 10 days if you have mild/moderate illness, or 20 days if you have severe illness or are immune compromised. You must also complete 14 days self-isolation from your last contact with the contact with COVID-19

Positive Cases of COVID-19

If you have tested positive for COVID-19:

- Individuals must self-isolate at home and monitor for symptoms. Please see the most updated Screening Posters and Questionnaires for more information
- If you were hospitalized in an intensive unit (ICU) with severe COVID-19 illness, or have a severe immune compromise (e.g., cancer chemotherapy, untreated HIV infection), you will have to self-isolate for 20 days
• Staff and children who are being managed by TPH must follow TPH instructions to determine when to return to the childcare. Clearance tests are not required for staff or children to return to the childcare

In all cases of a positive COVID-19 case at the Centre, once a positive test result has been received, the following steps must be taken:

Coordinator
• Will inform the Board of Directors and Student Centre building management immediately
• Only positive laboratory-confirmed cases of COVID-19 associated with childcare settings must be reported to TPH, Toronto Public Health (TPH) COVID-19 Notification Form for Child Care Settings
• Direction from TPH may include:
  o Providing attendance record (record of people who were in the childcare centre)
  o Providing names and contact information for families and staff being excluded
  o TPH will provide guidance on the information that should be shared with other staff, parents/guardians of children in the childcare centre
• Send out any communication provided by TPH to the following groups:
  o Families of children who are in direct contact with confirmed COVID-19 cases
  o Staff who are in direct contact with a confirmed COVID-19 case
  o All other families and staff who are not in direct contact with a confirmed COVID-19 case and are not being excluded from the Centre
• Report to the ministry by submitting and/or updating a Serious Occurrence

When Staff Members, Children or Household/Close Contact Test Positive For COVID-19

Staff Member
In the event a childcare staff tests positive for COVID-19:
• The employee should inform the Coordinator immediately and self-isolate immediately
• The employee will cooperate with management to identify close contacts and follow the direction from TPH and the Coordinator
• All other staff and families affected shall receive communication from the Coordinator. The Coordinator will send out communication as applicable
• All staff and children who are in the same room as the staff member who has tested positive will be excluded from the Centre for 10 days unless indicated otherwise by TPH

Child
In the event a child tests positive for COVID-19:
• The parent should inform the Centre’s Coordinator immediately
• The child will be managed by TPH
• All staff and children who are in the same room as the child who has tested positive will be excluded from the Centre for 10 days unless indicated otherwise by TPH

Household/Close Contacts of Children or Staff
In the event a household member or close contact of a child or staff tests positive for COVID-19:

- The staff or family who is “close contact” of a positive COVID-19 case attending LWCC should inform the Centre Coordinator immediately
- The staff member or child will be required to isolate and will be excluded from the Centre for a minimum of 10 days to monitor symptoms unless indicated otherwise from TPH

**Report Cases and Outbreaks to Toronto Public Health (TPH)**

LWCC have a duty to report confirmed cases of COVID-19 under the Health Protection and Promotion Act.

Two or more symptomatic laboratory-confirmed case of COVID-19 in a childcare Centre staff, placement student or child with an epidemiological link, where at least one case could have been infected in the childcare setting would be considered a confirmed COVID-19 outbreak, in consultation with TPH.

The Centre will notify TPH immediately of all laboratory-confirmed cases of COVID-19 by completing the Toronto Public Health COVID-19 Notification Form for Child Care Settings upon learning of the case and follow the instructions provided regarding the closure, reporting, and information regarding a return to care. TPH will also provide specific advice on what control measures should be implemented to prevent the potential spread and how to monitor for other possible infected staff members, placement students and children.

Additional support can be accessed by calling TPH at 416-338-7600 during work hours (8:30 a.m. to 4:30 p.m., Monday to Friday) or 3-1-1 after hours or by emailing publichealth@toronto.ca.

**Serious Occurrence Reporting**

Previously, licensees were also required to report all suspected cases of COVID-19 to the ministry. Currently, only where a child, staff, student, or an essential visitor that has a confirmed case of COVID-19 (i.e., a positive COVID-19 test result), licensees must:

- Report this as a serious occurrence to the ministry
- Report to the TPH unit and provide any materials (e.g., daily attendance records) to public health officials to support case management and contact tracing and other activities in accordance with all applicable legislation, including the Municipal Freedom of Information and Protection of Privacy Act.

Public health officials will determine any additional steps required, including but not limited to how to monitor for other possible infected staff/providers and children and the declaration of an outbreak and closure of rooms and/or entire childcare settings.

- If a closure is ordered by the TPH and the licensee has already submitted a serious occurrence for a confirmed case, the existing serious occurrence must be updated to reflect the closure.
Should additional individuals at the childcare develop a confirmed case, licensees must:

- Revise the open serious occurrence report to include the additional cases; or,
- Submit a new serious occurrence report if the first has been closed already.

While licensees are no longer required to report a serious occurrence for suspected cases; if the TPH unit determines that a full or partial closure is required (i.e., program room or entire childcare must remain closed for a period of time), a serious occurrence report must be submitted under the “Unplanned Disruption of Service” category. There are requirements of employers to let staff know if they may have been exposed in the workplace. Please see

Appendices #9

LWCC is required to post a serious occurrence notification form as required under CCEYA. It will be posted at our entrance/exit screening area as well as emailed to placement students, staff, parent(s)/guardian(s), the Board of Directors and Student Centre building management.

Outbreak Management
An outbreak may be declared by the TPH unit when within a 14-day period, there are two or more laboratory-confirmed COVID-19 cases in children, staff/providers or other visitors with an epidemiological link (e.g., cases in the same room) where at least one case could have reasonably acquired their infection in the childcare setting.

TPH will work with the licensee to determine whether epidemiological links exist between cases and whether transmission may have occurred in the childcare setting.

If TPH declares an outbreak, they will determine what happens next. This could include closing particular childcare rooms or an entire childcare setting.

- TPH will help determine which groups of children and/or staff/providers need to be sent home or if a partial or full closure of the childcare setting is required.
- If the public health unit determines that partial or full closure of the childcare setting is required, the licensee must revise their existing serious occurrence report for a confirmed COVID-19 case to include information about the closure.

Returning to Care for Children with Symptoms
If an ill child who has not been exposed to someone with COVID-19 has a negative test result:

- They may return to the setting 24 hours after their symptoms start improving, the child is well enough to participate in program activities and they pass screening

If an ill child who has not been exposed to someone with COVID-19 is not tested:

- The parent/guardian should ensure that the symptomatic child self-isolate for the required duration of days from the date their symptom(s) started, and contact a health care provider for further advice or assessment, including if the child needs a COVID-19
LWCC may allow symptomatic children that have not been tested to return to care based on an alternative assessment made by a physician or health care practitioner regarding symptoms or the determination that COVID-19 testing is not required.

- Medical notes are recommended or required by TPH
- Parents can complete a Return to Child Care Confirmation Form that confirms that your child is healthy and able to return to the childcare. By adding your signature, you are verifying that the information is true. LWCC requests that this form is completed and returned to LWCC’s Coordinator.

For further details around excluding ill children from the program, see attached Appendices #4 Exclusion of Sick Children Policy and Procedure.

The aforementioned procedure for Suspected or Positive COVID-19 Cases at LWCC is directly from Appendices #5 Procedure for Suspected or Positive COVID-19 Cases.

Communicate with Families and Other Stakeholders

- Communication platforms for program information and protocols on health and safety measures (e.g. screening practices, physical distancing, staying home if you’re sick) is through our website, emails, social media accounts and the HiMama application
- When applicable, develop a communications strategy in partnership with affiliated schools to ensure a collaborative response to laboratory-confirmed cases of COVID-19 in children who are both childcare attendees and students
- Telephone or video conferencing may be arranged for meetings between childcare staff and parents/guardians, stakeholders, Board of Directors or licensing inspectors
- Signs are posted at all entrances instructing individuals are not permitted in the Centre if they are ill
- Communication with stakeholders such as the Student Centre building management will be on a routine basis to provide updates about policies and procedures and to align any gaps or concerns regarding IPAC practices
- Parents/guardians are encouraged to speak to the Coordinator about current exclusion/return-to-care requirements and possible work arrangements in the event that their child becomes ill and is isolated and/or excluded from care
- TPH will provide further advice about information that will be shared with other staff, parents/guardians and other stakeholders in the event there is a case or outbreak of COVID-19 in the setting

Information will be specific to the nature of the situation:

- Changes in delivery of services and programs
- Evacuation plan/location
- Reduction of services and programs
- Refund/no refund policy to be shared with members
- Reopening of LWCC
- Safety and well-being of everyone at the Centre/program
- Status updates
- Shutdown of LWCC

External communication to the municipal, regional, licensing bodies, and the community (possibly media) will be by the Coordinator and/or designate of LWCC. The external contact information for the agencies/individual are located/posted in the LWCC office.

**Authority to Shutdown**

LWCC will follow all directions and recommendations from public health officials and the Provincial/Federal Government should a pandemic be declared.

The Public Health Act and the Emergency Measures Act authorize all levels of government to order a shutdown of services during a pandemic.

**Procedures**

**If a pandemic is declared and LWCC remains open:**
- Secure staffing to maintain ratios and safety utilizing all available part-time, supply or an outside agency staff
- Ensure additional staff are available to provide relief where required
- Modify shifts were required
- Identify which programs can be modified to accommodate possible increased or decreased needs
- Consult emergency health and safety supply checklist located in our inventory found on each tablet and office computer
- Secure additional cleaning supplies, routine-care supplies, and program supplies
- Ensure extra PPE supplies are available
- Ensure food service/delivery is secure
- Secure/access reserve funding for additional expenses
- Ensure families/clients are informed as per LWCC communication plan
- Ensure any other reporting requirements (licensing, municipal, etc.) are completed

**If LWCC is ordered to close:**
- If LWCC is open, all parents/guardians will be contacted immediately by the Coordinator and/or designate to pick-up their child(ren)
- Provide a letter or send out an email provided by the Board of Directors with specific details including refund/no refund policy
- Ensure families/clients who are absent are informed
- Inform the required regulatory bodies
• Inform all employees who are not present
• Initiate emergency closure plan
• Ensure all confidential information, records, and files are secured and locked

Preparation for Possible Shutdown

In the case of a mandatory shutdown, an off-site office will be set up by the Coordinator. A list of essential services and contacts is ready to be taken off-site and includes:

• Written instructions on how to access essential services
• Transfer computer files onto a portable hard drive
• Change the LWCC’s phone message to be directed to contact the Centre’s email
• How to set up remote access to the organization’s website
• Contact information for the Board and Licensing Advisor
• Contact information and passwords for Financial/Banking Institution
• Contact information and policy for the Insurance Company
• Ensuring continued access to payroll, finances and accounting systems
• Current list of families/clients
• Current list of employees
• Current list of suppliers and services
• Keys, key fob and passwords
• Any additional documents/records that are vital to the organization

Securing Records and Back-Up of All Information

• Ensure all records, documents, and computer files are backed-up
• Keep a back-up copy of the computer’s operating system, and critical software off-site
• Ensure all filing cabinets are locked
• Ensure the office is locked down
• Ensure the facilities are locked down

Recovery

LWCC will follow the directions of the Government and Public Health regarding reopening the Centre once the shutdown has been lifted.

The Board of Directors and the Coordinator and/or designate will meet regarding establishing the priorities for resuming services and programs that were interrupted or affected by the pandemic.

The Board of Directors and the Coordinator and/or designate will ensure all updated policies and procedures are in place including the Employee Handbook and the Parent/Guardian Handbook.

LWCC is obligated under the Health and Safety Act, to provide a safe and healthy work environment:
• Ensuring the premises have been thoroughly cleaned and disinfected before reopening
• Coordinator will inform the Board of Directors once the premises are ready to be opened
• Ensure critical supplies (cleaning product, disposable gloves, medical face masks) are re-stocked to protect both staff and children
• Recall employees to review policies and procedures around cleaning protocols, ill children and sick leave policy for staff

Enhanced Environmental Cleaning and Disinfection

Disinfectants commonly used in childcare settings are effective against COVID-19. Otherwise, all disinfectants must have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada. Always check expiry dates of products and follow the manufacturer’s instructions.

All staff are educated on how to use the cleaning agents and disinfectants used at LWCC (e.g., required disinfectant contact times, safety precautions, required PPE, and directions on where and how to securely store cleaning and disinfectant supplies).

In an effort to maintain a physical distance of 2 metres/6 feet between individuals and limit the spread of pathogens, items such as toys should be limited to one child at a time and cleaned and disinfected after each use.

Items that are not able to be cleaned and disinfected easily or at least twice daily should be removed from use at this time. Currently, these items have all been placed into storage. Activities that do not allow for a physical distance of 2 metres/6 feet between individuals and where media cannot be easily cleaned and disinfected should also be discontinued at this time. Examples of items and activities that should be discontinued include but are not limited to the following:

- communal sensory play including the use of water, sand and dry foods
- items that require laundering such as dress-up clothes
- paper materials that are unable to be cleaned and disinfected (i.e., puzzles, cards, magazines)
- soft toys and pillows

It is recommended that enhanced environmental cleaning and disinfection principles be applied to all aspects of the facility and may include the following:

- cleaning and disinfection of toilets after each use
- cleaning and disinfection of cots after each use. Rest mats are currently not used
- blankets and bedsheets are laundered daily after each use

Cleaning Surfaces and Objects

Regular cleaning and disinfecting of objects and high-touch surfaces will help to prevent the transmission of viruses from contaminated objects and surfaces. The Coordinator and/or designate will ensure monitoring of hand cleaning supplies is increased to ensure all sinks in the
washrooms and playrooms are well stocked with handwashing supplies at all times (e.g., hand soap, paper towels).

As per Public Health Ontario’s recommendations, frequently high-touched surfaces (i.e., toys, learning materials) should be of a material that allows them to be easily cleaned and disinfected at least twice daily at a minimum, however, more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soilage. Frequently touched surfaces include but are not limited to
- computers, keyboards, mouse,
- eating areas (i.e., tables, sinks, countertops),
- handles,
- phones,
- touch screens/tablets,
- washrooms (i.e., toilet fixtures, faucets).

LWCC keeps a cleaning and disinfecting log to track and demonstrate cleaning schedules. Existing practices are reviewed to determine where enhancements might be required, including frequency and timing of cleaning and disinfection, areas to clean and/or disinfect, choice of cleaning products, and child safety, staffing, signage, and PPE use when cleaning.

Water fountains in the classrooms will be closed at this time. Personal water bottles are permitted as long as they are labelled and are to stay at the LWCC. We suggest that children’s water bottles are straw-less so that we may properly disinfect the entire bottle. If not, the childcare has cups and sippy cups that children may borrow. These are labelled with your child(ren)’s name.

As per standard procedures, the Centre will ensure that the program has toys that are easily cleaned and disinfected, and any toys that do not meet the criteria will be temporarily removed from the playroom. The toy washing frequency will be increased from weekly toy washing to daily washing or in some cases toys will be washed per each use.

All hard surfaces and toys will be wiped down/sprayed throughout the day, before and after use, prior to leaving the room, as well as at the end of each day.

LWCC has assigned staff to specifically conduct environmental cleaning and disinfecting throughout the day. They are to sign off on a Cleaning and Disinfecting Log using a tablet to track cleaning and disinfecting activities for each room/area, individual/play items and sleeping equipment such as cots. Their recordings are saved on the tablet and backed-up weekly.

For additional information, refer to the attached Appendices #6 Environmental Cleaning and Disinfecting Procedure.
OPERATIONAL GUIDANCE

Changes in Program Delivery, Closures and Hours of Operation

LWCC may need to change services or close during a pandemic for the following reasons:

- The childcare centre may be asked to close by TPH to reduce the spread of the virus
- The childcare centre may close if caregiver-to-child ratios fall below legislative requirements
- Individual rooms in childcare may be closed due to an outbreak in that room

The Centre will be operating with reduced hours to assist with increased staffing requirements and to allow time for employees to complete all of the requirements around additional cleaning and sanitizing. Our hours of operation is 7:30 a.m. – 6:00 p.m. LWCC will be open 30 minutes after operational hours (6:00 p.m. – 6:30 p.m.) specifically to disinfect the Centre. The need for reduced hours will be reviewed regularly by the Board of Directors and parents/guardians will be notified of any changes.

Communication Plan

LWCC agrees that communication with families regarding the enhancement of health and safety measures facilitate transparency of expectations. New policies/procedures will be shared with families and to ensure they are aware of these expectations, including keeping children home when they are sick to help keep all children and staff safe and healthy.

Parent(s)/guardian(s) will receive LWCC’s COVID-19 Pandemic Response Plan and Operational Practice document which includes the policies and procedures regarding health and safety protocols to COVID-19, requirements and exceptions related to masks.

LWCC are not required as part of re-opening to revise their program statement, full parent handbook, and other policies.

The Centre will provide links to helpful information as well as detailed instructions regarding screening and protocols if a child or individual in the program becomes ill.

In-person communication is not permitted at this time. This includes during drop-off and pick-up times. Parents/guardians may be contacted via email, telephone or scheduled online video meetings.

The Centre will send daily logs via HiMama application and using social media posts to document activities and learning that happens in the program. Photo documentation will be sent to parents/guardians, using the HiMama application if a participation agreement is on file. Refer to Error! Reference source not found.
Enrollment

If you are interested in attending LWCC, please submit a waitlist application that is found on our website. In the event of a room being at its full capacity, you will remain on our waiting list until you request to be removed. Unfortunately, we cannot always meet the needs of parent(s)/guardian(s) when requested. You will be called by the Coordinator and/or designate when an opening becomes available.

LWCC waiting list priority is:

- Families with siblings of children already enrolled in the Centre
- A child already enrolled in the program will have priority over others when moving from one age group into another (applicable when accepting toddlers in the program)
- Students of York University
- CUPE 3903 members
- York University staff and faculty
- Members of the wider community

In each category, the following factor will also be considered when prioritizing families:

- Waitlist application submission dates and availability

Before enrolling your child, parent(s)/guardian(s) must schedule an appointment with the Coordinator for a virtual tour, and the child(ren) may accompany the parent(s)/guardian(s) in an online or telephone interview. We believe this provides both the parent(s)/guardian(s) and the Coordinator the opportunity to clearly convey their expectations of LWCC and go through the enrollment package together. There is a non-refundable registration fee of $50.00 that is required upon booking a registration appointment with the Centre.

Upon the decision to enroll your child, parent(s)/guardian(s) are provided with a registration package, tuition and financial agreement, health and emergency forms, as well as an electronic copy of our Parent/Guardian Handbook and COVID-19 Pandemic Response Plan and Operational Practice document. All forms are to be filled out electronically and submitted to the Centre through email or mail.

Nondiscrimination Policy

Admissions to LWCC are made without regard to race, colour, religious creed, ancestry, national origin, disability, age or gender.

Inclusion Policy

To the greatest extent possible, children with disabilities will be included in the full range of activities and services normally provided to children at LWCC by making necessary modifications to meet the child’s needs.
Access to Childcare Spaces and Prioritizing Families

When determining prioritization childcare spaces during and after a pandemic, LWCC will consider the following in addition to the current waiting list priorities:

- Children that attended emergency childcare centres during the period that the Centre was closed and previously attended the Centre (children of essential, frontline workers);
- Children of essential workers that were not placed in an emergency childcare centre that was previously attending the Centre;
- Children of families who are employed or self-employed where parents/guardians must return to work and that work outside of the home;
- Children of families who are students, in two-parent families, if one parent is a student, another parent must be employed, self-employed or in school;
- Families with special circumstances that would benefit from children returning to care such as children with special needs;
- Children of families who are looking for work.

In each category, the following factors will also be considered when prioritizing families:

- Lone parent families

The need for care and the type of care (part-time etc.) will be determined on an individual basis.

In addition to the above guidelines, our existing Waiting List Policy will be followed.

Immunization

We are required to collect and retain up-to-date immunization for staff and children in the Centre. Please provide us with current immunization information.

If your child has not been immunized, please provide the Statement of Medical Exemption form completed by your health practitioner. You may also complete the Statement of Conscience or Religious Belief which requires a signature by a Commissioner of Oath (e.g., lawyer, paralegal).

- Statement of Medical Exemption (Open Using Adobe Acrobat Reader)
- Statement of Conscience or Religious Belief (Open Using Adobe Acrobat Reader)

If you cannot provide either of these documents, we are unable to provide you with childcare.

If an outbreak occurs, a child who is not adequately immunized will not be able to attend care unless the child receives the required vaccine or until the outbreak is over.

Emergency Contacts List

LWCC will keep an up-to-date hardcopy list of contact information for staff, placement students, parents/guardians of children, TPH and ministry officials. The Centre will ensure parents/guardians have updated pick-up lists for children in case the designated person is unavailable during the pandemic.
Fees and Tuition

LWCC will not charge or accept fees or deposits to add families to a priority list for preferred access to space. In addition, the Centre will not charge fees to parents/guardians if they do not have access to space or decide not to accept a space.

We will be offering all LWCC members a 25% fee discount for full-time care (2020–2021 only).

Only electronic funds transfers (ETF) payments via pre-authorized debit (PAD) are accepted. No cash, cheques or e-transfers. EFT pays your monthly tuition automatically by electronically transferring money from your bank account to the Centre. Please see LWCC’s

Error! Reference source not found.

For new members, please note that the registration fee of $50.00 is required upon booking your registration appointment with the Centre, and is non-refundable.

Refund deposits are added to the tuition of your child’s/children’s first month of enrollment. The amount is based on one full month’s tuition. The deposit is held to assure the commitment of one semester term at LWCC (September – December, January – April, May – August).

If you need to withdraw your child’s/children’s enrollment, refund deposits are only to be used towards the last month of a term (December, April, August) with a one month’s written (via email) notice to the Coordinator. Otherwise you will continue to be charged your monthly tuition and your refund deposit will be held towards the following term. No reimbursement of tuition will be granted. Refund deposits is forfeited if a child’s enrollment is terminated before the last month of a semester.

There is an annual membership fee of $150 applied to September’s tuition. If enrolling during the summer term (May – August), the membership fee is prorated. Due to the pandemic, the 2021-2022 membership fee is discounted to $25 regardless of enrollment month. As a member, you are encouraged to attend the Centre’s Annual General Meeting (AGM) that traditionally occurs in the fall.

Discount for a second and subsequent child will be a 15% discount for parents/guardians who have more than one child enrolled at the Centre, providing that they are using more than 15 hours of licensed care per week and are not using CUPE 3903 subsidy. If you are using CUPE 3903 subsidy, the 15% is not included in your tuition plan.

Tuition is due before or on the 5th of every month, depending on what day the 5th falls in the week. If a payment is one week late, a $20.00 per week late fee will added towards next month’s tuition.
COVID-19 SCHEDULE OF FEES AND CHARGES  
2020 - 2021

<table>
<thead>
<tr>
<th>Block of Time</th>
<th>Number of Hours</th>
<th>Price (Toddler/Preschool)</th>
</tr>
</thead>
</table>
| Monthly Full Time Rate                             | 4 consecutive month enrollment (September – December, January – April, May – August) 8:00 a.m. – 5:00 p.m. | **$1,440 per month (Toddler)**  
**$1,375 per month (Preschool)**                      |
| 8:00 a.m. – 5:00 p.m.                             | 9 hours         | **$95.00/$90.00 per day**                   |
| 8:00 a.m. – 12:00 p.m.                            | 4 hours         | **$40.00/$38.00 per day**                   |
| 8:00 a.m. – 1:00 p.m.                             | 5 hours         | **$60.00/$55.00 per day**                   |
| 10:30 a.m. – 3:30 p.m.                            | 5 hours         | **$60.00/$55.00 per day**                   |
| 12:00 p.m. – 5:00 p.m.                            | 5 hours         | **$60.00/$55.00 per day**                   |
| 1:00 p.m. – 5:00 p.m.                             | 4 hours         | **$40.00/$38.00 per day**                   |

Other charges and fees

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
</table>
| CUPE Discount                                     | **50% off**  
Extra care is not eligible for CUPE discount                                      |
| Discount for second child                         | 15% minimum 15 hours per week of care  
Cannot combine with CUPE discount                                           |
| Late Payment                                      | $20 per week to a maximum of $80.00, if four weeks late.                     |
| Late Pick Up                                      | **$15.00 for the first 10 minutes**, then $1.00 per minute thereafter      |
| Membership fee                                    | $25 (September – August)  
Renewable each September                                              |
| Refund Deposit                                    | Equal to your first full month fee                                          |
| Registration fee                                  | $50.00 non-refundable  
Due upon booking your appointment                                      |
| Tax Receipt                                       | $10.00 for replacement                                                      |

**Late fee during program hours**: You will be charged for the next time block of care if past 10 minutes late from scheduled pick-up time.

**Late fee at the end of the program hours**: $15.00 charge per child for the first fifteen minutes elapsed after your scheduled pick-up time. $1 will be charged for every minute afterwards.

**All tuition is due** regardless of sickness, behavioural/disciplinary removal, vacations, weather-related closings or holidays (including Family day, Good Friday, Victoria day, Civic’s Day, Thanksgiving, Christmas, snow days, and reading weeks).

If LWCC is **mandated by local government to close down**, due to reasons like a pandemic, fees will be refunded for the duration the Centre is closed.

**Vacation (No Charge)**
One vacation week will be granted after a full-time or part-time child that has been enrolled at LWCC for 2 consecutive terms/8 full months. If enrolled at LWCC for 3 consecutive terms/one full year, two vacation weeks will be granted. This can be taken as 2 one week consecutive or 2 weeks consecutive.

a. A vacation week MUST be taken in five consecutive days regardless your tuition plan.

b. A vacation week will not be granted if tuition is not current and paid on time on a consistent basis.

c. The Coordinator requires a 2-week written notice (via e-mail) prior to month requested from parent(s)/guardian(s) who want to use their vacation week(s).

CUPE 3903 union and LWCC have a subsidy agreement that provides members a certain percentage off their childcare fees. Members must provide a photocopy of a current teaching contract or proof of current CUPE membership via email or mail.

CUPE subsidy amounts are subject to fluctuation, but typically range from 20% to 40% of monthly childcare costs. The number of CUPE users at LWCC and the amount of care they use will affect the amount of subsidy available. The CUPE subsidy will remain in effect as long as the CUPE subsidy funds are available.

For the 2021-22 year, we are offering CUPE families 50% off monthly childcare costs.

For further details around enrollment, part-time care, waitlist and withdrawal from the program see attached Appendices #7 Enrollment, Part-time Care, Waiting List, Withdrawal Policies and Procedure.

Protection of Children

LWCC will continue to follow the current protocols in our Parent/Guardian Handbook around children who are picked up late. This protocol includes calling parents/guardians and emergency contacts. If no contact has been made with either the parent or emergency contact by 7:00 p.m., the staff have a duty to report to the police department as well as the Toronto Children’s Aid Society (CAS) (416) 924-4646. The custody of the child(ren) at this time will be determined by the authorities.

Duty to Report

LWCC has a duty to report suspicions and disclosure of child abuse. If the Coordinator and/or staff of the Centre have reasonable grounds to suspect that a child may have been abused, the suspicion, and the information upon which that suspicion is based, must be reported immediately to a CAS.

A professional who works with children, can be charged and fined for failing to report. It is the responsibility of the child protection agency to investigate and follow-up on the situation, as necessary.
If a parent/guardian expresses concerns that a child is being abused or neglected while in our care, the parent will be advised to contact the local CAS directly. Any concern or complaint made by a parent or visitor that suggests an allegation of abuse will be reported to a local CAS by the staff who received the complaint.

**Behaviour Guidance**

LWCC staff use behaviour guidance strategies that support children to develop appropriate social and emotional skills. LWCC and the Early Years Act prohibit the following practices:

- corporal punishment,
- physical restraint of the child, such as confining the child to a chair, stroller or other device for the purposes of discipline or in lieu of supervision, unless the physical restraint is for the purpose of preventing a child from hurting themselves or someone else, and is used only as a last resort and only until the risk of injury is no longer imminent,
- locking the exits of the childcare Centre for the purpose of confining the child, or confining the child in an area or room without adult supervision, unless such confinement occurs during an emergency and is required as part of the licensee’s emergency management policies and procedures,
- use of harsh or degrading measures or threats or use of derogatory language directed at or used in the presence of a child that would humiliate, shame or frighten the child or undermine their self-respect, dignity or self-worth,
- depriving the child of basic needs including food, drink, shelter, sleep, toilet use, clothing or bedding;
- inflicting any bodily harm on children including making children eat or drink against their will.

If a staff member implements any of these practices, the appropriate children’s protection agency would be notified and disciplinary action is taken, including notification to the College of Early Childhood Educators for RECEs. Incidents of this nature are reported to the ministry as a Serious Occurrence.

**Complaints**

If you have a concern or complaint concerning your child's care, we encourage you to speak to the Coordinator directly. If you feel your concern or complaint has not been addressed or resolved to your satisfaction or you prefer to speak to someone else, you may request to contact a Board of Director via email.

Complaints are reviewed promptly and we attempt to resolve them quickly. We monitor complaints and use them to improve the quality of service we are able to provide to you. Complaints are treated confidentially and steps will be taken to help protect your privacy. You will be informed when a decision is made and provided with an explanation for the decision.
Complaints involving staff conduct will be investigated and you will be informed when it is resolved; however, no disciplinary information can be shared.

- All written complaints will be responded to in writing
- While there are certain steps that need to be taken to ensure fairness for all concerned, there can be unavoidable delays; however, we will treat each case in a prompt and thorough manner

If you are making a verbal complaint, you may be asked to put your complaint in writing, especially if it involves a serious or complex matter.

**Confidentiality**

Every issue and concern will be treated confidentially and every effort will be made to protect the privacy of parents/guardians, children, and staff, except when information must be disclosed for legal reasons (e.g. to the ministry, College of Early Childhood Educators, law enforcement authorities or a CAS).

**Respectful Environment**

Everyone has the right to feel safe and to be treated with dignity and respect. Harassment and discrimination will not be tolerated. This is an expectation of everyone entering into LWCC. Failure to adhere to this expectation may result in denied access to the Centre. If a parent/guardian or employee feels threatened, abused or belittled, they may immediately end the conversation and report the situation to the Coordinator.

**Staff Training**

Prior to returning to work, the Centre will ensure all employees have reviewed the training modules provided by TPH and Toronto Children’s Services. Childcare operators are required to confirm with Toronto Children’s Services that all staff have completed the training module by emailing qualityassurance@toronto.ca. The modules include training on:

- Environment and interactions
- Exclusion
- Infection prevention and control (IPAC)
- PPE
- Screening

Training also includes instruction on how to properly clean and disinfect the space and equipment, how to keep daily attendance records, and what to do in the case that someone becomes sick, including how and when to report.

Additionally, staff will be trained on LWCC’s COVID-19 Pandemic Response Plan and Operational Practice document which includes health, safety, and other operational measures
prior to returning to working with children. New training is not required with each iteration of this guidance but offered in a way that includes childcare staff/providers at least once.

**Occupational Health and Safety**

LWCC has an obligation to protect their staff from hazards in the workplace as set out in the [Occupational Health and Safety Act (OHSA)](#) and its regulations as well as the directives coming from the Chief MOH. Staff should raise any concerns to the Coordinator and Board of Directors. The Centre has a duty to take every reasonable precaution to protect workers from the hazards in the workplace and employees have the right to refuse unsafe work.

Staff have been able to participate in a COVID-19 Risk Assessment for the environment prior to returning to work in the childcare facility. This considered the following:

- What risks do we have?
- How can we eliminate risks?
- How is work performed?
- How can we implement barriers against COVID-19?

Workplace communication is a key strategy for reducing hazards in the workplace. Employees will have designated procedures for:

- Reporting illness
- Asking for support
- Expressing concerns

These procedures are:

- Providing feedback/suggestions while completing the Risk Assessment
- Email to the Coordinator
- Verbal Communication
- An anonymous box (Wooden lock box by the kitchen)

Employees are required to protect their own health and safety by working in compliance with the law and with the practices established by the Centre.

For further details around Occupational Health and Safety see attached [Appendices #8 Occupational Health and Safety Policy and Procedure](#) and [Appendices #9 COVID-19 Workplace Safety Plan](#)
The COVID-19 pandemic is an evolving situation – review your plan regularly and make changes as required. Refer to the Ontario government’s COVID-19 website for up-to-date information.

1. How will you ensure all workers know how and are able to keep themselves safe from exposure to COVID-19?

   **Consider:** What guidance will you need to provide? How will you share information? Do you need new or more frequent types of communication? Where will you update yourself on new COVID-19 guidance?

   **Example:** Ensure our procedures are up to date by a daily review of Ministry of Health guidance.

   **Actions:**
   - Only the designated staff (Coordinator) will screen people before entering the workplace
   - Support self-isolation for workers with symptoms and workers who are close contacts of COVID-19 cases
   - Ensure people maintain a physical distance of 2 metres/6 feet or more
   - All personnel entering the Childcare Centre is required to wear a medical face mask (face shield or goggles as well if working directly with children)
   - Enhanced cleaning and disinfecting of surfaces and objects
   - Support hand hygiene
   - Remind workers about good cough and sneeze etiquette and to avoid touching their face
   - Follow Toronto Public Health guidelines
   - Post Toronto Public Health signage at the entrance/exit and throughout the Centre
   - COVID-19 resource board by the staff kitchen is accessible to all personnel
   - Coordinator will keep up to date with Ministry of Education and Public Health guidelines and relay updates with staff via e-mail and on the COVID-19 resource board

2. How will you screen for COVID-19?

   **Consider:** How will you stay current about what symptoms to look for? Will you use a screening checklist? Who will do the screening? Who needs to be screened and how often?

   **Example:** To find out if workers are well when they come to work, we will ask each worker basic questions about their physical health and symptoms using the provincial list of COVID-19 symptoms.

   **Actions:**
   - Active screening will be taking place (the Coordinator will ensure that the information is collected and reviewed to determine whether a person may enter the workplace)
   - Will keep up to date with the Toronto Public Health screening tool for childcare centres
• Will align our health screening forms with Toronto Public Health screening checklist
• Parents must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility
• Staff and essential visitors must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility
• The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival.
• If your phone or tablet is not compatible to scan the QR code, the Coordinator will conduct an in-person health screening using a tablet.
• Children and staff will have their temperature taken at least once a day. Children’s temperatures are recorded onto a HiMama application.
• Signage is made visible and posted at the entrance/exit and throughout the childcare
• Encourage employees to monitor their own symptoms at all times
• Ensure workers know where to find the online COVID-19 self-assessment tool

3. How will you control the risk of transmission in your workplace?
Include how you will maximize distance and separation, reduce transmission from surfaces and objects, and support good hand and respiratory hygiene.

Consider: What engineering and administrative controls will you use? What changes will you make? Who needs to be in the workplace? How will you gather worker ideas about different ways of working?

Example: We have a new policy that limits time in the kitchen to 10 minutes, we have created a new outdoor break area in our parking lot and have changed how we schedule shifts and breaks.

Actions:
• Items that are easy to transmit COVID-19 have been removed from the Centre and placed into storage (i.e., porous items, soft items, area rugs, fabric, wood materials)
• All employees must stay home if they are feeling unwell
• Layout of Centre encourages social distancing
• Dividers are throughout the room to separate tables
• Remove extra chairs, tables, shelves that made it difficult for children to spread out
• Disinfecting is increased to a minimum of twice a day (morning and afternoon). Disinfecting will be more frequent when items are visibly soiled
• Toronto Public Health posters on hand hygiene are available at every sink
• Hand sanitizer is placed in every room and out of the reach of children
• New policies are in place that limit how many people are allowed in the rooms (i.e., kitchen 1 person, staff room 2 people, office 2 people)
• Coordinator will remain in office and limit movement between rooms
• Personal Protective Equipment (PPE) is required at all times by all personnel entering the facility. Employees must wear a medical face mask along with a face shield or goggles. Essential guests are only required to wear a medical face mask
• Will try to keep playground door open as much as possible for ventilation and air flow

4. What will you do if there is a potential case, or suspected exposure to, COVID-19 at your workplace?

Consider: What is the contact information for your local public health unit? What are your isolation procedures? How will you gather workplace contact information for public health contact tracing?

Example: We have designated a safe isolation area in the workplace and created a checklist with the procedures of what to do if some gets sick at work, including key contact numbers.

Actions:
• If an employee calls in sick, we will ask them to complete the self-assessment tool and ask the employee to follow any recommendations given by the tool, including being tested and self-isolating
• If anyone develops symptoms in the Centre, they are sent home to self-isolate.
• If there is a positive test result, the coordinator will report to Toronto Public Health and the Ministry of Education
• We will have contact information of every person that enters the Centre via our Google Doc screening in case we need to contact them. Attendance for essential guests is also kept with more detailed information (i.e., date enter/exit, rooms visited in the Centre, reason for visit, etc.)
• Childcare will be disinfected accordingly if a person has become symptomatic while at the Centre.
• Employees are to self-isolate if they either have symptoms, had close contact with an individual with symptoms or a confirmed diagnosis, or have travelled outside of Canada.
• We have designated a self-isolation area in the workplace in the event a child develops symptoms while in care.
• Toronto Public Health numbers will be posted on the COVID-19 resource board.

5. How will you manage any new risks caused by changes to the way you operate your business?

Consider: With workers, review existing critical risks and whether work practice changes will affect your current risk management strategy. Are any new risks introduced due to changes in worker numbers or work practices? What new risk controls are required?

Example: We will establish regular check-ins with workers about how they’re coping with the change to shift work.
Actions:
- Coordinator will conduct regular check-ins with employees about how they are coping with the changes
- Coordinator will conduct staff training for all employees prior to re-opening

6. How will you make sure your plan is working?

Consider: How often will you schedule a review of your plan? How will you get input and ideas from workers and clients? Who is responsible for evaluating how things are working and for adapting the plan as you find better/easier ways to do things? How will you communicate changes?

Example: We will set up a weekly meeting between the CEO and the health and safety representative.

Actions:
- The coordinator is responsible for evaluating how the workplace safety plan is working
- Reviews to the workplace plan will be updated whenever new guidance documents have been updated from Ministry of Education and Toronto Public Health
- Monthly staff meetings will be held to address any of the workers concerns, suggestions and for feedback
- Once changes have been made, all documents will be e-mailed to employees and will need to sign off on them
Appendices #10
Toy Disinfection Procedure

Disinfection of toys is vital to ensuring the health and safety of children as it reduces and mitigates the potential spread of germs and viruses among children and those who may come into contact with them.

All toys that are plush must be removed and not used in play. These include stuffed animals, hand puppets, cloth toys etc. In additional, all communal sensory play is suspended. Porous toys or materials that cannot be effectively cleaned and disinfected must be removed and not used in play.

Staff is to wear personal protective equipment (PPE) for toy disinfection procedures (i.e., medical face mask, face shield/goggles, gloves). Hands need to be cleaned after removing PPE.

Toys must be cleaned and disinfected daily and as often as necessary (e.g., when soiled, contaminated or if the toy has been used by a symptomatic individual).

**Toy Washing Procedures – Cleaning and Disinfection Using a Mechanical Dishwasher**
Toys cannot be cleaned and disinfected using LWCC’s mechanical dishwasher in the kitchen as the rinse cycle surpasses the required minimum of 82 degrees Celsius.

**Toy Washing Procedures - Manual Cleaning and Disinfection**
Toys are cleaned and disinfected using the Toronto Public Health (TPH) three-compartment sink/bin method
1\(^{st}\) sink: Wash toys with detergent
2\(^{nd}\) sink: Rinse with clean water

The designated person responsible for the cleaning of toys will ensure toys dry in a designated area that is separate from bathrooms, change tables, and protected from sources of contamination. They are to ensure that required disinfectant contact times are archived or alternatively allows toys to air dry.

**Toy Washing Procedures – Cleaning and Disinfecting Large Toys/Equipment Using Bleach Solution Spray**
Large toys, wooden toys, cots, etc. that cannot be immersed in a disinfectant solution should use this method for washing. Please follow the steps below:
1. Clean with soap and water using a cloth
2. Wipe with a clean wet cloth to rinse
3. Disinfect by spraying bleach solution and let it sit for a minimum of 2-minute contact time. Do not spray product to toys and surfaces when children or other staff are nearby
4. A final rinse is required using a single-use wet paper towel
5. Allow toys to air dry

Tips and Reminders
- Fill the bucket only to a level that is comfortable for transporting to the area you use for toy washing. A trolley can also be used to assist with transporting
- Unused test strips must be kept dry and in a dark space
- When a new bottle of test strips is opened the date opened should be written on the bottle
- Test strips expire six (6) months after the container is opened. Any unused test strips must be discarded after 6 months as it is no longer effective

Frequencies and Toy Cleaning Schedules
- Toy cleaning schedules will be saved onto the program rooms tablet and updated daily by the staff person responsible for the area
- Toys, including large toys, cots, equipment and high touch items will be cleaned and disinfected at least two times per day and as often as necessary (i.e., when toys/items are visibly soiled or when toys/items have been contaminated with body fluids)
- Toys and items such as electronic devices/tablets should be cleaned and disinfected between users prior to redistributing
- Refer to Appendices #6 Environmental Cleaning and Disinfecting Procedure for more guidance

Handling Used Toys
- Toys that have become visibly dirty or that have come into contact with body fluids (e.g., toys that have been mouthed) should be taken out of circulation immediately and cleaned and disinfected immediately. Toys that cannot be cleaned and disinfected immediately should be placed in a designated dirty toy sealed bin for a minimum of 7 days. The bin should be clearly labelled and inaccessible to children.

Policy and Procedure Review
This policy and procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.
IN PROGRAM CONSIDERATIONS

Parent(s)/Guardian(s) and Visitors

Parent(s)/guardian(s) and non-essential guests will not be permitted at the LWCC during this time. The Centre is not accepting special event guests until further notice. Volunteers, resource consultants, placement students, essential maintenance worker(s), ministry staff and other public officials (e.g., fire marshal, health inspectors) will be permitted if they pass screening procedures and follow protocol.

All essential guests that enter LWCC are subject to the same health and safety protocols as staff such as screening and the use of PPE when on the premises. Placement students in addition must review and sign-off on health and safety protocols.

Placement students will be permitted at the Centre and should only attend one childcare setting.

The provision of special needs services may continue and licensees may use their discretion to determine whether the services being provided are essential and necessary at this time.

In cases where questions arise in the respect to which service providers are permitted to enter the premises, TPH will be contacted, and their advice will be followed.

Enhanced Attendance Reporting Practices

LWCC maintains daily attendance records of all individuals entering the Centre. This includes, but is not limited to, staff, children, volunteers and essential visitors such as cleaners, food deliverers, placement students, maintenance workers and government agency employees (e.g., public health inspectors, program advisors, fire inspectors).

Staff and children’s attendance records are kept as a hardcopy and on a HiMama application.

Essential visitor attendance records are kept on a spreadsheet. It includes the following information:

- Date,
- Full name of each person,
- Company,
- Contact information,
- Time of arrival/departure,
- Reason for visit,
- Rooms/areas visited; and
• Screening results

Attendance records will be kept on-premise for a period of 12 months. It will be kept up to date and made available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak (i.e., records can be made available to public health within 24 hours of a confirmed COVID-19 case or outbreak).

Absence

Please call LWCC (416) 736-5959 or email us (yorkuchildcare@gmail.com) if your child will be absent and the reason (i.e., sick, going to grandparents). During a pandemic, the Centre must know the reason why a child is absent. LWCC aims at helping to keep all children and staff safe and healthy.

LWCC will monitor attendance records for patterns or trends (e.g., children and staff of the same cohort are absent at the same time or over the course of a few days).

Childcare operators are required by TPH to follow-up with all individuals to determine the reason of any unplanned absences, and if the absence is due to illness to note any symptoms (e.g., fever, sore throat, cough).

Screening Station

The designated screening area is the 2nd floor elevator room of the LWCC located inside the First Student Centre building. The screening area is for both drop-off and pick-up. This is the only entrance/exit that will be used to ensure effective screening practices. Should the elevator room not be accessible or in an emergency, the main foyer entrance of LWCC would be used as the screening area. TPH signs are posted at the entrance of the childcare to remind staff, parents/guardians, and essential visitors of screening requirements.

Our facility is operational from 7:30 a.m. – 6:00 p.m., Monday through Friday. If necessary, staggered times will be provided for morning drop-off and end of day pick-up times via email survey.

Right before you arrive at the screening area, please call the Centre so that the screener will have some time to prepare and meet you outside (i.e., bring their indoor shoes, gather belongings, assist with putting on the child’s coat). Please only come at your designated drop-off or pick-up time. If you see another family being checked in, please be patient during this time and remain at least 2 metres/6 feet away. Visual markers/cues on the ground will be spaced 2 metres/6 feet apart to assist individuals to maintain physical distancing from each other.

All parent(s)/guardian(s) MUST wear a face mask and/or face shield at the screening area. We may ask you to please remove your hat and/or sunglasses if we find it difficult to recognize you. If over the age of 2 years and with parent(s)/guardian(s) consent, hand sanitizer (70-90% alcohol concentrated) is provided the moment the child walks into the First Student Centre.
Building. Alcohol based hand rub is not accessible to children (i.e., within their reach) and children should be supervised when using the hand rub. TPH signage are posted at the entrance/exit demonstrating appropriate hand sanitizer use.

To reduce the risk of exposure to your family, and when possible, we encourage designating one person per household to be the drop-off and pick-up person for your child/children. Also, we ask that the designated drop-off and pick-up person not be a “vulnerable” person (older person such as grandparent(s) or a person with a serious underlying medical condition).

During this time, parent(s)/guardian(s) and non-essential guests are not permitted past the screening area (no access onto the playground and in the Centre).

**Drop-Off and Pick-Up Procedures**

LWCC is committed to supporting the well-being and health and safety of all families and staff. In order to support physical distancing during drop-off and pick-up of children the following procedures are implemented.

**Drop-Off Procedures**

Individuals including children, staff, placement students, childcare providers and essential visitors must be screened each day before entering the childcare setting.

Before arriving at LWCC, parent(s)/guardian(s) must complete and submit electronically a health screening form for their child(ren). The form is automatically emailed at 6 a.m. during our days of operation. Staff and essential visitors must do the same. The Coordinator will review the submissions prior to your arrival. Individuals who answer YES to any of the questions are not permitted in the Centre.

Screening results will be recorded daily and kept on-site for a minimum of 12 months.

Once you have arrived at the screening area, the Coordinator will do a visual assessment and ensure that the submitted health screening form is clear of symptoms of COVID-19.

Children will be escorted by the screener into the childcare's foyer. The screener will assist with changing the child into their indoor shoes and putting coats and backpacks in their cubbies, and carry their outdoor shoes before following the carpeted path to the elevator and into the childcare's foyer. Although no longer required by TPH, LWCC takes extra precaution by checking the children’s temperature using a contactless thermometer once inside the Centre. If no fever is confirmed, children are escorted into the playroom to immediately wash hands before joining the cohort.

The designated disinfector will wipe down the child's belongings and their personal cubbies in the foyer.

We understand that this may be unsettling for parents/guardians to not be permitted into the
Centre at this time; however, this will ensure that the childcare setting remains free of infection. Staff will provide photos of themselves so you can see who is caring for your child.

We recognize the new requirements around drop-off procedures may cause increased separation anxiety for children. Although this can be an incredibly stressful time for the child, it can also be an opportunity for the staff to have an incidental conversation with the child. This may reduce the child’s anxiety and at the same time, provide support for language development. Some strategies we will consider are:

- **Labeling the child’s emotions** (e.g. “I know you are sad to leave Mommy/Daddy.”)
- **Using a fun way of walking towards the Centre**
- **Giving the child a role** (e.g. helping bring something to the foyer, etc.)
- **Engaging a child in a brief guessing game** to guess who or what is waiting for them in the childcare room. A game like this supports language development by building decontextualized language (language that goes beyond the here and now)

**Pick-Up Procedures**

Please share instructions and/or custody arrangements with the Coordinator concerning pick-up or access to your child and ensure we are notified of any changes. We require legal documentation concerning custody arrangements and we will only release your child to individuals that you have authorized for pick-up on the child’s registration form. We may confirm identity by requesting government issued identification (i.e., driver's license, passport).

**Please abide by your pick-up time:** Right before you (or your designate) arrive at the screening area, please call the Centre. We will verify your identity and bring your child to you at the screening area. This will provide some time for the Coordinator or designate to gathering your child’s personal belongings. This practice is used to ensure physical distancing protocol.

If you need to pick-up your child/ren earlier due to an appointment, please arrange with the childcare Coordinator/Assistant Coordinator via email a time to arrive. If your plans change suddenly or it is an emergency, please call the Centre to advise a change in your pick-up time.

**School Aged Children in the Program**

Please refer to **Personal Protective Equipment (PPE) Policy and Procedure** regarding the use of non-medical mask or face covering while inside a childcare setting.

Children that attend the Centre before and after school are required to be screened once daily (i.e., screened in the morning). Children are not required to be screened again when returning to the Centre after school.

LWCC will connect with the school board to maintain communication or issues log. If needed, meetings may be scheduled virtually or through telephone conferences.
Emergency Care and Occasional Care (i.e., PA Days)

If children outside the cohort is added to the attendance for Emergency Care or during PA days, LWCC will:

- Notify families and explain the childcare setting public health policies and procedures (e.g., mask use, physical distancing, respiratory etiquette, hand hygiene and screening practices).
- Physical distancing will continue to be maintained
- Provide outdoor programming will be provided as much as possible

Personal Belongings

Personal belongings must all be clearly labelled and minimized to avoid accidental sharing. Each child with have their own designated cubby located in the Centre’s foyer. While in this phase of operation, children may not bring in any personal belongings aside from what is approved. These items include:

- Small backpack
- Extra clothing
- Outdoor clothing (weather appropriate: hat, jacket, snow pants, neck tube, etc.)
- Outdoor/Indoor shoes
- Over-the-counter products (i.e., diaper cream, insect repellant, lip balm, moisturizing lotion, sunscreen)
- Prescribed medication
- Toileting supplies (pull-ups, diapers, ointments)
- Water-bottle (preferably no straws)

No toys or personal items from home (i.e., snacks, blanket) will be permitted at this time. Children are to provide their own sunscreen and diaper cream that will stay at LWCC. LWCC can store small umbrella strollers in the screening area. However, the childcare is not responsible for any lost or stolen items that is left in this room. Any items that are not accepted in the Centre, must be kept by the parent(s)/guardian(s).

All staff and children will have indoor shoes that will stay at the Centre’s foyer and be disinfected daily. Since children spend time on the floor, we want it to be as clean and safe as possible. Once the Coordinator or designate knows a staff, child, visitor or essential visitor is at the screening area, they will bring the person’s indoor shoes downstairs for them to change into. Disposable shoe covers are provided for essential guests to wear over their shoes.

Space Set-Up and Physical Distancing

We recognize that physical distancing between children in a childcare setting is difficult however, we encourage our staff to maintain a welcoming and caring environment for children. Physical distancing must not compromise supervision or a child’s safety, emotional or
psychological well-being. The document *Building On How Does Learning Happen?* Provides more support and ideas on how to provide an engaging environment while physically distancing.

Physical distancing of at least 2 meters/6 feet must be maintained between children even if within the same cohort during activities while still permitting interaction and socializing to occur.

LWCC encourages children to greet each other using non-physical gestures (e.g., wave or nod or a verbal “Hello”) and to avoid close greetings (e.g., hugs, handshakes). Please see *TPH’s 10 Ways to Greet from 6 Feet*.

**Staff will regularly remind children to keep “hands to yourself”. Also, during this time, “no sharing” will be reinforced including not sharing food, personal items, objects or toys.**

While setting up our play spaces, these things were considered and/or implemented:

- Spreading children out into different areas, particularly at meal and dressing time;
- Incorporating more individual activities or activities that encourage more space between children while promoting social interaction (e.g., freeze dance in different areas of the room). Currently, TPH advises against activities that involves singing, shouting or speaking loudly indoors;
- If possible. Increase space between seating and play areas so that children and staff can practice physical distancing (i.e., 2 metres/6 feet):
  - Remove extra chairs to encourage children to spread out while seating
  - Place tape, signs or other visual markers on floors, tables, seats and in play areas to encourage children and staff to maintain physical distancing

**Interactions with Toddlers**

Recognizing that physical distancing is difficult with toddlers, additional suggestions include:

- Planning activities that do not involve shared objects or toys
- When possible, moving activities outside to allow for more space
- Singing only in alignment with the requirements set out in *Reopening Ontario (A Flexible Response to COVID-19) Act, 2020*

Children must not share food, feeding utensils, sippy cups, etc. Mouthed toys must be removed immediately for cleaning and disinfecting and must not be shared with other children. Items will be labelled with the child’s name, if possible, to discourage accidental sharing.

**Strategies for Educators Who Are Physically Distancing**

- **While maintaining physical distance, aim to still lower your entire body to be at the child’s physical level**, so your non-verbal cues are more obvious to the child.
- **Comment frequently on what you observe children doing** so that they know you are interested and paying attention.
- **Have similar materials to what the children have, so you can:**
  - *Imitate* what they are doing
- *Expand* on what they are doing by doing something different using the same material
- *Extend* the topic when appropriate by making a comment or asking a question that encourages children to think more deeply (e.g. while playing with toy insects and a magnifying glass, you could say, “Spiders make me feel scared” and/or “When you see bugs inside your house, what do you do?”)

- **Incorporate ‘people play’ activities that allow you to engage children**, follow their lead and extend the interaction without materials or physical proximity (e.g., Simon Says, follow the leader, making up stories together, guessing games, I spy)

Person capacity limits will be posted in the Centre before entering a room.
- **Kitchen**: 2 persons at a time
- **Children’s washroom**: 1 staff and two children
- **Staff room and office**: 2 persons

**Rest Time**

Rest time typically is around 1:00 p.m. – 3:00 p.m. Your child will be provided a cot with a sheet and blanket. Cots will be sanitized before and after each use and sheets and blankets will be changed and laundered in hot water after each use. Cots must be stored in a manner which there is no contact with the sleeping surface of another cot. If your child does not sleep, quiet activities are provided.

Children will continue to be placed head to toe or toe to head with an increased distance between cots.

**Equipment and Toy Usage and Restrictions**

LWCC will provide toys and equipment that are made of materials that can be cleaned and disinfected. No plush toys will be used in the childcare facility during this time. Dolls and other fabric/cloth items that cannot be readily washed and dried will be removed from the program.

*Where toys and equipment are shared, they are to be cleaned and disinfected prior to being shared, including between users of the same cohort.*

Mouthed toys must be separated, cleaned, and disinfected immediately after the child has finished using it.

Toys are cleaned and disinfected using a chlorine bleach solution or in a three-compartment sink. Toys must be washed in the first sink, rinsed in the second sink and disinfected in the third sink/bin.

The designated person responsible for the cleaning of toys will ensure toys dry in a designated area that is separate from bathrooms, change tables, and protected from sources of
contamination. They are to ensure that required disinfectant contact times are archived or alternatively allows toys to air dry.

Toys cannot be cleaned and disinfected using LWCC’s mechanical dishwasher in the kitchen as the rinse cycle surpasses the required minimum of 82 degrees Celsius.

Toys used during outdoor play are to be batched and rotated weekly. Outdoor play structures are not required to be cleaned and disinfected unless the equipment is visibly soiled or dirty. The ministry advises a focus on proper hand hygiene before and after using shared play structures. Please refer to the COVID-19 Guidance for Outdoor Playgrounds and Fitness Equipment.

**Activities and Toys to Avoid During a Pandemic**

Group sensory play/activities such as sand tables or other materials that cannot be readily disinfected should be discontinued during a pandemic. Sensory materials (e.g., playdough, water, sand, etc.) will be provided for single use (i.e., available to the child for the day) and labelled with the child’s name and discarded at the end of each day.

Plush or stuffed toys will not be allowed since they cannot be readily cleaned and disinfected. Other activities or equipment to consider discontinuing during a pandemic are:

- Cooking
- Dress up
- Paper books that cannot be disinfected

Toys and activities to consider during a pandemic are:

- Children will have individualized bins for art materials and supplies. Their bin is labelled with their picture and name to prevent accidental sharing (markers, crayons, paper, scissors, glue)
- Individual bins of books/reading material for each child. Bin will be labeled with the child’s name to prevent sharing
- Single child use (i.e., available to the child for the day) sensory materials (e.g., playdough, water, sand, etc.) will be provided and labelled with the child’s name, if applicable
- Outdoor exploration
- Washable toys (not porous or retains water)

Items that cannot be readily cleaned and disinfected (e.g., books) are batched. Batched items are rotated on a weekly basis. Items will be taken out of rotation after use, placed in a sealed designated container and set aside for seven days before reusing.

**Strategies for Book Use and Reading**

The book centre is a prime area for sharing books with children and having conversations that promote the development of emergent literacy skills. With several restrictions now in place on the material in the classroom that are difficult to sanitize, it is unclear where books will be
permitted given some mixed messages about the transmissibility of the virus on paper. Although we can use audio or online books in our program, they generally provide limited or no opportunity for interaction or active engagement of the children.

If thin paper books are off-limits, ways of providing books that can be sanitized will be explored such as cardboard, bathtub, laminated books and homemade ones. Other ideas we will explore are:

- **Group book sharing** where the educator holds the book is an ideal way to engage a group who is distanced and does not require the children to touch anything or each other
- **Offer easy to clean props** to children that encourage participation and interaction while reading the story
- **Read with animation**
- **Make sure the book is large and clear** enough for the children to see the illustrations
- **Pause frequently to encourage interaction and conversation** with the children. Pausing helps you create opportunities to act out the story, imitate actions, ask questions, make interesting comments, and relate the book to the children’s personal experiences.

Further details around our Toy Disinfection Procedure are attached in the *Appendices #9 COVID-19 Workplace Safety Plan*
The COVID-19 pandemic is an evolving situation – review your plan regularly and make changes as required. Refer to the Ontario government’s COVID-19 website for up-to-date information.

7. How will you ensure all workers know how and are able to keep themselves safe from exposure to COVID-19?

Consider: What guidance will you need to provide? How will you share information? Do you need new or more frequent types of communication? Where will you update yourself on new COVID-19 guidance?

Example: Ensure our procedures are up to date by a daily review of Ministry of Health guidance.

Actions:
- Only the designated staff [Coordinator] will screen people before entering the workplace
- Support self-isolation for workers with symptoms and workers who are close contacts of COVID-19 cases
- Ensure people maintain a physical distance of 2 metres/6 feet or more
- All personnel entering the Childcare Centre is required to wear a medical face mask (face shield or goggles as well if working directly with children)
- Enhanced cleaning and disinfecting of surfaces and objects
- Support hand hygiene
- Remind workers about good cough and sneeze etiquette and to avoid touching their face
- Follow Toronto Public Health guidelines
- Post Toronto Public Health signage at the entrance/exit and throughout the Centre
- COVID-19 resource board by the staff kitchen is accessible to all personnel
- Coordinator will keep up to date with Ministry of Education and Public Health guidelines and relay updates with staff via e-mail and on the COVID-19 resource board

8. How will you screen for COVID-19?

Consider: How will you stay current about what symptoms to look for? Will you use a screening checklist? Who will do the screening? Who needs to be screened and how often?

Example: To find out if workers are well when they come to work, we will ask each worker basic questions about their physical health and symptoms using the provincial list of COVID-19 symptoms.

Actions:
- Active screening will be taking place (the Coordinator will ensure that the information is collected and reviewed to determine whether a person may enter the workplace)
- Will keep up to date with the Toronto Public Health screening tool for childcare centres
Will align our health screening forms with Toronto Public Health screening checklist
Parents must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility
Staff and essential visitors must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility
The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival.
If your phone or tablet is not compatible to scan the QR code, the Coordinator will conduct an in-person health screening using a tablet.
Children and staff will have their temperature taken at least once a day. Children’s temperatures are recorded onto a HiMama application.
Signage is made visible and posted at the entrance/exit and throughout the childcare
Encourage employees to monitor their own symptoms at all times
Ensure workers know where to find the online COVID-19 self-assessment tool

9. How will you control the risk of transmission in your workplace?
Include how you will maximize distance and separation, reduce transmission from surfaces and objects, and support good hand and respiratory hygiene.

Consider: What engineering and administrative controls will you use? What changes will you make? Who needs to be in the workplace? How will you gather worker ideas about different ways of working?

Example: We have a new policy that limits time in the kitchen to 10 minutes, we have created a new outdoor break area in our parking lot and have changed how we schedule shifts and breaks.

Actions:
- Items that are easy to transmit COVID-19 have been removed from the Centre and placed into storage (i.e., porous items, soft items, area rugs, fabric, wood materials)
- All employees must stay home if they are feeling unwell
- Layout of Centre encourages social distancing
- Dividers are throughout the room to separate tables
- Remove extra chairs, tables, shelves that made it difficult for children to spread out
- Disinfecting is increased to a minimum of twice a day (morning and afternoon). Disinfecting will be more frequent when items are visibly soiled
- Toronto Public Health posters on hand hygiene are available at every sink
- Hand sanitizer is placed in every room and out of the reach of children
- New policies are in place that limit how many people are allowed in the rooms (i.e., kitchen 1 person, staff room 2 people, office 2 people)
- Coordinator will remain in office and limit movement between rooms
• Personal Protective Equipment (PPE) is required at all times by all personnel entering the facility. Employees must wear a medical face mask along with a face shield or goggles. Essential guests are only required to wear a medical face mask.
• Will try to keep playground door open as much as possible for ventilation and air flow.

10. What will you do if there is a potential case, or suspected exposure to, COVID-19 at your workplace?

**Consider:** What is the contact information for your local public health unit? What are your isolation procedures? How will you gather workplace contact information for public health contact tracing?

**Example:** We have designated a safe isolation area in the workplace and created a checklist with the procedures of what to do if some gets sick at work, including key contact numbers.

**Actions:**
• If an employee calls in sick, we will ask them to complete the self-assessment tool and ask the employee to follow any recommendations given by the tool, including being tested and self-isolating.
• If anyone develops symptoms in the Centre, they are sent home to self-isolate.
• If there is a positive test result, the coordinator will report to Toronto Public Health and the Ministry of Education.
• We will have contact information of every person that enters the Centre via our Google Doc screening in case we need to contact them. Attendance for essential guests is also kept with more detailed information (i.e., date enter/exit, rooms visited in the Centre, reason for visit, etc.)
• Childcare will be disinfected accordingly if a person has become symptomatic while at the Centre.
• Employees are to self-isolate if they either have symptoms, had close contact with an individual with symptoms or a confirmed diagnosis, or have travelled outside of Canada.
• We have designated a self-isolation area in the workplace in the event a child develops symptoms while in care.
• Toronto Public Health numbers will be posted on the COVID-19 resource board.

11. How will you manage any new risks caused by changes to the way you operate your business?

**Consider:** With workers, review existing critical risks and whether work practice changes will affect your current risk management strategy. Are any new risks introduced due to changes in worker numbers or work practices? What new risk controls are required?

**Example:** We will establish regular check-ins with workers about how they’re coping with the change to shift work.
Actions:
- Coordinator will conduct regular check-ins with employees about how they are coping with the changes
- Coordinator will conduct staff training for all employees prior to re-opening

12. How will you make sure your plan is working?

Consider: How often will you schedule a review of your plan? How will you get input and ideas from workers and clients? Who is responsible for evaluating how things are working and for adapting the plan as you find better/easier ways to do things? How will you communicate changes?

Example: We will set up a weekly meeting between the CEO and the health and safety representative.

Actions:
- The coordinator is responsible for evaluating how the workplace safety plan is working
- Reviews to the workplace plan will be updated whenever new guidance documents have been updated from Ministry of Education and Toronto Public Health
- Monthly staff meetings will be held to address any of the workers concerns, suggestions and for feedback
- Once changes have been made, all documents will be e-mailed to employees and will need to sign off on them
Appendices #10

Toy Disinfection Procedure

Disinfection of toys is vital to ensuring the health and safety of children as it reduces and mitigates the potential spread of germs and viruses among children and those who may come into contact with them.

All toys that are plush must be removed and not used in play. These include stuffed animals, hand puppets, cloth toys etc. In additional, all communal sensory play is suspended. Porous toys or materials that cannot be effectively cleaned and disinfected must be removed and not used in play.

Staff is to wear personal protective equipment (PPE) for toy disinfection procedures (i.e., medical face mask, face shield/goggles, gloves). Hands need to be cleaned after removing PPE.

Toys must be cleaned and disinfected daily and as often as necessary (e.g., when soiled, contaminated or if the toy has been used by a symptomatic individual).

Toy Washing Procedures – Cleaning and Disinfection Using a Mechanical Dishwasher

Toys cannot be cleaned and disinfected using LWCC’s mechanical dishwasher in the kitchen as the rinse cycle surpasses the required minimum of 82 degrees Celsius.

Toy Washing Procedures - Manual Cleaning and Disinfection

Toys are cleaned and disinfected using the Toronto Public Health (TPH) three-compartment sink/bin method

1\text{st} sink: Wash toys with detergent

2\text{nd} sink: Rinse with clean water


The designated person responsible for the cleaning of toys will ensure toys dry in a designated area that is separate from bathrooms, change tables, and protected from sources of contamination. They are to ensure that required disinfectant contact times are archived or alternatively allows toys to air dry.

Toy Washing Procedures – Cleaning and Disinfecting Large Toys/Equipment Using Bleach Solution Spray

Large toys, wooden toys, cots, etc. that cannot be immersed in a disinfectant solution should use this method for washing. Please follow the steps below:
6. Clean with soap and water using a cloth
7. Wipe with a clean wet cloth to rinse
8. Disinfect by spraying bleach solution and let it sit for a minimum of 2-minute contact time. Do not spray product to toys and surfaces when children or other staff are nearby
9. A final rinse is required using a single-use wet paper towel
10. Allow toys to air dry

Tips and Reminders
• Fill the bucket only to a level that is comfortable for transporting to the area you use for toy washing. A trolley can also be used to assist with transporting
• Unused test strips must be kept dry and in a dark space
• When a new bottle of test strips is opened the date opened should be written on the bottle
• Test strips expire six (6) months after the container is opened. Any unused test strips must be discarded after 6 months as it is no longer effective

Frequencies and Toy Cleaning Schedules
• Toy cleaning schedules will be saved onto the program rooms tablet and updated daily by the staff person responsible for the area
• Toys, including large toys, cots, equipment and high touch items will be cleaned and disinfected at least two times per day and as often as necessary (i.e., when toys/items are visibly soiled or when toys/items have been contaminated with body fluids)
• Toys and items such as electronic devices/tablets should be cleaned and disinfected between users prior to redistributing
• Refer to Appendices #6 Environmental Cleaning and Disinfecting Procedure for more guidance

Handling Used Toys
• Toys that have become visibly dirty or that have come into contact with body fluids (e.g., toys that have been mouthed) should be taken out of circulation immediately and cleaned and disinfected immediately. Toys that cannot be cleaned and disinfected immediately should be placed in a designated dirty toy sealed bin for a minimum of 7 days. The bin should be clearly labelled and inaccessible to children.

Policy and Procedure Review
This policy and procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.
**Program Statement/Activities**

Licensees are not required to make updates to their program statement during this time.

LWCC values the commitments and guidelines that make up our program statement. Due to physical distancing and enhanced health and safety protocols, some of the approaches outlined in our program statement may not be possible to implement. At this time, we are committed to continuing to provide a safe and welcoming environment for children that includes the four foundations of How Does Learning Happen; belonging, well-being, engagement, and expression. We will continue to recognize existing and new opportunities for incidental conversations. We have given great thought as to how we can overcome some of the obstacles we face and turn them into opportunities. We will do everything possible to ensure the values in our program statement are reflected within the enhanced health and safety protocols in place.

**Outdoor Play**

The Ministry of Ontario requires that children have outdoor play for two hours during a full day of care, weather permitting.

Temperature must be less than 32C with humidity and above -12C with windchill. LWCC will make alternative arrangements for children to have gross motor should weather not permit outdoor play on the playground.

Outdoor play time will be used to support our efforts to maintain physical distance requirements and support children's immune systems. It is important that children be dressed for various types of weather to ensure they can actively participate in the outdoor program. Please ensure that adequate and suitable clothing and footwear is provided and labelled.

At this time, LWCC requests families provide their child’s own sunscreen which would be labelled with their child’s name and kept on-site. Staff will apply the sunscreen using appropriate PPE and practicing hand hygiene in between each child’s application. Hand hygiene must be practiced before and after applying sunscreen. Sunscreen will not be shared between children.

Disinfectant wipes or bleach solution spray will be used to disinfect outdoor equipment/play structures when visibly soiled or dirty.

As advised by the ministry, a focus is on proper hand hygiene before and after using shared play structures. As a result, children are to use hand sanitizer before and after each use. Where using hand rub may not be applicable, staff will disinfect the play structure between uses. Children will immediately practice proper hand hygiene once they return indoors.
Hand sanitizer will be available for use during outdoor play in the staff’s playground bag and out of the reach of children.

Toys used outdoors are cleaned and disinfected prior to being shared. In addition, outdoor toys are to be batched and rotated weekly.

When physical distancing outdoors presents a challenge, staff should consider alternate arrangements (e.g. community walk) using physical distancing practices whenever possible.

**Field Trips/Special Events**

At this time, there will be no field trips or special events/gatherings that would invite parents/guardians and visitors into the Centre.

**Nutrition**

LWCC provides one meal and two snacks for the children in our care.

- **Snack:** Morning and afternoon snack is included in your monthly tuition. Snack is provided at 9:00 a.m. and 3:00 p.m.
- **Lunch:** Catered lunch is included in your monthly tuition. Lunch is provided at 12:00 p.m.

The nutrition we provide is within the guidelines of Canada’s Food Guide. Weekly menus will be available for you to review from our catering company, Wholesome Kids Catering.

Please note our Centre is nut free. If your child has an allergy to any food, please be sure that it has been indicated in your child’s registration form.

We may provide substitutions due to dietary/medical restrictions or preferences upon request.

**Modified Food Safety Practices**

LWCC staff will reinforce routine food safety and sanitation practices during meal preparation and during meal times (snacks/lunch). These food provisions include:

- Ensure and reinforce proper hand hygiene is practiced when staff is preparing food and for all individuals before and after eating.
- Staff must wear a medical face mask, face shield, hair covering and gloves while serving and/or preparing food.
- Meal practices will be modified to ensure that there is no self-serving or sharing of food at mealtimes
  - Shared utensils or items will not be provided (e.g., serving spoons, condiments)
  - Children will not be allowed to prepare nor provide food that will be shared
- Meals must be served by staff in individual portions to the children
  - Food cannot be left uncovered on tables
- Utensils must always be used to serve food
- Children and staff must be seated at a distance from one another to ensure physical distancing during meals
- Staff is not permitted to try the food with the children during meals. They are to wear their medical face mask and face shield at all times
- No outside snacks/lunch by the family/outside of regular meal provision will be allowed into the Centre (except where required and special precautions for handling and serving the food are put into place, for example, expressed breast milk)

**Food Services**

LWCC will continue to reinforce routine food safety and sanitation practices during the pandemic. The Centre will consider the following:

- Plan for alternative food supplies if regular catering services are interrupted
- Consider using disposable cutlery and plates if staffing levels are low
- Consider stockpiling a supply of non-perishable food in case food delivery is disrupted

**Allergies and Anaphylaxis**

Let us know if your child has an allergy that requires the administration of an auto-injector. We require written and specific details of your child’s allergy and symptoms of an allergic reaction from a medical practitioner including a prescribed epinephrine auto-injector. All allergies will be listed in our program to ensure employees can respond appropriately to any potential reactions. If your child requires an auto-injector due to a severe allergy, it must accompany them into care.

**Medication**

Permission for a child to be administered medication in LWCC must be approved by the physician and parent(s)/guardian(s) utilizing the Centre’s Medication Form. Medications for maintenance will be administered throughout the day as required. The medication must be given to the Coordinator and/or designate in its original bottle/packaging, clearly labeled with your child’s name and instructions for administering. The medication form must be signed by the parent(s)/guardian(s) and will be kept on file at the Centre. Children’s medication will be administered according to the prescription specifications only.

Non-prescription or over the counter medication must be accompanied by a written prescription by a medical practitioner outlining the exact dosage and time(s) to be given and symptoms of when to administer the medication.

Over the counter products (i.e., diaper cream, insect repellent, moisturizing skin lotion, lip balm and sunscreen) will require a form to be submitted as a single “blanket” authorization for staff to apply onto your child. These products will need to be labelled with the child’s name, stored in accordance with the instructions for storage on the label, and administered in accordance with the instructions on the label.
For the safety of the children, all medication must be handed directly to the Coordinator and/or designate. Therefore, it can be securely stored away from the children’s reach.

**Individual Medical Plan**

An *Individual Medical Plan* will be developed and put in place for any child requiring medication for a chronic or acute condition or diagnosis or who requires medication on an emergency basis. All individual medical plans will be developed in partnership with the child’s parent/guardian. Any necessary staff training will be provided by the child’s parent(s)/guardian(s) over video conference.

**Accidents and Injuries**

Despite close supervision, accidents may occur. If your child is injured at the Centre, the staff will provide immediate first aid. If the situation requires attention beyond basic first aid, we will contact you or the emergency contact person on file. If required, we will call 911. If your child experiences a head injury, you will be contacted.

Staff will provide you with an accident report documenting the accident or injury. A parent/guardian’s signature is required at the bottom of the form to verify that you were informed of the accident/injury. A copy of the signed report will be provided to you.

If your child has an accident or injury at home, please inform the staff when you drop-off your child the following day so we are aware of the incident.

**Provision of Special Needs Resources (SNR) Services**

LWCC recognizes that children with special needs and their families continue to require additional support and services in our childcare setting. The provision of in-person special needs services at the Centre will continue where appropriate. The Centre may use their discretion to determine whether the services being provided are essential and necessary at this time. We will work with our resource consultant to explore alternative modes of service delivery where in-person delivery is not possible or necessary (i.e., online video meeting).

All SNR staff must screen before entering the childcare and must follow all health and safety measures that staff/providers follow, including having their attendance logged, practicing proper hand hygiene, wearing a medical mask and eye protection, and maintaining physical distancing as much as possible.

Our SNR services are provided through external staff/service providers and their attendance in our facility will be recorded as required for contact tracing purposes.

Maximum capacity rules do not apply to the SNR staff (consultants and enhanced staff) on-site.
Collection and Use of Personal Information

All personal information requested in connection with the admission of your child, as well as his/her childcare records established with the childcare Centre, will be collected, used, maintained and in future destroyed in full compliance with rules established under the Municipal Freedom of Information and Protection of Privacy Act.

When personal information is collected, the City notifies the individual of the legal authority we have to collect the information, the purpose(s) for which the information will be used and provide contact information of a staff person who can answer questions about the collection.

Information collected by Toronto Children’s Services will be used for the purpose of ensuring the delivery of high-quality early learning and childcare services, to meet obligations we have under law, as well as the Toronto Quality Assessment for Improvement.

Questions about the collection and management of personal information can be directed to the Coordinator.

Appendices #1
Health Screening Procedure

In order to help reduce the risk of respiratory infections (including COVID-19), health screening is essential. This procedure applies to all staff, students’, families, community members, and any other persons engaging in business with the Lee Wiggins Childcare Centre (LWCC/The Centre). Everyone must be screened prior to entering the childcare centre.

This was developed to assist LWCC staff in preparing and administering health screening for staff and children who enter the Centre. All staff will be trained in health screening procedures.

Screening Set-Up
• Identify/set up the location and staffing of the screening area:
  - The screening area is the 2nd floor elevator room of the LWCC located inside the First Student Centre building. This is the only entrance/exit that will be used to ensure effective screening practices. Should the elevator room not be accessible or in an emergency, the main foyer entrance of LWCC would be used as the screening area.
  - Maintain a minimum of 2 metres/6 feet distance between staff conducting screening and the person being screened
  - Provide visual guides on the ground to assist with physical distancing (e.g., pylons/tape lines) if a line-up forms while parents/guardians and their children are waiting to be screened

• Place entrance signage that identifies the screening process outside the First Student Centre building Doors in the colonnade on a free-standing divider board
• Hand sanitizer (70 – 90% alcohol concentration) will be provided by the Coordinator. All individuals entering the childcare centre are asked to hand sanitize
• Ensure Toronto Public Health (TPH) resources are available for anyone who does not pass screening
• Ensure the health screening area is disinfected regularly before and after use
• Health screening questions are for the parent/guardian to answer on their child’s behalf, and for staff prior to arrival at the facility.
• Parents/guardians are not permitted past the health screening line to ensure physical distancing. Only one parent/guardian is permitted at the screening area
• Staff is not permitted past the health screening area until they have been cleared
• Parents/guardians are not permitted past the screening area and into the childcare

Daily Screening
Screening must be completed for every child, childcare staff, volunteer and essential visitor prior to entry/arrival to the childcare setting. Daily health screening may be completed and submitted electronically via online form using Google Docs prior to arrival at the childcare. The York University screening tool also must be completed for every child, childcare staff and volunteer prior to arrival. The screening tool will be e-mailed to all personnel at 6:00 a.m. Monday – Friday.

In the event that an individual is not screened prior to arriving at the childcare, active (in-person) screening is available when necessary. The Coordinator is to take appropriate precautions when screening and escorting children to the program, including maintaining a distance of at least 2 metres/6 feet from those being screened.

Individuals who do not pass the screening are not permitted to attend the program and must stay home. If symptoms are not COVID-19 related and present as enteric and respiratory the individual must remain away for 24-hours and be symptom-free before entering the facility.

Please refer to the Screening Poster for Child Care and the COVID-19 Decision Tool for Child Care (child attendees) for further information.
We suggest reviewing the self-assessment tool https://covid-19.ontario.ca/self-assessment/ on the Ministry of Health website if you were exposed to COVID-19 or have symptoms.

**Temperature Check**
Although no longer required by TPH, as extra precaution LWCC continues to take temperatures of anyone entering the childcare. In the foyer, a staff will conduct a temperature check using a contactless thermometer. Fever is considered a temperature of 37.8C or greater.

Children’s temperature is recorded onto a HiMama application. For the childcare’s reference, placement students and essential guests’ temperature are recorded onto a digital spreadsheet.

Refer to **Screening Station** for further information about drop-off and pick-up procedures.

**Health Screening Form**
The COVID-19 School and Child Care Screening Tool is available to support parents/guardians, staff/providers and essential visitors to help you decide if you should or should not go to childcare today. This is an optional tool and separate from the health screening form (via Google Docs) the Centre requires to be submitted daily prior to arriving at the childcare.

A health screening form via Google Docs is automatically emailed to staff and parents/guardians at 6 a.m. during our days of operation. This form must be completed and submitted back to the Centre prior to your arrival at the facility.

- COVID-19 Child Health Screening Form
- COVID-19 Staff/Essential Worker Health Screening Form

The health screening forms via Google Docs will be kept updated to align with TPH’s health-screening questionnaire for child care centres and the staff health-screening questionnaire.

The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival. A QR code is a type of matrix barcode that contains data for a locator or tracker that points to a website or application.

**How to scan the QR code:**
5. On your phone or tablet, open the built-in camera
6. Point the camera at the QR code
7. Tap the banner that appears on your phone or tablet
8. Follow the instructions on the screen before submission

If you were unable to complete the screening prior to your arrival, the screener will conduct an in-person health screening using a tablet.
Anyone who is symptomatic, does not pass screening, or has been advised to self-isolate by the local public health unit are not be permitted to attend the program and should stay at home (this includes children staff, students completing post-secondary placements and essential visitors).

If excluded from the Centre, children, placement students and staff are expected to report their absence and any symptoms associated with COVID-19 to the Coordinator (416) 736-5959. LWCC recommends that the individual who is ill go to a COVID-19 assessment centre as soon as possible. Also call TPH: (416) 338-7600 or Telehealth Ontario 1-866-797-0000. Please remain home and follow instructions from TPH to determine when to return to the facility.

Refer to TPH’s COVID-19 Decision Guide for Child Care and TPH’s Screening Tool for further procedural clarification.

If the individual answers no to all questions on the health screening form, admittance into the Centre will be allowed.

The Coordinator uses Google Sheets to view all the submitted health screening form results on one auto-generated spreadsheet. All staff are to ensure that they have answered and submitted the health screening questions via Google Docs. The first staff to arrive in the facility each day will take the temperature of the second staff entering the building.

Health screening questions may change as more information about the virus becomes available. Screening posters, checklists and forms will be updated as advised by TPH.

Please see Symptoms of Illness if developed while the individual is on-site.

Documentation of the Health Screening Form
At the time of arrival each day, the Coordinator is responsible for ensuring that documentation of the information received from the individual’s health screening form is kept and accessible throughout each day of operation. If a child presents COVID-19 symptoms at any time, this information must also be documented in the child’s personal file.

Procedure Review
This policy and procedure will be reviewed and signed off by all staff before employment at LWCC and at any time where a change is made.

Appendices #2
Hand Hygiene and Respiratory Etiquette Policy and Procedure
Lee Wiggins Childcare Centre (LWCC/The Centre) is committed to providing a safe and healthy environment for children, families, and employees. LWCC will take every reasonable precaution to prevent the risk of communicable diseases within our facility.

Hand hygiene is an important element of infection prevention and control (IPAC) in childcare centres. During a pandemic, hand hygiene should be reinforced and practiced by staff, children, parents/guardians, and visitors.

Increased hand washing monitoring will be implemented at LWCC. The handwashing procedure will be reviewed immediately with staff or children not following the appropriate handwashing procedures.

Hand hygiene posters (handwashing and hand sanitizing) from Toronto Public Health (TPH) will be posted at the entrance and in areas where they are likely to be seen to remind individuals to practice hand hygiene frequently.

**Purpose**
To ensure that all employees are aware of, and adhere to, the directive established by TPH, regarding cleaning and hand hygiene at the Centre.

**Application**
This policy applies to all employees, students, families, community members, and any other persons engaged in business with the Centre.

**Definitions**
Hand hygiene is a general term referring to any action of hand cleaning. Washing hands with plain soap and water are recommended as the mechanical action is effective at removing visible soil as well as microbes. In instances where handwashing sinks are not available, supervised use of alcohol-based hand sanitizers (70% - 90% alcohol concentrated) will be used on children over the age of 2 years with parent/guardian consent.

Two ways to perform hand hygiene:
- Handwashing
- Alcohol-based hand sanitizer

**Procedures**
Hands carry and spread germs. Touching your eyes, nose, mouth, or sneezing or coughing into your hands may provide an opportunity for germs to get into your body or spread to others.

Keeping your hands clean through good hygiene practice is one of the most important steps to avoid getting sick and spreading germs.

Ensure that adults and children are always practicing good hand hygiene when hands are visibly dirty and/or after:
• Coming into contact with any soiled/mouthed items
• Coming into contact with bodily fluids
• Gardening
• Handling garbage
• Handling raw foods
• Handling soiled laundry or dishes
• Handling soiled toys or other items
• Outdoor play and before and after using shared play structures
• Sneezing, coughing, or blowing your nose
• Toileting/diapering routine
• Using the washroom

Hands should be cleaned frequently. At a minimum, practice hand hygiene:
• After contact with body substances, mucous membranes of the eyes, nose, and mouth and non-intact skin (sneezing, coughing)
• After touching 'regularly touched' items such as doorknobs, toilets and sink taps
• After using the washroom
• Before and after child contact
• Before and after going outside
• Before and after preparing, handling, serving and eating food
• Before and after using shared computers, tablet, sorting equipment, toys, etc.
• Before putting on and after taking off PPE
• Upon entering or leaving the childcare centre
• Whenever there is a chance that your hands may have been contaminated!

Additionally, hands should be cleaned using soap and water or hand sanitizer before and after:
• Before and after giving medication
• Changing diapers
• Dispensing/handling expressed breastmilk
• Glove use
• Handling animals
• Preparing, handling, serving, and eating food
• Sensory play activity
• Touching a cut or open sore

When hands are visibly soiled, follow these steps for cleaning hands:
1. Wet hands
2. Apply soap
3. Lather for 15-30 seconds. Rub between fingers, back of hands, fingertips, under nails
4. Rinse well under running water
5. Dry hands well with a paper towel
6. Turn taps off with a paper towel

When hands are not visibly soiled and are using hand sanitizer, follow these steps for cleaning hands:
1. Apply hand sanitizer (70-90% alcohol-based)
2. Rub hands together for 15-30 seconds
3. Work sanitizer between fingers, back of hands, fingertips, and under nails
4. Rub hands until dry

Hand Hygiene Monitoring
As soon as children arrive to the room, they will wash their hands properly with the supervision of a staff. Hand washing visual posters from TPH are posted by every sink. Hands will be washed more frequently throughout the day with soap and water for at least 15 seconds.

To ensure that employees and children are using proper hand hygiene methods, the Coordinator and/or designate will observe and review hand hygiene practices on a regular basis and provide feedback to employees and children as required. If the proper handwashing method is not observed, the observer will demonstrate the proper method and request handwashing is repeated.

Hand Sanitizing Information
When your hands are not visibly dirty, a 70-90% alcohol-based hand sanitizer can be used. Hand sanitizers can only be used on children who are over the age of two and must always be used under adult supervision. Adults must ensure that the product has completely evaporated from the child’s hands before allowing the child to continue their activity. Parent consent is required to use hand sanitizer on children.

Glove Use
Staff must wear gloves when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment, or environmental surfaces. Gloves are single use only.

Gloves and Hand Hygiene
Hand hygiene shall be practiced before applying and after removing gloves. Gloves shall be removed and discarded after use.

To reduce hand irritation related to gloves:
- Ensure that hands are clean and dry before wearing gloves
- Ensure gloves are intact, clean and dry inside
- Gloves are single-use only and must be task-specific such as gloves for diaper changes
- Wear gloves for as short a time as possible
LWCC will ensure:

- Additional tissue supplies and waste receptacles are made available
- Alcohol-based hand sanitizers are provided to supplement handwashing facilities, secured dispensers should be placed in supervised areas so children cannot access it independently
- Staff will ensure Safety Data Sheets and product labels that provide additional information regarding placement, storage, and warnings associated with alcohol-based hand sanitizers are available on-site
- Written permission from parents/guardians permitting the use of an alcohol-based hand sanitizer on their child/children is completed

Respiratory Etiquette
To prevent the spread of respiratory infections, proper respiratory etiquette will be taught to the children and regularly practiced by staff, placement students and essential visitors. Respiratory etiquette posters are posted at the entrance and in areas where they are likely to be seen to remind individuals to practice proper respiratory etiquette.

Germs, such as influenza and cold viruses, are spread by coughing and/or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs.

Respiratory etiquette includes keep your distance (preferably more than 2 metres/6 feet) from people who are coughing or sneezing. Follow these steps to stop the spread of germs:

1. With a tissue, cover your mouth and nose when you cough, sneeze or blow your nose
2. Put used tissues in the garbage
3. If you don't have a tissue, cough or sneeze into your sleeve, not in your hands
4. Clean your hands with soap and water or hand sanitizer regularly and after using a tissue on yourself or others

Policy and Procedure Review
This policy and procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time where a change is made.
Appendices #3
Personal Protective Equipment (PPE) Policy and Procedure

All children in grades 1 and above are required to wear a non-medical mask or face covering while inside a childcare setting. All children (senior kindergarten and below) are encouraged but not required to wear a non-medical mask or face covering, including in hallways. Masks are not recommended for children under the age of two as it cannot be guaranteed the child will reliably not touch their mask and keep their mask on.

Parent(s)/guardian(s) are required to wear a face covering or non-medical mask upon drop-off and pick-up of their child(ren). Should a parent/guardian request their child wear a non-medical mask or face covering while at the Centre, they are responsible for providing their mask(s) or face coverings each day. In addition, they are required to provide a way to store their child's mask when not in use (i.e., labelled paper bag).

Essential visitors (maintenance, resource consultant, licensing inspectors, etc.) are required to wear a medical face mask upon arrival and throughout the duration of their stay at LWCC. Disposable medical face masks are provided should the visitor not have one on hand. In addition, disposable shoe covers are provided and we request visitors wear them over their outdoor shoes while inside the Centre.

Staff in addition to wearing a medical face mask are required to wear a face shield or goggles. Each staff are supplied with their own personal face shield to use while at the Centre. There is a supply of goggles for each staff should they request to wear goggles instead. Reusable masks are currently not permitted to be used by staff while at the Centre.

To support healthy and safe operation of childcare programs, a supply of disposable medical masks and eye protection (i.e., face shields) is procured and delivered through the Ministry of Government and Consumer Services to licensed childcare centres on a monthly basis. A back-up supply of non-medical or cloth masks are also provided for school age children in childcares in case they cannot bring one from home.

Extra supply of PPE is provided by the Centre. When possible, LWCC will attempt to secure and sustain a one to two-week supply of PPE (including but not limited to face shields or goggles, medical masks, gloves, etc.) and cleaning supplies that can support the Centre's current and ongoing operations at all times.

All staff and placement students are required to wear medical masks and eye protection (i.e., face shield or goggles) while inside LWCC, including in hallways and staff rooms (unless eating – but time with masks off should be limited and physical distance of 2 metres/6 feet should be maintained). Masks are to be replaced when they become damp or visibly soiled.
Exemptions or exceptions to wearing a face mask or eye protection may include medical conditions that make it difficult to wear a mask or eye protection (e.g., difficulty breathing, low vision); a cognitive condition or disability that prevents wearing a face mask or eye protection; hearing impairments or when communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication; and when performing duties in which a staff member is separated from their cohort and other staff/children (e.g., working alone in an office or during meal preparation in the kitchen).

The use of masks is required outdoors for adults and children regardless of physical distancing of at least 2 metres/6 feet being maintained between individuals.

The staff room couches have been moved to encourage physical distancing of 2 metres/6 feet and support nutrition breaks/mask breaks in a safe manner. If using the couch, staff are required to use a blanket to cover the seated area and removed for laundry after each individual use.

The use of medical masks and eye protection is for the safety of staff and the children in their care. This is very important when working with young children who may not be wearing face coverings (i.e. under the age of two). Staff are to keep in mind that it may be difficult to put on a mask and eye protection properly (i.e. without contamination) after having removed them, given the frequent and spontaneous need for close interactions with young children in a childcare setting. Please refer to Public Health Ontario resources for how to properly wear and take off masks and eye protection and view a helpful video on how to properly put on and take off masks and eye protection.

All staff at the Centre are required and responsible to perform and promote frequent, proper hand hygiene (including supervising or assisting participants with hand hygiene). Hand washing using soap and water is recommended over alcohol-based hand rub when hands are visibly soiled and for children. Refer to Public Health Ontario's How to Wash Your Hands fact sheet.

The following PPE is available at the Centre and may be used if there is an identified risk of exposure to the COVID-19 virus:

- Disposable medical face mask
- Disposable shoe cover
- Face shield
- Gloves
- Goggles
- Gown

Unless specified use of PPE is required, deciding to use PPE is based on your risk assessment of the situation

- Ask yourself: What you will be doing, is there a risk of exposure to the COVID-19 virus?
- Social distancing at 2 metres/6 feet and proper hand hygiene will be the most important way to protect yourself from the COVID-19 virus
• Improper use of PPE can create a false sense of confidence, increase chances of infection and waste supply
• Proper use of PPE is an effective part of IPAC, however, it is not a stand-alone method
• Proper hand hygiene must be exercised before putting on and after taking off PPE including gloves, medical face masks, and eye protection.

Strategies for Educators Wearing Medical Face Masks
Language, speech, and social development are so dependent on face-to-face interaction between adults and children. When wearing a medical face mask, facial expressions become more difficult to read, it is more difficult for an adult to show their interest in what a child is doing or saying, and speech may be muffled.

These strategies can be used as educators are required to wear a medical face mask in our program:
• **Speak loudly and clearly** to avoid the muffling effect of a face mask.
• **Lower yourself to the child’s physical level** even though you may be distanced.
• **Exaggerate your intonation** in the absence of being able to use facial expression to augment and clarify your message.
• **Exaggerate your gestures** which will help get a child’s attention and provide visual cues in the absence of the child being able to fully see your facial expression.
• **Consider wearing a badge or photo of yourself** or having photos in the classroom of educators and children with and without medical face masks. This is a great opportunity to make a ‘homemade’ book involving the children in the process.
• **Use gestures to encourage a child to take another turn** in an interaction or conversation e.g. hold out your arm, lean your body toward the child.
• **Aim to convey your message with your eyes** as much as possible such as using wide eyes when surprised, smiling eyes when happy, etc.
• **Make explicit comments to draw children’s attention to your feelings**, e.g., ‘Look how happy my eyes look! ”Look how surprised I am. My eyes are so wide!”
• **Encourage parents/guardians to play with face masks on with their children** so children become more comfortable when seeing face masks at childcare. Play by putting them on and taking them off so children understand that the person wearing them is the same friendly person they have always known even if part of their face is hidden. Face mask play can turn into a game where educators reveal a smile, frown, surprised look, etc. make comments such as “Even though you couldn’t see my mouth, I was smiling and happy to see you!”

Policy and Procedure Review
This policy and procedure will be reviewed and signed off by all employees before employment at the Centre and at any time where a change is made.
Appendices #4
Exclusion of Sick Children Policy and Procedure

Policy Statement
Lee Wiggins Childcare Centre (LWCC/The Centre) is committed to providing a safe and healthy environment for children, families, and employees. LWCC will take every reasonable precaution to prevent the risk of communicable diseases within our childcare facility.

Purpose
To ensure that all employees are aware of and adhere to the directions established by Toronto Public Health (TPH), and Children’s Services regarding the exclusion of sick children at LWCC.

Application
This policy applies to all employees, students, community members, and any other persons engaged in business with LWCC.

Procedures
As required by the Child Care and Early Years Act (CCEYA), the Centre must separate children of ill health and contact parents/guardians to take the child home.

When children are ill and/or exhibit COVID-19 related symptoms, childcare staff will ensure the following:

- Ill children will be separated from all other children to the designated exclusion space (childcare office or available empty playroom) and will be supervised and monitored by a staff until they are picked up from care by a parent/guardian or person authorized to pick-up by the parent/guardian
- Symptoms of illness will be recorded in the child’s daily record via HiMama application, a hard copy of the symptoms of illness form is kept in the child’s personal file and it is documented in a daily communication log as per the CCEYA
- The parent/guardian or emergency contact of the ill child will be notified of the child’s symptoms and of the need to pick-up the child immediately; or
- If it appears that the child requires immediate medical attention, the child will be taken to the hospital by ambulance and examined by a legally qualified medical practitioner or a nurse registered under the Health Disciplines Act. R.R.O. 1990, Reg. 262, s. 34(3).

If you suspect the child has symptoms of a reportable communicable disease (Refer to TPH Guidelines for Common Communicable Disease) including COVID-19, please report these immediately to TPH’s Communicable Disease Surveillance Unit (416) 392-7411.

When to Exclude
Staff should exclude a sick child when the child has any signs and/or symptoms that are greater than normal, or if the child is unable to participate in regular programming because of illness.
Exclusion Example:
- If the child has one or more of the following symptoms: fever, cough, muscle aches, and tiredness or shortness of breath

Symptoms of Illness in the Centre
Ensuring that all environmental conditions are constantly monitored is essential in prevention and reducing illness. Employees must monitor for an increase in the above-normal amount of illnesses among other employees and children by looking at the normal occurrence of illness at the childcare and during the specific time period.

Staff will complete a basic health check and screening to ensure your child is asymptomatic when they arrive. Your child will also be monitored throughout the day. The following information may be considered when evaluating a child’s symptoms:
- Daily screening results
- Information provided by the parents/guardians about the child’s baseline health and other known underlying conditions (e.g., allergies, anxiety, asthma)
- Daily observations made by staff that care for the child (e.g., identifying a new or worsening cough, or differentiating between a runny nose that is persistent as opposed to one that subsides and is likely caused from returning inside from the cold)
- Record symptoms of illness for each child including signs or complaints the child may describe (e.g., sore throat, stomach ache, headache, etc.)
- Record the date and time that the symptoms occur
- Record the room the child attends (e.g., room number/description)
- Record attendances and absences
- Alternative assessments by a physician or a health care practitioner regarding symptoms (if available)

Refer to the COVID-19 Decision Tool for Child Care (child attendees) for further information.

If Symptoms Develop in Staff During the Day
In the event that a staff member develops any symptoms of illness (respiratory or otherwise) while at the Centre, the staff member must be immediately excluded from the program and sent home.

If the staff member is experiencing respiratory symptoms, ensure the staff member immediately performs hand hygiene, is wearing a medical face mask, and leaves the childcare centre.

All items used by the staff who is symptomatic will be cleaned and disinfected immediately after they leave the Centre. All items that cannot be cleaned (e.g., paper, books, cardboard puzzles) will be removed and stored in a sealed container for a minimum of 7 days.

The Coordinator will inform parents/guardians of children and staff via email who were exposed to the ill staff and advise that they should monitor their child for symptoms.
If Symptoms Develop in Children During the Day

If a child appears to be sick or displays symptoms of COVID-19 while at LWCC, we will notify the parent(s)/guardian(s) or emergency contacts to immediately pick-up the child within one hour of notification. It is recommended that the person go to an assessment centre for testing as soon as possible and to self-isolate at home until their result is available.

The child will be immediately separated from the rest of the cohort in a designated room (i.e., isolated room). If a separate room is not available, the child who is symptomatic will be kept at minimum of 2 metres/6 feet from others. The child will be encouraged to lie down on a cot while waiting for the parent/guardian or emergency contact person to arrive. Outside doors and windows will be opened to increase air circulation in the area if it can be done so safely.

The symptomatic individual will be provided with tissues and both supervising staff and child are to practice hand hygiene, respiratory etiquette and proper disposal of tissues while awaiting to be picked up. Should a sink not be readily available, hand sanitizer of at least 70% alcohol concentration will be provided for children above the age of 2 and with parental/guardian consent. If tolerated and above the age of 2, the child should wear a medical mask if they are able to use it properly (e.g., avoiding touching while on).

One staff will remain with the symptomatic child until a parent/guardian or emergency contact arrives.

Staff supervising the ill child should maintain physical distancing as best as possible. We recognize that physical distancing may not always be possible (e.g., if a young child needs comfort). Staff are to wear PPE, including a medical mask, eye protection (e.g., face shield or goggles), disposable gloves and a gown at all times and not interact with others. All staff are properly trained on donning and doffing PPE. Disposable shoes are available and optional to wear over indoor shoes. Staff will avoid contact with the child’s respiratory secretions.

Upon pick-up, the ill individual and/or their parent/guardian are advised to use the online self-assessment tool and follow instructions which may include seeking medical advice or going for testing for COVID-19. Note that individuals do not require a medical note or proof of negative test to return back to the program.

Household members (i.e., siblings) must be excluded from the program. Please see TPH’s Screening Tool for further guidance.

All items used by the child who is symptomatic and within 2 metres/6 feet of the ill person will be cleaned and disinfected immediately after they have been picked-up/left the Centre. This includes hallways and rooms where the individual has passed through. Staff will wear full PPE (i.e., disposable gloves, disposable shoe covers, face shield/goggles, gown, medical face mask) while cleaning and disinfecting, ensuring that appropriate contact time is used. Disposable cleaning equipment, such as disposable paper towels and wipes, will be used where possible.
Waste will be disposed in a fresh garbage bag, tied to seal the contents and tossed into a garage bin that has a lid and out of children’s reach.

All items that cannot be cleaned (e.g., paper, books, cardboard puzzles) will be removed and stored in a sealed container for a minimum of 7 days. For additional information regarding cleaning products and contact time, refer to the attached *Appendices #6 Environmental Cleaning and Disinfecting Procedure*.

The Coordinator will update and inform necessary stakeholders within the childcare community via email while maintaining confidentiality of the ill individual (e.g., Student Centre building management, service system manager and/or the ministry through a Serious Occurrence Report as applicable). In addition, the Coordinator will inform parents-guardians of children and staff via email who were exposed to the ill child and advise that they should monitor their child for symptoms.

Regular childcare operation can continue unless directed otherwise by TPH.

**Returning to Care for Children with Symptoms**

If an ill child who has not been exposed to someone with COVID-19 has a negative test result:
- They may return to the setting 24 hours after their symptoms start improving, the child is well enough to participate in program activities and they pass screening

If an ill child who has not been exposed to someone with COVID-19 is not tested:
- The parent/guardian should ensure that the symptomatic child self-isolate for the required duration of days from the date their symptom(s) started, and contact a health care provider for further advice or assessment, including if the child needs a COVID-19 test or other treatment. Please see the most updated *Child Screening Infographic* and *Staff and Essential Visitors Infographic* from local public health.

LWCC may allow symptomatic children that have not been tested to return to care based on an alternative assessment made by a physician or health care practitioner regarding symptoms or the determination that COVID-19 testing is not required
- Medical notes are recommended or required by TPH
- Parents can complete a *Return to Child Care Confirmation Form* that confirms that your child is healthy and able to return to the childcare. By adding your signature, you are verifying that the information is true. LWCC requests that this form is completed and returned to LWCC’s Coordinator.

**Policy and Procedure Review**

This policy and procedure will be reviewed and signed off by all employees before employment at LWCC and at any time where a change is made.
Appendices #5
Procedure for Suspected or Positive COVID-19 Cases

The purpose of this procedure is to take all reasonable precautions in the protection of the staff, child, placement students and families when there is a positive or suspected COVID-19 case at the Lee Wiggins Childcare Centre (LWCC/The Centre).

Application
This applies to all employees, parents/guardians, students, and any other persons engaged in business with LWCC.

Procedure
When there is a suspected or positive case of COVID-19 at the Centre, the following procedures must be followed.

Suspected COVID-19 Cases at LWCC
Symptomatic staff and children will be excluded from the Centre and referred for testing. While awaiting test results, symptomatic staff and children will be directed to self-isolate.

If the symptomatic child is tested for COVID-19, follow the guidance of TPH for isolation and returning to the program. If there are other siblings or members of the household that attend the childcare, TPH will provide any further direction on returning to the program.

Childcare staff and children who have been exposed to an individual who became ill with symptoms must continue to be cohorted and monitored for signs and symptoms of illness:
  - Staff and placement students must be not assigned to other cohorts or work in other childcare settings. They must also be advised to avoid being in contact with vulnerable persons or settings where there are vulnerable persons (i.e., long-term care homes).
  - Staff must ensure that mixing of children is prevented
  - The Coordinator will inform parents/guardians of children who were exposed to the ill individual, and advise that they should monitor their child for symptoms

Refer to COVID-19 Interim Decision Guide for Child Care Operators to Direct Cohorts to Self-Isolate.

If you have symptoms of COVID-19, and were not a close contact of someone with COVID-19:
  - Stay home and self-isolate. Please see the most Screening Posters and Questionnaires from the Toronto website for more information
  - Contact Telehealth 1-866-797-0000 or your health care provider
  - Find out how to get tested and what you need to do

Child or Staff Has Been Excluded Due to COVID-19 Symptoms (Suspected COVID-19)
• The Coordinator will inform the Board of Directors and Student Centre building management immediately
• Parents/guardians of “close contacts” (staff and children who were in the same room) are contacted, cohorted and monitored for symptoms
• Symptomatic staff and children will be referred for COVID-19 testing
• As of October 2020, TPH no longer requires the reporting of symptomatic persons
• As of November 2020, the ministry no longer requires to report a serious occurrence for suspected cases

Exposure to Someone with COVID-19
We ask that all parent(s)/guardian(s) and staff let us know of any potential COVID-19 exposure immediately. A potential exposure means being a household contact or having close contact within 2 metres/6 feet of an individual with confirmed or suspected COVID-19 for at least 15 minutes. The timeframe for having contact with an individual includes the period of 24-hours before the individual became symptomatic. If there is a positive case of COVID-19 in a child or an adult who has been present in LWCC, we will inform the ministry, TPH, York University Student Centre (YUSC) management, LWCC Board of Directors, parents/guardians and staff.

LWCC staff, placement students and children exposed to a confirmed case of COVID-19 must be excluded from the childcare setting:

• Individuals must self-isolate at home and monitor for symptoms. Please see the most [Screening Posters and Questionnaires from the Toronto website](#)
• Contact [Telehealth 1-866-797-0000](#) or your health care provider
• Individuals who have been exposed to a confirmed case of COVID-19 should get tested
• If you do get tested, you must self-isolate while you wait for your results.
• If your test result is positive, you must stay home and self-isolate for 10 days if you have mild/moderate illness, or 20 days if you have severe illness or are immune compromised
• If you develop symptoms and do not get tested, you must self-isolate for 10 days if you have mild/moderate illness, or 20 days if you have severe illness or are immune compromised. You must also complete 14 days self-isolation from your last contact with the contact with COVID-19

Positive Cases of COVID-19
If you have tested positive for COVID-19:

• Individuals must self-isolate at home and monitor for symptoms. Please see the most [Screening Posters and Questionnaires from the Toronto website](#)
• If you were hospitalized in an intensive unit (ICU) with severe COVID-19 illness, or have a severe immune compromise (e.g., cancer chemotherapy, untreated HIV infection), you will have to self-isolate for 20 days
• Staff and children who are being managed by TPH must follow TPH instructions to determine when to return to the childcare. Clearance tests are not required for staff or children to return to the childcare
In all cases of a positive COVID-19 case at the Centre, once a positive test result has been received, the following steps must be taken:

**Coordinator**
- Will inform the Board of Directors and Student Centre building management immediately
- Only positive laboratory-confirmed cases of COVID-19 associated with childcare settings must be reported to TPH, [Toronto Public Health (TPH) COVID-19 Notification Form for Child Care Settings](https://www.toronto.ca/sites/default/files/webforms/childcare/COVID-19.pdf)
- Direction from TPH may include:
  - Providing attendance record (record of people who were in the childcare centre)
  - Providing names and contact information for families and staff being excluded
  - TPH will provide guidance on the information that should be shared with other staff, parents/guardians of children in the childcare centre
- Send out any communication provided by TPH to the following groups:
  - Families of children who are in direct contact with confirmed COVID-19 cases
  - Staff who are in direct contact with a confirmed COVID-19 case
  - All other families and staff who are not in direct contact with a confirmed COVID-19 case and are not being excluded from the Centre
- Report to the ministry by submitting and/or updating a Serious Occurrence

**When Staff Members, Children or Household/Close Contact Test Positive For COVID-19**

**Staff Member**
In the event a childcare staff tests positive for COVID-19:
- The employee should inform the Coordinator immediately and self-isolate immediately
- The employee will cooperate with management to identify close contacts and follow the direction from TPH and the Coordinator
- All other staff and families affected shall receive communication from the Coordinator. The Coordinator will send out communication as applicable
- All staff and children who are in the same room as the staff member who has tested positive will be excluded from the Centre for 10 days unless indicated otherwise by TPH

**Child**
In the event a child tests positive for COVID-19:
- The parent should inform the Centre’s Coordinator immediately
- The child will be managed by TPH
- All staff and children who are in the same room as the child who has tested positive will be excluded from the Centre for 10 days unless indicated otherwise by TPH

**Household/Close Contacts of Children or Staff**
In the event a household member or close contact of a child or staff tests positive for COVID-19:
- The staff or family who is “close contact” of a positive COVID-19 case attending LWCC should inform the Centre Coordinator immediately
• The staff member or child will be required to isolate and will be excluded from the Centre for a minimum of 10 days to monitor symptoms unless indicated otherwise from TPH

Report Cases and Outbreaks to Toronto Public Health (TPH)

LWCC have a duty to report confirmed cases of COVID-19 under the Health Protection and Promotion Act.

Two or more symptomatic laboratory-confirmed case of COVID-19 in a childcare Centre staff, placement student or child with an epidemiological link, where at least one case could have been infected in the childcare setting would be considered a confirmed COVID-19 outbreak, in consultation with TPH.

The Centre will notify TPH immediately of all laboratory-confirmed cases of COVID-19 by completing the Toronto Public Health COVID-19 Notification Form for Child Care Settings upon learning of the case and follow the instructions provided regarding the closure, reporting, and information regarding a return to care. TPH will also provide specific advice on what control measures should be implemented to prevent the potential spread and how to monitor for other possible infected staff members, placement students and children.

Additional support can be accessed by calling TPH at 416-338-7600 (8:30 a.m. to 4:30 p.m., Monday to Friday), 3-1-1 after hours or by emailing publichealth@toronto.ca.

Serious Occurrence Reporting

Previously, licensees were also required to report all suspected cases of COVID-19 to the ministry. Currently, only where a child, staff, student, or an essential visitor that has a confirmed case of COVID-19 (i.e., a positive COVID-19 test result), licensees must:

• Report this as a serious occurrence to the ministry
• Report to the TPH unit and provide any materials (e.g., daily attendance records) to public health officials to support case management and contact tracing and other activities in accordance with all applicable legislation, including the Municipal Freedom of Information and Protection of Privacy Act.

Public health officials will determine any additional steps required, including but not limited to how to monitor for other possible infected staff/providers and children and the declaration of an outbreak and closure of rooms and/or entire childcare settings.

• If a closure is ordered by the TPH and the licensee has already submitted a serious occurrence for a confirmed case, the existing serious occurrence must be updated to reflect the closure.

Should additional individuals at the childcare develop a confirmed case, licensees must,

• Revise the open serious occurrence report to include the additional cases; or,
• Submit a new serious occurrence report if the first has been closed already.
While licensees are no longer required to report a serious occurrence for suspected cases; if the TPH unit determines that a full or partial closure is required (i.e., program room or entire childcare must remain closed for a period of time), a serious occurrence report must be submitted under the “Unplanned Disruption of Service” category. There are requirements of employers to let staff know if they may have been exposed in the workplace. Please see Appendices #9 COVID-19 Workplace Safety Plan for further information.

LWCC is required to post a serious occurrence notification form as required under CCEYA. It will be posted at our entrance/exit screening area as well as emailed to placement students, staff, parent(s)/guardian(s), the Board of Directors and Student Centre building management.

Outbreak Management
An outbreak may be declared by the TPH unit when within a 14-day period, there are two or more laboratory-confirmed COVID-19 cases in children, staff/providers or other visitors with an epidemiological link (e.g., cases in the same room) where at least one case could have reasonably acquired their infection in the childcare setting.

TPH will work with the licensee to determine whether epidemiological links exist between cases and whether transmission may have occurred in the childcare setting.

If TPH declares an outbreak, they will determine what happens next. This could include closing particular childcare rooms or an entire childcare setting.

- TPH will help determine which groups of children and/or staff/providers need to be sent home or if a partial or full closure of the childcare setting is required.
- If the public health unit determines that partial or full closure of the childcare setting is required, the licensee must revise their existing serious occurrence report for a confirmed COVID-19 case to include information about the closure.

Returning to Care for Children with Symptoms
If an ill child who has not been exposed to someone with COVID-19 has a negative test result:

- They may return to the setting 24 hours after their symptoms start improving, the child is well enough to participate in program activities and they pass screening

If an ill child who has not been exposed to someone with COVID-19 is not tested:

- The parent/guardian should ensure that the symptomatic child self-isolate for the required duration of days from the date their symptom(s) started, and contact a health care provider for further advice or assessment, including if the child needs a COVID-19 test or other treatment. Please see the most updated Child Screening infographic and Staff and Essential Visitors infographic from local public health.

LWCC may allow symptomatic children that have not been tested to return to care based on an alternative assessment made by a physician or health care practitioner regarding symptoms or the determination that COVID-19 testing is not required
• Medical notes are recommended or required by TPH
• Parents can complete a Return to Child Care Confirmation Form that confirms that your child is healthy and able to return to the childcare. By adding your signature, you are verifying that the information is true. LWCC requests that this form is completed and returned to LWCC’s Coordinator.

Please see TPH’s COVID-19 Decision Tool for Child Care (child attendees) for further procedural clarification.

Procedure Review
This procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.
Appendices #6
Environmental Cleaning and Disinfecting Procedure

Lee Wiggins Childcare Centre (LWCC/The Centre) is committed to providing a safe and healthy environment for children, families, and employees. LWCC will take every reasonable precaution to prevent the risk of communicable diseases within our facility.

Purpose
To ensure that all employees are aware of, and adhere to, the directive established by Toronto Public Health (TPH) and Children’s Services regarding cleaning and disinfecting at LWCC.

Application
This applies to all employees, students, families, community members, and any other persons engaged in business with the Centre.

Definitions
Cleaning: refers to the physical removal of foreign material (i.e., dust, soil) and organic material (i.e., blood, secretions, microorganisms). Cleaning removes, rather than kills microorganisms. Warm water, detergent, and mechanical action (i.e. wiping) is required to clean surfaces. Rinsing with clean water is required to complete the cleaning process to ensure the detergent film is removed.

Disinfecting: describes a process completed after cleaning in which a chemical solution (i.e., bleach/water, Oxivir TB Ready-to-Use (RTU)) is used to kill most disease-causing microorganisms. In order to be effective disinfectant must be left on a surface for a period of time (contact time). Contact times are generally prescribed by the product manufacturer. Any items children may come into contact with, requires a final rinse after the required contact time is observed.

Procedures
Disinfectants commonly used in childcare settings are effective against COVID-19. Otherwise, all disinfectants must have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada. Always check expiry dates of products and follow the manufacturer’s instructions.

All products including cleaning agents and disinfectants must be out of reach of children, labeled, and must have Safety Data Sheets (SDS) up to date (within three years), which are stored in both the Centre’s tablets. A hardcopy is found in the staff kitchen.

All staff are educated on how to use the cleaning agents and disinfectants used at LWCC (e.g., required disinfectant contact times, safety precautions, required PPE, and directions on where and how to securely store cleaning and disinfectant supplies).
In an effort to maintain a physical distance of 2 metres/6 feet between individuals and limit the spread of pathogens, items such as toys should be limited to one child at a time and cleaned and disinfected after each use.

Items that are not able to be cleaned and disinfected easily or at least twice daily should be removed from use at this time. Currently, these items have all be placed into storage. Activities that do not allow for a physical distance of 2 metres/6 feet between individuals and where media cannot be easily cleaned and disinfected should also be discontinued at this time. Examples of items and activities that should be discontinued include but are not limited to the following:

- communal sensory play including the use of water, sand and dry foods
- items that require laundering such as dress-up clothes
- paper materials that are unable to be cleaned and disinfected (i.e., puzzles, cards, magazines)
- soft toys and pillows

It is recommended that enhanced environmental cleaning and disinfection principles be applied to all aspects of the facility and may include the following:

- cleaning and disinfection of toilets after each use
- cleaning and disinfection of cots after each use
- blankets and bedsheets are laundered daily after each use

**Cleaning Surfaces and Objects**

Regular cleaning and disinfecting of objects and high-touch surfaces will help to prevent the transmission of viruses from contaminated objects and surfaces. The Coordinator and/or designate will ensure monitoring of hand cleaning supplies is increased to ensure all sinks in the washrooms and playrooms are well stocked with handwashing supplies at all times (e.g., hand soap, paper towels).

As per Public Health Ontario’s recommendations, frequently high-touched surfaces (i.e., toys, learning materials) should be of a material that allows them to be easily cleaned and disinfected at least twice daily at a minimum, however, more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soilage. Frequently touched surfaces include but are not limited to

- computers, keyboards, mouse,
- desks,
- doorknobs,
- eating areas (i.e., tables, sinks, countertops),
- handles,
- handrails,
- light switches,
- phones,
- photocopier/printer,
- push buttons,
- sports equipment,
• touch screens/tablets,
• washrooms (i.e., toilet fixtures, faucets).

LWCC keeps a cleaning and disinfecting log to track and demonstrate cleaning schedules. Existing practices are reviewed to determine where enhancements might be required, including frequency and timing of cleaning and disinfection, areas to clean and/or disinfect, choice of cleaning products, and child safety, staffing, signage, and PPE use when cleaning.

Water fountains in the classrooms will be closed at this time. Personal water bottles are also not permitted in the Centre. The Centre will provide a cup of water and the cup will be washed immediately after use.

As per standard procedures, the Centre will ensure that the program has toys that are easily cleaned and disinfected, and any toys that do not meet the criteria will be temporarily removed from the playroom. The toy washing frequency will be increased from weekly toy washing to daily washing or in some cases toys will be washed per each use.

All hard surfaces and toys will be wiped down/sprayed throughout the day, before and after use, prior to leaving the room as well as at the end of each day.

LWCC has assigned staff to specifically conduct environmental cleaning and disinfecting throughout the day. They are to sign off on a Cleaning and Disinfecting Log using a tablet to track cleaning and disinfecting activities for each room/area, individual/play items and sleeping equipment such as cots. Recordings are saved on the tablet and transferred to iCloud daily.

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

Disinfecting
Water and bleach mixture made daily is used at the Centre as a disinfectant. It is an approved chlorine bleach solution provided by TPH. All spray bottles are clearly labeled and are kept out of the reach of children. In addition to the water/bleach mixture, Lysol wipes are used to wipe down hard surfaces (doorknobs/shelves/light switches) in between water/bleach disinfecting.

According to TPH, the bleach solutions for disinfecting are as follows:
• 5 mL (1 teaspoon) of bleach to 250mL (per cup) of warm water. 500 ppm – Prepared daily for toys, play mats, diaper change tables, sensory play tables, animal enclosures. Minimum 2-minute contact time. Allow to air dry
• 50 mL of bleach to 450 mL of warm water. 5000 ppm – Prepared as needed for blood spills and body fluid spills. Minimum 2-minute contact time. Allow to air dry
- 10 mL of bleach to 490 mL of warm water. 1000 ppm. Prepared as needed for outbreaks. Minimum 2-minute contact time. Allow to air dry
- Prepare fresh bleach solutions daily

Disinfecting using bleach solutions and/or Lysol wipes
1. Put one time use disposable gloves, medical face mask and face shield (or goggles)
2. Wipe the area with a Lysol wipe or spray the bleach/water mixture and leave on the surface for the appropriate disinfecting contact time (2 minutes). Lysol wipes (4 minutes)
3. Once the disinfecting contact time has elapsed, the surface has been disinfected.
4. Any surface children may come into contact with requires a final rinse with a single-use wet paper towel (i.e. lunch tables, highchair tray, floor, toy shelves)
5. If the surface continues to be wet, you may wipe it dry with a single-use paper towel

Accelerated Hydrogen Peroxide (AHP) was approved by TPH for use in childcare centres as a disinfectant. The AHP disinfecting product that is used at LWCC is Oxivir TB Ready-to-Use (RTU) spray. It is considered a high-level disinfectant which is defined as the complete elimination of all microorganisms in or on a surface.
- All individuals who pass screening are to have their outdoor shoes disinfected using Oxivir TB RTU, which comes ready to use in spray bottles. The contact time for disinfecting is 1 minute
- Refer to Appendices #9

COVID-19 Workplace Safety Plan
The COVID-19 pandemic is an evolving situation – review your plan regularly and make changes as required. Refer to the Ontario government’s COVID-19 website for up-to-date information.

13. How will you ensure all workers know how and are able to keep themselves safe from exposure to COVID-19?

**Consider:** What guidance will you need to provide? How will you share information? Do you need new or more frequent types of communication? Where will you update yourself on new COVID-19 guidance?

**Example:** Ensure our procedures are up to date by a daily review of Ministry of Health guidance.

**Actions:**
- Only the designated staff [Coordinator] will screen people before entering the workplace
- Support self-isolation for workers with symptoms and workers who are close contacts of COVID-19 cases
- Ensure people maintain a physical distance of 2 metres/6 feet or more
- All personnel entering the Childcare Centre is required to wear a medical face mask (face shield or goggles as well if working directly with children)
- Enhanced cleaning and disinfecting of surfaces and objects
- Support hand hygiene
- Remind workers about good cough and sneeze etiquette and to avoid touching their face
- Follow Toronto Public Health guidelines
- Post Toronto Public Health signage at the entrance/exit and throughout the Centre
- COVID-19 resource board by the staff kitchen is accessible to all personnel
- Coordinator will keep up to date with Ministry of Education and Public Health guidelines and relay updates with staff via e-mail and on the COVID-19 resource board

14. How will you screen for COVID-19?

**Consider:** How will you stay current about what symptoms to look for? Will you use a screening checklist? Who will do the screening? Who needs to be screened and how often?

**Example:** To find out if workers are well when they come to work, we will ask each worker basic questions about their physical health and symptoms using the provincial list of COVID-19 symptoms.

**Actions:**
- Active screening will be taking place (the Coordinator will ensure that the information is collected and reviewed to determine whether a person may enter the workplace)
- Will keep up to date with the Toronto Public Health screening tool for childcare centres
• Will align our health screening forms with Toronto Public Health screening checklist
• Parents must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility
• Staff and essential visitors must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility
• The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival.
• If your phone or tablet is not compatible to scan the QR code, the Coordinator will conduct an in-person health screening using a tablet.
• Children and staff will have their temperature taken at least once a day. Children’s temperatures are recorded onto a HiMama application.
• Signage is made visible and posted at the entrance/exit and throughout the childcare
• Encourage employees to monitor their own symptoms at all times
• Ensure workers know where to find the online COVID-19 self-assessment tool

15. How will you control the risk of transmission in your workplace?
Include how you will maximize distance and separation, reduce transmission from surfaces and objects, and support good hand and respiratory hygiene.

Consider: What engineering and administrative controls will you use? What changes will you make? Who needs to be in the workplace? How will you gather worker ideas about different ways of working?

Example: We have a new policy that limits time in the kitchen to 10 minutes, we have created a new outdoor break area in our parking lot and have changed how we schedule shifts and breaks.

Actions:
• Items that are easy to transmit COVID-19 have been removed from the Centre and placed into storage (i.e., porous items, soft items, area rugs, fabric, wood materials)
• All employees must stay home if they are feeling unwell
• Layout of Centre encourages social distancing
• Dividers are throughout the room to separate tables
• Remove extra chairs, tables, shelves that made it difficult for children to spread out
• Disinfecting is increased to a minimum of twice a day (morning and afternoon). Disinfecting will be more frequent when items are visibly soiled
• Toronto Public Health posters on hand hygiene are available at every sink
• Hand sanitizer is placed in every room and out of the reach of children
• New policies are in place that limit how many people are allowed in the rooms (i.e., kitchen 1 person, staff room 2 people, office 2 people)
• Coordinator will remain in office and limit movement between rooms
• Personal Protective Equipment (PPE) is required at all times by all personnel entering the facility. Employees must wear a medical face mask along with a face shield or goggles. Essential guests are only required to wear a medical face mask
• Will try to keep playground door open as much as possible for ventilation and air flow

16. What will you do if there is a potential case, or suspected exposure to, COVID-19 at your workplace?

Consider: What is the contact information for your local public health unit? What are your isolation procedures? How will you gather workplace contact information for public health contact tracing?

Example: We have designated a safe isolation area in the workplace and created a checklist with the procedures of what to do if some gets sick at work, including key contact numbers.

Actions:
• If an employee calls in sick, we will ask them to complete the self-assessment tool and ask the employee to follow any recommendations given by the tool, including being tested and self-isolating
• If anyone develops symptoms in the Centre, they are sent home to self-isolate.
• If there is a positive test result, the coordinator will report to Toronto Public Health and the Ministry of Education
• We will have contact information of every person that enters the Centre via our Google Doc screening in case we need to contact them. Attendance for essential guests is also kept with more detailed information (i.e., date enter/exit, rooms visited in the Centre, reason for visit, etc.)
• Childcare will be disinfected accordingly if a person has become symptomatic while at the Centre.
• Employees are to self-isolate if they either have symptoms, had close contact with an individual with symptoms or a confirmed diagnosis, or have travelled outside of Canada.
• We have designated a self-isolation area in the workplace in the event a child develops symptoms while in care.
• Toronto Public Health numbers will be posted on the COVID-19 resource board.

17. How will you manage any new risks caused by changes to the way you operate your business?

Consider: With workers, review existing critical risks and whether work practice changes will affect your current risk management strategy. Are any new risks introduced due to changes in worker numbers or work practices? What new risk controls are required?

Example: We will establish regular check-ins with workers about how they’re coping with the change to shift work.
Actions:
- Coordinator will conduct regular check-ins with employees about how they are coping with the changes
- Coordinator will conduct staff training for all employees prior to re-opening

18. How will you make sure your plan is working?

Consider: How often will you schedule a review of your plan? How will you get input and ideas from workers and clients? Who is responsible for evaluating how things are working and for adapting the plan as you find better/easier ways to do things? How will you communicate changes?

Example: We will set up a weekly meeting between the CEO and the health and safety representative.

Actions:
- The coordinator is responsible for evaluating how the workplace safety plan is working
- Reviews to the workplace plan will be updated whenever new guidance documents have been updated from Ministry of Education and Toronto Public Health
- Monthly staff meetings will be held to address any of the workers concerns, suggestions and for feedback
- Once changes have been made, all documents will be e-mailed to employees and will need to sign off on them
Appendices #10
Toy Disinfection Procedure

Disinfection of toys is vital to ensuring the health and safety of children as it reduces and mitigates the potential spread of germs and viruses among children and those who may come into contact with them.

All toys that are plush must be removed and not used in play. These include stuffed animals, hand puppets, cloth toys etc. In addition, all communal sensory play is suspended. Porous toys or materials that cannot be effectively cleaned and disinfected must be removed and not used in play.

Staff is to wear personal protective equipment (PPE) for toy disinfection procedures (i.e., medical face mask, face shield/goggles, gloves). Hands need to be cleaned after removing PPE.

Toys must be cleaned and disinfected daily and as often as necessary (e.g., when soiled, contaminated or if the toy has been used by a symptomatic individual).

Toy Washing Procedures – Cleaning and Disinfection Using a Mechanical Dishwasher
Toys cannot be cleaned and disinfected using LWCC’s mechanical dishwasher in the kitchen as the rinse cycle surpasses the required minimum of 82 degrees Celsius.

Toy Washing Procedures - Manual Cleaning and Disinfection
Toys are cleaned and disinfected using the Toronto Public Health (TPH) three-compartment sink/bin method
1\textsuperscript{st} sink: Wash toys with detergent
2\textsuperscript{nd} sink: Rinse with clean water

The designated person responsible for the cleaning of toys will ensure toys dry in a designated area that is separate from bathrooms, change tables, and protected from sources of contamination. They are to ensure that required disinfectant contact times are archived or alternatively allows toys to air dry.

Toy Washing Procedures – Cleaning and Disinfecting Large Toys/Equipment Using Bleach Solution Spray
Large toys, wooden toys, cots, etc. that cannot be immersed in a disinfectant solution should use this method for washing. Please follow the steps below:
11. Clean with soap and water using a cloth
12. Wipe with a clean wet cloth to rinse
13. Disinfect by spraying bleach solution and let it sit for a minimum of 2-minute contact time. Do not spray product to toys and surfaces when children or other staff are nearby
14. A final rinse is required using a single-use wet paper towel
15. Allow toys to air dry

**Tips and Reminders**
- Fill the bucket only to a level that is comfortable for transporting to the area you use for toy washing. A trolley can also be used to assist with transporting
- Unused test strips must be kept dry and in a dark space
- When a new bottle of test strips is opened the date opened should be written on the bottle
- Test strips expire six (6) months after the container is opened. Any unused test strips must be discarded after 6 months as it is no longer effective

**Frequencies and Toy Cleaning Schedules**
- Toy cleaning schedules will be saved onto the program rooms tablet and updated daily by the staff person responsible for the area
- Toys, including large toys, cots, equipment and high touch items will be cleaned and disinfected at least two times per day and as often as necessary (i.e., when toys/items are visibly soiled or when toys/items have been contaminated with body fluids)
- Toys and items such as electronic devices/tablets should be cleaned and disinfected between users prior to redistributing
- Refer to Appendices #6 Environmental Cleaning and Disinfecting Procedure for more guidance

**Handling Used Toys**
- Toys that have become visibly dirty or that have come into contact with body fluids (e.g., toys that have been mouthed) should be taken out of circulation immediately and cleaned and disinfected immediately. Toys that cannot be cleaned and disinfected immediately should be placed in a designated dirty toy sealed bin for a minimum of 7 days. The bin should be clearly labelled and inaccessible to children.

**Policy and Procedure Review**
This policy and procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.
• for further guidance

Disinfecting using Oxivir Tb Ready-To-Use (RTU) Spray
  1. Put one time use disposable gloves, medical face mask and face shield (or goggles)
  2. Spray on Oxivir Tb RTU-1 Minute solution and leave on the surface for the appropriate disinfecting contact time (1 minute). Ensure the spray setting is on stream and not mist
  3. Once the 1 minute disinfecting contact time has elapsed, the surface has now been disinfected
  4. Any surface children may come in contact with requires a final rinse with a single-use wet paper towel
  5. If the surface continues to be wet, you may wipe it dry with a single-use paper towel

Cleaning and Disinfecting Frequency Requirements

Clean and Disinfect Upon Staff Entry to the Childcare:
  • Any hard surfaces such as travel mugs, cell phones, lunch containers, outdoor shoes

Clean and Disinfect Upon Children’s Entry to the Childcare:
  • Any hard surfaces such as outdoor shoes

Clean and Disinfect Frequencies for Other Surface Items:
  • **Tables and countertops:** Used for food preparation must be cleaned and disinfected before and after each use
  • **Spills:** Must be cleaned and disinfected immediately
  • **Handwash sinks:** Staff and children washroom areas must be cleaned and disinfected at least two times per day and as often as necessary (e.g. when visibly dirty or contaminated with body fluids)
  • **Floors:** Cleaning and disinfecting must be performed as required (when spills occur) and throughout the day when rooms are available (during outdoor play)
  • **Outdoor play equipment:** Outdoor play structures are not required to be cleaned and disinfected unless the equipment is visibly soiled or dirty. It is recommended to limit the amount of outdoor play equipment and toys in use. Batch toys played outdoors and rotate weekly.
  • **High-touch surfaces:** Any surfaces that have frequent contact with hands (e.g. light switches, shelving, containers, door knows, sink faucets). These surfaces should be cleaned at least twice per day and as often as necessary (e.g. when visibly dirty or contaminated with body fluids)
  • **Other shared items:** Phones, tablets, keyboards, binders, etc., disinfected between users

Clean and Disinfect Daily:
• Low—touch surfaces (any surfaces that have minimal contact with hands), must be cleaned and disinfected daily (e.g. window ledges, doors, sides of furnishings, etc.)

Clean and Disinfect as Required:
Blood/Bodily Fluid Spills: Using the steps below, the surface must be cleaned first then disinfected:
1. Isolate the area around the spill so that no other objects/humans can be contaminated
2. Gather all supplies, perform hand hygiene, then put on single-use gloves
3. Scoop up the fluid with disposable paper towels (check the surrounding area for splash/splatter) and dispose of in separate garbage bag
4. Clean the spill area with detergent, warm water and single-use paper towels
5. Rinse to remove detergent residue with clean water and single-use paper towel
6. Discard used paper towels and gloves immediately in a tied plastic bag
7. Spray Oxivir TB Ready-to-Use disinfectant in and around the spill area and allow the appropriate 1 minute disinfecting contact time.
8. A final rinse is required if children come into contact with the area
9. Remove gloves as directed and discard them immediately
10. Perform hand hygiene as directed

Notes:
• If the spill includes broken glass, ensure a brush and dustpan is used to pick it up and discard. Disinfect the brush and dustpan after use. NEVER use your hands to clean up the glass.
• Please refer to the TPH, 'Blood and Bodily Fluid Spills' poster for further guidance

Cot Cleaning and Disinfecting:
• Cots must be assigned/designated to a single child per use
• Cots must be cleaned and disinfected before being assigned to a child
• Cots must be cleaned and disinfected daily and when soiled or wet
• High touch surfaces on cots must be disinfected at least twice per day (before and after each use) and as often as necessary
• Cots must be stored in a manner which there is no contact with the sleeping surface of another cot
• Bedding must be laundered daily with hot water, and when soiled or wet

Where an Individual is Suspected of Having COVID-19 in the Childcare
• All items used by the child who is symptomatic and within 2 metres/6 feet of the ill person will be cleaned and disinfected immediately after they have been picked-up/left the Centre. This includes hallways and rooms where the individual has passed through.
• Staff will wear full PPE (i.e., disposable gloves, disposable shoe covers, face shield/goggles, gown, medical face mask) while cleaning and disinfecting, ensuring that appropriate contact time is used.
• Disposable cleaning equipment, such as disposable paper towels and wipes, will be used where possible.
• Waste will be disposed in a fresh garbage bag, tied to seal the contents and tossed into a garage bin that has a lid and out of children’s reach.
• All items that cannot be cleaned (e.g., paper, books, cardboard puzzles) will be removed and stored in a sealed container for a minimum of 7 days.

Additional Infection Prevention and Control Practices for Hygiene Items
• Pacifiers are not permitted at the Centre
• Label creams and lotions used during diapering. Never put hands directly into lotion or cream bottles. Use a tissue or single-use gloves. Upon arrival to the Centre, wipe the cream/lotion container with a disinfecting wipe. Creams and lotions are to kept on-site
• Label all clothing
• At this time, the Centre requests families provide their child’s own sunscreen which would be labelled with the child’s name and kept on-site. Staff will apply the sunscreen using appropriate PPE and practicing hand hygiene in between each child’s application. Sunscreen from home will not be shared between children. Hand hygiene must be practiced before and after applying sunscreen
• For Toy Cleaning and Disinfecting, please refer to the Appendices #9

COVID-19 Workplace Safety Plan
The COVID-19 pandemic is an evolving situation – review your plan regularly and make changes as required. Refer to the Ontario government’s COVID-19 website for up-to-date information.

19. How will you ensure all workers know how and are able to keep themselves safe from exposure to COVID-19?

Consider: What guidance will you need to provide? How will you share information? Do you need new or more frequent types of communication? Where will you update yourself on new COVID-19 guidance?

Example: Ensure our procedures are up to date by a daily review of Ministry of Health guidance.

Actions:
- Only the designated staff [Coordinator] will screen people before entering the workplace
- Support self-isolation for workers with symptoms and workers who are close contacts of COVID-19 cases
- Ensure people maintain a physical distance of 2 metres/6 feet or more
- All personnel entering the Childcare Centre is required to wear a medical face mask (face shield or goggles as well if working directly with children)
- Enhanced cleaning and disinfecting of surfaces and objects
- Support hand hygiene
- Remind workers about good cough and sneeze etiquette and to avoid touching their face
- Follow Toronto Public Health guidelines
- Post Toronto Public Health signage at the entrance/exit and throughout the Centre
- COVID-19 resource board by the staff kitchen is accessible to all personnel
- Coordinator will keep up to date with Ministry of Education and Public Health guidelines and relay updates with staff via e-mail and on the COVID-19 resource board

20. How will you screen for COVID-19?

Consider: How will you stay current about what symptoms to look for? Will you use a screening checklist? Who will do the screening? Who needs to be screened and how often?

Example: To find out if workers are well when they come to work, we will ask each worker basic questions about their physical health and symptoms using the provincial list of COVID-19 symptoms.

Actions:
- Active screening will be taking place (the Coordinator will ensure that the information is collected and reviewed to determine whether a person may enter the workplace)
- Will keep up to date with the Toronto Public Health screening tool for childcare centres
• Will align our health screening forms with Toronto Public Health screening checklist  
• Parents must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility  
• Staff and essential visitors must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility

- The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival.  
- If your phone or tablet is not compatible to scan the QR code, the Coordinator will conduct an in-person health screening using a tablet.  
- Children and staff will have their temperature taken at least once a day. Children’s temperatures are recorded onto a HiMama application.

- Signage is made visible and posted at the entrance/exit and throughout the childcare  
- Encourage employees to monitor their own symptoms at all times  
- Ensure workers know where to find the online COVID-19 self-assessment tool

21. How will you control the risk of transmission in your workplace?  
Include how you will maximize distance and separation, reduce transmission from surfaces and objects, and support good hand and respiratory hygiene.  

Consider: What engineering and administrative controls will you use? What changes will you make? Who needs to be in the workplace? How will you gather worker ideas about different ways of working?

Example: We have a new policy that limits time in the kitchen to 10 minutes, we have created a new outdoor break area in our parking lot and have changed how we schedule shifts and breaks.

Actions:  
• Items that are easy to transmit COVID-19 have been removed from the Centre and placed into storage (i.e., porous items, soft items, area rugs, fabric, wood materials)  
• All employees must stay home if they are feeling unwell  
• Layout of Centre encourages social distancing  
• Dividers are throughout the room to separate tables  
• Remove extra chairs, tables, shelves that made it difficult for children to spread out  
• Disinfecting is increased to a minimum of twice a day (morning and afternoon). Disinfecting will be more frequent when items are visibly soiled  
• Toronto Public Health posters on hand hygiene are available at every sink  
• Hand sanitizer is placed in every room and out of the reach of children  
• New policies are in place that limit how many people are allowed in the rooms (i.e., kitchen 1 person, staff room 2 people, office 2 people)  
• Coordinator will remain in office and limit movement between rooms
- Personal Protective Equipment (PPE) is required at all times by all personnel entering the facility. Employees must wear a medical face mask along with a face shield or goggles. Essential guests are only required to wear a medical face mask.
- Will try to keep playground door open as much as possible for ventilation and air flow.

22. What will you do if there is a potential case, or suspected exposure to, COVID-19 at your workplace?

**Consider:** What is the contact information for your local public health unit? What are your isolation procedures? How will you gather workplace contact information for public health contact tracing?

**Example:** We have designated a safe isolation area in the workplace and created a checklist with the procedures of what to do if some gets sick at work, including key contact numbers.

**Actions:**
- If an employee calls in sick, we will ask them to complete the self-assessment tool and ask the employee to follow any recommendations given by the tool, including being tested and self-isolating.
- If anyone develops symptoms in the Centre, they are sent home to self-isolate.
- If there is a positive test result, the coordinator will report to Toronto Public Health and the Ministry of Education.
- We will have contact information of every person that enters the Centre via our Google Doc screening in case we need to contact them. Attendance for essential guests is also kept with more detailed information (i.e., date enter/exit, rooms visited in the Centre, reason for visit, etc.).
- Childcare will be disinfected accordingly if a person has become symptomatic while at the Centre.
- Employees are to self-isolate if they either have symptoms, had close contact with an individual with symptoms or a confirmed diagnosis, or have travelled outside of Canada.
- We have designated a self-isolation area in the workplace in the event a child develops symptoms while in care.
- Toronto Public Health numbers will be posted on the COVID-19 resource board.

23. How will you manage any new risks caused by changes to the way you operate your business?

**Consider:** With workers, review existing critical risks and whether work practice changes will affect your current risk management strategy. Are any new risks introduced due to changes in worker numbers or work practices? What new risk controls are required?

**Example:** We will establish regular check-ins with workers about how they’re coping with the change to shift work.
**Actions:**

- Coordinator will conduct regular check-ins with employees about how they are coping with the changes
- Coordinator will conduct staff training for all employees prior to re-opening

24. How will you make sure your plan is working?

**Consider:** How often will you schedule a review of your plan? How will you get input and ideas from workers and clients? Who is responsible for evaluating how things are working and for adapting the plan as you find better/easier ways to do things? How will you communicate changes?

**Example:** We will set up a weekly meeting between the CEO and the health and safety representative.

**Actions:**

- The coordinator is responsible for evaluating how the workplace safety plan is working
- Reviews to the workplace plan will be updated whenever new guidance documents have been updated from Ministry of Education and Toronto Public Health
- Monthly staff meetings will be held to address any of the workers concerns, suggestions and for feedback
- Once changes have been made, all documents will be e-mailed to employees and will need to sign off on them
Appendices #10
Toy Disinfection Procedure

Disinfection of toys is vital to ensuring the health and safety of children as it reduces and mitigates the potential spread of germs and viruses among children and those who may come into contact with them.

All toys that are plush must be removed and not used in play. These include stuffed animals, hand puppets, cloth toys etc. In additional, all communal sensory play is suspended. Porous toys or materials that cannot be effectively cleaned and disinfected must be removed and not used in play.

Staff is to wear personal protective equipment (PPE) for toy disinfection procedures (i.e., medical face mask, face shield/goggles, gloves). Hands need to be cleaned after removing PPE.

Toys must be cleaned and disinfected daily and as often as necessary (e.g., when soiled, contaminated or if the toy has been used by a symptomatic individual).

**Toy Washing Procedures – Cleaning and Disinfection Using a Mechanical Dishwasher**

Toys cannot be cleaned and disinfected using LWCC’s mechanical dishwasher in the kitchen as the rinse cycle surpasses the required minimum of 82 degrees Celsius.

**Toy Washing Procedures - Manual Cleaning and Disinfection**

Toys are cleaned and disinfected using the Toronto Public Health (TPH) three-compartment sink/bin method

1\(^{st}\) sink: Wash toys with detergent
2\(^{nd}\) sink: Rinse with clean water

The designated person responsible for the cleaning of toys will ensure toys dry in a designated area that is separate from bathrooms, change tables, and protected from sources of contamination. They are to ensure that required disinfectant contact times are archived or alternatively allows toys to air dry.

**Toy Washing Procedures – Cleaning and Disinfecting Large Toys/Equipment Using Bleach Solution Spray**

Large toys, wooden toys, cots, etc. that cannot be immersed in a disinfectant solution should use this method for washing. Please follow the steps below:
16. Clean with soap and water using a cloth
17. Wipe with a clean wet cloth to rinse
18. Disinfect by spraying bleach solution and let it sit for a minimum of 2-minute contact time. Do not spray product to toys and surfaces when children or other staff are nearby
19. A final rinse is required using a single-use wet paper towel
20. Allow toys to air dry

Tips and Reminders
- Fill the bucket only to a level that is comfortable for transporting to the area you use for toy washing. A trolley can also be used to assist with transporting
- Unused test strips must be kept dry and in a dark space
- When a new bottle of test strips is opened the date opened should be written on the bottle
- Test strips expire six (6) months after the container is opened. Any unused test strips must be discarded after 6 months as it is no longer effective

Frequencies and Toy Cleaning Schedules
- Toy cleaning schedules will be saved onto the program rooms tablet and updated daily by the staff person responsible for the area
- Toys, including large toys, cots, equipment and high touch items will be cleaned and disinfected at least two times per day and as often as necessary (i.e., when toys/items are visibly soiled or when toys/items have been contaminated with body fluids)
- Toys and items such as electronic devices/tablets should be cleaned and disinfected between users prior to redistributing
- Refer to Appendices #6 Environmental Cleaning and Disinfecting Procedure for more guidance

Handling Used Toys
- Toys that have become visibly dirty or that have come into contact with body fluids (e.g., toys that have been mouthed) should be taken out of circulation immediately and cleaned and disinfected immediately. Toys that cannot be cleaned and disinfected immediately should be placed in a designated dirty toy sealed bin for a minimum of 7 days. The bin should be clearly labelled and inaccessible to children.

Policy and Procedure Review
This policy and procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.
Refer to Public Health Ontario’s Environmental Cleaning Fact Sheet and the Public Services Health and Safety Association’s Child Care Centre Employer Guidelines for more information.

Procedure Review
This procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.

Appendices #7
Enrollment, Part-time Care, Waiting List, Withdrawal Policies and Procedure

Maximum Cohort Size, Ratio and Staffing
Given the strict health and safety measures in place and the advice of local public health units, Lee Wiggins Childcare Centre (LWCC/The Centre) has decided to temporarily operate with one mixed age group (“cohort”) consisting of both toddler and preschool children. There is a maximum of 15 children in attendance at any given time between the age of 18 months – 6 years. LWCC is licensed to accept children between the age of 13 – 18 months as long as they are independently walking and can generally feed themselves. In addition, only 3 underaged children are permitted to be on the attendance at any given time.

Ratio is 1 staff with 8 children with a maximum of 2 staff with 15 children. If there are more than 3 toddlers present at any given time, the ratio changes to 1 staff with 5 children with a maximum of 3 staff with 15 children. This ensures that we maintain effective health and safety, infection prevention and control practices.

Maximum capacity does not apply to special needs resource staff on-site, staff designated to food prep, or enhanced cleaning (i.e., if they are not counted towards staff to child ratios, they are not included in the maximum capacity rules).

Reduced ratios are permitted as set out under the Child Care and Early Years Act (CCEYA) provided that cohorts are not mixed with other cohorts. Reduced ratios are not permitted at any time during outdoor play.

Staff will be designated to one role/location. Therefore, staff specifically assigned with the children, check-in/check-out or disinfecter should be supported by the same staff as much as possible. The check-in/check-out designate and Coordinator will limit their movement between rooms and doing so when absolutely necessary.
Currently, there will be two designated full-time staff on the floor with the children, two designated disinfectors (one a.m. shift, one p.m. shift) and one designated screener (Coordinator).

Enrollment
LWCC currently has a maximum capacity of 15 children in attendance at any given time.

All registration, medical, and permission forms must be completed and placed on file before the child’s first day. In addition,

- Immunization records must be up to date before a child will be accepted into childcare.
- A registration fee ($50.00) and first month tuition must be submitted prior to the child’s first day in care.
- A child that requires an individual medical plan must provide all necessary medication pertaining to the plan prior to starting at the childcare.

Part-Time Care
LWCC provides part-time care to families when space is available. We currently have five different part-time slots that families are able to choose from.

The reduced hour time slots are as follows:
- 5 hours: 7:30 a.m. – 12:30 p.m.
- 5 hours: 8:30 a.m. – 1:30 p.m.
- 4 hours: 8:30 a.m. – 12:30 p.m.
- 5 hours: 10:30 a.m. – 3:30 p.m.
- 5 hours: 12:30 p.m. – 5:30 p.m.
- Full Day: 7:30 a.m. – 6:00 p.m.

Families are able to choose what day of the week and what timeslots works best for them. Schedules are created two weeks before the beginning of a term (September, January, May). Families are able to add days/hours to their schedules mid-term; however, we do not permit removing days or shortening hours.

Extra Care
Registered families are able to request days that they may not be scheduled to bring in their child(ren). Extra care is only available if there is space and within meeting ratio. Costs for extra care will be added to the following month’s tuition fee.

Waiting List
As of September 1, 2016, under the authority of Ontario Regulation 137/15, licensed childcare centres may no longer charge fees to have their child placed on a wait list.

A wait list fee is any fee or deposit paid by a parent for an unsecured spot in a childcare centre. Regardless of whether or not the fee is refundable, childcare licensees may no longer accept
payment to place a child’s name on a wait list that may or may not lead to the child being offered childcare.

Childcare centres may charge fees related to the administration of enrolling new children. However, these fees may only be charged once a child has been offered and accepted entrance into the childcare centre.

The Ministry of Education recognizes that maintaining a wait list is not a straightforward endeavour and that a first-come/first served approach may not be viable. Licensed centres need the flexibility to manage their admissions fairly, effectively and transparently.

To support transparency, new requirements in section 75.1 of the Ontario Regulation 137/15 requires childcare licensees to have a wait list policy that explains how licensees manage wait lists and to include this policy in its Parent/Guardian Handbook. Licensed childcare centres must also provide parents/guardians with a best approximation of their child’s status on a wait list, when asked. These new requirements came into effect on January 1, 2017.

During a pandemic, all waitlist applications are completed online (www.yorkuchildcare.ca). Spots available are determined based on a first come first serve basis. Once you complete the application, it will automatically be emailed to the Centre. Each application is time and date stamped.

As such, the order of priority is:
- Families with siblings of children already enrolled in the Centre
- A child already enrolled in the program will have priority over others when moving from one age group into another.
- Students of York University
- CUPE 3903 members
- York University staff and faculty
- Members of the wider community

In each category, the following factor will also be considered when prioritizing families:
- Waitlist application submission dates and availability

Once space becomes available, whether full time or part time space, the LWCC will revisit the wait list.

The Centre will prioritize the first family, based on the above list, who may fill the space based on their requested hours of care and the child’s age group. Families may ask their status on the waiting list through email or phone call.

In addition to the above existing guidelines, the following factors will be considered.
Access to Childcare Spaces and Prioritizing Families During and After A Pandemic

When determining prioritization childcare spaces during and after a pandemic, LWCC will consider the following in addition to their current enrollment priorities:

- Children that attended emergency childcare centres during the period that the Centre was closed and that previously attended the Centre (children of essential, front line workers);
- Children of essential workers that were not placed in an emergency childcare centre that was previously attending the Centre;
- Children of families who are employed or self-employed where parents/guardians must return to work and that work outside of the home;
- Children of families who are students, in two-parent families, if one parent is a student, another parent must be employed, self-employed or in school;
- Families with special circumstances that would benefit from children returning to care such as children with special needs;
- Children of families who are looking for work.

In each category, the following factors will also be considered when prioritizing families:

- Lone parent families

The need for care and the type of care (part-time etc.) will be determined on an individual basis.

Waiting List Procedure

1. Children are added to LWCC waiting list in the order in which their applications are submitted by date. Parents/guardians are not charged a fee when placing their child on the waiting list.
2. The Centre will ensure that the waiting list will be made available to parents/guardians in a manner that maintains the privacy and confidentiality of the children listed on it, but that allows the position of a child on the list to be ascertained by the affected persons or families.
3. Each waiting list application is signed and dated. Dates are needed in order to provide first come first serve care. If completed a form online, it is automatically date and time stamped.
4. We endeavor to follow a ‘first come first serve’ procedure, however, we reserve the right to enroll children in our program that meets the needs of our enrollment planning. For example, if we have a very large number of older children in our preschool program, and a space opens up for a preschool child, we may contact the next youngest child on the waiting list, not necessarily the next child on the waiting list. We must consider the needs of our program as well as the needs of the families.
5. The waitlist will be reviewed near the end of each term (December, April, August) each year. The Coordinator and/or designate will contact families to find out if care is still required and the current age of the child on the waiting list.

Withdrawal from the Program
If you need to withdraw your child’s/children’s enrollment, refund deposits are only to be used towards the last month of a term (December, April, August) with a one month’s written notice via email to the Coordinator. Otherwise you will continue to be charged your monthly tuition and your refund deposit will be held towards the following term. No reimbursement of tuition will be granted. Refund deposits is forfeited if a child’s enrollment is terminated before the last month of a semester.

**LWCC Initiated Withdrawal from the Program**

LWCC strives to meet the needs of all children attending our program. In the event that we cannot meet the specific needs of the child, we reserve the right to withdraw the child from the program with the provision of two weeks’ notice of the Centre’s intention to do so. Attempts will be taken to communicate concerns with the parents/guardians on an ongoing basis. The Centre will provide a verbal and written warning prior to any revocation of childcare service.

Withdrawal of a child from the Centre may be required by the Board of Directors for any of the following reasons:

- Any contravention to the policies within the COVID-19 Pandemic Response Plan and Operational Practice document and existing Parent/Guardian Handbook
- Consistent late pick-up of child(ren)
- Direct violations of the Parent and Child Code of Conduct policy
- Non-payment of fees
- The behaviour displayed by the child could not be managed by the staff, after consultation/assistance from necessary specialists
- The behaviour displayed by the child is identified as requiring assistance from an outside agency, and the parent refuses such help
- **Inappropriate shouting/language/physical contact is used by parents/guardians to other parties**

**Should the first incident be of a severe nature, the Board of Directors reserves the right to immediately revoke childcare service. Such a decision will be based on staff documentation of the incident and verbal and/or written submissions from the affected parties.**

If a child is asked to leave or denied admission due to the Centre’s inability to accommodate the child’s needs or family circumstances, the procedure will include:

- Documentation of meetings with parents/guardians and use of support services
- Notification of Board of Directors
- Notification of Children’s Services Consultant
- Referral to other services
Appendices #8
Occupational Health and Safety Policy and Procedure

Lee Wiggins Childcare Centre (LWCC/The Centre) commits to ensuring a safe working environment. The agency will comply with all government legislation regarding occupational health and safety issues.

LWCC will make every effort to provide a safe and healthy work environment. To achieve this goal, the Coordinator and employees must be dedicated to continuously reducing occupational risk or injury.

Every staff must protect their own health and safety by working in compliance with the law and with the practices established by the Centre. It is in the best interest of all parties to consider health and safety in every activity.

The issue of safety requires co-operation, so all employees, volunteers, and students must follow the Centre’s safety policy. We actively encourage “safety consciousness” expecting everyone to be cautious in the workplace, and to immediately alert the Coordinator of any safety hazards or injuries. Any member of the Centre (including employees, volunteers, and students) who deliberately violates health and safety issues will be counseled and/or face disciplinary action.

The health and well-being of every employee, child and parent is of critical importance to the Centre. In carrying out this objective, our employees are to be provided with a clean and safe place to work, safe equipment, proper materials, and safe practices and methods are to be followed.

To fulfill our commitment to health and safety, the Centre will:
- Comply with legal requirements and follow accepted workplace practices
- Provide and maintain a safe and healthy work environment
• Provide appropriate training related to employee’s specific job requirements

This policy will be distributed to all employees. All employees will be required to review it and sign off annually. A copy of the policy will be placed in the Occupational Health and Safety binder found in the staff lounge room.

While LWCC will make every effort to provide a safe, healthy work environment in accordance with the Occupational Health and Safety Act (the Act), all employees of the Centre have a duty to maintain the health and safety of a workplace. Everyone is responsible for preventing accidents and removing conditions that might cause injury, interrupt workflow, or damage or destroy equipment or property. Employees who jeopardize their own safety or that of other employees or visitors will be subject to disciplinary action up to and including termination of employment.

**ROLES AND RESPONSIBILITIES**

**Board of Directors**
- Take all reasonable care to ensure the Centre complies with the Act and regulations
- Take every precaution reasonable to ensure the safety of employees
- Strategic oversight of health and safety policies and program

**Coordinator**
- Develop, implement and enforce health and safety policies and program
- Post policies in the workplace
- Inform parties of actual and potential workplace hazards
- Take steps to eliminate or control hazards
- Provide necessary instruction and safety equipment
- Cooperate with the Health and Safety Representative/Committee at York University
- Take every precaution reasonable to protect employees
- Ensure all staff are educated in proper equipment use
- Conduct accident/incident investigations and report all findings of the investigation to the Board of Directors
- Advise the Board of Directors and employees on legislative requirements and changes, potential hazards and preventing injury and illness
- Conduct monthly inspections of the workplace and evaluate any actual or potential hazards, recommend corrective action and follow up on implemented recommendations
- Identify situations that may be a source of danger to employees and make recommendations
- Obtain information about and be present for safety-related testing of equipment and tools
- When applicable, communicate with facilities management of the building on potential or existing hazards
- Assist in accident investigations, analysis and preparation of accident reports and summaries
• Actively promote health and safety in the workplace through training and information programs
• Take part in discussions on injury, health, welfare and damage control

Employee
• Carry out work in a manner so as not to create health and safety hazard to yourself or others
• Assist in the reduction and control of accident and illness producing conditions
• Report to the Coordinator if any unsafe acts, hazardous conditions, breach in legislation, policy or practice and defects in or lack of equipment required to perform the role
• Co-operate with any health and safety investigations as required
• Comply with policy and procedures at all times, including personal protective equipment, housekeeping programs, labeling of cleaning products, proper storage methods, complete any injury reports and proper hand hygiene practices
• Participate in regular training as established by the Centre
• Suggest ways to eliminate hazards

Procedure for Responding to Injury or Illness
All incidents requiring any form of first aid, hospitalization, or calling of an ambulance, that occur on-site, and impact employees, volunteers, clients or visitors must report using the Staff Incident/Accident Reporting Form (Sample attached).

At a minimum and in all cases, accident and/or injury reporting shall comply with the requirements of the Act and the Workplace Safety and Insurance Act, 1997. Accordingly, the affected employee will participate in the completion of a report of an accident/incident form, as well as other necessary forms.

Employees should report any incidents to the Coordinator who in turn is responsible to ensure that accident and injury reports are properly prepared and issued in a timely manner to the appropriate authorities consistent with the reporting requirements specified in the Act.

In the event of a fatality or critical injury to an individual at a workplace, the Coordinator will notify the Ministry of Labour and Safety Contact immediately by telephone (1-877-202-0008) as well as provide a written report in the manner prescribed by the Act within forty-eight hours after the occurrence of the incident.

Emergency and Fire Evacuation Procedure
In the event of a fire in your work area, employees should follow these guidelines:

Step # 1  Employees must immediately stop whatever they are doing.
Step # 2  Employees must walk directly to the nearest accessible fire exit and leave the building. They should feel all closed doors for heat before going through them. If the door feels hot, they must use a different door. They must not run or make detours (washroom, locker, etc.).
Step # 3 Employees should walk to a designated gathering location outside of the building.
Step # 4 Employees should stay together in a designated area until a headcount can be taken.
Step # 5 Fire alarms will ring for a period of time and then be silenced. Once the alarm goes to the fire department, only the fire department should give instructions to silence the alarm. This does not mean the danger is over. Employees must not leave the gathering point or re-enter the building until instructed to so by Management or the Fire Department.

NOTE: There are clearly marked fire exits in the workplace.

Please see LWCC’s *Fire and Evacuation Procedure* for more details.

**ACCIDENT PREVENTION**

**Occupational Illness**

Employees should be aware that an occupational illness under the Act is a condition that results from exposures in a workplace to a physical, chemical, or biological agent.

Staff should be aware of the potential infection hazards associated with childcare services:
- Enteric, which causes diarrhea, vomiting, gastrointestinal symptoms
- Respiratory and systemic infections, which leads to influenza, chickenpox, hand, foot and mouth disease
- Skin infections, bites, and wounds

An employee should immediately report to the Coordinator if he or she exhibits symptoms of occupational illness. Further, for specific types of illnesses, employees may be required to be away from work until they no longer have those symptoms.

**Personal Protective Equipment**

Where applicable, the Centre will provide employees the appropriate personal protection equipment (PPE) to use in the performance of their duties and responsibilities. The Centre will ensure that each employee is properly trained in and aware of the hazards associated with their position, and the required PPE and any requirements for maintenance, care, and use.

**WHMIS**

When handling materials, if the employee is in doubt to safe handling and storage, the employee should seek the assistance of the Coordinator. All Safety Data Sheets (SDS) will be provided for all products in use at the Centre. The Centre will ensure that each employee is properly trained and aware of the hazards associated with their position.

**Housekeeping**

Good housekeeping is an essential operating practice throughout the Centre which contributes to a reduced accident and illness. Poor housekeeping is the most common cause of injuries and contributes to accidents. Everyone can assist in providing a safer and healthier workplace by observing, correcting, and/or reporting unsafe housekeeping practices and conditions.
Right to Refuse Unsafe Work Procedures
Employees have the right to refuse work that they believe endangers themselves or others in
the workplace. Should an employee believe the work asked to be performed or being performed
is dangerous, the employee should follow the procedure outlined.

- Staff refuses to work because they have reason to believe work endangers health or
  safety
- Staff reports problem to Coordinator
- The Coordinator will inform and consult with the Board of Directors
- The Coordinator investigates in the presence of a Board of Directors representative
- Does the Coordinator agree the situation endangers health and safety?

Does staff have reasonable grounds to believe work endangers health or safety?
If NO – return to work
If YES – Board of Directors are called in

- Board of Director’s representative investigates in presence of employee and Coordinator
- Written Decision
- Corrective Action if ordered
  - Staff returns to work

Every accident or incident, no matter how minor, should be reported to the Coordinator. This
allows the Board of Directors and the Centre to ensure measures are put in place to assist in
the prevention of future incidents and to ensure compliance with the requirements of the
Ministry of Education and the Child Care and Early Years Act, 2014.

Health and Safety Training
In accordance with the Act, the Centre will provide health and safety training for employees on
their legal rights and duties, common workplace hazards and occupational illness. Such training
will be provided before any new employee assuming their duties and responsibilities. Records of
completed health and safety training will be kept as required by legislation.

All Employees, Volunteers, and Placemat Students Are To:
Be aware of physical safety:
- Blocked fire exits or extinguishers
- Blocked walkways
- Frayed electrical wires
- Poorly lit areas and burnt-out light bulbs
- Slippery floors or spills
- Worn or buckled areas of carpet or other flooring

Be aware of psychological safety:
- Not harbour issues or resentments without discussing and resolving, or getting
  assistance to do so
- Not tolerate hurtful gossip or other behaviour that puts another down
• Not tolerate intimidation, bullying or verbal abuse
• Not tolerate unwanted jokes, pictures or approaches of a sexual or otherwise offensive nature
• Treat colleagues and families with respect regardless of ethnicity, religion, gender, age, appearance or sexual orientation

**Follow general safety rules:**
• Clean up any messes or spills immediately. If necessary, let others know or leave a sign if floors are wet
• Do not use any equipment that you are not trained to use
• Follow all safety procedures for the job
• Keep doors locked if working alone after hours or on weekends
• Keep walkways, doorways, fire exits, fire extinguishers, or fire sprinklers unblocked
• Keep workstations clean
• Make sure trash is deposited in the appropriate bin (i.e., diaper bin, garbage)
• Report any hazards or injuries to the immediate Coordinator

Employees, volunteers, and placement students are encouraged to use additional precautions appropriate for other specific situations.

A **Staff Safety Accident/Incident Reporting Form** shall be completed within 24 hours of any accident or incident.

Please refer to [COVID-19 and Workplace Health and Safety](#) and [COVID-19 and Your Employment Standards Protections](#) for more information.

**Policy and Procedure Review**
Employees and unpaid placement student review the existing Occupational Health and Safety Policy and Procedure annually.
Lee Wiggins Childcare Centre
Staff Safety Accident/Incident Reporting Form

<table>
<thead>
<tr>
<th>Name of Injured:</th>
<th>Date of Accident/Incident:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone Number:</td>
<td>Location:</td>
</tr>
<tr>
<td>Address of Injured:</td>
<td></td>
</tr>
</tbody>
</table>

**Description of Accident/Incident:** (include exact location, probable cause, conditions of surface i.e. wet/dry, ice/snow, type of shoes worn, etc.)

<table>
<thead>
<tr>
<th>Extent of Injury:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Attention Provided?</td>
<td>Hospitalization? (if yes, when)</td>
</tr>
<tr>
<td>Witnesses? (provide names and contact information)</td>
<td></td>
</tr>
</tbody>
</table>
Recommendations *(any ideas to prevent reoccurrence?)*

<table>
<thead>
<tr>
<th>Reported By:</th>
<th>Position:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Reported:</td>
<td>Signature:</td>
</tr>
</tbody>
</table>

**Appendices #9**  
COVID-19 Workplace Safety Plan
The COVID-19 pandemic is an evolving situation – review your plan regularly and make changes as required. Refer to the Ontario government’s COVID-19 website for up-to-date information.

**25. How will you ensure all workers know how and are able to keep themselves safe from exposure to COVID-19?**

*Consider:* What guidance will you need to provide? How will you share information? Do you need new or more frequent types of communication? Where will you update yourself on new COVID-19 guidance?

*Example:* Ensure our procedures are up to date by a daily review of Ministry of Health guidance.

**Actions:**
- Only the designated staff [Coordinator] will screen people before entering the workplace
- Support self-isolation for workers with symptoms and workers who are close contacts of COVID-19 cases
- Ensure people maintain a physical distance of 2 metres/6 feet or more
- All personnel entering the Childcare Centre is required to wear a medical face mask (face shield or goggles as well if working directly with children)
- Enhanced cleaning and disinfecting of surfaces and objects
- Support hand hygiene
- Remind workers about good cough and sneeze etiquette and to avoid touching their face
- Follow Toronto Public Health guidelines
- Post Toronto Public Health signage at the entrance/exit and throughout the Centre
- COVID-19 resource board by the staff kitchen is accessible to all personnel
- Coordinator will keep up to date with Ministry of Education and Public Health guidelines and relay updates with staff via e-mail and on the COVID-19 resource board

**26. How will you screen for COVID-19?**

*Consider:* How you will stay current about what symptoms to look for? Will you use a screening checklist? Who will do the screening? Who needs to be screened and how often?

*Example:* To find out if workers are well when they come to work, we will ask each worker basic questions about their physical health and symptoms using the provincial list of COVID-19 symptoms.

**Actions:**
- Active screening will be taking place (the Coordinator will ensure that the information is collected and reviewed to determine whether a person may enter the workplace)
- Will keep up to date with the Toronto Public Health screening tool for childcare centres
- Will align our health screening forms with Toronto Public Health screening checklist
• Parents must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility.
• Staff and essential visitors must complete and submit a health screening form (via Google Docs) prior to arrival. The Coordinator will then review the submissions to determine access into the facility.
• The screening area will have a Quick Response code (QR code) to pull up the health screening form on your phone if the link was not sent prior to your arrival.
• If your phone or tablet is not compatible to scan the QR code, the Coordinator will conduct an in-person health screening using a tablet.
• Children and staff will have their temperature taken at least once a day. Children's temperatures are recorded onto a HiMama application.
• Signage is made visible and posted at the entrance/exit and throughout the childcare.
• Encourage employees to monitor their own symptoms at all times.
• Ensure workers know where to find the online COVID-19 self-assessment tool.

27. How will you control the risk of transmission in your workplace?
Include how you will maximize distance and separation, reduce transmission from surfaces and objects, and support good hand and respiratory hygiene.

Consider: What engineering and administrative controls will you use? What changes will you make? Who needs to be in the workplace? How will you gather worker ideas about different ways of working?

Example: We have a new policy that limits time in the kitchen to 10 minutes, we have created a new outdoor break area in our parking lot and have changed how we schedule shifts and breaks.

Actions:
• Items that are easy to transmit COVID-19 have been removed from the Centre and placed into storage (i.e., porous items, soft items, area rugs, fabric, wood materials).
• All employees must stay home if they are feeling unwell.
• Layout of Centre encourages social distancing.
• Dividers are throughout the room to separate tables.
• Remove extra chairs, tables, shelves that made it difficult for children to spread out.
• Disinfecting is increased to a minimum of twice a day (morning and afternoon). Disinfecting will be more frequent when items are visibly soiled.
• Toronto Public Health posters on hand hygiene are available at every sink.
• Hand sanitizer is placed in every room and out of the reach of children.
• New policies are in place that limit how many people are allowed in the rooms (i.e., kitchen 1 person, staff room 2 people, office 2 people).
• Coordinator will remain in office and limit movement between rooms.
• Personal Protective Equipment (PPE) is required at all times by all personnel entering the facility. Employees must wear a medical face mask along with a face shield or goggles. Essential guests are only required to wear a medical face mask.
• Will try to keep playground door open as much as possible for ventilation and air flow

28. What will you do if there is a potential case, or suspected exposure to, COVID-19 at your workplace?

Consider: What is the contact information for your local public health unit? What are your isolation procedures? How will you gather workplace contact information for public health contact tracing?

Example: We have designated a safe isolation area in the workplace and created a checklist with the procedures of what to do if some gets sick at work, including key contact numbers.

Actions:
• If an employee calls in sick, we will ask them to complete the self-assessment tool and ask the employee to follow any recommendations given by the tool, including being tested and self-isolating
• If anyone develops symptoms in the Centre, they are sent home to self-isolate.
• If there is a positive test result, the coordinator will report to Toronto Public Health and the Ministry of Education
• We will have contact information of every person that enters the Centre via our Google Doc screening in case we need to contact them. Attendance for essential guests is also kept with more detailed information (i.e., date enter/exit, rooms visited in the Centre, reason for visit, etc.)
• Childcare will be disinfected accordingly if a person has become symptomatic while at the Centre.
• Employees are to self-isolate if they either have symptoms, had close contact with an individual with symptoms or a confirmed diagnosis, or have travelled outside of Canada.
• We have designated a self-isolation area in the workplace in the event a child develops symptoms while in care.
• Toronto Public Health numbers will be posted on the COVID-19 resource board.

29. How will you manage any new risks caused by changes to the way you operate your business?

Consider: With workers, review existing critical risks and whether work practice changes will affect your current risk management strategy. Are any new risks introduced due to changes in worker numbers or work practices? What new risk controls are required?

Example: We will establish regular check-ins with workers about how they’re coping with the change to shift work.

Actions:
• Coordinator will conduct regular check-ins with employees about how they are coping with the changes
• Coordinator will conduct staff training for all employees prior to re-opening
30. How will you make sure your plan is working?

**Consider:** How often will you schedule a review of your plan? How will you get input and ideas from workers and clients? Who is responsible for evaluating how things are working and for adapting the plan as you find better/easier ways to do things? How will you communicate changes?

**Example:** We will set up a weekly meeting between the CEO and the health and safety representative.

**Actions:**
- The coordinator is responsible for evaluating how the workplace safety plan is working
- Reviews to the workplace plan will be updated whenever new guidance documents have been updated from Ministry of Education and Toronto Public Health
- Monthly staff meetings will be held to address any of the workers concerns, suggestions and for feedback
- Once changes have been made, all documents will be e-mailed to employees and will need to sign off on them
Appendices #10
Toy Disinfection Procedure

Disinfection of toys is vital to ensuring the health and safety of children as it reduces and mitigates the potential spread of germs and viruses among children and those who may come into contact with them.

All toys that are plush must be removed and not used in play. These include stuffed animals, hand puppets, cloth toys etc. In addition, all communal sensory play is suspended. Porous toys or materials that cannot be effectively cleaned and disinfected must be removed and not used in play.

Staff is to wear personal protective equipment (PPE) for toy disinfection procedures (i.e., medical face mask, face shield/goggles, gloves). Hands need to be cleaned after removing PPE.

Toys must be cleaned and disinfected daily and as often as necessary (e.g., when soiled, contaminated or if the toy has been used by a symptomatic individual).

Toy Washing Procedures – Cleaning and Disinfection Using a Mechanical Dishwasher
Toys cannot be cleaned and disinfected using LWCC's mechanical dishwasher in the kitchen as the rinse cycle surpasses the required minimum of 82 degrees Celsius.

Toy Washing Procedures - Manual Cleaning and Disinfection
Toys are cleaned and disinfected using the Toronto Public Health (TPH) three-compartment sink/bin method
1\textsuperscript{st} sink: Wash toys with detergent
2\textsuperscript{nd} sink: Rinse with clean water

The designated person responsible for the cleaning of toys will ensure toys dry in a designated area that is separate from bathrooms, change tables, and protected from sources of contamination. They are to ensure that required disinfectant contact times are archived or alternatively allows toys to air dry.

Toy Washing Procedures – Cleaning and Disinfecting Large Toys/Equipment Using Bleach Solution Spray
Large toys, wooden toys, cots, etc. that cannot be immersed in a disinfectant solution should use this method for washing. Please follow the steps below:
21. Clean with soap and water using a cloth
22. Wipe with a clean wet cloth to rinse
23. Disinfect by spraying bleach solution and let it sit for a minimum of 2\textbf{-minute} contact time. Do not spray product to toys and surfaces when children or other staff are nearby
24. A final rinse is required using a single-use wet paper towel
25. Allow toys to air dry

Tips and Reminders
- Fill the bucket only to a level that is comfortable for transporting to the area you use for toy washing. A trolley can also be used to assist with transporting
- Unused test strips must be kept dry and in a dark space
- When a new bottle of test strips is opened the date opened should be written on the bottle
- Test strips expire six (6) months after the container is opened. Any unused test strips must be discarded after 6 months as it is no longer effective

Frequencies and Toy Cleaning Schedules
- Toy cleaning schedules will be saved onto the program rooms tablet and updated daily by the staff person responsible for the area
- Toys, including large toys, cots, equipment and high touch items will be cleaned and disinfected at least two times per day and as often as necessary (i.e., when toys/items are visibly soiled or when toys/items have been contaminated with body fluids
- Toys and items such as electronic devices/tablets should be cleaned and disinfected between users prior to redistributing
- Refer to Appendices #6 Environmental Cleaning and Disinfecting Procedure for more guidance

Handling Used Toys
- Toys that have become visibly dirty or that have come into contact with body fluids (e.g., toys that have been mouthed) should be taken out of circulation immediately and cleaned and disinfected immediately. Toys that cannot be cleaned and disinfected immediately should be placed in a designated dirty toy sealed bin for a minimum of 7 days. The bin should be clearly labelled and inaccessible to children.

Policy and Procedure Review
This policy and procedure will be reviewed and signed off by all employees before employment/unpaid placement at LWCC and at any time when a change is made.