



# COVID-19 Guidelines for Child Care Centres, Before and After School Programs, and EarlyON Programs in Windsor and Essex County

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**WINDSOR-ESSEX COUNTY  
HEALTH UNIT**

Environmental Health Department  
**Version 10 – September 13, 2021**



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## Introduction

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This document is applicable for:

- Licensed child care centres
- Licensed home child care providers
- Before and After School Programs
- EarlyON Child and Family Centres

To support the safe operation of child care centres, before and after school programs, and EarlyON Child and Family Centres, many requirements must be followed as directed by the local Medical Officer of Health, the Child Care and Early Years Act, 2014 (CCEYA) and other policies and guidelines issued by the Ministry of Education. Plans must also be in place should any child care centre staff member, child, or parent/guardians develop symptoms and/or be exposed to a confirmed case of COVID-19 or if an outbreak is declared in a centre.

The information and references in this document are current as of August 25, 2021, and is intended to provide local guidance and act as a supplement to the:

- [Ministry of Education Operational Guidance During COVID-19 Child Care Re-opening - FR](#)
- [Ministry of Education Operational Guidance During COVID-19 EarlyON Re-opening – FR](#)
- [Ministry of Education Before and After School Programs Kindergarten – Grade 6 - FR](#)

## Protocols for Symptomatic Individuals, Testing and Confirmed Cases

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### Symptomatic Individuals

- Symptomatic staff, essential visitors, and children with any new or worsening symptoms of COVID-19, as indicated on the [COVID-19 School and Child Care Screening Tool](#), even those with only one symptom must stay home until:
  - they receive negative COVID-19 test results,
  - they receive an alternative diagnosis by a health care professional, or
  - it has been 10 days since their symptom onset and they are feeling better.
- Individuals who are symptomatic, and household members who have been identified as a close contact of the symptomatic individual are required to isolate until the symptomatic household member:
  - Receives a negative COVID-19 test result, or receives an alternative diagnosis by a health care professional.
  - If the symptomatic individual tests positive, or is not tested and does not receive an alternative diagnosis from a health care professional, the symptomatic individual must isolate (including from household members) for 10 days from symptom onset, and all high-risk household contacts must isolate until 14 days from their last contact with the symptomatic individual.

### Testing

- Those who test negative for COVID-19 must be excluded from programs and services until **24 hours after symptom resolution (for facilities NOT declared in outbreak)** and the WECHU does not have to be notified.

### Confirmed Cases

- If a child or staff member **tests positive** for COVID-19, the WECHU should be notified, and the health unit's advice should be followed. Those individuals must be excluded from all programs and services until such date as instructed by the case and contact manager.

### High Risk Exposures

- The WECHU requires unvaccinated children who are a high-risk household contact to a positive case (e.g. household member such as parent or sibling who has tested positive) and who have **not** been tested, will be required to isolate for a minimum of 14 days. Should they develop symptoms during the isolation period, they will be treated as a probable case and will need to further isolate 10 days from symptom onset.
- Fully vaccinated individuals who are a high risk household contact to a positive case (e.g. vaccinated household member such as parents or vaccinated siblings >12 years of age) may or may not be required to isolate. This will be determined under the direction of the case and contact manager.

- As of June, 2021 all adults and children that have received a COVID-19 vaccination in the last 48 hours and are experiencing mild headache, fatigue, muscle aches and/or joint pain that has only began after immunization with no other symptoms indicated on the screening tool may continue to attend the child care program if they are well enough to do so.
  - These individuals are to wear a properly fitted mask for their entire time in the child care setting. Their mask can be removed to eat or drink provided that they are at least 2 metre from others. If the symptoms worsen or continue past 48 hours they must self-isolate and get tested.
  - If these side effects worsen or continue past 48 hours the person must immediately self-isolate and seek COVID-19 testing. An ill individual who has an alternative diagnosis provided by a health care professional may return if they do not have a fever and their symptoms have been improving for at least 24 hours.
- All staff/providers should receive updated training on current health and safety measures. Encourage staff to download the COVID Alert mobile app so they can be notified directly if they have been in close contact with someone who was contagious with COVID-19.
- For before and after school programs, the Ministry recognizes that it may not be possible to limit students in the before and after school program to their groups from the core school day. The best practice is to limit interactions between students from different classes by:
  - Making best efforts to group the before and after school program class with the same core day class (e.g. determining core day classes based on whether the child is enrolled in the before and after school program); and
  - Making use of large, well-ventilated spaces (e.g. gymnasium) or outdoor spaces as much as possible for the before and after school programs.

## Additional Requirements and Recommendations

### Immunization Disclosure Policy

As of September 7, 2021 in accordance with the authority granted by the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020, all licensees must establish, implement and report on a COVID-19 Immunization Disclosure Policy.

For support in creating a policy, please review the Ontario [“Resource Guide for Licensed Child Care – COVID-19 Immunization Disclosure Policy”](#) document. There is a sample policy provided in this document that can be adapted for your own program.

### Masks

- Students in Grades 1 to 12 and all child care staff are **required** to wear a properly fitted non-medical or cloth mask indoors in school, including in hallways and during classes, as well as on school vehicles.

- The WECHU **recommends** that all individuals in a school or child care setting - including students in JK/SK and children over the age of two wear a non-medical or cloth mask that covers the mouth, nose, and chin.
- Masks are not recommended for children under the age of two.
- Students and children are not required to wear masks outdoors, but physical distancing should be encouraged as much as possible. Where physical distancing cannot be maintained, mask use is recommended.
- Staff are not required to wear masks outdoors where physical distancing can be maintained.
- Parents/guardians are responsible for providing their child(ren) with a non-medical mask(s) or face covering(s) each day and should be reminded that if children are wearing masks, they will require a way to store their mask when not in use.
- The child care centre should keep a back-up supply of non-medical or cloth masks. A mask will be provided for school age children in child care in case they cannot bring one from home.

### Eye Protection

- The WECHU **recommends** eye protection (e.g. goggles, face shield, or safety glasses) for all staff and visitors. This includes at all time spent indoors especially when in close contact with another person, or interacting with a person who is producing respiratory droplets or other body fluids to a degree that is likely to get on the clothes, skin, or face of the staff member/caregiver.
- The Ministry **requires** eye protection for child care staff working in close contact with students who are not wearing masks (for example, students in kindergarten). For acceptable types of eye protection, please review the WECHU [COVID-19 Workplace Eye Protection Fact Sheet](#).
- Staff are not required to wear eye protection outdoors where physical distancing can be maintained.
- Goggles and face shields provide a barrier to protect your eyes and face from expelled splashes, sprays, and bodily fluids by a contaminated person. A face shield is a device that has a transparent window or supported visor in front of the face to shield the eyes and face. If goggles are used, they must fit securely against the face with no openings. Goggles should be reusable and disinfected between uses.

### Gloves

- Proper glove use along with frequent hand hygiene is recommended only when there is a potential of coming into contact with blood or other body fluids such as phlegm, stool, urine, or vomit.
- Glove use does not replace frequent hand hygiene.
- Rubber gloves should be worn when using disinfectants if recommended by the manufacturer.

- 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 for children. Refer to Health Unit’s [How to Wash Your Hands](#) poster.

### **General Measures**

- Continue to practice public health measures – such as physical distancing between cohorts, practicing respiratory etiquette, etc. – when using community playgrounds
  - Monitor hand hygiene practices upon return to child care centre.
- Gymnasiums should only be used for moderate activity where physical distancing and current masking protocols for children and program staff can be followed.
- Efforts should be made to limit the use of shared equipment. Shared equipment should be disinfected regularly, and children and program staff should practice proper hand hygiene before and after participating in physical activity and equipment use.
- Non-essential visitors are permitted at the child care centre, however they should be limited to the ability to maintain physical distancing of at least 2 metres. Special needs services may continue.
- Supervise and ensure that children practice hand hygiene frequently while using playground
- Child care operators should secure and sustain an adequate amount of cleaning supplies that can support their current and ongoing operations.
- It is important to maintain a welcoming and caring environment for children. There is a document suggesting space set-up and physical distancing entitled [Building On How Does Learning Happen?](#) that provides ideas.
- Drop-off and Pick-up Procedures: Centres should develop procedures that support physical distancing and separate groups of children as best as possible – ideally separate entrances and exits (i.e., children of one room enter door A and children of another room enter door B), or staggered entrance times. Review the [Preparedness and Prevention Checklist](#) developed by Public Health Ontario for school reopening, for helpful considerations.

### **School Photos and Class Pictures**

When planning individual photos or class pictures, consider the following safety measures:

- Photographers can be permitted onsite under visitor policies and requirements.
- It is recommended that individual photos are taken outdoors where possible. Children can take their mask off for the photo while maintaining 6 feet of distance from the photographer.
- If outdoor individual pictures are not possible, indoor individual photos are permitted with public health measures planned and in place. Children can take their mask off just before taking photo while maintaining 6 feet of distance from the photographer.
- For class photos within cohorts, if all masks are removed, they are to be taken outdoors only with as much distancing as able within needs for photo. These are not permitted indoors (even in same cohort).

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- If an outbreak is declared at the centre, class photos/photographers onsite would not be permitted for the duration of the outbreak.



## Frequently Asked Questions

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1. What information do I need to provide the the Health Unit?
2. What additional policies and procedures should I have in place?
3. Are there any changes to how the child care centre must be cleaned and disinfected?
4. How do I cohort children and staff and what are the maximum group sizes?
5. What are the physical distancing requirements between children and staff?
6. What do we need to know about handling linens, food, and utensils?
7. How do we screen children and staff for COVID-19?
8. What is the procedure if a child or staff member becomes ill while at the centre?
9. What happens if a child care centre is declared as having a COVID-19 Outbreak?

### 1. What information do I need to provide to the Health Unit?

Each licensed child care centre and before and after school program must have written policies and procedures outlining their operational procedures during the pandemic. Please refer to the [Develop your COVID-19 workplace safety plan](#) webpage to support you in fulfilling this obligation. The documentation should include:

- An overview of how the child care setting will operate during and throughout the recovery phase following the pandemic
- How attendance records will be kept
- How communication between parents and the centre will be managed
- Policies and procedures describing health and safety protocols, including PPE requirements
- Detailed description of child drop-off and child pick-up procedures, including screening methods
- Items that will be prohibited in the centre (e.g. Items from home such as food, toys, or other plush items)
- Cleaning and disinfection of the space, toys and equipment
- Hand hygiene methods and frequency
- How food will be provided
- How staff will identify, report, and respond to illness in children and staff
- How physical distancing will be encouraged and monitored through the day
- How groups of children will be assigned and managed
- How staff will be scheduled
- Rescheduling of group events and/or in-person meetings

### 2. What additional policies and procedures should I have in place?

All licensed child care centres are required to have a COVID-19 Immunization Disclosure Policy. Please see the [Resource guide for licensed child care - Covid-19 immunization disclosure](#)

**policy** for implementing the immunization disclosure policy and meeting the obligations. Requirements to have this policy will come into effect on **September 7, 2021** and are anticipated to be in place for the 2021/22 school year.

**Note:** The Chief Medical Officer of Health will be issuing instructions for licensed child care in accordance with the authority granted by the *Reopening Ontario (A Flexible Response to COVID-19) Act, 2020* and dates for compliance.

### **3. Are there any changes to how the child care centre must be cleaned and disinfected?**

It is important to clean and disinfect all areas of the child care centre frequently using approved cleaning and disinfecting agents. Contact your Public Health Inspector if you have any questions about appropriate cleaning and disinfection products.

A policy and procedure on environmental cleaning and disinfecting must be created and include the following:

- Routine cleaning and disinfection schedule(s) for each room/area that identifies the surfaces, equipment and items to be cleaned and disinfected, the frequencies of cleaning and disinfection (i.e. daily, weekly and monthly), and the person(s) responsible for that task. Please refer to **Figure 1: Cleaning and Disinfectant Chart**.
- Frequently touched surfaces should be cleaned and disinfected twice daily at a minimum and more frequently depending on usage and extent of soil.
- Information relating to the cleaning agent(s) and disinfectant(s) used at the child care centre including:
  - Drug identification number (DIN)
  - Material safety data sheet (MSDS)
- Directions on how and when a product is to be used (staff should be able to provide a description of the products used, contact times, proper dispensing and usage)
- Directions for where to securely store cleaning and disinfectant supplies
- Operators should also keep a cleaning and disinfecting log to track and demonstrate cleaning schedules.

#### **Cleaning protocols if an individual is suspected or confirmed as having COVID-19 in the child care setting:**

- Establish a protocol to determine contaminated areas and carry out cleaning and disinfection, including timing, when to return to use, methods of cleaning, PPE to be used while cleaning, and waste disposal.
- Identify areas that may require cleaning plus disinfection (items used by the individual and all surfaces within 2 m of the ill person).
- Use disposable cleaning equipment, such as disposable wipes, where possible.

- Remove all items that cannot be cleaned (paper, books, etc.) and store them in a sealed container for a minimum of 7 days

### Choosing a Disinfectant

The [Government of Canada](#) has published a website with a list of disinfectant products that are effective against COVID-19 and can be used to help your facility select a cleaning and disinfecting product. Consult with your Public Health Inspector if you are unsure if the disinfectant currently used at your facility is appropriate.

When choosing a disinfectant, facilities should select one that:

- Is easy to use (e.g., clear label instructions)
- Has an 8-digit Drug Identification Number (DIN) which indicates it is approved by Health Canada. **Please note that using homemade cleaners, such as self-mixed solutions using essential oils, vinegar, or baking soda are not appropriate for use against COVID-19.**
- Is broad spectrum (destroys a variety of harmful microorganisms)
- Is not affected by environmental factors (e.g., disinfectant remains active in the presence of different soils or contaminants; doesn't react negatively with other cleaning products)
- Is compatible with a wide range of materials (e.g., wood, leather, etc.)
- Economical

**Figure 1: COVID-19 Cleaning and Disinfection Chart**

Diapering Station	What To Do	After Each Use	2-3 times per day	Weekly
Diaper change mat	Clean & Disinfect	X		
Diaper change table	Clean & Disinfect	X		
Hand sink	Clean & Disinfect		X	
Toys	What To Do	After Each Use	2-3 times per day	Weekly
Mouthed toys	Clean & Disinfect	X		
Infant	Clean & Disinfect	X		
Toddler and Pre-school	Clean & Disinfect	X		
Kindergarten & School Age	Clean & Disinfect	X		
Homemade playdough	Emphasis on hand hygiene before and after use Discard at least weekly			X
Sensory/Water play bins & toys	Emphasis on hand hygiene before and after use Discard and refill frequently		X	

Outdoor Play Equipment and Toys	Emphasis on hand hygiene before and after use Clean & Disinfect			X
Plush toys and dress up clothes	Emphasis on hand hygiene before and after use Avoid as much as possible			X
Natural items (stones, sticks, beads, pinecones)	Emphasis on hand hygiene before and after use Avoid as much as possible.			X
<b>Sleeping Items</b>	<b>What To Do</b>	<b>After Each Use</b>	<b>2-3 times per day</b>	<b>Weekly</b>
Cots and cribs	Clean & Disinfect	X		
Bedding and linens	Launder Single child use only			or more often if soiled
<b>Personal Items &amp; Hygiene</b>	<b>What To Do</b>	<b>After Each Use</b>	<b>2-3 times per day</b>	<b>Weekly</b>
Bibs and cloth towels	Launder	X		
Combs and brushes	Clean & Disinfect	X		
Soothers/pacifiers	Clean & Disinfect	X		
<b>Flooring</b>	<b>What To Do</b>	<b>After Each Use</b>	<b>2-3 times per day</b>	<b>Weekly</b>
Carpets in infant rooms	Vacuum (daily) Steam clean (monthly)			
Carpets in non-Infant rooms	Vacuum (steam every 6 months)			
Floors and floor mats	Sweep and wet mop with low-level disinfectant		X or once per day	
<b>Furniture</b>	<b>What To Do</b>	<b>After Each Use</b>	<b>2-3 times per day</b>	<b>Weekly</b>
Activity tables	Clean & Disinfect	X		
Fabric upholstered furniture (consider removing from use during pandemic)	Vacuum (steam 2x/year)			
High chairs	Clean & Disinfect	X		

Washrooms	What To Do	After Each Use	2-3 times per day	Weekly
Potty chairs and toilet seat inserts	Clean & Disinfect	X		
Toilets	Clean & Disinfect		X	
Hand sinks	Clean & Disinfect		X	

### ***Indoor Surfaces and Items***

Enhanced frequency of cleaning and disinfection of all surfaces, especially high touch surfaces is required at least 2-3 times per day. These surfaces include doorknobs, light switches, washroom areas, electronics, and table tops. Toys that are mouthed by children should be cleaned and disinfected immediately after the child is finished using it.

When cleaning and disinfecting toys:

- Toys **must** be cleaned and disinfected using the 3-compartment sink method or a dishwasher. The 2-compartment sink method is acceptable if washing and rinsing are done in the first sink, and disinfection in the second sink. If no sinks are available, then the 3 bin method is acceptable
- If using a dishwasher to clean and disinfect toys, the dishwasher **must** comply with the requirements of Ontario Regulation 493/17: Food Premises
- Disinfectant used **must** be safe and suitable for the intended purpose. The manufacturer's directions for dilution and contact times **must** be followed
- Child care operators **must** wear appropriate personal protective equipment (e.g., rubber gloves) as per manufacturer's directions

### ***Sleeping/Nap Areas and Equipment***

Children **must** be placed in a sleeping arrangement that minimizes the spread of respiratory infections (i.e. head to toe) and spaced a minimum of 2 metres (6 feet) apart unless they are from the same household.

- Sleep equipment **must** be labelled and assigned to a single child
- Sleep equipment **must** be cleaned and disinfected before being reassigned
- Cots/Crib mattresses **must** be made of a cleanable material
- Crib mattresses **must** be cleaned and disinfected when contaminated (soiled or wet)
- Cots must be cleaned and disinfected after each use and as necessary (when soiled)
- Sleeping equipment and bedding **must** be stored in a manner to prevent contamination (e.g., avoid contact with mats/bedding used by another child)
- Bedding (sheets and blankets) **must** be assigned to each child and laundered weekly, or more frequently when soiled or wet. Avoid shaking laundry items before washing to minimize the spread of microorganisms.

### ***Outdoor Play Areas and Equipment***

- Centres should schedule outdoor play by groups in order to facilitate physical distancing. If the outdoor play area is large enough to accommodate multiple groups, groups must be separated by at least 2 metres. Children are not required to wear masks.
- Licensees and home child care providers are encouraged to have designated toys and equipment (e.g., balls, loose equipment) for each room or group.
- Where toys and equipment are shared, hand hygiene is recommended before and after use and these items should be cleaned regularly.

### ***Sensory Play***

If sensory materials are provided (e.g. playdough, water, sand, etc.) emphasis should be placed on hand hygiene before and after use of materials.

- Children should wash their hands before and after engaging in sensory play
- Discard water from sensory play frequently.
- Inspect sand boxes daily for contaminants and discard as needed
- Playdough can be re-used if stored in separate bags and labelled for each child. Discard as needed

Other toys/items that are not considered single use and are difficult to clean and disinfect are discouraged to be used for the duration of the pandemic and be stored out of use. Examples include:

- Plush toys
- Loose parts or items that are porous and cannot be cleaned and disinfected (e.g. pine cones, sticks, leaves, cardboard, beads)
- Materials that are difficult to clean

### ***Kitchen and Food Prep Areas***

All food handlers must continue to comply with requirements of Ontario Regulation 493/17: Food Premises which includes frequent hand hygiene and exclusion from work if feeling ill. In addition, the following enhanced measure are recommended:

- Children and visitors are not permitted in the kitchen and food prep areas
- Family style meals are permitted to operate provided that food handlers use proper food handling and safety practices.
- Serve food items with utensils and not by hand
- Snacks will be served directly to children in their own container (no shared snacks)

- Shared food containers should be removed from dining areas (e.g., shared pitchers of water)
- Children must not be permitted to participate in food preparation or serving

### ***Maintaining Healthy Eating Practices***

It's important to remember that early experiences with food shape children's lifelong preferences and eating behaviours and are important for children's health and well being. Offering healthy meals and snacks that meet [Canada's Food Guide](#) and emphasize a variety of wholesome foods (i.e., less packaged foods) is possible within the constraints of COVID-19 requirements.

- Contact the Health Unit as [nutrition@wechu.org](mailto:nutrition@wechu.org) to speak with a Public Health Nutritionist for information and guidance to help you safely meet the food and drink requirements set out in the Child Care and Early Years Act, 2014. Registered Dietitians are available to help you plan menus that nourish children's bodies and minds.
- For menu planning guides, visit: <https://www.odph.ca/child-care-resources>.

## **4. How do I cohort children and staff and what are the maximum group sizes?**

To reduce the spread of communicable diseases and facilitate contact tracing for confirmed COVID-19 cases or outbreak, cohorting should be implemented in the child care centre.

**A cohort is defined as a group of children and the staff members assigned to them, who stay together throughout the duration of the program for minimum 7 days.**

- As of **September 1, 2020**, child care centres may return to maximum group sizes as set out under the CCEYA.
- Cohort must stay together as much as possible throughout the day and should not mix with other cohorts
- Refer to CCEYA or contact your program advisor regarding maintaining ratios and mixed age grouping
- Movement of supervisors and/or designates, staff and students on educational placement between child care locations and between licensed age groups is permitted. Reducing the movement of staff and placement students where possible is encouraged to minimize potential for transmission.
- Staff and students completing post-secondary placements are not included in the maximum group size, but should be assigned to a specific group as much as possible.
- Supervisors and/or designates should limit their movement between rooms, doing so when absolutely necessary.

- Supply/replacement staff should be assigned to specific cohorts and these staff should not mix between cohorts.

Age Category	Age range of category	Ratio of employees to children	Max number of children in group
Infant	< 18 mos	3 to 10	10
Toddler	>18 mos but < 30 mos	1 to 5	15
Preschool	>30 mos but < 6 years	1 to 8	24
Kindergarten	>44 mos but < 7 years	1 to 13	26
Primary/Junior school age	>68 mos but < 13 yrs	1 to 15	30
Junior school age	>9 years but < 13 yrs	1 to 20	20
Source: <a href="https://files.ontario.ca/edu-operational-guidance-child-care-during-covid-19-en-2021-08-10.pdf">https://files.ontario.ca/edu-operational-guidance-child-care-during-covid-19-en-2021-08-10.pdf</a>			

## 5. What are the physical distancing requirements between children and staff?

Physical distancing of 2 metres between children in a child care setting can be difficult to maintain; however, it is an important strategy that should be encouraged whenever possible.

More than one child care or early years program or day camp can be offered per building/space as long as they are able to maintain separation between the groups/cohorts and follow all health and safety requirements that apply to those programs. Physical barriers (which begin at the floor and reach a minimum height of 8 feet) are not required if a distance of 2 metres can be maintained between cohorts.

When in the same common space (e.g., entrances, hallways), physical distancing of at least 2 metres must be maintained between different groups and should be encouraged, as much as possible, between children within the same group by:

- spreading children out into different areas, particularly at meal and dressing time;
- incorporating more individual activities or activities that encourage more space between children; and,
- using visual cues to promote physical distancing.

In shared outdoor space, mixing between groups and any other individuals outside of the group is permitted, though physical distancing should be encouraged between groups as much as possible.



Licenseses and home child care providers are encouraged to increase the distance between cribs/cots/resting mats/playpens or place the children head to toe or toe to toe if the space is limited.

Recognizing that physical distancing is difficult with small children and infants, additional suggestions include:

- planning activities for smaller groups when using shared objects or toys;
- when possible, moving activities outside to allow for more space; and,
- singing is permitted indoors; masking is encouraged but not required for singing indoors if a minimum of two metres distance can be maintained between cohorts and as much distancing as possible maintained within a cohort.

## 6. What do we need to know about handling linens, food, and utensils?

- Personal bedding and linens should be properly labelled with child's name to prevent communicable disease transmission.
- Reinforce "no sharing" policies and procedures. This includes the current practice of not sharing food, water bottles, or personal items and belongings. Personal items should be clearly labelled with each child's name.
- When meals or snacks are provided, they should be portioned into individual servings (pre-plated) in the kitchen/food preparation area before serving in the classroom/dining area.
- Stagger meals and snacks to limit the number of children eating all at once.
- No self-serve or sharing of food at meal times.
- No utensils or food items (e.g., serving spoon or salt shaker) should be shared.
- No food brought in by parents/guardians should be permitted for eating inside of the centre unless required due to food allergies.
- Foods are prepared, handled, stored and served in a safety manner as outlined in Ontario Regulation 493/17: Food Premises.
- Multi-use utensils must be cleaned and sanitized between uses as per requirements outlined in Ontario Regulation 493/17: Food Premises.

## 7. How do we screen children and staff for COVID-19?

**Please note that if an individual does not pass the screening and is not permitted to attend the program, this does not need to be reported to the WECHU.**

All individuals must self-screen every day before arrival at the child care setting. Individuals who do not pass the screening are not permitted to attend the program and must stay home.

An ill individual who has a known alternative diagnosis provided by a health care provider may return to child care if they do not have a fever and their symptoms have been improving for at least 24 hours.

The [COVID-19 school and child care screening tool](#) is available to support parents/guardians, staff/providers and essential visitors or those regularly in a home child care setting in meeting this requirement.

There are 2 types of screening; passive screening and active screening.

### **Passive screening:**

- Staff and children who do not pass the screening must stay home and consult their primary care provider regarding symptoms and possible COVID-19 testing.
- Staff and children should not return to the facility until they have been assessed and advised by their health care provider that they are safe to return.
- Visit [www.wechu.org/cv](http://www.wechu.org/cv) to learn about local COVID-19 Assessment Centres and to determine if further care is required.

### **Active screening:**

In the event that an individual has not been screened before arriving at the child care centres, or there is an increased risk of transmission due to an exposure or an outbreak, active (in-person) screening should be conducted when instructed by the WECHU.

- Designate an area near the main entrance to conduct the screening. The area should allow a minimum of 2 metres (6 feet) distance between staff conducting screening. If physical distancing cannot be maintained, a barrier (e.g., plexiglass barrier, etc.) should be installed.
- The staff member conducting the screening should be wearing a medical mask and eye protection, and perform frequent hand hygiene.
- Post signage in visible areas which clearly explains the screening process and the rules and conditions for entry (see example [Do Not Enter](#) sign and [COVID-19 Screening Sign](#)).
- Ask the questions on the Ministry screening tools for [Students \(EN\) – FR](#) and for [Employees and visitors \(EN\) - FR](#)
- Provide alcohol-based hand rub at the screening stations for people who have answered NO to all questions for use prior to entry into the facility.
  - Limit the number of parents/caregivers entering the facility
- Staff/parents/caregivers who answer YES to any of the questions should not be permitted to enter the facility, or drop-off their child(ren).
- All child care centres must keep daily records (name, time of arrival/departure, screening results) and these records are to be kept for at least 30 days on-site and provided if asked by the Health Unit.
  - Records for staff and contractors are also to be maintained

## 8. What is the procedure if a child or staff member becomes ill while at the centre?

- Please follow the detailed step-by-step protocol when for when a child or staff member becomes ill while at the centre in the [Operational Guidance for Child Care During COVID-19 Outbreak – Version 7](#) document (pages 19 & 20).
- If a child or child care staff member becomes ill while at the centre, they must be isolated immediately.
- Staff members should be sent home and if a child becomes ill, approved individuals to pick up the ill child must be contacted immediately. If a separate room is not available, they must be kept a minimum of 2 metres (6 feet) from all others.
- Children should wear a mask if they are able to use the mask properly (e.g. donning and doffing carefully, avoiding touching while on).
- Staff caring for the ill child should consider additional PPE (i.e. gloves, gown) and wear a medical mask and eye protection regardless of physical distancing. When holding infants and toddlers use blankets or cloths over childcare providers clothing and change the blanket or cloths between children.
- Clean and disinfect the area immediately after the child with symptoms has been sent home.
- All siblings/household members must also be picked up. Household members must self-isolate until COVID-19 has been ruled out.
- Public transportation is not recommended but a taxi is ok.
- The ill individual and/or their parent or guardian be advised to use the [online](#) self-assessment tool and follow instructions which may include seeking medical advice or going for COVID-19 testing.
- Child care centre staff should direct parents/caregivers to consult with:
  - Telehealth Ontario (1-866-797-0000)
  - Primary health care provider and/or,
  - COVID-19 Assessment Centre
- An outbreak is defined as two or more lab-confirmed COVID-19 cases in students and/or staff (or other visitors) in a school with an epidemiological link, within a 14-day period, where at least one case could have reasonably acquired their infection in the child care setting.
- Where a child, parent, staff, student, home child care provider, home child care visitor or a person who is ordinarily a resident of/regularly present at a home child care premises is suspected (i.e. has one or more symptoms and has been tested) of having or has a confirmed case of COVID-19, licensees must report this to the Ministry as a serious occurrence.
- Where a room, centre or premises closes due to COVID-19, licensees must report this to the Ministry as a serious occurrence.
- Regular child care operation can continue unless directed otherwise by the WECHU.
- **Staff/children who are being managed by the WECHU (e.g., confirmed cases of COVID-19, household contacts of cases) should follow instructions provided by the Health Unit to**

**determine when to return to the facility and provide advice on control measure to implement to prevent further spread. Please refer to Appendix A for COVID-19 specific line lists sheets for staff and children.**

## **9. What happens if a child care centre is declared as having a COVID-19 Outbreak?**

An outbreak may be declared by the WECHU 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, cases that are part of the same before/after school care cohort) where at least one case could have reasonably acquired their infection in the child care setting.

The WECHU will work with the licensee to determine whether epidemiological links exist between cases and whether transmission may have occurred in the child care setting.

WECHU will request attendance records for all children/parents/caregivers/essential visitors entering the centre to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak. These records must be made available within 24 hours of the request and contain up to date contact details.

If the WECHU declares an outbreak, they will contact the centre and give instructions related to closure or dismissing of cohorts. If the WECHU determines that partial or full closure of the child care setting is required, the licensee must revise their existing serious occurrence report for a confirmed COVID-19 case to include information about the closure.

The child care setting should have developed a communication plans for families/guardians and other stakeholders.

### 3.0 Before and After School Program Guidance

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More detail on operational guidance for before and after school programs can be found in the Ministry of Education’s [Ministry of Education Before and After School Programs Kindergarten – Grade 6 - FR](#) document.

- All shared items used by children in a before and after school program must be cleaned and disinfected per the instructions given in this document. See question response for “**Are there changes to how the child care centre must be cleaned and disinfected?**” (page 9) for details. Additional information can be found in the Ministry document.
- All individuals including staff, children and visitors must be screened before entering the program. Please follow the screening instructions as stated in “**How do we screen children and staff for COVID-19?**” (page 16).
  - An individual who has been screened for symptoms prior to the before school program would not need to be re-screened for the core day program. Similarly, an individual that has been screened prior to the before school program or core day program, would not need to be re-screened for the after school program.

## 4.0 EarlyON Child and Family Centres Guidance

More detail on operational guidance for EarlyON centres can be found in the Ministry of Education [Ministry of Education Operational Guidance During COVID-19 EarlyON Re-opening – FR](#)

Every EarlyON Centre providers must ensure that there are written policies and procedures outlining their health and safety protocols for EarlyON Centres, including mobile and outdoor offerings. These policies and procedures must be consistent with any direction from the local medical officer of health and include information on how the EarlyON Centre will operate including:

- Cleaning and disinfecting of the space, toys, and equipment;
  - All shared items used by children in an EarlyON program must be cleaned and disinfected per the instructions given in this document. See question response for “**Are there changes to how the child care centre must be cleaned and disinfected?**” (page 9) for details.
- How to report illness;
- How physical distancing of at least 2 m between participants will be ensured;
- Requirements on the use of personal protective equipment (PPE)
  - All EarlyON staff are required to wear medical masks and are recommended to wear eye protection (i.e., goggles, face shield) while inside the EarlyON premises or required to wear eye protection when coming within 2 metres of an individual with no face mask.
  - All other adults (i.e. parents/guardians, and visitors) are required to wear a face covering or non-medical mask while inside the premises.
  - Masks are not recommended for young children under the age of two. School-aged children in Grade 1 and above are required to wear non-medical or cloth masks indoors. The wearing of non-medical or cloth masks is recommended for younger school-aged children, (age 2 through Grade 1) particularly in common spaces. The use of masks is not required outdoors for adults or children if physical distancing of a least 2 metres (6 feet) can be maintained between individuals.
- Scheduling of advance reservation or registered programs;
- All individuals including staff, children and visitors must be screened before entering the EarlyON program. Please follow the screening instructions as stated in “**How do we screen children and staff for COVID-19?**” (page 16)
- parent and child sign-in procedures that support safe drop off and pick up
- communication plan in the event of a case/outbreak;
- mobile programs (if offered); and
- outdoor programs (if offered).

EarlyON Centre staff are also encouraged to perform and promote frequent, proper hand hygiene (including supervising or assisting participants with hand hygiene).

## 5.0 References

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Ministry of Education (2021) [Before and After School Programs Kindergarten – Grade 6 Policies and Guidelines for School Boards for the 2020-2021 School Year](#)

Ministry of Education (2021) [How does learning happen; Ontario’s pedagogy for the early years](#)

Ministry of Education (2021) [Operational Guidance for Child Care During COVID-19 Outbreak](#)

Ministry of Education (2021) [Operational Guidance During COVID-19 Outbreak: EarlyON Child and Family Centres](#)

Ontario (2021) [COVID-19 school and child care screening](#)

Public Health Ontario (2021) [COVID-19 Preparedness and Prevention in Elementary and Secondary \(k-12\) Schools](#)

Public Health Ontario (2021). [IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19.](#)

Windsor-Essex County Health Unit (2017) [Managing Outbreaks in Child Care Centres](#) Manual.

# 6.0 Appendix A



## COVID-19 LINE LIST CHILDREN

Fax line lists daily by 10:00 AM to 1-226-894-3768  
 until outbreak declared over by the WECHU  
 Phone: 519-258-2146 ext. 4475  
 After Hours: 519-973-4510

<b>Name of Facility:</b> Enter Facility Name		<b>Outbreak # :</b> 2268 – YYYY – #####		<b>Date:</b> Click to enter a date.																	
<b>Address of Facility:</b> Address of Facility		<b>Phone # &amp; Ext.:</b> (###) ### - #### ext. #####		<b># of Pages:</b> ## of ##																	
<b>Affected Room/Area:</b> Please specify unit or Entire Facility		<b>After Hours #:</b> (###) ### - #####																			
<b>Suspect Outbreak:</b> Submit when CHILDREN is: [1] suspected to have COVID-19, or [2] tested for COVID-19.																					
<b>Case Definition:</b> Check all as defined by WECHU:																					
<input type="checkbox"/> Nausea <input type="checkbox"/> Abdominal pain <input type="checkbox"/> Headache <input type="checkbox"/> Malaise/Fatigue <input type="checkbox"/> New Cough <input type="checkbox"/> Diarrhea <input type="checkbox"/> Vomiting <input type="checkbox"/> Nasal Congestion/Sneezing <input type="checkbox"/> Muscles aches <input type="checkbox"/> Rash <input type="checkbox"/> Shortness of Breath <input type="checkbox"/> Sore Throat/Hoarseness <input type="checkbox"/> Conjunctivitis (pink eye) <input type="checkbox"/> Loss of taste/smell																					
Case Identification		Symptoms (check symptoms that apply)				Resolution		Clinical Info													
Name of Child	Age (Years)	Room/Area	Onset Date of Symptom (MM-DD)	Fever (≥ 37.8°C)	New cough (dry or productive)	Headache	Shortness of Breath	Diarrhea (e.g. x3)	Vomiting (e.g. x2)	Nausea	Abdominal pain	Sore throat/ Hoarseness	Nasal congestion/ Sneezing	Muscle aches	Loss of taste/smell	Conjunctivitis (pink eye)	Rash	24 Hours Symptom-Free	48 Hours Symptom-Free	COVID-19 Positive	Date Swabbed
Full Name	Age	Room/Area	MM-DD	##	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	Age	Room/Area	MM-DD	##	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	Age	Room/Area	MM-DD	##	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	Age	Room/Area	MM-DD	##	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	Age	Room/Area	MM-DD	##	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	Age	Room/Area	MM-DD	##	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD

**COVID-19 positive children can only be removed from the line list when:** Asymptomatic child has completed 10-day isolation period, OR Symptomatic child has completed 10-day isolation period AND is 48-hours symptom free.



Completed By: \_\_\_\_\_ Printed Name and ext.

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## COVID-19 LINE LIST STAFF

Fax line lists daily by 10:00 AM to 1-226-894-3768  
until outbreak declared over by the WECHU  
Phone: 519-258-2146 ext. 4475  
After Hours: 519-973-4510

<b>Name of Facility:</b> Enter Facility Name		<b>Outbreak # :</b> 2268 – YYYY – #####		<b>Date:</b> Click to enter a date.																			
<b>Address of Facility:</b> Address of Facility				<b># of Pages:</b> ## of ##.																			
<b>Affected Unit/Floor:</b> Please specify unit or Entire Facility		<b>Phone # &amp; Ext.:</b> (###) ### - ##### ext. #####		<b>After Hours #:</b> (###) ### - #####																			
<b>Suspect Outbreak:</b> Submit when STAFF is: <input type="checkbox"/> [1] suspected to have COVID-19, or <input type="checkbox"/> [2] tested for COVID-19.																							
<b>Case Definition:</b> Check all as defined by WECHU:																							
<input type="checkbox"/> Nausea <input type="checkbox"/> Abdominal pain <input type="checkbox"/> Headache <input type="checkbox"/> Malaise/Fatigue <input type="checkbox"/> New Cough <input type="checkbox"/> Diarrhea <input type="checkbox"/> Vomiting <input type="checkbox"/> Nasal Congestion/Sneezing <input type="checkbox"/> Conjunctivitis (pink eye) <input type="checkbox"/> Rash <input type="checkbox"/> Shortness of Breath <input type="checkbox"/> Sore Throat/Hoarseness <input type="checkbox"/> Loss of taste/smell																							
Case Identification			Symptoms (check symptoms that apply)																				
Name of Staff Member	Date of Birth	Work Assignment Location	Onset Date of New Symptom	Last Date of Work	Fever (≥ 37.8°C)	New cough (dry or productive)	Malaise/ Fatigue	Headache	Shortness of Breath	Diarrhea (e.g. x3)	Vomiting (e.g. x2)	Nausea	Abdominal pain	Sore throat/ Hoarseness	Nasal congestion/ Sneezing	Muscle aches	Loss of taste/smell	Conjunctivitis (pink eye)	Rash	24 Hours Symptom-Free	48 Hours Symptom-Free	COVID-19 Positive	Date Swabbed
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD
Full Name	YYYY-MM-DD	Room/Area	MM-DD	MM-DD	##.#	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM-DD	MM-DD	<input type="checkbox"/>	MM-DD

**COVID-19 positive staff can only be removed from the line list when: Asymptomatic staff have completed 10-day isolation period, OR Symptomatic staff has completed 10-day isolation period AND is 48-hours symptom free.**

Completed By: \_\_\_\_\_  
Printed Name and ext.

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