



Childcare Programs

Infection Control

Policy and Procedures

First Adventure Child Development Centres

For Hastings County

August 28, 2020 – Version 5

**Hastings County
Childcare Infection Control Policies and Procedures**

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Introduction

The purpose of the Childcare Programs Policy and Procedures Template document for The County of Hastings is to support consistency and best practices in the reopening of childcare settings in accordance with direction from the Ministry of Education, Ministry of Health, the Hastings Prince Edward (HPE) Public Health Unit and the Hastings County Children's Services.

This document may be amended as needed to in response to continually evolving circumstances during the COVID-19 pandemic.

This document begins with definitions to help guide the reader. Sections 1 through 8 contain the specific policies and their procedure templates that the service provider may adapt for their own programs. The Appendices contain the forms and logs referenced in the template documents.

The Service Provider may add any information they wish to these template policies, or modify the details of these policies to fit their program's needs. However, it is not recommended that any information be removed from these template documents without first discussing these changes with HPE Public Health

These policy templates are intended to supplement the information provided in the *Ministry of Education Operational Guidance During COVID-19 Outbreak Version 3* document. Service Providers are expected to ensure that all requirements in the Ministry of Education Guidance document are met, in addition to the direction contained within these template policies and procedures. This includes but is not limited to the development of policies and procedures regarding how shifts will be scheduled, and also rescheduling of group events and/or in-person meetings; as well as ensuring that all COVID-19 Serious Occurrence reporting duties are carried out.

If direction from the Ministry of Education, Ministry of Health, or HPE Public Health contradicts this document, that direction shall be considered to supersede any information provided in this document.

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Definitions

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

Disinfecting: refers to the process completed after cleaning in which a chemical solution is used to kill most disease-causing microorganisms. In order to be effective disinfectants must be left on a surface for a period of time (contact time). Contact times are generally prescribed by the product manufacturer. Depending on the specifications of the disinfectant in use, items children may come into contact with may require a final rinse after the disinfectant contact time is observed. Disinfectant wipes may also be used; specified contact time for the product must be observed. Any disinfectant used must have a DIN. If using bleach for disinfecting a solution of 1000ppm should be used with a contact time of 10 minutes. The measurements for 1000ppm bleach solution are 20 ml (4 teaspoons) household bleach + 1000 ml (4 cups) water.

DIN: A Drug Identification Number (DIN) is an 8-digit number given by Health Canada that confirms a product is approved for use in Canada. Any disinfectant used must have a DIN.

Hand Hygiene: refers to the process of hand washing or use of hand sanitizer. See Hand Hygiene Policy and Procedures for a detailed description of hand hygiene practices.

High Touch Surfaces: refers to any surfaces that have frequent contact with hands (e.g., light switches, hand rails, door knobs, sinks, toilets, etc.). These surfaces must be cleaned and disinfected at least twice per day and more often as necessary (e.g. when visibly dirty or contaminated with body fluids).

Low Touch Surfaces: refers to any surfaces that are reachable, but are likely to have minimal contact with hands. These surfaces must be cleaned and disinfected at least once per day and more often as necessary (e.g. when visibly dirty or contaminated with body fluids).

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MSDS: a Material Safety Data Sheet (MSDS) is a document that contains information on the potential health effects of exposure to chemicals, or other potentially dangerous substances, and on safe working procedures when handling chemical products.

PPE: personal protective equipment (PPE) is protective clothing, goggles, masks, gloves or other garments or equipment designed to protect the wearer's body from injury or infection. See use of Personal Protective Equipment Policy and Procedures for additional detail.

Three Sink Method: refers to a method of cleaning and disinfecting items using a three stage process. Suggestion: the 1st sink is used for washing with detergent, the 2nd sink is used for cleaning with water and the 3rd sink is used for disinfecting. After items are removed from disinfectant solution, items must be left to air dry.

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1. Health Screening and Parent Drop Off/Pick Up Procedures

Purpose

The purpose of this policy is to provide clear direction for employees of **First Adventure Child Development Centres** to follow when conducting health screening procedures. This policy is designed to help reduce risk of the spread of illness, including COVID-19.

Policy

In consideration of the increased health risk associated with the spread of COVID-19, and in accordance with Ontario Regulation 137/15, s. 36(1), s. 88.6 (5) and Ministry of Education Operational Guidance During COVID-19 Outbreak; it is required that that all individuals entering into **First Adventure Child Development Centres** undergo a health screening. If an individual does not pass health screening entry into **First Adventure Child Development Centres** will not be permitted.

Parents dropping off children, although not entering the centre, must participate in health screening on their child's behalf.

Health screening must be conducted in accordance with the procedures described in this policy.

In the interest of reducing risk of infection no visitors, volunteers or any other non-essential individuals (e.g. music instructor) shall be allowed entry into **First Adventure Child Development Centres**.

Any essential visitors that must enter the childcare centre must be screened, and wear a **medical mask and eye protection (e.g. face shield)** while in the centre (e.g. maintenance personnel, Ministry Staff, Public Health Inspectors, etc.).

Where possible, daily screening should be done electronically (e.g., via online form, survey, or e-mail) prior to the child arriving at the centre.

Procedure

All individuals wishing to enter **First Adventure Child Development Centres** will be prior to entering the program. Entry will only be permitted only if the individual passes the health screening.

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If any individual fails the health screening they shall not be permitted to enter the childcare centre.

Wherever possible, staff should be screened by another staff member. In the event that this is not possible, staff may perform the health screening procedure on themselves. Consideration should be given to scheduling staff shifts and/or arrival times to allow for staff to complete screening and be ready to welcome children into ratio as they arrive.

All other individuals (children and essential visitors) entering the centre must be screened by designated staff if screening electronically prior to attending the centre is not possible. As much as possible parents should not go past the screening area. If exceptional circumstances are identified which require a parent to enter into the centre, the parent must pass screening prior to entry, the parent would be considered an essential visitor as per the paragraph below.

If an essential visitor enters the centre, they are required to wear a medical mask and eye protection (e.g. face shield) for the duration of their visit. As per O. Reg. 137/15 s. 88.4 (1), A record must also be kept of the essential visitor's contact information, and time of arrival and departure. A record should also be kept detailing where in the centre the essential visitor was present (e.g. keep a record of which room they visited).

In order to ensure the screening process is efficient, it is recommended that where possible, two staff be designated to set up the health screening area and to carry out the screening process. It is permissible for one staff person to conduct the health screening, provided all duties described in this policy are carried out.

Health Screening Area Set Up

- Health Screening will take place Bridge St. Campus in the front foyer for children and the back stairwell for staff, Georges Vanier Campus and Our Lady of Fatima at the designated doors entering the child program. Electronic screening will be made available upon completion a program and will be sent to families and staff at that time.
- No individual shall be permitted to proceed into the centre without successfully passing the health screening;
- In order to ensure that all individuals are screened, only the designate entrance as stated above, will be used to enter the building.

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- An area should be dedicated for screening outside of the program area, with the following items available:
 - Hand sanitizer (ensure hand sanitizer is visible to those entering the building)
 - Screening questionnaires
 - Pens
 - Disinfectant wipes (use of wipes with a short contact time e.g. 1 minute is recommended)
 - Small plastic container (to place soiled eyewear in)
 - Public Health COVID-19 information resources
 - Trash receptacle

- The health screening area must be set up to allow for physical distancing at a minimum of 2 metres:
 - The staff conducting health screening should maintain a minimum of 2 metres distance between themselves and the person being screened.
 - Visual guides should be set up to assist with physical distancing (e.g., pylons) in the event that a line-up forms while parents/guardians and their children are waiting to be screened prior to entering into the child care centre;

- Signage describing the health screening process is posted at the screening area and on the door of the childcare centre.

Health Screening Implementation

- Staff must ensure the screening questionnaire is completed for each individual wishing to enter the centre;

- Parents/visitors complete daily screening of their children/themselves prior to entry using the COVID-19 Screening Tool (Appendix A) once it is made available

- Staff will confirm from the parent/guardian that the screening tool was completed and the child/visitor passed. This must be documented and retained using the COVID-19 Child Care Screening Tracking Tool (Supplement to Appendix A)

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- If not completed electronically parents will be required to answer the screening questions on their child's behalf before entering the program.
- Centres will keep record of pass/fail (e.g. Supplement to Appendix A) on file, it is not necessary for each individual child's screening tool to be kept (Appendix A)
- The staff screening individuals upon entry to the centre will wear the following PPE while carrying out health screening duties:
 - Surgical/procedure mask
 - Eye protection

Procedure for in-person Health Screening

- Greet everyone with a friendly, calm manner;
- Request that each individual (parent/guardian, and child) use hand sanitizer (please follow manufacturer's instructions for use on children under the age of 2);
- Begin the screening with the following statement:
 - "Good morning/afternoon/evening. As you are aware COVID-19 continues to evolve, as a result we are conducting active screening for potential risks of COVID-19 for everyone who enters the location. The screening will ensure the safety and well-being of staff, children and families"
- The Note Taker will ask each staff person, parent/guardian, or essential visitor all of the health screening questions (Appendix A);
- The Note Taker will also perform a visual check and record observations as outlined on the health screening questionnaire;
- The Note Taker will review the health screening form:
 - If all questions have been answered with a **NO** the individual may be admitted to the centre. When admitting a child the Note Taker should accompany the child to their classroom and drop them off with the program staff who will be caring for the child. The Note Taker must verbally confirm with the program staff that the child is entering into their

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care. (This can occur while the Screener carries out hand hygiene and begins screening the next child).

- If any questions have been answered with a **YES** or the individual's the individual **cannot be admitted** to the centre. The Note Taker should respond by saying: *"Thank you for your patience. Unfortunately based on these answers/this temperature reading, I'm not able to let you/your child enter the child care centre. Please make arrangements to be tested at the COVID-19 testing centre."* Print resources, with information on the local COVID-19 Testing Centre should be provided. In the event that a staff person or child cannot be admitted to the centre because they failed the screening, the site supervisor must be notified immediately;
- If an individual who has just completed and passed health screening is an essential visitor (not a child or staff person) they must be asked to don a medical mask and eye protection (e.g. face shield) prior to entering the childcare centre, and wear throughout their visit.
- All completed screening questionnaires must be retained at the childcare centre until otherwise directed by Public Health;
- As per O. Reg. 137/15 s. 88.4 (4) all screening records must be retained at the childcare centre for at least one year after the date the record is made;
- At the end of the screening process, hand hygiene should take place.

Child Pick Up Procedure

- As parents/guardians are not to enter past the screening area (unless exceptional circumstances are identified). The following process will be put in place for parents/guardians to notify staff that they have arrived to pick up their child
 - Bridge St Campus – parents will enter the foyer and push the buzzer. A staff (not in ratio) will answer the buzzer and parents identifies who they are and who they are here to pick up. Staff will deliver the child to the parent.

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- Georges Vanier & Our Lady of Fatima Campus, parents will wait at the designated drop off area door and staff (not in ratio) will deliver the child
- Outside all programs – parents are to wait at the outside playground area, not entering the playground, and the staff will ask parent to step back 2 meters from the gate and the staff will open the gate and deliver the child to the parent at the gate. With infants and children requiring physical support, staff will wear a mask and eye protection to physically deliver the children outside to parents.
- Staff should be aware of both the typical and atypical signs and symptoms of COVID-19 as described by the Ontario Ministry of Health. Please refer to the latest version of the Ministry of Health COVID-19 Reference Document for Symptoms note: children may exhibit atypical signs/symptoms of COVID-19. Screening staff must be familiar with these signs/symptoms in case they are reported by a parent during the screening process:

Ministry of Health Reference Documents can be found here: [Click Here](#)

Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work at **First Adventure Child Development Centres**

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2. How to Report Illness and Exclusion of Ill Individuals

Purpose

The purpose of this policy is to provide clear direction for staff of **First Adventure Child Development Centres** to follow on how to report the exclusion and return to program of an individual who has been excluded either because they failed the Health Screening, or due to signs of illness while in attendance in program. As Per the Ministry of Education Operational Guidance During COVID-19 Outbreak, this policy is designed to help reduce risk of the spread of illness, including COVID-19.

Policy

Due to the increased health risk associated with the spread of COVID-19, all staff of **First Adventure Child Development Centres** must adhere to this policy when excluding an individual or considering admitting any individual into program who has been previously excluded due to failing the Health Screening, or due to observed symptoms of ill health while in attendance in program.

Any observation of ill health in any individual present in the program staff or child must be reported to HPE Public Health. If direction from Public Health varies from the information contained within this policy, the Service Provider is expected to adhere to direction provided by Public Health.

Children will be excluded from a child care centre as individuals or groups based on direction from the Medical Officer of Health. At a minimum, exclusion of the ill individual applies. The Medical Officer of Health may direct groups considered close contact to the ill child are also excluded, based on but not limited to, local epidemiology or outbreaks associated with child care centres.

Symptomatic children or staff should be referred for testing. Testing of asymptomatic persons should only be performed as directed by HPE Public Health as part of case/contact and outbreak management. Please refer to the [provincial testing guidance](#) document for updated information regarding the requirement for routine testing in a child care setting.

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A single, symptomatic, laboratory confirmed case of COVID-19 in a staff member, home child care provider or child must be considered a confirmed COVID-19 outbreak, in consultation with the local public health unit. Outbreaks should be declared in collaboration between the program and the local public health unit to ensure an outbreak number is provided.

Where a child, parent or, staff is **suspected (i.e. has one or more symptoms and has been tested)** of having or has a confirmed case of COVID-19, licensees must report this to the ministry as a serious occurrence.

Where a room, centre or premises closes due to COVID-19, licensees must report this to the ministry as a serious occurrence.

Procedure

When considering an individual (child or staff) who has failed the Health Screening Questionnaire (Appendix A):

- If the individual has failed the Health Screening due to answering “Yes” to any of the questions, the individual must be excluded from program and referred to the COVID-19 Assessment Centre for testing. Readmission of the individual to program will take place once a negative COVID-19 test result is received and the individual is 24-hours symptom free or after 14-days from symptom onset as well as 24-hours symptom free.
- Any individual who has shown signs or symptoms of illness must be instructed to attend the COVID-19 Assessment Centre for testing, Belleville and Trenton 613-961-5544, Bancroft 613-332-2825 ext. 2222
- If you have specific questions in regards to an ill child at your home/agency please contact HPE Public Health at 613-966-5500 or 1-800-267-2803 Ext 349.
- **If the individual has reoccurring symptoms listed on the Health Screening Questionnaire as a result of a known medical problem, a physician can provide a medical attestation to be kept on file by the centre.**

When considering exclusion an individual with observed symptoms of ill health while in attendance at the program:

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- If the individual is a child, they should be isolated immediately and picked up as soon as possible as per the program's Isolation of Ill Children Policy and Procedure. The parent/guardian of the child must be instructed to attend the local assessment centre for COVID-19 testing. Public Health must be notified.
- If the individual is a staff, they should leave the centre as soon as possible and be instructed to attend the local assessment centre for COVID-19 testing. Public Health must be notified;
- Other children, including siblings of the sick child, and child care staff/providers in the program who were present while the child or staff member/provider became ill should be instructed to monitor for signs and symptoms. The cohort will continue to be actively screened each day before attending the child care centre.
- Exclusion of the cohort exposed to a child/staff with symptoms will be at the direction of local public health. Cohort exclusion is based upon close contact of a confirmed COVID-19 case or if required based on local epidemiology by the Medical Officer of Health.
- There may be additional guidance from public health following a positive laboratory test or suspected outbreak.

When considering readmission to program for individuals who have had symptoms of ill health:

- Readmission to the program will take place after a negative COVID-19 laboratory test is received and the individual is 24-hours symptom free.
- If the excluded individual does not undergo COVID-19 testing, they will be excluded from the program for a minimum of 14 days, and after 14 days may be readmitted, provided they are symptom free.
- Once the individual is excluded from the program for 14-days following a positive COVID-19 test and is 24-hours symptom free, the parent should contact the **First Adventure Child Development Centres** staff and return to care will be approved for the next day.

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Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in **First Adventure Child Development Centres**.

3. Isolation of Ill Children

Purpose

The purpose of this policy is to ensure that all employees of **First Adventure Child Development Centres** are prepared to respond to any sign of illness in a manner that will help reduce risk of the illness spreading.

Policy

In accordance with Ontario Regulations 137/15, s. 36(2) the Service Provider must separate a child showing signs of illness from all other children. In consideration of the increased health risk associated with the spread of COVID-19 and in accordance with Ministry of Education Operational Guidance During COVID-19 Outbreak, employees of **First Adventure Child Development Centres** are required to follow the Isolation of Ill Children Policy and Procedure”.

Procedure

- Children will be monitored for signs of ill health throughout the day by:
 - The staff in the child’s program
- Any child showing symptoms of ill health must be immediately separated from other children and picked up by a parent/guardian. Public Health must also be immediately notified;
- Any child showing signs of illness will be isolated in the following location while awaiting pickup by their parent/guardian:
 - In the designated isolation room when possible (Bridge St. Campus 3rd room on second floor) when not possible the child may be isolated in the program -maintaining social distancing of at least 2 meters from the cohort

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- While isolated the staff person caring for the ill child will be: not in ratio, when ever possible a staff member from the child's program.
- The staff person caring for the ill child must wear PPE including surgical/procedure mask, protective eyewear, gown and disposable gloves. If over two years of age the child should also wear a surgical/procedure mask (provided the child will tolerate it). Please Note: due to risk of suffocation, masks are not to be used on children under 2 years of age, or on any child over the age of 2 who would be unable to remove the mask of their own accord;
- Staff must be aware of proper protocols for safely donning and doffing PPE;
- Tissues must be provided to the child for proper respiratory etiquette, with proper disposal of the tissues and proper hand hygiene. Proper respiratory etiquette (using a tissue to cover a cough or sneeze) should be practiced;
- Environmental cleaning and disinfection of the space the child was separated must be conducted once the child has been picked up;
- Any materials the ill child had been using in the classroom must be removed until cleaned and disinfected. All items that cannot be cleaned (paper, books, cardboard puzzles) should be removed and stored in a sealed container for a minimum of 7 days.
- Contact HPE Public Health to notify them of a potential case Public Health will provide information on the next steps and direction regarding the information that should be shared with other parents of children in the childcare centre.

Serious Occurrence Reporting

- Child care centre licensees have a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. The licensee should contact their local public health unit to report a child suspected to have COVID-19. The local public health unit will provide specific advice on what control measures should be implemented to prevent the potential spread and how to monitor for other possible infected staff members and children.

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- Where a child, parent, staff or home child care provider is suspected (i.e. has one or more symptoms and has been tested) of having or has a confirmed case of COVID-19, licensees must report this to the ministry as a serious occurrence.
- Where a room, centre or premises closes due to COVID-19, licensees must report this to the ministry as a serious occurrence.
- Licensees are required to post the serious occurrence notification form as required under the CCEYA, unless local public health advises otherwise.

Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in **First Adventure Child Development Centres**.

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4. Environmental Cleaning and Disinfecting

Purpose

The purpose of this policy is to provide clear direction for environmental cleaning and disinfecting practices in **First Adventure Child Development Centres**. This policy is designed to help reduce risk of the spread of illness, including COVID-19

Policy

In accordance with Ontario Regulation 137/15, s. 33, Ministry of Education Operational Guidance During COVID-19 Outbreak and in consideration of the increased health risk associated with the spread of COVID-19, the staff of **First Adventure Child Development Centres** are required to strictly adhere to environmental cleaning and disinfecting procedures, as described in this document.

Please refer to [Public Health Ontario's Environmental Cleaning fact sheet](#) and the Public Services [Health and Safety Association's Child Care Centre Employer Guideline](#) for information on cleaning. This includes information on which products to use, how to clean and disinfect different materials, and additional information on cleaning product usage.

All employees of **First Adventure Child Development Centres** are expected to know and understand these procedures, and carry out these procedures as per their job duties.

Procedures

When carrying out any cleaning or disinfecting appropriate PPE must be worn in accordance with MSDS information for the particular product in use. Products selected for use in disinfecting must have a DIN. Hand hygiene must be completed before and after use of PPE, and upon completion of cleaning and disinfecting routines.

If using bleach for disinfecting, a solution of 1000ppm must be used with a contact time of 10 minutes. The measurements for 1000ppm bleach solution are 20 ml (4 teaspoons) household bleach + 1000 ml (4 cups) water.

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When using bleach, the surface must first be cleaned with soap and water. The bleach solution must remain wet on the surface for at least 10 minutes. The bleach solution must be replaced daily.

If using a disinfectant other than bleach manufacturer instructions for use and contact time must be observed.

Expired cleaning and disinfection products are not to be used.

Environmental Cleaning and Disinfecting Record Keeping

- Cleaning and disinfecting logs which correspond with this policy must be maintained. Logs corresponding with this policy are as follows:
 - Appendix B – Environmental Cleaning and Disinfecting Log
 - Appendix C – Washroom Environmental Cleaning and Disinfecting Log
 - Appendix D – Cot and Bedding Environmental Cleaning and Disinfecting Log
 - Appendix E – Outdoor Play Equipment Environmental Cleaning and Disinfecting Log;
- All tasks listed in these logs must be carried out with appropriate frequency as described in this policy and indicated in the logs;
- It is acceptable to add additional tasks to these logs, as needed for each particular setting;
- A separate log is required for each corresponding area of the childcare centre (E.g. each classroom, washroom etc.);
- All logs once completed must be kept on file at the childcare centre for a period of 4 weeks;

Environmental Cleaning and Disinfecting Routine Practices

Upon Entry to Childcare Centre:

- Staff are encouraged not to bring personal items into the classroom area or unless the item will be needed throughout the day (e.g. a water bottle, keys etc.);
- All hard surface personal items brought into the classroom area by any individual (staff or child) must be cleaned and disinfected upon arrival.

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Common Areas:

- An Environmental Cleaning and Disinfecting Log (Appendix B) shall be kept for common building areas (e.g. entryways and hallways). This log must be accessible to all staff (e.g. posted on a wall, or in a binder kept in an accessible location);
- Cleaning and disinfecting routines shall be carried out consistently in accordance with the Environmental Cleaning and Disinfecting Log;
- All high touch areas, such as door knobs and light switches must be cleaned and disinfected at a minimum, twice daily and as often as necessary (e.g. when visibly dirty, or contaminated with body fluids);
- All low touch areas, such as floors must be cleaned and disinfected at a minimum, once daily and as often as necessary (e.g. when visibly dirty, or contaminated with body fluids).

Classrooms:

- Each classroom shall maintain its own Environmental Cleaning and Disinfecting Log (Appendix B). This log must be accessible to all staff working in the room (e.g. posted on the wall, or in a binder kept in an accessible location);
- Cleaning and disinfecting routines shall be carried out consistently in accordance with the Environmental Cleaning and Disinfecting Log;
- All fabric items, such as pillows, stuffed animals, puppets, and dress up clothes should be removed from the play environment;
- Ensure all toys and play materials in use are made of materials that can easily be cleaned and disinfected;
- Ensure that any tablets or other electronic devices shared between staff are disinfected between users;
- All high touch areas must be cleaned and disinfected at a minimum twice daily and as often as necessary (e.g. when visibly dirty, or contaminated with body fluids);
- High touch areas include but are not limited to:
 - shelves containing children's toys
 - frequently used toys
 - tables
 - chairs
 - light switches
 - door knobs

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- counter tops
 - sinks;
- All low touch areas must be cleaned and disinfected minimum once daily and as often as necessary (e.g. when visibly dirty, or contaminated with body fluids);
- Low touch areas include but are not limited to:
 - Floors
 - Door surfaces
 - Window ledges;
- Any carpeting or upholstered furniture in the room must be vacuumed daily and maintained in a sanitary condition;
- Tables, chairs and countertops used for food service/meal routines must be cleaned and disinfected immediately prior to use and again after food service has ended;
- Trash cans located within children's reach should have a lid.

Washrooms:

- For each washroom within the childcare centre a Washroom Environmental Cleaning and Disinfecting Log (Appendix C) shall be kept. This includes washrooms located within classrooms. This log must be accessible to all staff (e.g. posted nearby the washroom, or in a binder kept in an accessible location);
- Cleaning and disinfecting routines shall be carried out consistently in accordance with the Washroom Environmental Cleaning and Disinfecting Log;
- All washroom surfaces are considered high touch surfaces and must be cleaned and disinfected at a minimum twice daily and as often as necessary (e.g. when visibly dirty, or contaminated with body fluids);
- Trash cans located within children's reach should have a lid;
- A Public Health Hand washing poster must be posted in a conspicuous location near all sinks;
- If there is a change table located in the washroom a Public Health Diapering Routine poster must be posted in a conspicuous location near the change table;
- Only one cohort should access the washroom at a time and it is recommended that the facilities be cleaned in between each use particularly if different cohorts will be using the same washroom.

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Cots and Bedding:

- Each classroom shall maintain its own Cot and Bedding Environmental Cleaning and Disinfecting Log (Appendix D). This log must be accessible to all staff working in the room (e.g. posted on the wall, or in a binder kept in an accessible location);
- Cleaning and disinfecting routines shall be carried out consistently in accordance with the Cot and Bedding Environmental Cleaning and Disinfecting Log;
- In accordance with Ontario Regulation 137/15 33.1(2.C.i) All children who sleep while in attendance at the childcare centre shall be assigned a cot or crib, as developmentally appropriate. All cots/cribs once assigned to a child are to be labeled with that child's name;
- Cots must be stored in a manner that prevents the bedding and/or sleeping surface of one cot from touching the bedding and/or sleeping surface of any other cots (e.g. do not allow a blanket to hang over the side of a cot and make contact with the cot stacked below);
- If cots are to be stored in the classroom, cots must be covered with a large fabric sheet used solely for this purpose, this sheet must be laundered after each use;
- No items are to be placed or stored on top of cots (e.g. extra bedding, toys);
- Hard surfaces of cots must be cleaned and disinfected after each use (e.g. corners and legs of the cots that come into contact with other cots when stacked for storage);
- Hard surfaces of cribs must be cleaned and disinfected after each use; (e.g. corners and legs of the cots that come into contact with other cots when stacked for storage);
- Hard surfaces of cribs must be cleaned and disinfected after each use;
- Bedding should be removed from the cot/crib and laundered on a weekly basis, or more often as needed. Bedding must be laundered if switching between children;
- All surfaces of cots/cribs should be cleaned and disinfected on a weekly basis;
- If a child requires a personal comfort item for sleep (e.g. stuffy, special blanket etc.) the item should, be left at the childcare centre. This item should be laundered regularly, along with bedding and blankets;
- Personal comfort items (e.g. stuffy, special blanket etc.) must not be brought from home daily.

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Children's Hygiene Items:

- Toothbrushes and pacifiers must be individually labeled with the child's name, stored separately (not touching each other), and covered. These items must not be shared among children. The plastic handle of a toothbrush and/or pacifier must be washed in detergent upon arrival to the centre, and regularly after use;
- For diapering creams and lotions, each container/tube must be labeled with the child's name and disinfected upon arrival at the centre, and regularly after use. Never put hands directly into lotion or cream containers, use a tissue or single-use glove to remove product from the container and apply product to child's skin. If more product is needed, a fresh tissue or single use glove must be used;
- Only sealed packages of diapers should be accepted for use at the childcare centre. Upon arrival the package must be disinfected and labeled with the child's name.
- Clean cloth diapers may also be accepted for use at the childcare centre, these must be stored in a bin or basket labeled with the child's name. Soiled cloth diapers must be stored in a container with a lid, in a location that is inaccessible to children and sent home daily.
- Children's individual sunscreen containers must be labeled with the child's name and disinfected upon arrival at the centre, and regularly after use. When applying, or helping children to apply sunscreen staff must either use a pair of disposable gloves for each child or hand hygiene undertaken before and after each application. It is recommended that each child have their own sunscreen, however if the same container of sunscreen is to be used for multiple children the sunscreen must be dispensed onto a paper towel and then applied to the child;
- Staff should not clean or rinse wet or soiled children's clothing. Instead the wet or soiled item should be placed in a sealed plastic bag and sent home. Staff are required to practice hand hygiene if touching any wet or soiled item.

Outdoor Play Equipment:

- Prior to taking a group of children onto the playground, the staff responsible shall complete an Outdoor Play Equipment Environmental Cleaning and Disinfecting Log (Appendix E). This log must be accessible to all staff (e.g. in a folder near the playground door, or in a binder kept in an accessible location);
- Cleaning and disinfecting routines shall be carried out consistently in accordance with the Outdoor Play Equipment Environmental Cleaning and Disinfecting Log;
- It is preferred that climbers and other fixed play structures are not used;

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- If climbers and other fixed play structures are to be used, all high touch surfaces must be cleaned and disinfected immediately prior to use. If multiple groups of children are to use the structure, all surfaces must be cleaned and sanitized prior to use by each individual group. Surfaces are also to be cleaned more frequently, as necessary (e.g. visibly dirty, or contaminated with body fluids);
- It is preferred that each group of children has their own outdoor play equipment and toys, and that items are not shared between multiple groups of children. All items must be cleaned and disinfected prior to use. Items are also to be cleaned more frequently, as necessary (e.g. visibly dirty, or contaminated with body fluids);
- If outdoor play equipment and toys must be shared by multiple groups of children, all items must be cleaned and disinfected prior to use by each individual group. Items are also to be cleaned more frequently, as necessary (e.g. visibly dirty, or contaminated with body fluids).
- If using strollers for transportation it is recommended that the stroller be made from plastic that can be disinfected before and after each use;
- If using a stroller where children sit beside each other it is preferred family grouping be sat together, or if possible leave the seat empty;
- Where this is not possible, hand hygiene must be closely followed.

Toys and Play Materials:

- Please refer to the Toy and Play Materials Cleaning and Disinfection Policy and Procedure.

Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in **First Adventure Child Development Centres**.

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5. Toy and Play Material Cleaning and Disinfection Practices

Purpose

The purpose of this policy is to provide clear direction for the staff of **First Adventure Child Development Centres** to follow when cleaning and disinfecting children's toys and play materials. This policy is designed to help reduce risk of the spread of illness, including COVID-19.

Policy

In accordance with Ontario Regulation 137/15, s. 33, and Ministry of Education Operational Guidance During COVID-19 Outbreak Service Providers are required to have in place, policies and procedures in place with respect to sanitary practices. Due to the increased health risk associated with the spread of COVID-19, **First Adventure Child Development Centres** will follow routine toy and play material cleaning and disinfection in accordance with this policy, and document using the Toy and Play Materials Cleaning and Disinfecting Log (Appendix F).

Procedure

When carrying out any cleaning or disinfecting appropriate PPE must be worn in accordance with MSDS information for the particular product in use. Products selected for use in disinfecting must have a DIN. Hand hygiene must be completed before and after use of PPE, and upon completion of cleaning and disinfecting routines.

- All toys and play materials accessible to children must be cleaned and disinfected on a daily basis. Daily cleaning and disinfection are required whether or not children were observed to have touched the materials;
- Any toys which are mouthed, or otherwise come into contact with bodily fluids must be immediately removed and placed in a designated container away from children's reach until the item can be appropriately cleaned and disinfected;

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- Toy and play material cleaning and disinfecting must be carried out using either the three sink method, or a dishwasher. Large items may be cleaned and then sprayed with disinfectant left for the appropriate contact time;
- Staff are required to wear PPE as appropriate for the cleaners and disinfectants used;
- All toy and play material cleaning and disinfection routines are to be documented using the Toy and Play Materials Cleaning and Disinfecting Log (Appendix F);
- Use of sensory materials (e.g. shredded paper, soil, sand etc.) shall be limited to individual portions of materials offered to children. These materials are not to be shared between children. These materials are to be considered single use only, and shall be disposed of each day;
- If using “wet” sensory materials (e.g. individual bins of water, goop, slime etc.) care must be taken in disposing of these materials immediately after use by a single child, and that the surrounding surfaces are immediately cleaned and disinfected in order to remove any of the material that may have splashed in the surrounding area.
- All fabric toys and play materials are to be removed from the classroom and shall not be used;
- Any toys that children are likely to put in their mouths or hold against their faces should be removed (e.g. toy dishes or cutlery, binoculars, magnifying glasses);

Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in **First Adventure Child Development Centres**

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6. Physical Distancing and Daily Routines

Purpose

The purpose of this policy is to provide clear direction for the staff of **First Adventure Child Development Centres** to follow when planning and implementing daily routines, in order to support physical distancing. This policy is designed to help reduce risk of the spread of illness, including COVID-19.

Policy

Given the increased risk of infection due to COVID-19 routine practices must be modified in order to support physical distancing. It is recognized that maintaining physical distancing with young children is exceptionally challenging. Every effort will be made to maintain a warm and caring atmosphere. Physical distancing measures will be implemented in a positive manner so as not create undue stress, anxiety or disruption for children.

Procedure

Mealtimes

- Ensure that both staff and children perform diligent hand hygiene before and after eating
- Refrain from allowing children to self-serve food (often called “family style meals”). All food should be served by staff only, and all serving dishes kept covered and out of children’s reach when food is not actively being served;
- Practice extra vigilance when ensuring that children do not share food or eating utensils;
- Arrange mealtime seating to maximize physical distance between children, while still ensuring that all children can appropriately be supervised. (e.g. children

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seated at several different tables within clear sight of staff, rather than seated all together at one table);

- Refrain from allowing children to help prepare food or set the table;
- Refrain from allowing children to help clear each other's plates and other dishes. A child may clear their own dishes, or staff may do so.

Daily Schedules

- As much as possible, each group of children should be cared for by one staff person, who is assigned to the group. Staff rotation should be limited to required breaks and shift changes; (e.g. coverage for a lunch break, or afternoon shift changeover);
- Students completing post-secondary education placements will be permitted to enter child care settings and should only attend one child care setting and be assigned to one group of children;
- Students will also be subject to the same health and safety protocols as other staff members such as screening, and the use of PPE when on the child care premises, and must review the health and safety protocols
- Special Needs Resourcing (SNR) may be conducted in person and operators may use their discretion to determine whether services are essential and necessary;
- Scheduling of shifts will take place in accordance with the needs of the program, the centre and the additional cleaning and screening as per additional policies from Public Health, Hastings County and the Ministry of Education;
- Rescheduling of group events and/or in person meetings will take place in accordance with current public health policies – distancing and only when alternate mode is not appropriate. Virtual/online meetings will be the preferred procedure.

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- Staff should work at only one location;
- A record must be kept for contact tracing purposes of the name of each staff and time in/out of each room; This record must also reflect any essential visitors who enter into the room;
- Each group of children must be strictly separated:
 - Only one group of children should be in a playground area at any given time. If the playground is sufficiently large more than one group of children may be outdoors at the same time, providing a visual barrier(e.g. pylons or caution tape) to maintain a minimum of two meters separation between each group
 - If the playground (two groups cannot be outdoors on the same playground area together) use of indoor common spaces such as gyms or resource rooms should be considered as a secondary choice after outdoor play. The area must be thoroughly cleaned and disinfected between use by each group.
 - If multiple groups are to use the same gym or indoor area at the same time, a floor to ceiling divider must be in place to separate the groups.
 - Each group must have their own assigned indoor space, separated from all other groups by a physical barrier. The purpose of the barrier is to reduce the spread of respiratory droplets that are thought to transmit COVID-19 and to reinforce physical distancing requirements between cohorts. The physical barrier must begin at the floor and reach a minimum height of 8 feet to ensure that it will always be 12 inches taller than the tallest person in the facility. It must be as wide as the space/room will allow.
 - Consideration is be given to each group's transition schedules in order to eliminate contact between groups. (E.g. two groups meeting in the hallway as one group is going outside and the other is coming in.).

Classroom Set Up

- Play materials and “invitations to play” should be set up to encourage children to spread out as much as possible.
 - Consider offering multiple copies of popular items, and disperse them throughout the room

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- Set up multiple “points of interest” throughout the room
- Consider moving furniture to eliminate “bottle necks” and create more space for children to move, while maintaining distance.

Rest/sleep routines

- When setting up cots for sleep, cots will be placed with consideration to maximize physical distancing between children. Children are encouraged to lie on their cots in such a way as to alternate head to toe.

Staff Breaks

- Wherever possible, stagger breaks between staff to avoid multiple staff congregating in one room;
- If more than one staff are in a break room together physical distancing must be practiced; Staff must sit in designated areas in the staff rooms to ensure social distancing is maintained
- Staff will clean and disinfect surfaces as they leave (e.g. tables, chairs);
- Staff will to perform hand hygiene before/upon entering a break room and before/after eating.

Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in **First Adventure Child Development Centres**.

7. Hand Hygiene Best Practices

Purpose

The purpose of this policy is to ensure that all employees of **First Adventure Child Development Centres** are aware of, and adhere to hand hygiene best practices. This policy is designed to help reduce risk of the spread of illness, including COVID-19.

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Policy

All staff must be aware of, understand, and adhere to hand hygiene best practices. This is of extreme importance as proper hand hygiene is crucial in reducing the spread of illness, including the potential of COVID-19.

The supervisor shall routinely monitor staff and provide feedback as needed in order to ensure that the hand hygiene practices described within this policy are strictly adhered to.

Hand Hygiene is defined as hand washing, or hand sanitizing carried out as per the procedures described in this policy.

Procedure

- Public Health Hand washing posters must be posted in a visible location near all sinks;
- Public Health Hand Sanitizing posters must be posted in a visible location near where hand sanitizer is kept for use;
- Public Health Diapering Routine posters must be posted in a visible location near all diaper change tables.

Hand Hygiene shall be carried out routinely as described below:

- All staff must practice hand hygiene upon entry to the classroom, prior to engaging in play or any other activities;
- Hand hygiene must be practiced when hands are visibly dirty;
- Hand hygiene must be practiced **after**:
 - Sneezing, coughing, or blowing your nose
 - Using the washroom
 - Handling garbage
 - Handling raw foods
 - Outdoor play
 - Toileting/diapering routine

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- Handling soiled laundry or dishes
- Handling soiled toys or other items
- Coming into contact with bodily fluids
- Coming into contact with any soiled/mouthed items
- Gardening;

- Hands hygiene should be practiced **before and after:**
 - Preparing, handling, serving and eating food
 - Handling animals
 - Touching a cut or open sore
 - Changing diapers
 - Glove use
 - Dispensing/handling expressed breast milk
 - giving medication.

Hand washing shall be carried out in accordance with the following steps:

- Wet hands;
- Apply soap;
- Lather for at least 20 seconds. Rub between fingers, back of hands, fingertips, under nails;
- Rinse well under running water;
- Dry hands well with paper towel;
- Turn taps off with paper towel.

Hand Sanitizer shall be used in accordance with the following steps:

- Apply hand sanitizer (minimum 60% alcohol-based);
- Rub hands together for at least 15-20 seconds (follow manufacturer's directions if different);
- Work sanitizer between fingers, back of hands, fingertips, and under nails;
- Rub hands until dry;
- NOTE: If hands are visibly dirty, hand sanitizer will not clean sufficiently. If hands are visibly dirty they must be washed with soap and water.

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Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in First Adventure Child Development Centres.

8. Use of Personal Protective Equipment

Purpose

The purpose of this policy is to ensure that all employees of First Adventure Child Development Centres are aware of appropriate use of Personal Protective Equipment (PPE), to ensure employee safety and to help reduce risk of the spread of illness, including COVID-19.

Policy

First Adventure Child Development Centres shall provide their employees with all PPE required to safely carry out their required job duties. This includes but is not limited to, routine cleaning, mixing of disinfectant solutions, changing diapers, health screening, and temporarily supervising a symptomatic child.

All employees shall receive training on proper and safe use of PPE.

Procedure

- Nitrile, vinyl or similar material disposable gloves shall be available in sizes appropriate for staff who will be using them;
- Eye protection shall be available for staff use;
- Disposable surgical/procedure masks shall be available for staff use;
- Gowns shall be available for staff use.
- Surgical mask and eye protection (e.g. face shield) must be worn by staff while indoors

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- Exceptions to wearing masks indoors could include circumstances where physical distance of at least 2-metres can be maintained between individuals (i.e. during sleep time, when in office)
 - Staff may remove their mask and eye protection while outside providing they are able to maintain physical distancing of 2-metres
 - Please note that if transporting children safety is key, face shields should not be worn while driving if you have impaired vision and use eye protection, your insurance company should be contacted prior to wearing PPE while driving to ensure safety requirements are met for driving/insurance purposes
 - All children grades 4 and above are required to wear a non-medical or cloth mask while inside the child care centre including in hallways
- Glove use is required when carrying out any of the following:
 - Performing first aid
 - Changing a child's diaper or assisting a child with toileting
 - Routine cleaning and disinfecting activities
 - Cleaning bodily fluids
 - Cleaning and disinfecting PPE
 - Handling toys, bedding or other items which may have come into contact with bodily fluids;
 - Eye protection and gloves are required when mixing disinfectants (use PPE as required in accordance with MSDS);
 - Mask, eye protection, gown and glove use is required when caring for a child who shows symptoms of illness, or when cleaning blood or body fluid spills if there is risk of splashing;
 - Personal Protective Equipment is expected to be worn in accordance with this policy.

Additional Considerations:

- If using reusable gowns, the gown must be laundered after each task (i.e. after caring for a child who is ill), or when it becomes visibly soiled.
- Reusable gowns must be washed in a hot water cycle and dried in the dryer on the hottest setting.

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- If gowns are homemade, the CDC recommends using either polyester or polyester-cotton blend, see link for more details <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/isolation-gowns.html>
- Please display the following poster that assists staff in donning and doffing gowns in all areas where the process would take place <https://www.publichealthontario.ca/-/media/documents/L/2013/lanyard-removing-putting-on-ppe.pdf?la=en>

Policy and Procedure Review

This policy and procedure must be reviewed and signed off by all employees prior to commencing work in **First Adventure Child Development Centres**

Appendix A. Screening Tool

COVID-19 Screening Tool

Parents and caregivers should review the following checklist with their child before sending them to school each day.

Does your child have any of the following:

**Fever
37.8°C or higher**



Yes
 No

**New or
worsening cough**



Yes
 No

**Shortness
of breath**



Yes
 No

**Sore throat,
trouble swallowing**



Yes
 No

Runny nose



Yes
 No

**Loss of taste
or smell**



Yes
 No

Not feeling well



Yes
 No

E.g., chills, fatigue, pink eye, lack of appetite

**Nausea, vomiting,
diarrhea**



Yes
 No

Not related to seasonal allergies or other known conditions



In the past 14 days, has the child had close contact with a confirmed case of COVID-19?

Yes
 No



Have you or your child returned from travel outside of Canada in the past 14 days?

Yes
 No



If you answered **yes** to any of these questions, stay home and self-isolate right away. Call your health care provider or go to an assessment centre to find out if you need a COVID-19 test.

Covid-19 Child Care Screening Tracking Tool

Supplement to Appendix A – Child Care Screening Tracking Tool

Date: 2020-08-20

Location: [Click or tap here to enter text.](#)

First and Last Name (person being screened)	Child	Staff	Visitor	Screening Tool			Visual Check Before Entry		Time In	Time Out	Notes	Staff Initials
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Appendix B – Environmental Cleaning and Disinfecting Log

Staff : _____
Print First and Last Name

Initials

Staff : _____
Print First and Last Name

Initials

Classroom/Area: _____

Week of: _____

Please indicate completion of each routine cleaning item/location by initialing in the appropriate space below.

Twice Daily:

Item/location	Monday		Tuesday		Wednesday		Thursday		Friday	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Door Knobs										
Sinks										
Counters										
Tables										
Chairs										
Hand rails										
Shelving										
Light switches										
Trash can										

Once Daily:

Item/location	Monday	Tuesday	Wednesday	Thursday	Friday
Floor					
Carpet vacuumed					
Classroom door					
Cupboard doors					
Windows within reach					

Please note: Any surface or item that becomes dirty or comes in contact with any bodily fluid including saliva or nasal mucous must immediately be cleaned and disinfected.

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Appendix C – Washroom Environmental Cleaning and Disinfecting Log

Staff : _____
Print First and Last Name Initials

Staff : _____
Print First and Last Name Initials

Washroom Location: _____

Week of: _____

Please indicate completion of each routine cleaning item/location by initialing in the appropriate space below.

Twice Daily:

Item/location	Monday		Tuesday		Wednesday		Thursday		Friday	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Door Knob(s)										
Sink(s)										
Counter(s)										
Mirror(s)										
Toilet										
Cupboard doors										
Diaper change table*										
Trash can										
Floor										

*Diaper change table cleaning is in addition to the cleaning which takes place as part of the diaper change routine.

If multiple groups of children are using a washroom, high touch surfaces (e.g. tap handles, toilet handles, door knobs etc.) are recommended to be disinfected between groups. Please note: In addition to the routine cleaning listed in this log, any surface or item that becomes dirty or comes in contact with any bodily fluid must immediately be cleaned and disinfected.

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Appendix D – Cot and Bedding Environmental Cleaning and Disinfecting Log

Staff : _____
Print First and Last Name Initials

Staff : _____
Print First and Last Name Initials

Classroom: _____

Please indicate completion of each routine cleaning item/location by initialing in the appropriate space below.

Week of: _____

Item	Mon	Tue	Wed	Thu	Fri
Hard surfaces of cots/cribs cleaned and disinfected after each use					
Bedding laundered weekly and all cot surfaces disinfected (indicate day)					
Personal toys laundered weekly (indicate day)					
(If accessible to children) Cots covered for storage, covering changed after each use					

Week of: _____

Item	Mon	Tue	Wed	Thu	Fri
Hard surfaces of cots/cribs cleaned and disinfected after each use					
Bedding laundered weekly and all cot surfaces disinfected (indicate day)					
Personal toys laundered weekly (indicate day)					
(if accessible to children) Cots covered for storage, covering changed after each use					

Week of: _____

Item	Mon	Tue	Wed	Thu	Fri
Hard surfaces of cots/cribs cleaned and disinfected after each use					
Bedding laundered weekly (indicate day)					
Personal toys laundered weekly (indicate day)					
Cots covered for storage (if accessible to children)					

Please note: In addition to the routine cleaning listed in this log, any surface or item that becomes dirty or comes in contact with any bodily fluid must immediately be cleaned and disinfected.

**Hastings County
Childcare Infection Control Policies and Procedures**

Appendix F – Toy and Play Materials Cleaning and Disinfecting Log

Staff : _____
Print First and Last Name _____
 Initials

Staff : _____
Print First and Last Name _____
 Initials

Classroom: _____

Please indicate completion of cleaning and disinfection of each toy/play material by listing the item, and initialing in the appropriate space below.

Monday Date: _____

Toy/Material	Initials	Toy/Material	Initials

Tuesday Date: _____

Toy/Material	Initials	Toy/Material	Initials

Wednesday Date: _____

Toy/Material	Initials	Toy/Material	Initials

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Thursday Date: _____

Toy/Material	Initials	Toy/Material	Initials

Friday Date: _____

Toy/Material	Initials	Toy/Material	Initials

If more space is needed to list toys and play materials, this log may be edited in order to add additional rows.

Please note: In addition to the routine cleaning listed in this log, any toy or other item that mouthed, becomes dirty or comes in contact with any bodily fluid must immediately be cleaned and disinfected.