

## COVID-19 Plan

KidLogic is following recommendations by the Ministry of Education and the Local Public Health to ensure children and staff remain safe during this current Recovery Period. This policy will supersede any of our existing policies that may have conflicting information.

- ❖ We will operate under our regular licensed capacity with enhanced health and safety measures in place.
- ❖ Groups will stay together as much as possible and should not mix with other groups.
- ❖ Where possible staff will be assigned to a specific group.
- ❖ KidLogic to provide additional materials and equipment to safely and effectively run the program.
- ❖ We will follow all directions as set out by our local public health and Ministry of Education.
- ❖ Stay abreast of any changes or updates made by local public health and the Ministry of Education.
- ❖ We will resume operating with normal operating hours.
- ❖ Staff will only work at one location.
- ❖ Management and supply staff to limit movement between classrooms.
- ❖ Students on placements from post-secondary schools will be assigned to a specific group.
- ❖ Discounts may apply for missed absence days due to COVID-19 reasons, please ask center management for specific policy.

## Enhanced Cleaning and Sanitizing

- ❖ Use only the approved sanitizers.
- ❖ Ensure that sanitizers are kept out of reach of children.
- ❖ Ensure that sanitizers are changed daily or more often if needed.
- ❖ Limit toys and equipment to those that can be cleaned and sanitized frequently.
- ❖ Follow the steps below for cleaning and sanitizing:
  - For counters, tables, high chairs and food contact surfaces.
    - Clean and sanitize before and after each use.
    - Spray with soapy water and rinse with water.
    - Spray with sanitizer and allow 2 minutes of contact and wipe dry
  - For Toys and Equipment

- Spray with or submerge in soapy water and rinse with water.
- Spray with or submerge in sanitizer and allow 1 minute of contact and then wipe dry if possible
- ❖ Follow the cleaning schedule as outlined below:
  - Clean and sanitize bathroom surfaces such as faucet handles and toilet seats and handles after each bathroom routine.
  - Staff must clean and sanitize staff washroom after use.
  - Floors swept after each snack and lunch routine or when spill occurs.
  - Door handles, light switches, phones at least twice a day.
  - Technology (IPad, computers, phones etc.) should be wiped down between users.
  - Wash and sanitize crib, crib rails, and cots after each use.
  - Wash mattress covers, sheets, blankets every day.
  - Wash face cloths after each use.
  - Place soiled clothing in plastic bags and return to parents.
  - Wash and sanitize the water play equipment after each individual child.
  - Wash and sanitize all toys daily. Mouthed toys should be removed from play immediately and washed and sanitized before returning to play.
  - Clean and sanitize low shelves, doorknobs and other surfaces likely to be touched by children, daily.
  - Outdoor toys and equipment will be sanitized between cohorts unless each group has their own toys and equipment. Playground structures are not required to be cleaned between groups. Hand hygiene to be a priority before and after using play structures.
- ❖ Bottles and pacifiers to be labelled and stored separately.
- ❖ The cleaning company to do the following:
  - Vacuum carpets, mop floors, dust and sweep daily.
  - Empty and sanitize garbage pails daily.
  - Clean and sanitize all bathrooms.
  - Clean and sanitize window sills, sides of furniture and doors daily.

## Personal Protective Equipment (PPE), Hand Hygiene and Respiratory Etiquette

- ❖ All adults in the childcare, staff, student and regulatory persons, are required to wear medical masks and eye protection while inside the childcare premise, including in the hallways and staff rooms.

- ❖ Masks are not required outside if a distance of at least 2 meters can be maintained between staff and children.
- ❖ Exceptions to wearing the mask could include circumstances where physical distance of at least 2 meters can be maintained by individuals, or reasonable exceptions for medical conditions.
- ❖ Exceptions must be documented as related to masks.
- ❖ We will provide all necessary personal protective equipment for staff.
- ❖ Staff to be trained on how to properly put on and take off PPE.
- ❖ JK/SK children will be required to wear masks during attendance both indoors and outdoors. (parents to provide mask)
  
- ❖ Encourage children and staff to cough or sneeze into their sleeve or cover their mouth and nose with a tissue.
- ❖ Throw tissues out immediately after use and wash hands.
- ❖ Avoid touching the eyes, nose and mouth with unwashed hands.
  
- ❖ Practice the following hand hygiene procedure and encourage the children to do the same:
  - Hands must be washed when visibly soiled and/or
    - When you enter the building.
    - Before putting on or after removing PPE.
    - Before and after direct contact with the children.
    - Before preparing or serving food, handling raw food.
    - Outdoor play.
    - After handling any soiled items (laundry, dishes, toys etc.)
    - After diapering a child, cleaning up messes, or wiping a nose.
    - After you have been to the bathroom with a child or by yourself.
    - After sneezing or coughing and blowing your nose.
    - After coming into contact with any bodily fluids.
  
- ❖ Hand washing is the preferred hand hygiene method
- ❖ Use the following hand washing procedure:
  - Wet hands under warm running water.
  - Scrub hands all over with soap for at least 15 seconds or more as needed.
  - Rinse under warm running water.
  - Dry with a paper towel.
  - Turn taps off with paper towel.
- ❖ When Hand washing is not available use the following hand sanitizer procedure:
  - Use a sanitizer with greater than 60% alcohol content

- Apply sanitizer
- Rub hands for 15 seconds or until dry

## Screening

- ❖ We will arrange for a screener to greet everyone who enters the building.
- ❖ We will adhere to the following procedure for entering and leaving the building:
  - Screening table will be placed at the front door. Parents will not be allowed past the screening area.
  - Provide visual guides to help assist with physical distancing
  - The screener will wear all necessary Personal Protective equipment
  - Greet anyone who comes to door warmly.
  - Parents to self- screen their children following the Ministry of Health's Screening checklist. <https://covid-19.ontario.ca/school-screening/>
  - Staff to self-screen using the Ministry of Health's Screening Checklist. <https://covid-19.ontario.ca/school-screening/>
  - Screener will ask if they have passed the self-screen.
  - If a Self-Screen is failed parent or staff must contact KidLogic to inform them
  - Screener will conduct screening if it has not been done prior to arrival.
  - If the screening is passed:
    - For Child: they are brought to the classroom, staff dropping off child to ensure that they make contact with classroom staff
    - For Adult: They may enter but must wear all necessary Personal Protective Equipment.
  - If the person fails the screening:
    - The person will not be allowed to enter
    - The screener to inform management
    - Child/Staff should go for a medical assessment. Either a Doctor ruling out COVID-19, have a COVID-19 Test or self-isolate for 10 days. In all cases before returning back to care symptoms in question 1 must be cleared for a minimum of 24 hours, symptoms in question 2 must be improving after 24 hours of monitoring at home. If there are 2 or more symptoms from question 2 then either a Doctor ruling out COVID-19, have a COVID-19 Test or self-isolate for 10 days.
  - Child's attendance record will be maintained by the staff in each group.
  - Staff attendance will be recorded on timesheet.

- Ensure that no one, other than staff, children or authorized persons enter the building. Anyone who is permitted to enter must provide name, contact information's, time of arrival/departure, and screening results.
- All essential visitors screenings to be recorded and kept on the premises
- Contact lists must be made available to public health within 24 hours of being requested.
- During pickup parents must remain between the glass doors and wait for the child to be brought to them.
- A staff member to escort the child to the parent and convey any messages from the child's day.

## Symptoms of Illness and Reporting

- ❖ Children, staff, and students, should be taken for a medical assessment. Either a Doctor ruling out COVID-19, have a COVID-19 Test or self-isolate for 10 days.
- ❖ In all cases before retuning back to care symptoms in question 1 must be cleared for a minimum of 24 hours, symptoms in question 2 must be improving after 24 hours of monitoring at home. If there are 2 or more symptoms from question 2 then either a Doctor ruling out COVID-19, have a COVID-19 Test or self-isolate for 10 days. Those who test positive for COVID-19 must be excluded from the program for 10 days after the onset of symptoms and/or clearance has been received from the local public health unit.
- ❖ Symptomatic Child: should be separated from other children where possible, if not possible separate child from group by at least 6 feet. Staff watching the sick child, must wear mask and face shield, and if the child is over two and will tolerate they should also wear a mask.
  - Parents should be contacted and child should be picked up immediately, taken for medical assessment.
- ❖ Symptomatic Staff: Separate the staff from their group. Staff must wear gloves, mask and face shield. Staff should be sent home immediately.
- ❖ All items used by the symptomatic person should be cleaned and disinfected.
- ❖ Symptoms will be recorded in the daily log.
- ❖ Reporting Procedures
  - Any confirmed cases of COVID-19 of a child, staff, or anyone who has entered the center will be reported as a serious occurrence.
  - An outbreak may be declared by the local public health unit when: within a 14-day period, there are two or more laboratory-confirmed COVID-19 cases in children, staff/providers or other visitors with an epidemiological

link (e.g., cases in the same room, 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. Where a room, center or premises closes due to COVID-19, licensees must report this to the ministry as a serious occurrence.

## Communication

- ❖ In the event of a Positive COVID-19 case or an outbreak all families will be notified by email, or posted notice.
- ❖ Families within the affected group will be notified by phone as soon as possible.
- ❖ Management will inform all stakeholders with regards to the COVID-19 situation.

## Physical Distancing

- ❖ Staff to encourage physical distancing while maintaining a welcome and caring environment for the children.
- ❖ Physical distancing will be encouraged by:
  - Staggering drop off and pickup times, where possible.
  - Having individual craft supplies in labelled bag for each child
  - Individualized sensory play, which will be cleaned and sanitized between children.
  - Children will be encouraged to distance.
  - Chairs will be placed at tables to help children maintain physical distance.
  - Cots will be spread out as much as possible, Children will be put head to toe or toe to toe if distancing is an issue.
  - Playground will be divided with a 6 feet wide space to accommodate multiple cohorts where needed
  - Staff will encourage children to do individual activities.
  - Staff will avoid group activities, including singing.
  - We will ensure no group events, in person meeting, tours or non-essential visitors will be allowed to be conducted.
  - Students on post-secondary placements will be assigned to one group.

Signature of Authority

A handwritten signature in black ink, appearing to be 'K. L.', written above a horizontal line.

Date of Last Review

November 2020