Region of Waterloo
Child Care Centre Guidance Document

March 2021
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Introduction

Preventing the spread of COVID-19 in child care centres and EarlyON centres is critical for the health of staff and children. Guidance from the Ministry of Education or Ministry of Health relevant to your centres should be reviewed and implemented.

This document has been developed for Child care centres and EarlyON centres to provide a compilation of important resources and locally relevant information which supports— but does not replace—the advice, guidelines, recommendations, directives or other direction of provincial Ministries. Both Child Care and Early ON centres should continue to monitor for new guidance from the Ministry of Education or Ministry of Health related to their centres.

Please reference the most current version of the Ministry of Education’s Operational Guidance for Child Care During COVID-19 Outbreak Child Care (version 5, March 2021) and/or EarlyON Child and Family Centres Operational Guidance During COVID-19 Outbreak (version 3, November 2021) for detailed information and operational guidance during COVID-19, as relevant to your centre. In this companion document to the Ministry of Education’s guidance, Region of Waterloo Public Health is providing additional guidance, recommendations and locally relevant information.

Region of Waterloo Public Health sincerely appreciates your ongoing collaboration to reduce the transmission of COVID-19 in our community.
Health and Safety Requirements

Working with Local Public Health
Region of Waterloo Public Health is able to provide support and advice to child care centres regarding COVID-19 guidance implementation.

For questions about guidance implementation related to COVID-19, call 519-575-4400

Child care centres have a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act.

To report a child or staff person who became sick while attending your child care centre, please complete and submit the Region of Waterloo Reporting Form for Symptomatic Staff / Children.

Health and Safety Protocols
Provincial guidelines outline required COVID-19-related policy and procedures. In addition, the Region of Waterloo Public Health strongly recommends each child care centre have the following protocols outlined in their policies:

• Group size and staffing
• COVID-19 response plan (i.e. a plan is in place if a child, parent or child care staff becomes symptomatic at the centre or is a confirmed case of COVID-19)
• Active and passive screening for symptoms
• Daily attendance records
• Enhanced cleaning and disinfection
• Requirements on the use of PPE (including information on exemptions and exceptions)
• Visitor restrictions
• Physical distancing
• Reporting illness
• Parent drop off and pick up procedures

In the event that any person at the child care centre is exhibiting symptoms of COVID-19 or has been exposed to COVID-19, the operator shall implement their COVID-19 response plan immediately.

Please see the guide on developing a COVID-19 workplace safety plan to support you in fulfilling this obligation.

All staff must be trained and familiar with the most current Health and Safety measures in place according to the Operational Guidance as well as those put in place by the local Public Health Unit.

Cleaning Child Care Centres/Homes
Review Public Health Ontario’s Cleaning and Disinfection for Public Settings fact sheet. Additional recommendations are provided below:

• It is recommended to clean and disinfect with either hospital grade or regular household cleaner with a Drug Identification Number (DIN) and that are effective against viruses. A DIN is an 8-digit
number given by Health Canada that confirms it is approved for use in Canada. You can also use diluted bleach according to the label directions.

- If a diluted bleach solution is used, it should be prepared according to instructions on the label or if using bleach that has a concentration of 5% hypochlorite. Add 5 mL (1 teaspoon) of bleach in 250 mL (a cup) of water, or add 20 mL (4 teaspoons) bleach in 1 litre (4 cups) of water to give a 0.1% sodium hypochlorite solution. Be sure to prepare the solution fresh, when you are intending to use it, and only dilute bleach in water (and not with additional chemicals).

- Health Canada has published a list of hard-surface disinfectants that are likely to be effective for use against COVID-19. This list is updated regularly. Check the expiry date of products you use and always follow manufacturer’s instructions.

- Child care centres and home child care premises should be cleaned daily and in between programs. In addition, frequently touched surfaces should be cleaned and disinfected twice daily at a minimum, however, more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soiling. Frequently touched surfaces include but are not limited to washrooms (for example toilet fixtures, faucets), eating areas (for example, tables, sinks, countertops), doorknobs, light switches, handles, desks, phones, keyboards, touch screens, push buttons, handrails, computers, photocopiers, sports equipment, water fountain knobs.

- It is recommended that childcare operators keep a cleaning and disinfecting log to track and demonstrate cleaning schedules.

- It is recommended to review the existing practices and 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.

- Child care providers may keep an inventory to determine items to be stored, moved, or removed altogether to reduce handling or the challenges associated with cleaning them (for example, porous or soft items such as stuffed toys, area rugs, fabric upholstered seating).

- Child care operators should secure and sustain an adequate amount of PPE and cleaning supplies that can support their current and ongoing operations. The Ontario Together Portal has a Workplace PPE supplier Directory that lists Ontario businesses that provide personal protective equipment [https://covid-19.ontario.ca/how-your-organization-can-help-fight-coronavirus](https://covid-19.ontario.ca/how-your-organization-can-help-fight-coronavirus)

Resources:

- Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19 Outbreak
- Health Canada hard-surface disinfectants and hand sanitizers for COVID-19
- Public Health Ontario cleaning and disinfection for public settings COVID-19

Hand Hygiene

Hand hygiene is a key practice for staff and children to prevent transmission and spread of COVID-19. Use your facility’s standard practices for hand hygiene. Additional considerations related to hand hygiene and COVID-19 are outlined in this section. 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.

- **Staff must wash their hands with soap and warm water in the following situations:**
  - Before and after using gloves
  - Immediately following the disposal or laundering of any contaminated PPE.
  - Before and after touching theirs or someone else’s face
  - Before entering and leaving a program room
  - After touching contaminated articles such toys that have been mouthed or personal care items such as toothbrushes.

- **If staff cannot access soap and water, alcohol based hand sanitizer containing a minimum of 60% alcohol can be used, only if the hands are not visibly soiled.**

- **Staff should provide supervision for hand hygiene practices and provide assistance where necessary. Children should wash their hands with warm soapy water:**
  - Before handling food
  - Before and after eating
  - Before and after toileting, including after a diaper change
  - After putting their hands in their mouths

For a printable poster on hand hygiene please visit Region of Waterloo Public Health’s website or visit Appendix A: Hand Hygiene Poster.

**Resources:** Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19 Outbreak

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**Use of Masks and Personal Protective Equipment (PPE)**

Use your facility’s standard practices when using PPE. Additional considerations related to mask and PPE use and COVID-19 are outlined in this section.

- **Wearing a mask and eye protection can help to prevent the spread of some respiratory illnesses, but can also become a source of infection if not worn or discarded properly. Wash your hands before putting on and after removing a mask and eye protection, using soap and water or an alcohol based hand sanitizer. Refer to Public Health Ontario resources for how to properly wear and take off masks and eye protection.**

- **All adults in a child care setting (i.e., child care staff, home child care providers, home child care visitors, and students) should wear medical masks and eye protection (i.e., face shield) while inside in the child care setting premises, including in hallways and staff room (unless eating – but time with masks off should be limited and physical distance should be maintained).**

- **All other adults (i.e. parents/guardians, and visitors) are required to wear a face covering or non-medical mask while inside the premises (see information about the use of face coverings on the provincial COVID-19 website).**

- **All children entering grades 1 and above must wear a non-medical mask or face covering while inside in the child care setting including in hallways. This also applies to before-and-after school programs, as well as on school vehicles.**

- **All younger children (aged 2 to SK), are encouraged but not required to wear a non-medical mask or face covering while inside in the child care setting, including in hallways.**

- **Masks are not recommended for children under the age of two.**
• Mandatory masking outdoors is required where physical distancing cannot be maintained.
• Masks should be replaced when they become damp or visibly soiled.
• Reasonable exceptions to the requirement to wear masks should be put in place by child care providers. Exceptions to wearing masks indoors could include situations where a child cannot tolerate wearing a mask, reasonable exceptions for medical conditions, etc.
  o If a child cannot tolerate a mask, consider other types of facial coverings
• Child care providers should document their requirements and exceptions related to masks.
• Child care providers should consider ways to support nutrition breaks/mask breaks in a safe manner (i.e., a space where staff/providers can maintain at least 2 metres to remove masks and eat)
• Child care providers must wear a medical mask and eye protection when:
  o Cleaning and disinfecting blood or body fluid spills if there is a risk of splashing. Please refer to the Public Services Health and Safety Association’s Child Care Centre Employer Guideline for more information on working safely in a child care setting. Note that there is also a resource document for child care providers.
  o Caring for a sick child or a child showing symptoms of illness.

How to wear your mask:
1. Wash your hands with soap and water for at least 15 seconds or use alcohol-based hand sanitizer before putting on your mask.
2. Secure the elastic loops of the mask around your ears. If your mask has strings, tie them securely behind your head.
3. Cover your mouth and nose with the mask and make sure there are no gaps between your face and the mask.
4. Do not touch the front of the mask while you wear it. Wash your hands with soap and water for at least 15 seconds or use alcohol-based hand sanitizer if you accidentally touch your mask.

How to throw away your mask:
1. Do not touch the front of your mask to remove it.
2. Remove the elastic loops of the mask from around your ears or untie the strings from behind your head.
3. Hold only the loops or strings and place the mask in a garbage bin with a lid.
4. Wash your hands with soap and water for at least 15 seconds or use alcohol-based hand sanitizer after you have discarded your mask.

Resources:
Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19 Outbreak
Public Health Ontario: When and How to Wear a Mask
Government of Canada: Non-medical Masks and Face Coverings
Disposable Gloves
Gloves are used alone or in combination with other PPE to prevent exposure when indicated (e.g., contacting bodily fluids). Gloves should be put on just prior to the intended use and removed immediately and disposed of in the appropriate receptacle when the interaction has ended.

Please use your facility’s standard practices when using gloves. Additional considerations related to use of gloves and COVID-19 are outlined in this section. For a demonstration please watch the How to don and doff gloves video

How to put on gloves:
1. Perform hand hygiene
2. Put on gloves, taking care not to tear or puncture glove

How to remove gloves:
Remove gloves using a glove-to-glove/skin-to-skin technique
1. Grasp outside edge near the wrist and peel away, rolling the glove inside-out
2. Reach under the second glove and peel away
3. Discard immediately into waste receptacle
4. Perform hand hygiene

Resources:
Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19 Outbreak
Public Health Ontario: Recommended Steps for Putting On and Taking Off Personal Protective Equipment

Screening for Symptoms
Entry Screening Procedures
- Region of Waterloo Public Health recommends that childcare providers continue to actively screen all individuals using the COVID-19 school and child care screening tool (or other tool with criteria aligned with the Ministry tool) before entering the childcare centre, where operationally feasible.
- At minimum, all individuals must self-screen every day before arrival at the child care setting using the COVID-19 school and child care screening tool.
  - Daily confirmation of passing online screening tool to be provided by all individuals prior to the entry of the child care centre or home.
  - Maintaining records of daily screening is optional.
  - Any individual who has not completed the self screen will be required prior to entry
- 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.
- Remind staff and parents/guardians that they must not attend the child care program when they are ill, and that they should report any signs and symptoms of COVID-19 to the child care centre if symptoms develop at home.
Child care staff, providers, placement students, and children with only 1 symptom (new or worsening) as indicated by the screening tool, must stay at home until:

- A negative COVID-19 test result
- Receive an alternative diagnosis by a health care professional, or
- It has been 10 days since symptom onset and they are feeling better.

Household contacts are to self-isolate until a negative test result. If no testing is done, those with young child that cannot self-isolate are to stay at home for 14 days from the last exposure.

Appropriate signage should be posted at the front entranceway of all child care centres to notify visitors not to enter if they have any COVID-19 symptoms. Please refer to the Ministry of Health's website for a printable poster.

Refer to Appendix C for a sample COVID-19 daily screening form that can be used/adapted as needed, provided all Ministry requirements are met.

Deny entry to any person according to Ontario’s COVID-19 school and child care screening tool and Procedure When a Staff Member or Child Fails Screening table below

Staff must follow Public Health guidelines on when they can return to work. (see Procedures when a Child or Staff Member Fails Screening below).

Staff should also do a visual check of anyone entering the facility. Where a child or adult is obviously ill (e.g. coughing, vomiting, has runny nose), staff must refuse entry into the facility to promote health and wellness at the centre.

Upon passing the screening, the dedicated child care provider will receive the child/children at the drop off zone.

All entrances should have alcohol-based hand rub with a concentration of 60-90% available with signage demonstrating appropriate use (see How to Wash Your Hands).

The child/children will be asked to complete hand hygiene before going into the program room.

Alcohol based hand rub should not be accessible to children (i.e., within their reach) and children should be supervised when using the hand rub.

Children may be screened mid-day for symptoms (this is optional).

If the childcare is attached to/a part of an elementary or secondary school – ensure the childcare is also following the guide to reopening Ontario’s schools.

Resources:

Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19

Guide to re-opening Ontario's schools

Procedure When a Staff Member or Child Fails Screening

It is no longer required for child care centres to notify Region of Waterloo Public Health in all cases if someone fails screening before entering the child care facility (i.e. through electronic screening from home, through screening at the child care centre and identified before proceeding into the facility). See table below for further details. However, if an individual becomes symptomatic while within the child care facility and any of the following apply, Region of Waterloo Public Health must still be notified:

- Close contact with a COVID-19 case
- Travel outside of Canada within 14 days prior to symptom onset
- Been told by a doctor, health care provider, or public health unit to self-isolate

Because it is no longer necessary for child care centres to contact Region of Waterloo Public Health due to failed screenings in all cases, we have provided detailed guidance for what to do in various scenarios that result in a failed screening. If a child care centre operator is still uncertain about what to do after reviewing the guidance below, they should contact Region of Waterloo Public Health for further assistance using the Region of Waterloo Reporting Form for Symptomatic Staff / Children.

Please review the table below for details on failed screening for children.

<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Asymptomatic child</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asymptomatic child who has travelled outside of Canada within last 14 days</td>
<td>• Self-isolate</td>
<td>The child may return after 14 days have elapsed since they returned to Canada, provided they do not develop symptoms. If symptoms develop, the child is to continue to isolate for 14 days from symptom onset and go for testing.</td>
</tr>
<tr>
<td>Asymptomatic child who had close contact with a COVID-19 case in the last 14 days</td>
<td>• Self-isolate 14 days from the last exposure to the COVID-19 case and get tested  • Household members are to stay at home except for essential reasons (attending work/school/childcare &amp; essential errands: groceries, medical appointments/prescriptions).  • Any child/cohort who had close contact with this individual should self-monitor</td>
<td>Self-isolate 14 days from their last exposure to the case provided they do not develop symptoms. If symptoms develop, the child is to continue isolating and get tested. Household members need to self-isolate while awaiting test results. The cohort will be dismissed if there was an exposure during the infectious period. Follow guidance of symptomatic child as appropriate (below).</td>
</tr>
<tr>
<td><strong>Asymptomatic household member of child</strong></td>
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<td></td>
</tr>
<tr>
<td>Asymptomatic household members of a child with travel outside of Canada and the child being screened did not travel and has no symptoms</td>
<td>• Household members are to stay at home except for essential reasons (attending work/school/childcare &amp; essential errands: groceries, medical appointments/prescriptions).  • The child should self-monitor, provided that household member is isolating away from child.</td>
<td>The child may attend childcare.</td>
</tr>
<tr>
<td>Information from screening or reported</td>
<td>Immediate action/recommendations for staff who fail screening</td>
<td>How long to exclude staff from work</td>
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</tr>
<tr>
<td>Asymptomatic household member of a child who has been identified as a high risk contact and the child has no exposure or symptoms</td>
<td>• Child and any other household members should stay at home except for essential reasons (attending work/school/childcare &amp; essential errands: groceries, medical appointments/prescriptions) for the duration of the contact’s quarantine period.</td>
<td>The child may attend childcare if the high risk contact is asymptomatic. If the high-risk contact becomes symptomatic, the household must self-isolate until a negative test is received (guidance for household members of high risk contacts then applies) or for 14 days after their last exposure to the symptomatic contact (if positive or not testing). Follow guidance of symptomatic child as appropriate (below).</td>
</tr>
</tbody>
</table>

**Symptomatic child**

Child has **one or more** COVID-19 symptoms listed in the Provincial School/childcare Screening tool and **NONE** of the following apply:
- Close contact with a COVID-19 case
- Travel outside of Canada within 14 days prior to symptom onset
- Been told by a doctor, health care provider, or public health unit to self-isolate

1. • Self-isolate.
   • Get tested for COVID-19 as soon as possible
   • All household members of the child should self-isolate while waiting for the test results of the symptomatic child (if a household member is a health care worker, they should contact their Occupational Health regarding return to work and/or work self-isolation).
   • Any staff or child who had close contact or was in the same cohort as this individual 48 hours before they developed symptoms and/or up to 14 days afterwards should self-monitor

If test is **negative**:
The child may return to the childcare if all the following apply:
- do not have a fever (without using medication)
- it has been at least 24 hours since symptoms started improving
- complete the daycare screening prior to attending.

If test is **positive**:
- The child must be excluded from childcare for 10 days from symptom onset*. Public Health will provide the child with a return to childcare date.
- Public Health will provide further guidance for household and other close contacts. In
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
</table>
| Child who has any COVID-19 symptom(s) and **ONE OR MORE** of the following apply:  
  - Close contact with a COVID-19 case  
  - Travel outside of Canada within 14 days prior to symptom onset  
  - Been told by a doctor, health care provider, or public health unit to self-isolate |  
  - Self-isolate  
  - Get tested for COVID-19 as soon as possible  
  - All household members should self-isolate  
  - Childcare to notify Public Health.  
  - The childcare will provide a list of cohort members and other close contacts. Public Health will provide guidance regarding management of staff/children in the same cohort and other close contacts, while awaiting test results of the symptomatic individual. | general, anyone who had close contact with the case or was in the same cohort during the case’s infectious period will need to self-isolate for 14 days from their last exposure to the case.  
If the child **refuses** to get tested (unless a doctor has diagnosed the child with another illness):  
  - The child must self-isolate for 10 days from symptom onset*  
  - Household members will need to isolate 10 days from symptom onset and if not able self isolate, need to isolate 14 days from last day of exposure (24 days from symptom onset) |
| If test is **negative**:  
  - The child must continue to self-isolate for 14 days from their last exposure.  
  - Household members are to stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical appointments/prescriptions)  
If test is **positive**:  
  - The child must be excluded from childcare for 10 days from symptom onset*. Public Health will provide the child with a return to childcare date. |
Information from screening or reported | Immediate action/recommendations for staff who fail screening | How long to exclude staff from work
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**Symptomatic Household Member of child**
Asymptomatic child has a household member with one or more COVID-19 Symptoms and **NONE** of the following apply to the child or their household member:
- Close contact with a COVID-19 case
- Travel outside of Canada within 14 days prior to symptom onset

• Child to self-isolate pending test result of household member.

• Symptomatic household member should follow the recommendation of the appropriate provincial screening tool to determine if testing is required
  - Household members who is not a child or school/child care staff:

If household member’s test is **negative:**
- Child may attend childcare and self-monitor

If household member’s test is **positive:**
- Public Health will provide further guidance regarding self-isolation and testing for

• Public Health will provide further guidance for household and other close contacts. In general, anyone who had close contact with the case or was in the same cohort during the case’s infectious period will need to self-isolate for 14 days from their last exposure to the case.

If the child **refuses** to get tested:
• The child must self-isolate for 10 days from symptom onset* or 14 days from their last exposure, whichever is longest.

• Public Health will provide further guidance for household and other close contacts. In general, anyone who had close contact with the case or was in the same cohort during the case’s infectious period will need to self-isolate for 14 days from their last exposure to the case.
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
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</tr>
</thead>
</table>
| • Been told by a doctor, health care provider, or public health unit to self-isolate | **COVID-19 Self Assessment**  
- Household member who is a child or school/childcare staff: [COVID-19 School/childcare Screening Tool](#)  
- No action required for anyone who had close contact or was in the same cohort as this child | household members. In general, anyone who had close contact with the case during their infectious period will need to self-isolate for 14 days from their last exposure to the case. |

**If test is refused by household member:**  
• The child should isolate for 14 days from their last exposure to the symptomatic household member.  

Asymptomatic child has a household member with one or more COVID-19 symptoms and **ONE OR MORE** of the following apply to their household member (but not the child):  
• Close contact with a COVID-19 case  
• Travel outside of Canada within 14 days prior to symptom onset  
• Been told by a doctor, health care provider, or public health unit to self-isolate  

<p>| | | |</p>
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</thead>
</table>
| | • Child to self-isolate, pending test result of the household member.  
• Symptomatic household member should get tested for COVID-19 as soon as possible and self-isolate for 14 days from their last exposure.  
• No action required for anyone who had close contact or was in the same cohort as the child | If household member’s test is **negative:**  
• Child and any other household members should stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical appointments/prescriptions) for the duration of the household member’s quarantine period.  
• Child should self-monitor and may return to the childcare. Reinforce self-isolation of symptomatic household member.  

If household member’s test is **positive:**  
• Public Health will provide further guidance regarding self-isolation and testing for household members (in general, child would have to self-isolate for 14 days from their last exposure, |
Information from screening or reported | Immediate action/recommendations for staff who fail screening | How long to exclude staff from work
---|---|---
Asymptomatic staff who has travelled outside of Canada within last 14 days | • Self-isolate | The staff may return after 14 days have elapsed since they returned to Canada, provided

*Clearance of confirmed cases after 10 days from symptom onset applies to children with mild to moderate illness AND no severe immune compromise, which will apply to most children cases. Children with severe illness (requiring ICU level of care) OR severe immune compromise can discontinue isolation 20 days from symptom onset. Where this applies, Public Health will provide this direction to the child/parent/guardian. Severe illness is defined as requiring ICU level of care for COVID-19 illness (e.g., respiratory dysfunction, hypoxia, shock and/or multi-system organ dysfunction). Examples of severe immune compromise include cancer chemotherapy, untreated HIV infection with CD4 T lymphocyte count 20 mg/day for more than 14 days and taking other immune suppressive medications. Factors such as advanced age, diabetes, and end-stage renal disease are generally not considered severe immune compromise.

Updated testing recommendations for dismissed cohorts and close contacts:

- Get tested at 7 days or later after last contact with the positive case
- If tested before 7 days, get a repeat test at 10 days or later after your last contact with the positive case
- If symptoms develop, get tested immediately
- In the context of an outbreak, Public Health may advise to test immediately (instead of waiting till day 7 or later) and again at day 10 or later of the isolation period, if the initial test is negative
- If the result is negative, contacts must continue to complete the 14 day isolation period
- If the test result is positive, continue to self-isolate. Region of Waterloo Public Health will contact the case directly.

Please review the table below for details on failed screening for staff.
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
</table>
| Asymptomatic staff who had close contact with a COVID-19 case in previous 14 days | • Self-isolate 14 days from the last exposure to the COVID-19 case.  
• Household members are to stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical appointments/prescriptions).  
• Any staff/cohort who had close contact with this individual should self-monitor.  
• Anyone who had close contact with this individual should self-monitor. | Self-isolate 14 days from their last exposure to the case, provided they do not develop symptoms.  
If symptoms develop, the staff member is to continue isolating and go for testing.  
Household members need to self-isolate while awaiting test results. The cohort will need to be dismissed if there was an exposure during the infectious period. (Follow symptomatic child with exposure guidance below). |
| Asymptomatic household member of staff | | |
| Asymptomatic household members of staff with travel outside of Canada and the staff being screened did not travel and has no symptoms | • Household members are to stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical appointments/prescriptions).  
• The staff should self-monitor provided that household member is isolating away from staff.  
• The household member who travelled should self-isolate. | The staff may go to work. |
| Asymptomatic household member of a staff who has been identified as high risk contact and the staff has no exposure or symptoms | • Staff and any other household members should stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical | If the high-risk contact is not having symptoms, the staff member may attend childcare.  
If the high-risk contact becomes symptomatic, the household must self-isolate. |
### Information from screening or reported

- Immediate action/recommendations for staff who fail screening
  - appointments/prescriptions) for the duration of the contact’s quarantine period.
  - until a negative test is received (guidance for household members of high risk contacts then applies) or for 14 days after their last exposure to the symptomatic contact (if positive or not testing).
  - Follow guidance of symptomatic staff as appropriate (below).

### Symptomatic staff

Staff that has one or more COVID-19 symptoms listed in the [Provincial School/childcare Screening tool](#) and NONE of the following apply:

- Close contact with a COVID-19 case
- Travel outside of Canada within 14 days prior to symptom onset
- Been told by a doctor, health care provider, or public health unit to self-isolate

- Self-isolate
- Get tested for COVID-19 as soon as possible
- All household members of the staff should self-isolate while waiting for the test results of the symptomatic staff (if a household member is a health care worker, they should contact their Occupational Health regarding return to work and/or work self-isolation).
- Any staff or child who had close contact or was in the same cohort as this individual the 48 hours before they developed symptoms or up to 14 days afterwards should self-monitor

If test is **negative**:

- The staff may return to the childcare if all the following apply:
  - do not have a fever (without using medication)
  - it has been at least 24 hours since symptoms started improving
  - Complete the school/childcare screening prior to attending.

If test is **positive**:

- The staff must be excluded from childcare for 10 days from symptom onset*. Public Health will provide the staff with a return to childcare date.
- Public Health will provide further guidance for household and other close contacts. In general, anyone who had close contact with the case or was in the same cohort during the case’s infectious period will need to self-isolate for
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
</table>
| **Staff who has one or more COVID-19 symptoms and **ONE **OR MORE** of the following apply:** | • Self-isolate  
• Get tested for COVID-19 as soon as possible  
• All household members should self-isolate  
• Childcare to notify Public Health.  
• The childcare will provide a list of cohort members and other close contacts. Public Health will provide guidance regarding management of staff/children in the same cohort and other close contacts, while awaiting test results of the symptomatic individual. | 14 days from their last exposure to the case.  
If staff **refuses** to get tested (unless a doctor has diagnosed the staff with another illness):  
• The staff must self-isolate for 10 days from symptom onset*  
• Household members will need to isolate 14 days from last day of exposure while the staff member is infectious (10 days from symptom onset). If the household member is not able to self-isolate away from the symptomatic staff, this would mean the household members need to self-isolate for 24 days from symptom onset. |

If test is **negative**:  
• The staff must continue to self-isolate for 14 days from their last exposure.  
• Household members are to stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical appointments/prescriptions)  
If test is **positive**:  
• The staff must be excluded from childcare for 10 days from symptom onset*. Public Health will provide the staff with a return to childcare date. |
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Public Health will provide further guidance for household and other close contacts. In general, anyone who had close contact with the case or was in the same cohort during the case’s infectious period will need to self-isolate for 14 days from their last exposure to the case.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If the staff <strong>refuses</strong> to get tested:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• The staff must self-isolate for 10 days from symptom onset* or 14 days from their last exposure, whichever is longest. Public Health will provide further guidance for household and other close contacts. In general, anyone who had close contact with the case or was in the same cohort during the case’s infectious period will need to self-isolate for 14 days from their last exposure to the case.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Symptomatic Household Member of Staff

**Asymptomatic staff has a household member with one or more COVID-19 symptoms and **NONE** of the following apply to the staff or their household member:**
- Close contact with a case of COVID-19
- Travel outside of Canada within 14 days prior to symptom onset

**Staff to self-isolate pending test result of the household member.**

Symptomatic household member should follow the recommendation of the appropriate provincial screening tool to determine if testing is required
- Household member who are not children or school/child care staff:
  - If household member’s test is **negative**: Staff may attend childcare and self-monitor
  - If household member’s test is **positive**: Public Health will provide further guidance regarding self-isolation and testing for household members. In general, anyone who
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
</table>
| • Have been told by a doctor, health care provider, or public health unit to self-isolate | **COVID-19 Self Assessment Tool**  
- Household member who is a child or school/childcare staff: [COVID-19 School/childcare Screening Tool](#)  
- No action required for anyone who had close contact or was in the same cohort as this staff | had close contact with the case during their infectious period will need to self-isolate for 14 days from their last exposure to the case. |
| **Asymptomatic staff has a household member with one or more COVID-19 symptoms and **ONE OR MORE** of the following apply to their household member (but not the staff):**  
  • Close contact with a case of COVID-19  
  • Travel outside of Canada within 14 days prior to symptom onset  
  • Been told by a doctor, health care provider, or public health unit to self-isolate | **Staff to self-isolate, pending test result of the household member.**  
- Symptomatic household member should get tested for COVID-19 as soon as possible and self-isolate for 14 days from their last exposure.  
- No action required for anyone who had close contact or was in the same cohort as the staff | If test is **refused by household member:**  
- The staff should self-isolate for 14 days from the last exposure to the symptomatic household member. |
| **If household member’s test is **negative:****  
- Staff and any other household members should stay at home except for essential reasons (attending work/school/childcare & essential errands: groceries, medical appointments/prescriptions) for the duration of the household member’s quarantine period.  
- Staff should self-monitor and may return to childcare. Reinforce self-isolation of symptomatic household member. | **If household member’s test is **positive:****  
- Public Health will provide further guidance regarding self-isolation and testing for household members (in general, staff would have to self-isolate for 14 days from their last exposure, unless they develop symptoms). |
<table>
<thead>
<tr>
<th>Information from screening or reported</th>
<th>Immediate action/recommendations for staff who fail screening</th>
<th>How long to exclude staff from work</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>If test is refused by household member:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The staff must self-isolate for 14 days from the last exposure to the symptomatic household member</td>
</tr>
</tbody>
</table>

*Clearance of confirmed cases after 10 days from symptom onset applies to staff with mild to moderate illness AND no severe immune compromise, which will apply to most staff cases. Staff with severe illness (requiring ICU level of care) OR severe immune compromise can discontinue isolation 20 days from symptom onset. Where this applies, Public Health will provide this direction to the staff. Severe illness is defined as requiring ICU level of care for COVID-19 illness (e.g., respiratory dysfunction, hypoxia, shock and/or multi-system organ dysfunction). Examples of severe immune compromise include cancer chemotherapy, untreated HIV infection with CD4 T lymphocyte count 20 mg/day for more than 14 days and taking other immune suppressive medications. Factors such as advanced age, diabetes, and end-stage renal disease are generally not considered severe immune compromise.

Updated testing recommendations for dismissed cohorts and close contacts:

- Get tested at 7 days or later after last contact with the positive case
- If tested before 7 days, get a repeat test at 10 days or later after your last contact with the positive case
- If symptoms develop, get tested immediately
- In the context of an outbreak, Public Health may advise to test immediately (instead of waiting till day 7 or later) and again at day 10 or later of the isolation period, if the initial test is negative
- If the result is negative, contacts must continue to complete the 14 day isolation period
- If the test result is positive, continue to self-isolate. Region of Waterloo Public Health will contact the case directly.

Daily Staff Close Contact Log Template

Please reference Appendix E for a daily close contact log template. This can be used to keep track of staff who may have come into close contact with other staff or children (less than 2 metres), at what time this happened, and whether or not any PPE was being used during this close contact. Recording this information can help Public Health in the event of a positive COVID-19 case to support contact tracing.

Protocols When a Child or Staff/Home Child Care Provider Demonstrates Symptoms of Illness or Becomes Sick

Symptomatic Staff, Home Child Care Provider or Children

The child care operator is to conduct surveillance and record all illnesses (respiratory and enteric) in the centre. The child care centre is to report to Region of Waterloo Public Health when any staff or child exhibits COVID-19 symptoms while in the child care facility in accordance with the Table above.
Symptoms and signs to look for include but are not limited to:

- Fever
- Cough
- Difficulty breathing
- Sore throat or difficulty swallowing
- Runny nose or nasal congestion
- Red eyes (conjunctivitis)
- Nausea/vomiting
- Diarrhea
- Abdominal pain
- New loss of taste or smell
- Headache and a general feeling of being unwell
- Tired or sore muscles, chills
- Headache and lethargy or difficulty feeding in infants (if no other diagnosis).

Children in particular should be monitored for atypical symptoms and signs of COVID-19. For more information, please see the symptoms outlined in the ‘COVID-19 Reference Document for Symptoms’ on the Ministry of Health’s COVID-19 website.

Confirmed cases should generally not be re-tested if they develop new symptoms after their COVID-19 infection resolves. If a child or staff was a confirmed case and then develops symptoms after a new exposure to a confirmed case or travel, however, please report the situation to Public Health via the online reporting form and we will provide advice regarding testing and isolation.

**Staff COVID-19 Symptomatic**

- If a staff member becomes ill while at the centre they should let their supervisor know, and remove themselves from program as soon as possible. Staff should be advised to get tested.
- The supervisor or designate will notify Public Health in accordance with the Table above through the Region of Waterloo Reporting Form for Symptomatic Staff / Children.
- Public Health management will assign a Public Health professional to initiate investigation.
- Staff can contact any testing/assessment centre to book an appointment.
- Public health will provide direction for self-monitoring or self-isolation as determined by the exposure and inform any child care facility-wide measures.

**Child COVID-19 Symptomatic**

- Any child who develops symptoms of ill health including symptoms of ill health related to COVID-19 must leave the child care program.
- The child care staff member will notify the supervisor or designate immediately for contact to be made to the parent/caregiver. Pick-up shall be arranged for the child. If the parent cannot be reached, the emergency contact person will be contacted to pick up the child.
- While waiting to be picked up, the child should be isolated from all other child care centre staff and children, except for one supervising child care provider.
- Where possible, anyone who is providing care to the child should maintain a distance of at least 2 metres while following provincial guidelines. The child care staff member should also wear
gloves in addition to their mask and eye protection while supervising a symptomatic child. If tolerated and above the age of 2, the child should wear a surgical/procedure mask.

- Contaminated articles belonging to the symptomatic child (including soiled clothing) are sent home immediately for cleaning. Do not rinse or launder at the centre, roll and place items separately in a sealed plastic bag (take care not to contaminate the surrounding environment).
- The supervisor or designate will notify Public Health in accordance with the Table above through the Region of Waterloo Reporting Form for Symptomatic Staff / Children.

Once the child and siblings have been picked up, the child care provider will remove and dispose of PPE, according to the Public Health Ontario Don/Doffing PPE Fact Sheet

- Reusable PPE such as a blanket, cloth or lab coat should be laundered immediately.
- The Supervisor will contact Region of Waterloo Public Health through the Region of Waterloo Reporting Form for Symptomatic Staff / Children to notify them of a potential case and seek input regarding the information that should be shared with other parents of children in the child care centre. The supervisor will follow all direction provided by Public Health. The following information will be shared with Public Health:
  a. Child care centre name, address, contact person, phone number and e-mail
  b. Child’s name, date of birth, and name of parent/guardian
  c. Child and parent/guardian’s contact information

Cleaning Post-Symptomatic Child

- A sign will be posted on the door of the isolation room indicating that the room is closed until a thorough cleaning can be done.
- Cleaning will include disinfection of all toys and surfaces including tabletops, chairs, washrooms, cots, and equipment with which the child interacted and not just in the isolation room.
- All linens and bedding touched/used by the symptomatic child at the centre must be laundered immediately.
- Staff must use appropriate PPE when handling dirty laundry (e.g., gloves, eye protection apron etc.).
- Items unable to be disinfected will either be disposed of or quarantined in a storage area for a minimum of 7 days.

Resources:

- Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19 Outbreak
- Public Health Ontario: Cleaning and Disinfection for Public Settings
- Public Health Ontario Don/Doffing PPE Fact Sheet

General Approach to Isolation, Testing and Closure in Child Care Centres

The following provides a summary of the general approach taken by Region of Waterloo Public Health in several common scenarios, in collaboration with the child care centre. The specific details of each unique scenario may require a specific management plan for the centre. Region of Waterloo Public Health staff will work closely with child care centre staff and providers to explain the required steps to be taken and provide ongoing support.
For details on how to self-monitor and isolate, refer to Public Health Ontario’s factsheets:


For information about how long to exclude staff/providers/children from the program depending on COVID-19 test results, please refer to the Ontario Ministry of Education: Operational Guidance During COVID-19 Outbreak Child Care Reopening.

**Home Child Care Setting**

**Symptomatic Child**

<table>
<thead>
<tr>
<th>Case Details</th>
<th>Guidance for children and staff in the same group and other close contacts at the child care centre</th>
</tr>
</thead>
</table>
| **Symptomatic child undergoing testing with NO KNOWN exposure:** | • Self-isolate while awaiting test results  
• If test of symptomatic child is positive for COVID-19, Public Health will provide direction. Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. It will require closure of home child care centre if there are not other staff who do not require self-isolation |
| - Close contact with a COVID-19 case |  |
| - Travel outside of Canada within 14 days prior to symptom onset |  |
| - Been told by a doctor, health care provider, or public health unit to self-isolate |  |
| **Symptomatic child undergoing testing with KNOWN exposure:** | • In a situation where a child had a known exposure, Public Health will provide direct guidance. Generally, children and staff in the same group and other close contacts will require self-isolation while awaiting results of the symptomatic child.  
• If test of symptomatic child is positive for COVID-19, Public Health will provide direction. Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. It will require closure of home child care centre if there are not other staff who do not require self-isolation |
| - Close contact with a COVID-19 case |  |
| - Travel outside of Canada within 14 days prior to symptom onset |  |
| - Been told by a doctor, health care provider, or |  |
### Symptomatic Home Child Care Provider

<table>
<thead>
<tr>
<th>Case Details</th>
<th>Guidance for children and staff in the same group and other close contacts at the child care centre</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Symptomatic home child care provider undergoing testing with NO KNOWN exposure:</strong></td>
<td>• The home child care provider must self-isolate while waiting for results. It will require closure of home child care centre</td>
</tr>
<tr>
<td></td>
<td>• Children and staff in the same group and other close contacts should self-monitor while awaiting test results of the symptomatic provider</td>
</tr>
<tr>
<td></td>
<td>• If test of symptomatic provider is positive for COVID-19, Public Health will provide direction. Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. It will require closure of home child care centre</td>
</tr>
<tr>
<td></td>
<td>• If test is negative for COVID-19 the home child care provider must be excluded from the program until 24 hours after symptom resolution.</td>
</tr>
</tbody>
</table>

| Symptomatic home child care provider undergoing testing with KNOWN exposure: | • The home child care provider must self-isolate while waiting for results. It will require closure of home child care centre |
| | • In a situation where a provider had a known exposure, Public Health will provide direct guidance. Generally, children and staff in the same group and other close contacts will require self-isolation while awaiting results of the symptomatic provider. |
| | • If test of symptomatic provider is positive for COVID-19, Public Health will provide direction. Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. It will require closure of home child care centre |
### Confirmed Case

<table>
<thead>
<tr>
<th>Case Details</th>
<th>Guidance for children and staff in the same group and other close contacts at the child care centre</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed COVID case in home child care provider or child</td>
<td>- Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. It will require closure of the home child care centre</td>
</tr>
</tbody>
</table>
## Symptomatic Child/Staff

<table>
<thead>
<tr>
<th>Case Details</th>
<th>Guidance for children and staff in the same group and other close contacts at the child care centre</th>
</tr>
</thead>
</table>
| Symptomatic child/staff undergoing testing **with NO KNOWN exposure:** | • Self-isolate while awaiting test results  
• If test of symptomatic child/staff is positive for COVID-19, Public Health will provide direction. Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. If grouping was appropriately practiced, the child care centre may remain open for those who were not exposed. If there was no grouping, the child care centre must be closed |
| • Close contact with a COVID-19 case  
• Travel outside of Canada within 14 days prior to symptom onset  
• Been told by a doctor, health care provider, or public health unit to self-isolate | |
| Symptomatic child/staff undergoing testing **with KNOWN exposure:** | • In a situation where a child had a known exposure, public health will provide direct guidance. Generally, children and staff in the same group and other close contacts will require self-isolation while awaiting results of the symptomatic child.  
• If test of symptomatic child is positive for COVID-19, Public Health will provide direction. Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. If grouping was appropriately practiced, the child care centre may remain open for those who were not exposed. If there was no grouping, the child care centre must be closed |
| • Close contact with a COVID-19 case  
• Travel outside of Canada within 14 days prior to symptom onset  
• Been told by a doctor, health care provider, or public health unit to self-isolate | |
Confirmed Case

<table>
<thead>
<tr>
<th>Case Details</th>
<th>Guidance for children and staff in the same group and other close contacts at the child care centre</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed COVID-19 case in a child or staff person</td>
<td>Children and staff in the same group and other close contacts of the confirmed case while the case was infectious must self-isolate for 14 days from their last exposure to the case. If grouping was appropriately practiced, the child care centre may remain open for those who were not exposed. If there was no grouping, the child care centre must be closed</td>
</tr>
</tbody>
</table>

Outbreak Definition

The definition of an outbreak in a child care setting is determined by the Ministry responsible for that setting. Please consult the most up-to-date Ministry guidance for the setting for the definition of an outbreak.

In-Program Considerations

A sample re-opening checklist can be found in Appendix F. The purpose of the reopening checklist is to identify gaps where child care operators can improve their overall preparedness and management of COVID-19.

This reopening checklist is to be used in conjunction with Ministry of Education, Ministry of Health and Public Health directives, guidelines, and recommendations. For additional information refer to Government of Ontario, Ministry of Education and Region of Waterloo Public Health website.

Sleep/Rest areas

- Children should have a crib, cot, or mattress assigned to them. Beds should be placed 2 metres apart if possible to support physical distancing practices. If 2 metre separation is not possible, children should be placed head-to-toe or toe-to-toe.
- Bedding must be changed between each user. Bedding, if used by same user, must be cleaned weekly or more frequently as needed.
- Beds must be cleaned and sanitized between each user if they are shared among children.
- Beds must be cleaned and sanitized weekly or more frequently as needed.

Interactions with Infants & Toddlers

- If used, launder re-usable PPE such as lab coats, blankets or cloths between each use. Do not re-use disposable lab coats.
- If used, avoid wearing/transporting re-usable PPE such as blankets, cloths or lab coats outside the program room (e.g. into the kitchen or staff room).
- Wash your hands for at least 20 seconds immediately after laundering any contaminated coverings.
- Avoid close contact with a child’s face as much as possible. Mask and eye protection must be worn. See Masks and PPE section on proper mask technique.
For a printable physical distancing poster, please visit Region of Waterloo Public Health’s website or Appendix B: Physical Distancing Poster

Resources:
Ontario Ministry of Education: Operational Guidance for Child Care During COVID-19 Outbreak

Washroom Use
- Recommend reducing maximum occupancy to the use of every second toilet wherever operationally possible, to facilitate physical distancing.
- Encourage hand hygiene after use of the washroom.
- Partitions between the toilets may be used when access to all toilets is operationally needed.
- Only one cohort at a time should use the washroom. Washroom facilities must be cleaned and disinfected between cohort uses.

Play Equipment, Toy-use and Restrictions
Infection prevention and control measures that should be taken to help reduce the risk of infections, including COVID-19, are as follows:

- Staff should wear gloves when cleaning/disinfecting any toys, equipment or furnishings.
- Staff should perform hand hygiene before and after using gloves.
- Staff should ensure that all toys and equipment are in good repair, clean and sanitary.
- Personal comfort toys may be brought to centre and used during nap/sleep time. They must be placed back in a bag in the child’s cubby after nap/sleep time. They are not to be shared.
- It is recommended to remove all items that cannot be cleaned (paper, books, etc.) and store them in a sealed container for a minimum of 7 days.
- EarlyON providers must adhere to the gathering limits set by the Government of Ontario and local municipal by-laws, and physical distancing of at least 2 metres should be maintained.
- Childcare centres and before and after school programs should schedule outdoor play by groups in order to facilitate physical distancing.
- Limit the use of shared equipment. Shared equipment should be disinfected regularly and children and staff to perform hand hygiene before and after participating in physical activity and equipment use.
- If play structures are used by more than one cohort, the structures should be cleaned and disinfected between each cohort use. Hand hygiene should be performed before and after use by staff and children.
- Sanitizing outdoor structures on playgrounds is not required. The focus should be on maintaining physical distancing, limiting total gathering size on playgrounds, hand hygiene and masking protocols when physical distancing cannot be maintained.
- If a childcare setting is part of school, use of gyms should be for moderate activity only where physical distancing and masking protocols can be followed. Children should not be engaged in moderate to vigorous physical activity indoors.
- If moderate to vigorous physical activity takes place outdoors, children and staff should maintain physical distancing. Masks should not be worn for high intensity activity.
Food Provision

- “No sharing” policies and procedures should be reinforced. There should be no sharing of food or water bottles. Personal items should be clearly labelled with each child’s name.
- Limit the number of staff in the kitchen and maintain physical distance in the kitchen.
- Food handlers must be in good health and practice hand hygiene and respiratory etiquette. Dedicate staff for kitchen duties; ideally, **do not** assign housekeeping staff to be involved with food preparation or food service.
- There should be no food provided by the family/outside of the regular meal provision of the program.
- Special precautions for handling and serving the food must be put in place, when possible:
  - Meals should be individually portioned for each child (i.e., no family style service) in the kitchen. If this cannot be done, meals can be portioned in the program room on a designated surface by the child care provider. Leftover food should be disposed of.
  - Children and staff should practice physical distancing while eating.
  - For more information, please visit [Food Premises Regulation 493/17](#).
Appendix A: Hand Hygiene Posters

How to... Wash your hands

1. Wet hands
2. Use enough liquid soap to cover all areas of your hands
3. Lather and scrub hands for at least 15 seconds (rub finger tips, between fingers, back of hands, base of thumbs and wrists)
4. Rinse under warm, running water
5. Dry with paper towel
6. Turn off water with paper towel

For information contact:
Health Protection and Investigation
519-575-4400 (TTY 519-575-4608) • www.regionofwaterloo.ca/ph
Available in alternate formats upon request

1 How to wash your hands poster
Clean your hands!

Your hands can pass on harmful germs.
We carry many different germs on our hands everyday. These germs can make us sick (e.g. cold, flu, diarrhea). When done right, cleaning your hands often is one of the best ways to help stop the spread of germs.

Clean your hands before & after:
- Preparing and serving food
- Eating
- Putting on or taking off disposable gloves
- Treating a cut or wound
- Caring for someone that is sick

Clean your hands after:
- Handling raw meat
- Coughing, sneezing or blowing your nose
- Using the washroom
- Changing a diaper
- Handling animals or their waste

How to use alcohol-based hand rub

Note: If your hands look dirty, it is best to use soap and water.

1. Use enough alcohol-based hand rub to cover all areas of your hands
2. Rub hands for at least 15 seconds or until product is dry (rub finger tips, between fingers, back of hands, base of thumbs and wrists)

62% alcohol
Recommended for the general public

70% alcohol
Recommended for healthcare settings

Gel vs. Foam: Use enough hand rub to allow for a 15 second rub. Foam can dry out quicker; more foam may be needed.

Other ways to prevent the spread of germs:
- Cover your cough or sneeze
- Stay home when you are sick, return to work only when you feel better
- Clean and disinfect to remove dirt and germs from surfaces
- Prevent food-borne illness by handling food safely

Region of Waterloo
PUBLIC HEALTH

June 2013
Appendix B: Physical Distancing Poster

Practice Physical Distancing

Keep 2 metres between yourself and others

(about 2 arms’ length)

Visit regionofwaterloo.ca/COVID19
Appendix C: COVID-19 Daily Screening Form

Form to be completed by staff at screening station. All children attending child care, staff, students and child care providers, parents/guardians, and visitors must be screened each day before entering the child care setting. Staff are to escort child(ren) into the building. Parents are not permitted to enter the centre.

Week of: __________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Name (Last Name, First Name)</th>
<th>Room</th>
<th>Travel outside of Canada in the last 14 days OR close contact with someone with confirmed COVID-19 in the past 14 days OR Been told by a doctor, health care provider, or public health unit to self-isolate?</th>
<th>Does the individual have one or more COVID-19 symptoms?</th>
<th>Do any of the individual’s household members have one or more COVID-19 symptoms?</th>
<th>Is the individual’s temperature greater than 37.8?</th>
<th>Public Health Contacted (yy/mm/dd)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
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<tr>
<td>☐Yes ☐No</td>
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<td>☐Yes ☐No</td>
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<td>☐Yes ☐No</td>
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<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
<td>☐Yes ☐No</td>
</tr>
</tbody>
</table>
Appendix D: COVID-19 Symptoms Daily Screening Checklist

Please use Ontario’s COVID-19 school and child care screening tool for screening symptoms. Offline, printable versions are available for children and staff/essential visitors for use at the centre. The Daily Screening Form in Appendix C may be used to record screening results.

For an up to date list of symptoms of COVID-19, please see the Ministry of Health’s Reference Document for Symptoms.
Appendix E: Child Care Staff Daily Close Contact Log

Staff Name:

Instructions:

1. During the course of your shift or at end of your shift please log the people who you have been in close contact with. **Close contact is defined as being less than 2 meters apart from someone.**
   - Only include names of people (staff and/or children initials) you were in close contact with.
   - If you were in close contact with someone, please note what location (room) you were in and what PPE was donned.

2. Each staff should file their daily log in a designated location by the end of each shift. We may need to use this information in the event of a positive COVID-19 case to support contact tracing.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Record: People you were in close contact with, the location and what PPE was donned.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>
Appendix F: Reopening checklist

COVID-19 Child Care Centre – Reopening checklist

<table>
<thead>
<tr>
<th>Child care centre information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of child care centre:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Checklist completed by (Name):</td>
</tr>
<tr>
<td>Date:</td>
</tr>
<tr>
<td>Maximum capacity for reopening:</td>
</tr>
</tbody>
</table>

The purpose of this sample reopening checklist is to identify gaps where child care operators can improve their overall preparedness and management of COVID-19 through the development of policies and procedures, adherence to infection prevention and control practices and appropriate response planning to ensure the health and safety of staff, children, parents/guardians and visitors.

This reopening checklist is to be used in conjunction with Ministry of Education, Ministry of Health and Public Health directives, guidelines, and recommendations. For additional information refer to Government of Ontario, Ministry of Education and Region of Waterloo Public Health website.

<table>
<thead>
<tr>
<th>1.0</th>
<th>General Measures</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Health and Safety policy and procedure is developed as per Ministry guidelines. Additional recommended protocols are developed, including but not limited to:</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Grouping and staffing</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>COVID-19 response plan (i.e. a plan is in place if a child, parent or child care staff becomes symptomatic at the centre or is a confirmed case of COVID-19)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Active and passive screening for symptoms</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Daily attendance records</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Enhanced cleaning and disinfection</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Requirements on the use of PPE (including information on exemptions and exceptions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Visitor restrictions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical distancing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.0</td>
<td>General Measures</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Notes</td>
</tr>
<tr>
<td>-----</td>
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<td>-----</td>
<td>----</td>
<td>-----</td>
<td>-------</td>
</tr>
<tr>
<td></td>
<td>• Reporting illness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Parent drop off and pick up procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Staff/providers are trained in this policy.</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

| 1.2 | Operator is aware that in the event that any person at the child care centre is exhibiting symptoms of COVID-19 or has been exposed to COVID-19, the operator shall implement a COVID-19 Response Plan, immediately. | ☐ | ☐ | ☐ |       |

| 1.3 | A copy of the health and safety policy and procedure and COVID-19 Response Plan is accessible to all staff, parents/guardians and emergency contacts. | ☐ | ☐ | ☐ |       |

<table>
<thead>
<tr>
<th>2.0</th>
<th>Screening</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>Screening station for COVID-19 is in place at main entry/drop-off point.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2.2</td>
<td>Screening station allows for physical distancing (minimum 2 metres) between staff and the person being screened or they are separated by a physical barrier (e.g. plexiglass) and a surgical/procedural mask and eye protection</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2.3</td>
<td>Screening poster with COVID-19 symptoms listed is posted at the main entrance</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2.4</td>
<td>Necessary equipment and supplies are provided at screening station (e.g. alcohol-based hand rub (ABHR), thermometer, disinfectant, PPE).</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2.5</td>
<td>ABHR has an alcohol content of 60-90%</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2.6</td>
<td>All individuals (i.e., children, parents/guardians, essential visitors) and staff are screened prior to or upon arrival. Staff, students, parents/guardians and essential visitors are educated on the signs and symptoms of COVID-19 and are directed to call the child care centre if symptoms develop at home.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>2.7</td>
<td>Daily active and passive screening results may be maintained and kept on-site (optional). Each record should include: Name</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
## 2.0 Screening

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact information</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Screening results</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 2.8 Children, parents/guardians, essential visitors, students and staff who are symptomatic or fail the screening are not allowed to enter the child care centre.

- 2.9 Children are screened mid-day for symptoms (optional).

- 2.10 If any child or staff member becomes ill while at the child care facility, Region of Waterloo Public Health is contacted.

## 3.0 Grouping and Staffing

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where there is more than one child care program or day camp in the same building, both programs and groups of children:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Maintain physical separation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Use separate facilities, entrances, and rooms as much as possible</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 3.1 Where there is more than one child care program or day camp in the same building, both programs and groups of children:
- 3.2 Group sizes are in compliance with the maximum group size for each room as per Ministry guidelines.*

- 3.6 Child care staff must work at only one location.

- 3.7 Supervisors and/or designates should limit their movement between rooms, only doing so when absolute necessary.

* The maximum capacity rule does not apply to Special Needs Resource staff on-site.

## 4.0 Hand Hygiene

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proper and frequent hand hygiene practices are followed.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff provides supervision for hand hygiene practices and provides assistance where necessary.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Sufficient supply of hand hygiene products are available in all rooms equipped with hand wash sink or ABHR (i.e., hand soap in dispenser, paper towels, ABHR).</td>
<td></td>
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</tr>
<tr>
<td>Hand hygiene is performed before donning and after doffing PPE.</td>
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</tr>
<tr>
<td>5.0</td>
<td>Cleaning and Disinfection</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>------</td>
<td>---------------------------</td>
<td>-----</td>
<td>----</td>
</tr>
<tr>
<td>5.1</td>
<td>Clean and disinfect common areas and items including high touch surfaces (e.g., door knobs, handrails, sink and toilet handles) at least twice daily and as often as necessary.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5.2</td>
<td>Use cleaners and disinfectants with a drug identification number (DIN). Disinfectants must be effective against COVID-19 (see...)</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5.3</td>
<td>A sufficient supply of cleaning and disinfecting products provided and accessible to staff.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5.4</td>
<td>All rooms where a symptomatic child was present must be cleaned and disinfected immediately; additionally, all high traffic areas such as bathrooms, corridors and frequently touched items/surfaces should be disinfected immediately.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.0</th>
<th>Toys and Equipment</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1</td>
<td>All toys used are made of material that can be cleaned and disinfected (e.g. remove plush toys).</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>6.2</td>
<td>Increased frequency of cleaning and disinfection of toys.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>6.3</td>
<td>Where toys and equipment are shared, they should be cleaned and disinfected prior to being shared.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>6.4</td>
<td>Mouthed toys are cleaned and disinfected immediately after the child is finished using them.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>6.5</td>
<td>Staff wear gloves when cleaning/disinfecting any toys, equipment or furnishings.</td>
<td>☐</td>
<td>☐</td>
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</table>

<table>
<thead>
<tr>
<th>7.0</th>
<th>Physical Distancing</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.1</td>
<td>Physical distancing (i.e., 2 metres) is maintained in both indoor and outdoor play space.</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>7.2</td>
<td>Physical distancing is maintained between groups Physical distancing strategies are incorporated in the child care centre:</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>7.0</td>
<td>Physical Distancing</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Notes</td>
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<tr>
<td></td>
<td>• Spreading children out into different areas at meal and dressing time</td>
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<tr>
<td></td>
<td>• Incorporating more individual activities. Avoid planning activities that involve shared objects or toys</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Using markings on floors and walls to promote physical distancing</td>
<td></td>
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</tbody>
</table>
|     | • Using a physical barrier  
  o must begin at the floor and reach a minimum height of 8 feet (must always be 12 inches taller than the tallest person in the facility)  
  o must be as wide as the space/room will allow |     |    |     |       |
|     | • Moving activities outside to allow for more space |     |    |     |       |
|     | • Increasing distance between sleeping equipment (e.g., cots and mats) or placing children head to toe or toe to toe |     |    |     |       |
|     | • Moving cribs to allow for 2 metres distancing or placing infants in  
  every other crib. Provide clear markings for cribs that should not be used |     |    |     |       |
|     | • Staggering lunch/break time for staff |     |    |     |       |
|     | • Re-arranging/increasing spatial distance of chairs and tables in staff room to ensure physical distancing |     |    |     |       |

<table>
<thead>
<tr>
<th>8.0</th>
<th>Personal Protective Equipment (PPE)</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1</td>
<td>Staff are trained on the proper use of PPE</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>8.2</td>
<td>Medical masks and eye protection (i.e., face shield) are worn by all adults (i.e., child care staff, home child care providers, home child care visitors, and students) while inside in the child care premises, including hallways and staff room</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>8.0</td>
<td>Personal Protective Equipment (PPE)</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Notes</td>
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<tr>
<td></td>
<td>Non-Medical masks or face covering are worn by all children in grades 1 and above while inside in the child care premises, including in hallways. As well as outside when physical distancing cannot be maintained.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td></td>
<td>Masks are also worn:</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td></td>
<td>• When cleaning and disinfecting blood or bodily fluid spills if there is a risk of splashing. Please refer to the Public Services Health and Safety Association’s Child Care Centre Employer Guideline for more information on working safely in a child care setting. Note that there is also a resource document for Child Care Providers.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td></td>
<td>• When caring for a sick child or a child showing symptoms of illness</td>
<td>☐</td>
<td>☐</td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9.0</th>
<th>Food Safety</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.1</td>
<td>“No sharing” policies and procedures are reinforced. No sharing food, water bottles or personal items and belongings. Personal items should be clearly labelled with each child’s name.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td>9.2</td>
<td>Meals or snacks are portioned into individual size in the kitchen / food preparation area before serving in the program area.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>9.3</td>
<td>No self-serve or sharing of food at meal times</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>9.4</td>
<td>No utensils or food items (e.g., serving spoon or salt shaker) should be shared.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>9.5</td>
<td>No food should be provided by family/outside of regular meal.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>9.6</td>
<td>Foods are prepared, handled, stored and served in a safe manner as outlined in Food Premises Regulation 493/17.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>9.7</td>
<td>Multi-use utensils must be cleaned and sanitized between uses as per requirements outlined in Food Premises Regulation 493/17.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>10.0</td>
<td>Management of child or staff who has symptoms of illness</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Notes</td>
</tr>
<tr>
<td>------</td>
<td>----------------------------------------------------------</td>
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</tr>
<tr>
<td>10.1</td>
<td>Staff/child care provider, parents/guardians and children do not enter the centre if they are ill with any symptoms. Child care operator to conduct surveillance and record all illnesses (respiratory and enteric) in the centre. Child care centre is to report to Region of Waterloo Public Health when any staff or child exhibits COVID symptoms while at the child care facility in accordance with the instructions provided earlier in the document.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>10.2</td>
<td>Symptomatic child/staff at the centre is immediately separated from others and is supervised in a designated room/space and parent/guardian is contacted for immediate pick up.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>10.3</td>
<td>Designated staff member providing care to a symptomatic child should maintain a distance of 2 metres, if possible. Avoid contact with the child’s respiratory secretions and perform meticulous hand hygiene.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>10.4</td>
<td>A surgical/procedural mask should be worn by the symptomatic child (if tolerated and above age of 2). A surgical/procedure mask and eye protection should be worn by the staff member who takes care of the symptomatic child.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>10.5</td>
<td>Symptomatic child should be reminded to practice hand hygiene and respiratory etiquette while waiting for pick up.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td></td>
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<td>10.6</td>
<td>Clean and disinfect the room/space and any items touched by the symptomatic child after they have been picked up. For items such as books or cardboard puzzles, remove from use and store in a sealed container for a minimum of 7 days.</td>
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<tr>
<td>10.0</td>
<td>Management of child or staff who has symptoms of illness</td>
<td>Yes</td>
<td>No</td>
<td>N/A</td>
<td>Notes</td>
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<td>10.7</td>
<td>Exclusions of group members and other close contacts are made in accordance with guidance provided in this document</td>
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<td>10.8</td>
<td>Contaminated items belonging to the symptomatic child (including soiled clothing) are sent home immediately for cleaning. Place the item in a securely tied plastic bag and send home with the child’s parents/guardians. Soiled item must not be rinsed and or washed at the centre.</td>
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