



McNicoll Avenue Child Care Program

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McNicoll Avenue Child Care Program's
**COVID-19
PANDEMIC
RESPONSE PLAN**

Version 2.7
As of March 21, 2022

McNicoll Avenue Child Care Program
COVID-19 PANDEMIC RESPONSE PLAN

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Revision History:

| Revision | Date | Description |
|----------|-------------------|---|
| 1.0 | August 7, 2020 | Updated – “clusters” of suspected cases is now 2 or more with symptoms within 48 hours (pg. 18) + added “what to do” to share with parents of children excluded from care (pg. 20) |
| 1.1 | August 27, 2020 | Added Ministry’s Operational Guidance revisions – August 2020 - Version 3: <ol style="list-style-type: none"> 1. Revised cohorts to maximum group size 2. ECE students now allowed & must review Health and Safety protocols 3. Revisions to mask use: all adults always required to wear medical masks and eye protection indoors 4. Updated guidance around when an individual does not pass screening (does not need to be reported to TPH) 5. Revisions to SO reporting 6. Revisions to parent fees – 14 days notice to accept a space or withdraw 7. Staff training clarified to be at least once 8. Revised guidance to remove the use of receiving blankets while holding infants and toddlers |
| 1.2 | August 28, 2020 | Revised Serious Occurrence to reflect once again to report a S.O. for a suspected case of COVID for individuals exhibiting 1 or more symptoms (no longer 2 or more symptoms) |
| 1.3 | August 29, 2020 | Inserted updates from Public Health Guidance document revised Aug. 28, 2020, to include: <ol style="list-style-type: none"> 1. Individuals demonstrating symptoms of illness should be referred for COVID testing 2. Attendance reporting must indicate when a staff or student is absent – staff now required once again to sign on the attendance log located at the screening table and indicate what room they are working in / or screener role 3. Practice physical distancing as best as possible with larger group sizes 4. Insert policies & procedures that addresses the handling of food sent from home (Infants) – food packed to require as little handling by staff as possible. 5. Launder blankets/sheets weekly and when soiled. Blankets/sheets must be assigned to an individual child, stored separately to prevent accidental sharing and in a manner that prevents contamination. 6. Shared outdoor spaces may be used if physical distancing is always maintained between groups 7. All adults always required to wear a surgical (medical) mask and eye protection (face shield) while inside. Use of masks and eye protection not required for staff outdoors if physical distancing can be maintained. 8. Revision to once again inform parents of children who were exposed to an ill child and advise them to monitor their child for symptoms. 9. Revised Public Health outbreak guidelines to include 1 symptomatic lab confirmed case of COVID = confirmed COVID outbreak + reporting to TPH for probable cases of COVID |
| 1.4 | October 27, 2020 | Revisions added to include: Updated MOH COVID-19 reference document or COVID symptoms (Version 7) Removed requirement for staff to cohort for 7 days at a time (TPH) Updated with TPH checklist questions for children vs staff Updated hours of operation Added Appendices’ Section with sample revised forms |
| 1.5 | November 12, 2020 | Updated revisions based on Version 4 of Ontario’s Operational Guidance Document: <ul style="list-style-type: none"> • emphasis on interactions with multiple groups be avoided as much as possible • update on expectations to apply for a VSC if one cannot be obtained in a reasonable amount of time • add requirements on the use of PPE to these policies + info on record keeping & communication plans • revisions around cleaning spaces and equipment to align with practices in schools: including frequency and timing of cleaning and disinfection areas to clean and /or disinfect, choice of cleaning products, child safety, staffing, signage, and PPE used when cleaning • keep an inventory of items that have been removed & are in storage (rugs, fabric toys etc.) • keep a cleaning log • clarifications on mask/eye protection requirements for adults/children + how to properly wear these • revised guidance on screening practices to encourage the use of the provincial screening tool and to remove the requirement to maintain records of daily screening • revised guidance on protocols for symptomatic, testing and reporting advice + how to treat siblings of a symptomatic individual • revised guidance on SO reporting (remove SO’s for suspected cases) • revised definition of an outbreak (=2 or more lab confirmed COVID cases in children, staff) • additional guidance on use of hand sanitizer (60-90%) at entrances and exits & not within reach of children • revised guidance to remove the requirement to clean and disinfect outdoor play structures between each group and focus on hand hygiene • revised guidance on the inclusion of Special Needs Resource staff on site if necessary |
| 1.6 | December 16, 2020 | Updated revisions to screening checklist from TPH as of Dec. 7, 2020, to include: The main changes to screening include: <ul style="list-style-type: none"> • Removal of the 24-hour period for symptom resolution • Exclusion based on only one new or worsening symptom • Addition of exclusion now for siblings and other children in the same household • Inserted new screening forms and returning to childcare forms (see Appendices) |
| 1.7 | February 17, 2021 | Updated revisions as per Ministry guidelines indicated on Feb. 12, 2021, Memo to include Highlighted in yellow <ul style="list-style-type: none"> • Wear both shields/goggles and mask at all times except when eating or when outdoors when physical distancing cannot be maintained • Preschoolers will now be encouraged to wear masks inside and outdoors when distancing is not possible |

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| | | <ul style="list-style-type: none"> Updated checklists, postings (see appendices) (as of February 2021) |
| 1.8 | March 11, 2021 | <p>Updated revisions as per Ministry guidelines indicated on March 11, 2021, and TPH Checklists dated February 23, 2021. Highlighted in yellow</p> <ul style="list-style-type: none"> Medical masks are mandatory for all children grades 1 and up, and strongly encouraged for children younger than grade 1 Updated guidance on face coverings outdoors (to reflect new mask recommendation for children over 2) Additional guidance around screening practices to emphasize single symptom exclusion Household contacts of symptomatic individuals or individuals awaiting test results must not attend childcare Guidance around confirmation of self-screening Additional guidance around isolation practices: due to variants of concern, asymptomatic household contacts of symptomatic individuals are required to quarantine Revised guidance on staff training of COVID health and safety measures Additional guidance around the use of gymnasiums for physical activity |
| 1.9 | March 22, 2021 | <p>Updated revisions as per TPH guidelines as of Mar. 22, 2021. Highlighted in yellow</p> <ul style="list-style-type: none"> Addition of "COVID-19 Absence and Outbreak Fee Policy – v 1.0" Additional guidance for all cases of positive COVID-19 cases at the childcare centre (staff, students, children) (from Feb 12, 2021, TPH COVID-19 Guidance document) Added guidance re: how to self isolate and how to care for self-isolating or COVID-19 positive child (TPH website as of March 22, 2021) Replaced Decision Tool for Child / Staff/Visitor - now dated March 22, 2021 |
| 2.0 | May 3, 2021, | <ul style="list-style-type: none"> Added guidance regarding reporting positive cases to TPH and filing serious occurrences Added checklist for reporting Added TPH's updated Return to Childcare Confirmation form (updated March 29, 2021) Removed references to McNicoll's Parent and Child Medical Clearance form as it is redundant Added clarity around when TPH must close a classroom vs. a whole site Added vaccination recommendation |
| 2.1 | June 25, 2021 | <ul style="list-style-type: none"> Updated COVID Staff Screening Questionnaire Checklist (now includes new or worsening pink eye or headache) dated June 21, 2021 Updated COVID Child Screening Questionnaire Checklist dated June 18, 2021 Removed requirement to do COVID-19 online self-assessment for staff exhibiting symptoms Revised guidance for symptoms after receiving COVID-19 vaccination Removed screening-related text and replaced it with screening checklists and flow chart Simplified language around food service/handling |
| 2.2 | July 5, 2021 | <ul style="list-style-type: none"> Updated TPH Attestation Return to School form – revised as of July 5, 2021 |
| | July 28, 2021 | <ul style="list-style-type: none"> Updated TPH Staff/Visitor Screening Checklist – updated July 28, 2021 |
| | August 12, 2021 | <ul style="list-style-type: none"> Updated TPH Child Screening Checklist – updated Aug. 3, 2021 |
| 2.3 | September 3, 2021 | <ul style="list-style-type: none"> Include reference to vaccine disclosure policy Updated TPH child screening checklist – updated Sept 1, 2021, with shortened list of symptoms Updated TPH staff screening checklist – updated Sept 2, 2021, with shortened list of symptoms Removed outdated Decision Guide Tools for Screening and Directing Cohorts to Self-Isolate Staff will continue to screen children at this time and escort children to their classrooms Underscoring need to follow up with ALL unplanned/unexplained child and staff absences – must have comprehensive absence reporting in all cases Cohort list must be made available to TPH for contacting tracing Staff should still remain with one cohort consistently and NOT move from room to room as much as possible; physical distancing should take place if a different staff is required to supervise a cohort Masks are required for staff outdoors where physical distancing cannot be maintained Masks and face shield/goggles are still required for staff indoors except while eating or in a private area alone Revised guidance around masking for children ages two and older Family-style meals are permitted provided proper food handling procedures are followed Staff can only remove their masks to eat and then must immediately put their mask back on Hand hygiene must be performed before and after using outdoor play structures Singing is permitted indoors if staff masking, and physical distancing is followed Isolation and exclusion procedures to be followed in accordance with screening checklist/flow chart Revised hours of operation (now 7:45-5:45) |
| 2.4 | October 13, 2021 | <ul style="list-style-type: none"> Revised guidance re: vaccination status and cohort dismissal Defined "fully-vaccinated" in accordance with TPH Removed references to the Medical Clearance Form |
| 2.5 | January 5, 2022 January 12, 2022 | <ul style="list-style-type: none"> Removed portions to streamline this document Removed appendices as screening tools are changing too often |
| 2.6 | February 14, 2022 | <ul style="list-style-type: none"> Updated this document regarding Feb 14th memo from Bofofo Kwamena Director of Child Care Quality Assurance and Licensing which includes changes in: <ul style="list-style-type: none"> Reporting COVID: now there is an end to routine notification of confirmed cases to families in schools and childcare settings Suspension of public reporting of COVID cases in childcare Removed from this policy: <ul style="list-style-type: none"> an explanation of how confirmed or suspected cases of COVID are reported and how confirmed cases or an outbreak of COVID would be communicated to parents & to notify parents of any ongoing changes to these policies |

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| | | <ul style="list-style-type: none"> • Still required to report: <ul style="list-style-type: none"> - Program closures related to COVID where they result in an “unplanned disruption of service” & only closures impacting the entire centre (not just one room) - Serious Occurrence reporting still required if we close voluntarily or when TPH has ordered the closure • Add Immunization Disclosure Policy to this document • Update staff option to use non-fitted N95 masks • Update changes to monitoring and responding to reports of COVID symptoms and to change to reporting and Serious Occurrence reporting to use the provincial screening tool and the Interim Guidance for Schools and Child Care Omicron Surge document for symptom screening, monitoring, and isolation procedures • Update on conditions for permitted physical activities • Change to space set up and physical distancing on conditions for permitting singing indoors |
| 2.7 | March 14, 2022 | <p>Re: Memo from Holly Moran on Lifting of Health and Safety Measures in Child Care</p> <p>As of March 14th:</p> <ul style="list-style-type: none"> • Revoked COVID immunization policy – kept but italicized portions that are revoked – Board to decide on remainder of policy <p>As of March 21st:</p> <ul style="list-style-type: none"> • No more masks or eye protection required for staff and students (unless returning from international travel for 14 days are to wear a mask at school). • No more cohorts or distancing both indoors and outdoors • No more on-site screening but staff and families are required to continue to self-screen at home. |

INTRODUCTION and PURPOSE

This document was created in response to the COVID-19 Pandemic. Part of the requirements to re-open McNicoll Avenue Child Care Program after emergency closures were ordered in Ontario on March 13, 2020, was to establish a pandemic response plan. This Covid-19 Pandemic Response Plan and Operational Practice is written in accordance with the Toronto Public Health Guidance for Child Care Centres and the Ministry of Education's Operational Guidance During COVID-19 Outbreak/childcare Re-Opening documents. These documents are revised when required to ensure protocols are up to date and our practices and protocols will follow current Toronto Public Health Guidance.

The purpose of this document is to keep all persons entering the facility safe and to outline all required procedures to be strictly implemented and adhered to daily. This document also outlines what to do in the event of exposure to COVID-19 by a child, parent, or staff member at the site.

We are closely monitoring COVID-19 and base our response and actions on recommendations of regulating bodies. While infection prevention and control (IPAC) has always been an integral part of our childcare culture, we have adapted and enhanced our policies and procedures in response to COVID-19, to mitigate risk and ensure the health and safety of all. This document will be regularly reviewed to ensure protocols are up to date and the current document posted on our website. Parents will be notified of changes.

All childcare employees and parents of children registered at McNicoll Avenue Child Care Program will be required to read and sign off on the policies and procedures in this document prior to enrolling in this Centre.

COMMUNICATIONS PLAN

Information Sharing

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

Parents will initially receive a copy of the Centre Covid-19/Pandemic Response Plan which includes the policies and procedures regarding health and safety protocols to Covid-19 and are required to attest that they have read and agree to abide by our Pandemic Response Plan. This document is revised when updates are received, and the current Pandemic Response Plan is posted on our website.

Limited In-Person Communication

Prior to April 4, 2022 the Centre sent weekly updates documenting activities and learning that happened in the program. Parents received written daily reports via email for Infant and Toddler children until restrictions were lifted. Parents of Preschool children were verbally informed daily at pick up time as to how their child ate and slept.

As of April 4, 2022 measures were lifted to allow parents to enter the premises. At this time, we ask that only 1 parent per child enters the building and they are asked to wear a mask when inside the centre.

COVID-19 Absence and Outbreak Fee Policy (as of January 2022)

If a child's MACCP room or the entire centre is closed due to COVID as determined by TPH or by decision of the Board of Directors, fees will be credited toward future payments for up to 10 days. Fees will only be credited for the days of the closure that the child would have otherwise been attending. If an enrolled child develops symptoms of COVID-19 during closure period and must remain isolated beyond the MACCP room or centre closure, fees will be credited toward future payments for up to an additional 3 days beyond the credit for the closure.

OPERATIONAL GUIDANCE

Changes in Program Delivery, Closures and Hours of Operation

McNicoll Avenue Child Care Program may need to change services or close during a pandemic for the following reasons:

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

The Centre was operating with reduced hours to assist with increased staffing requirements and to allow time for employees to complete all the requirements around additional cleaning and sanitizing.

Our hours of operation were 7:45 AM - 5:45 PM since September 7th, 2021.

As of April 4, 2022 the centre returned to the regular hours of operation pre-COVID: 7:30 AM – 6:00 PM.

Regular Late fee policy/fine will apply after 6:00 p.m.

Maximum Cohort Size and Ratio

A cohort is defined as a group of children and the staff members assigned to them.

Maximum cohort size for each room in the Centre is decided by the Ministry of Education and as of September all centres may return to maximum group sizes as set out under the CCEYA and our own licensed capacity.

Maximum capacity rules do not apply to Special Needs Resource staff on site (i.e., if they are not counted towards staff to child ratios, they are not included in the maximum capacity rules).

Each cohort will stay together throughout the day and as much as possible will not mix with the other groups.

As of March 21, 2022 the Ministry removed the requirement for separating children and staffing into cohorts.

Ratios set out under the Child Care and Early Years Act (CCEYA) must be maintained. The Executive Director/designate may increase staff to child ratio if the cohort does not exceed the licensed capacity of each room.

Mixed age grouping is permitted as set out under the CCEYA as Director/designate approval has been granted on the childcare licence.

*Reduced ratios (during arrivals, sleep time and departures) are permitted as set out under the CCEYA. Reduced ratios are not permitted at any time for infants.

September 2020: Group Size / Ratios – up to licensed capacity as follows:

| Program | Maximum Number of Children in a Room | Ratio of employees to Children | *Reduced Ratios |
|-----------|--------------------------------------|--------------------------------|--------------------|
| Infants | 10 | 3:10 | 3:10; no reduction |
| Toddler | 15 | 1:5 | 1:8 |
| Preschool | 24 | 1:8 | 1:12 |

Changes to group size will be in accordance with Provincial and Ministry directives. **Staff are no longer required to practice physical distancing.**

Scheduling Staff

Up until March 2022, staff were assigned to only one cohort and were to refrain from entering any other classrooms throughout the day as much as possible. **As of March 21, 2022 the Ministry of Education removed the requirement to maintain cohorts.** ECE student teachers are allowed on site to complete their practicums and will no longer be assigned to a specific cohort.

Changes to Staff Duties and Schedules

To meet the needs of the Centre during a re-opening period, temporary changes to employee duties and schedules may need to be considered. With reduced staff, for example, increasing work hours within the limits of the Employment Standards Act may be required. Additional job duties may also be assigned within scheduled shifts while other regular duties may be ceased or amended in the interim.

Emergency Contacts List

The Centre will keep an up-to-date hard copy list of contact information for staff, parents, or alternates in the classroom Emergency Card Binder. The emergency staff phone list will include the contact information for Toronto Public Health, City of Toronto, and Ministry officials. Prior to admission and when a child changes rooms, MACCP will ensure parents have updated the Emergency Contact information for children to ensure the designated person is available during the pandemic.

Licensed Child Care Spaces within the Building

MACCP is committed to working in collaboration with other tenants at 155 McNicoll to ensure that we can open and operate with appropriate health and safety policies and procedures in place. We will share our enhanced health and safety measures, policies, and procedures with management of Lumenus (formerly known as Adventure Place) to facilitate transparency of expectations.

Staff Training

MACCP will ensure that all new and returning employees review the training modules provided by Toronto Public Health and Toronto Children's Services prior to commencing employment. The Director/designate is required to confirm with Toronto Children's Services that all staff has completed the training modules.

These COVID-19 Training Modules & Resources include training on:

- Infection prevention and control (IPAC)
- Personal Protective Equipment (PPE)
- Childcare centre screening
- Exclusion of an ill child and COVID-19 case
- Childcare centre Environment and interactions

<https://www.toronto.ca/community-people/community-partners/early-learning-child-care-partners/training/reopening-of-early-learning-child-care/>

Additionally, employees will be trained on this Centre's Covid-19 Response Plan which includes health, safety, and other operational measures prior to returning to working with children.

All employees and Board Members are required to obtain Vulnerable Sector Checks in accordance with the CCEYA; however, due to significant backlogs in processing time, applicants may have to wait longer than usual for their clearance after a check has been submitted. In the case that a check has not been processed by the time an applicant is posed to start, the applicant must submit proof to the Director that an application has been submitted and must sign an offence declaration attesting that they have not been convicted of any crimes. The staff will not be left unsupervised with the children until they have received a clear VSC.

Occupational Health and Safety

The Centre has an obligation to protect their workers from hazards in the workplace as set out in the Occupational Health and Safety Act (OHSA) and its regulations as well as the directives coming from the Chief Medical Officer of Health. MACCP employees may raise any concerns to the:

- Executive Director/designate
- Health and Safety Rep

- Board of Directors

Employees have participated in a COVID-19 Risk Assessment for the environment prior to returning to work at the childcare centre. The following was considered:

- What risks do we have?
- How can we eliminate risks?
- How is work performed?
- What strategies or barriers can we implement against COVID19?

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

- Reporting illness
- Asking for support
- Expressing concerns

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

ENHANCED HEALTH AND SAFETY PROTOCOLS/PROCEDURES

Daily Screening for Staff and Children

As of March 21, 2022 there is no longer any designated screener at the door. However, all parents and staff entering the premises is required to self-screen using the current applicable TPH COVID-19 Screening Checklist for children/ students/adults. Parents must monitor their children for any signs of ill health. The teachers will continue to monitor your children for symptoms throughout the day. If a child, staff, or visitor answers “yes” to any of the screening questions, then they will be instructed NOT to come to the centre and will be instructed to follow the current TPH advice.

Required Screening Posters

All Screening Posters provided by Toronto Public Health are posted on the exterior entrance and the interior of the building, visible to all individuals entering the Centre.

Documentation

Health Screening Records

Documentation of the information received from parents and staff during the screening process will be recorded and stored in each child’s/staff’s file. The Director/designate or MACCP’s Health and Safety Rep. are responsible for ensuring that this information is managed and recorded as required. If a child presents with COVID-19 symptoms at any time, this information must also be documented in the child’s file and the child’s Classroom Daily Communication Logbook.

Attendance Records

MACCP will continue to keep an attendance record of the children’s daily arrival and departure times. MACCP is no longer required to keep daily records of any visitors entering the facility.

Attendance reports must indicate when a student is absent; all unplanned absences will be followed up on and any symptoms noted. MACCP is no longer required to keep an attendance log, however until informed otherwise, the prior records will be kept on premises for one year and made available to TPH if/when required.

Returning to Care

Staff and Parents must submit Toronto Public Health's "Back to Child Care - Confirmation Form"

<https://www.toronto.ca/wp-content/uploads/2021/06/98ef-Attestation-for-Return-to-Child-Care-Day-Camp-School-Parents.pdf> prior to returning to the centre after exclusion. This signed documentation is to confirm that they have completed all required isolation periods and are cleared to return to the childcare centre. To ensure the continuing safety of MACCP families and employees, no child excluded due to COVID-19 symptoms may return to the centre without this signed form.

INFECTION PREVENTION AND CONTROL MEASURES

Infection prevention and control measures to help reduce the risk COVID-19, are as follows:

- A Risk Assessment has been completed identifying all possible COVID-19 hazards and action steps have been implemented to decrease the spread
- Policies and procedures have been developed specific to COVID-19 to increase the health and safety of children, staff, and families
- A screening table is available at the playground entrance (Door #7) of the childcare centre
- Door #7 will continue to be used for childcare parents and staff as entrance/exit to limit the contact with other tenants in the building
- The use of PPE is no longer required for staff or children; however, masks are still encouraged to be used while we're still in the pandemic
- All individuals are expected to complete the TPH health screen checklist prior to entry into the Centre
- No longer required to maintain attendance list of people who have entered the Centre and monitor for trends
- Visitors are now permitted to enter, but MACCP staff will monitor the hallways to avoid congestion
- At this time only one parent per child is allowed to enter the centre
- Children and staff will be excluded from the Centre if they develop any 1 or more symptoms related to COVID-19, as per screening checklist
- Staff will monitor children to encourage physical distancing whenever possible, infection prevention and control practices are prioritized
- Staff will receive thorough enhanced infection prevention and control, and health and safety. Training will be updated as necessary and provided to ensure best practices and consistency
- Handwashing and hand sanitizing will be monitored
- Regular communication on health and safety and infection prevention and control practices will be shared with families
- Procedures will be updated and revised regularly to ensure best practices in accordance with Public Health authorities
- The slow re-introduction of special events and special guests will be considered
- All staff meetings and Board meetings will be carried out via Zoom until further notice.

Protecting yourself from COVID-19

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

1. Risk Assessment
2. Hand Hygiene
3. Use of Personal Protective Equipment (PPE)
4. Control of the Environment
5. Vaccination

1. Risk Assessment

Perform a risk assessment before each child interaction:

- What will you be doing? Is there a risk of exposure to the COVID-19 virus?

- Does the child have symptoms of a respiratory infection?
- What kind of contact/interaction will you be having with the child?
- Is there a way to maintain a 2-metre distance with the child during the interaction?
- Is there a way to avoid contaminating your hands during the interaction?

2. Hand Hygiene

MACCP is committed to providing a safe and healthy environment for children, families, and employees. The Centre will take every reasonable precaution to prevent the risk of communicable diseases within our childcare facility. Hand hygiene is an important element of infection control in childcare centres. During a pandemic, hand hygiene is to be reinforced and practiced by staff, children, parents or guardians, and visitors.

Increased hand washing monitoring will be implemented at the Centre and the handwashing procedure will be reviewed immediately with staff or children not following the appropriate handwashing procedures. Hand hygiene posters (handwashing and hand sanitizing) will be posted at the entrance and in areas where they are likely to be seen to remind staff and children to practice hand hygiene frequently.

Washing hands with plain soap and water are recommended as the mechanical action is effective at removing visible soil as well as microbes. In instances where handwashing sinks are not available, supervised use of alcohol-based hand sanitizers will be used.

Ensure that employees and children are always practicing good hand hygiene when hands are visibly dirty and/or after:

- Sneezing, coughing, or blowing your nose
- Using the washroom
- Handling garbage
- Handling foods
- Outdoor play
- Toileting/diapering routine
- 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

Hands will be cleaned frequently. At a minimum, practice hand hygiene:

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

Additionally, hands will be cleaned using soap and water or hand sanitizer before and after:

- Glove use
- Dispensing/handling expressed breastmilk
- Before and after giving medication
- Sensory play activity

When hands are visibly soiled, follow these steps for cleaning hands:

- Wet hands
- Apply soap
- Lather for at least 15 seconds (Hum the "Happy Birthday" song twice!). Rub between fingers, back of hands, fingertips, under nails
- Rinse well under running water
- Dry hands well with a paper towel

- Turn taps off with a paper towel

When hands are not visibly soiled, follow these steps for sanitizing hands:

- Apply hand sanitizer (70-90% alcohol-based)
- Rub hands together for at least 15 seconds
- Work sanitizer between fingers, back of hands, fingertips, and under nails
- Rub hands until dry

Monitoring Hand Hygiene

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

Hand Sanitization

When your hands are not visibly dirty, a 70-90% alcohol-based hand sanitizer can be used. Hand sanitizers can only be used on Toddler and Preschool children with signed consent on file and must always be used under adult supervision. Adults must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity. Hand sanitizer will be available at the entrance/exit doors and inside the classroom doors and children's washroom at all times and kept out of reach of children.

Respiratory Etiquette

Germs, such as influenza and cold viruses, are spread by coughing and/or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs. Keep your distance (preferably more than 2 metres/6 feet) from people who are coughing or sneezing.

Follow these steps to stop the spread of germs:

- If you have a tissue, cover your mouth and nose when you cough, sneeze, or blow your nose
- Put used tissues in the garbage immediately
- If you do not have a tissue, cough, or sneeze into your sleeve, not in your hands
- Clean your hands with soap and water or hand sanitizer (70-90% alcohol-based) regularly and after using a tissue on yourself or others

3. Personal Protective Equipment (PPE)

PPE creates a physical barrier that protects an employee's own tissue from exposure to infectious materials and from transmission resulting from contact with others. The type of PPE is dependent on the nature of the interaction with others.

Where PPE is no longer required for staff to wear, staff may choose to continue wearing PPE. The Ministry will continue to provide masks and face shields for those that want to continue to wear them.

Common PPE that will be provided to MACCP staff include:

- Gloves
- Facial Protection (masks and face shields)

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

- Ask yourself: What you will be doing, is there a risk of exposure to the COVID-19 virus?
- A particular PPE item should not be worn when it is not needed
- Proper hand hygiene will be the most important way to protect yourself from the COVID-19 virus
- Improper use of PPE can create a false sense of confidence, increase chances of infection and waste supply

- Proper use of PPE is an effective part of infection prevention and control, however, it is not a stand-alone method
- Proper hand hygiene must be exercised before donning and after doffing PPE including gloves, face masks, and face shields.

Glove Use

Gloves shall be worn when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment, environmental surfaces, or when using cleaning products. Gloves are single use only. Hand hygiene must be practiced before wearing and after removing gloves. Gloves shall be removed (as per proper glove removal procedure) and discarded after each use.

To reduce hand irritation related to gloves:

- Wear gloves for as short a time as possible
- Ensure that hands are clean and dry before wearing gloves
- Ensure gloves are intact, clean, and dry inside
- Gloves are single-use only and must be task-specific such as diaper changes
- The use of gloves is essential during the COVID-19 outbreak. As personal protective equipment (PPE), they protect staff by providing a barrier to help prevent potential exposure to infectious disease, if used properly.

Disposable Smocks / Reusable Smocks

- As children may still need to be isolated when exhibiting signs of illness, staff will be encouraged to protect their clothing from bodily fluids by wearing a disposable or reusable smock over their clothing when supervising a symptomatic child in the isolation room.

Facial Protection

- As of September 2020, all adults in a childcare setting are required to wear medical grade disposable masks and eye protection (i.e., face shield or safety goggles) while inside in the childcare premises at all times, except when eating.
- As of January 2022, the Ministry of Education updated the use of masks to include the option for staff to use non-fit tested N95 masks, as/when provided by the Ministry.
- As of March 21, 2022 the Ministry of Education removed the need for staff to wear masks, making it optional for staff to choose whether to wear one or not. Time with masks off, should be limited; after eating, staff should immediately put their masks back on.
- Masks are no longer required outdoors.
 - **Exceptions to this rule:** Upon returning to care after **International Travel all individuals must wear a mask in the childcare centre for 14 days after returning.**

MACCP's Preschool children are encouraged to wear face masks indoors during programming time (i.e., not during eating or rest periods). Preschool staff will work with children to teach proper donning and doffing methods as well as safe disposal/storage of masks when they are removed throughout the day, such as meal or rest times. Masks are not recommended for children under the age of two.

Please provide masks and inform the Preschool staff directly if you want your Preschooler to continue wearing a mask at school.

Hand hygiene is to be performed before putting on and after removing the mask or face shield.

The use of masks and eye protection is no longer required outdoors for adults.

Masks are not required to be worn by the children outside. If you want your Preschooler to wear a mask outside, please provide masks and inform the Preschool staff directly.

Disposable Medical Masks should:

- Fit snugly but comfortably against the side of the face
- Be secured with ties or ear loops
- Allow for breathing without restriction

Face shields if worn, should be cleaned, and disinfected after each use.

Strategies for Children Wearing Face Masks

In accordance with the Ministry of Education's Operational Guidance document, preschool-aged children at McNicoll Avenue Child Care Program will no longer be required to wear masks indoors during regular programming time (i.e., not during eating or rest periods).

If you want your preschool child to wear a mask while at school, please provide **a regular supply of disposable masks** clearly labelled with the child's name to be kept at the childcare centre. Children should be brought into care wearing their first mask of the day. The children will perform hand hygiene before and after removing their masks and will be taught to dispose of them in a lined garbage can. The classroom teachers will let parents know when their child requires more masks; cloth masks are discouraged at this time due to storage/laundry/contamination concerns.

Mask Exemptions

As of March 21, 2022 Masks are no longer required to be worn. However, MACCP trusts that families recognize the importance of face mask use. It is important that all parents, caregivers, staff, and childcare providers who are able to wear a mask do so when indoors, and that preschool children wear them to the greatest extent possible during indoor programming time. As mask wearing is now optional, the previous *possible* exemptions for mask wearing that were limited to the following, are no longer necessary:

- 1) Children with intellectual or sensory-processing challenges who find mask-wearing unduly uncomfortable
- 2) Children with severe asthma where masks may trigger an asthma episode
- 3) Children with physical impairments that prevent them from removing a mask independently

Strategies for Educators Wearing Face Masks

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

During times when our educators choose to wear a mask, these strategies can and should be used:

- **Speak loudly and clearly** to circumvent the muffling effect of a face mask
- **Lower yourself to the child's physical level** even though you may be distanced
- **Exaggerate your intonation** in the absence of being able to use facial expression to augment and clarify your message
- **Exaggerate your gestures** which will help get a child's attention and provide visual cues in the absence of the child being able to fully see your facial expression
- **Consider wearing a badge or photo of yourself** or having photos in the classroom of educators and children with and without face masks. This is a great opportunity to make a 'homemade' book involving the children in the process.
- **Use gestures to encourage a child to take another turn** in an interaction or conversation e.g., hold out your arm, lean your body toward the child
- **Aim to convey your message with your eyes** as much as possible such as using wide eyes when surprised, smiling eyes when happy, etc.
- **Make explicit comments to draw children's attention to your feelings**, e.g., 'Look how happy my eyes look! "Look how surprised I am. My eyes are so wide open!"

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

4. Control of the Environment

Space Set-Up and Physical Distancing

As of March 21, 2022 MACCP staff are no longer required to practice physical distancing practices:

- Toddler and Preschool classrooms are now combined in the morning and at the end of the day in order to meet ratio requirements.
- Distance between classroom groups will otherwise be encouraged as much as possible throughout the remainder of the day (such as staggered entry and exit times for outdoor play or washroom use)
- Floor markings identifying “stay 6 feet apart”, have been removed
- We will continue to implement small group activities when applicable and according to classroom program schedules.
- We will continue to incorporate additional outside time as much as possible.
- The gymnasium will be used for play during inclement weather according to the building shared use schedule.
- Staff are continued to increase the distance between cots when possible and to place the children head to toe or toe to toe if the space is limited.

Visitors

Non-essential visits will gradually be permitted to enter/exit the premises through Door #7

Parent tours will be scheduled during outdoor time whenever possible and preference will be to have less contact with the group of children, when possible.

Tours will be limited to 1 person at a time, and masks must be worn by adults.

Special guests (program enrichment) will be gradually reintroduced with preference given to outdoor visits.

College placement students are permitted and will be assigned to one classroom. These students will be subject to the same health and safety protocols as staff members such as screening, the use of PPE and they must review the centre’s health and safety protocols.

The use of telephone / virtual interviews can continue to be used to interact with families where possible.

Drop-off and pick-up procedures are structured between 7:30-10:00 a.m. and 3:00-6:00 p.m.

At this time, we ask that only one (1) parent (wearing a mask) enter the building to drop off/pick up in order to avoid congestion in the hallway.

Essential visitors are permitted to enter and inspect the Centre premises at any reasonable time and must acknowledge that they have completed the self-screening questionnaire prior to entering the centre.

Essential Visitors include:

- Special Needs Resource Consultant
- Ministry staff
- Children’s Services Consultant
- Public Health Inspector
- Other public officials (e.g., Fire Marshal, Police Officer)

5. Vaccinations

In accordance with MACCP's existing vaccination policy, staff are strongly encouraged to avail themselves of any and all COVID protection measures, up to and including vaccination. Staff are required to obtain the vaccine as soon as it becomes available. If a staff/visitor has a mild headache, tiredness, sore muscles, or joints within 48 hours after getting a COVID-19 vaccine, they will still be permitted to enter the childcare premises. If symptoms last longer than 48 hours or worsen, they are to stay home, self-isolate and follow current protocols. Please refer to MACCP's COVID-19 Immunization Policy for more information on requirements.

A staff/child is considered fully vaccinated if they have received:

1. The full series of a COVID-19 vaccine authorized by Health Canada, or any combination of such vaccines
2. One or two doses of a COVID-19 vaccine not authorized by Health Canada followed by one dose of a COVID-19 mRNA vaccine authorized by Health Canada
3. Three doses of a COVID-19 vaccine not authorized in Canada (i.e., Sinovac)

Fully vaccinated staff and children will still have to pass the COVID-19 self-screening checklist each day, confirming they do not have symptoms.

Protocols When a Child or Staff Demonstrates Symptoms of Illness or Becomes Sick

If a child, staff, or visitor of MACCP has a COVID-19 symptom, that individual will be excluded and required to isolate as per the current TPH COVID-19 Screening checklist. Siblings and household contacts of the symptomatic individual may also be required to self-isolate in accordance with the current screening checklist.

Toronto Public Health may still declare an outbreak which is defined as two or more people (children or staff) with the same symptoms, in the same room within 48 hours. Outbreaks will be declared in collaboration between the program and TPH to ensure an outbreak number is provided. **If an outbreak is declared, Toronto Public Health will determine the next steps for MACCP to follow, up to and including closing specific childcare rooms, or the entire centre.** If a full or partial closure is required by TPH, the licensee will submit a serious occurrence report with information regarding any full centre closure only. Partial closures are not to be reported as a serious occurrence.

Though TPH may not always order a site closure, MACCP reserves the right to dismiss classrooms or the whole centre at the discretion of the Board of Directors and the Executive Director if deemed in the best interests of staff, children, and families.

Testing Requirements

Please follow the **current** TPH Screening Checklist for isolation requirements, testing steps and procedures. MACCP strongly encourages ALL symptomatic individuals or individuals to get tested using 2 Rapid Antigen Tests (RAT) conducted 24-48 hrs apart).

MANAGEMENT OF CASES AND OUTBREAKS OF COVID-19

As of January 2022, the Ministry of Health made changes to the provincial case, contact and outbreak management approach, resulting in an end to routine notification of confirmed cases to families in schools and childcare settings.

Public Health and the Ministry of Education have instructed childcares to no longer report positive cases, as **anyone with a symptom is presumed positive** unless proven otherwise and there are limited Rapid Antigen test kits available.

Centre or classroom will no longer be closed due to a positive case, as any child/adult will be self-isolating and return upon completion of 5 days (10 days if adult is unvaccinated). To this end, if we receive a self-reported case of positive RAT result, we are no longer reporting this as all families are required to continue to monitor their child for symptoms regardless of whether they're positive or negative.

Guidance for Parents of Symptomatic Children

If your child is deemed ineligible to come to care due to a symptom on the current TPH checklist, please stay home, self isolate, and follow Toronto Public Health advice listed on the checklist. Please refer to the flow charts on the second page of the COVID-19 screening checklists for more information on what to do if your child is symptomatic.

If Symptoms Develop in STAFF During the Day

If a staff member develops any symptoms of illness (respiratory or otherwise) while at the Centre, the staff member must be immediately excluded from the program and sent home. The staff member must go home, self-isolate, and follow current TPH guidance.

If Symptoms Develop in CHILDREN During the Day

Children will be monitored throughout the day for any changes in health. Staff will record symptoms of illness for each child including signs or complaints the child may describe (e.g., sore throat, stomach-ache, headache etc.) The date and time that the symptoms occur will also be recorded.

If a child develops any symptoms of illness (respiratory or otherwise) while at the Centre, the parents will be notified **to pick up as soon as possible (within one hour)** and the following procedures will be followed.

- Staff will separate the ill child from their cohort and move to a designated area under supervision.
- Staff should provide the child with a tissue to cover his or her mouth and nose when coughing or sneezing. Tissues should be disposed of immediately in a garbage can after use. The child should practice hand hygiene following the disposal of the tissue.
- If a separate room is not available or staffing does not allow for the use of a separate room, the sick child will be isolated in an area of the room which is a minimum of 2 meters from others. They must not interact with others.
- The child can be encouraged to lie down on a cot or mat while waiting for the parent or guardian.
- If the child is experiencing respiratory symptoms, encourage the child to wear a mask (if over 2 years of age) while self-isolating at the Centre. If the child is unable or unwilling to wear a mask, do not force it.
- Staff caring for a child in the isolation room must maintain physical distancing and wear PPE including eye protection if there is a risk of respiratory droplets from the child.
- There should be increased ventilation in the designated exclusion room if possible (e.g., open windows).
- If the child requires immediate medical attention, staff will call 911 and the child will be taken by ambulance to a hospital to be examined by a qualified medical professional.
- Symptoms of illness will be recorded on the child's illness report and the classroom logbook by the supervising staff.
- The parent will be asked to sign the illness report when the child is picked up. A copy of this illness report will be given to the parent. Parent must complete Toronto Public Health's Attestation: "**Back to Child Care - Confirmation Form**" <https://www.toronto.ca/wp-content/uploads/2021/06/98ef-Attestation-for-Return-to-Child-Care-Day-Camp-School-Parents.pdf> upon their child's return to the centre.
- Once symptomatic individuals have left the Centre, staff will ensure that contaminated surfaces and high touch areas are cleaned and disinfected with disposable cleaning equipment. All items used by the person who is symptomatic should be cleaned and disinfected

COVID-19 Reporting

In alignment with the changes to the reporting previously noted, O.Reg. 137/15 (General) under the Child Care and Early Years Act, 2014 (CCEYA) has been amended February 14, 2022 so that licensees are no longer required to report confirmed cases of COVID-19 as a serious occurrence to the Ministry of Education.

Furthermore, all centres have been instructed to remove the requirement to report confirmed or suspected COVID cases to parents or any governing body. Parents have been notified of this change in policy and any future changes will be communicated.

Centre Closures:

To continue to support ongoing monitoring and transparency related to COVID-19 impacts on childcare, MACCP is still required to report program closures related to COVID-19 where they result in an “Unplanned Disruption of Service” to the normal operation of our centre.

Testing:

Dependent on supply, the Ministry of Education will arrange for our centre to receive Rapid Antigen Tests (RAT) to distribute to our families and staff members. RATs will be used to predict a positive or negative result. If RATs are not available, then the child will be presumed to be positive for COVID-19 and will be required to complete the full isolation period as indicated on current TPH screening checklists.

Positive results:

In all cases of a **positive** COVID-19 case at the Centre, once a positive test result has been received, the individual or family member who has tested positive will contact the centre to report the positive case.

The Director/designate will inform the President of the Board of Directors.

The childcare staff/student will be instructed to stay home and self-isolate according to the current TPH direction from the day their symptoms first appeared. The first day of symptoms counts as Day zero. The 5 (or 10 if parent is unvaccinated) following days are the isolation dates. They may return to the childcare upon completion of the isolation days **AND** if they do not have a fever (without the use of medication) **AND** their symptoms have been greatly improving or resolved for at least 24 hours (48 hours for Gastrointestinal symptoms) prior to their return.

Returning to Care

If a staff, student, or child has **tested positive**:

Childcare staff/students and children must stay home and self-isolate according to the current TPH direction from the day their symptoms first appeared (or from the date of their positive RAT test). They may return to the childcare upon completion of the isolation days if they do not have a fever (without the use of medication) and their symptoms have been greatly improving for at least 24 hours (48 hours for GI symptoms). Please see the flow chart on the second page of the applicable current TPH screening checklist <https://www.toronto.ca/wp-content/uploads/2021/06/994c-Screening-Questionnaire-Child-Care-Day-Camp-School.pdf> for more detailed information. To return to care, parents must provide the centre with a photo of the test result (if tested) and the “Back to Child Care” Attestation form: <https://www.toronto.ca/wp-content/uploads/2021/06/98ef-Attestation-for-Return-to-Child-Care-Day-Camp-School-Parents.pdf> prior to returning to care. Staff must provide the centre with the test results (if tested).

If a staff, student, or child has **tested negative twice within 24-48 hrs of each test**:

Please see the flow chart on the second page of the applicable current TPH screening checklist <https://www.toronto.ca/wp-content/uploads/2021/06/994c-Screening-Questionnaire-Child-Care-Day-Camp-School.pdf> for more detailed information. If it was a child who tested negative twice, the family must email a photo of their 2 negative RAT results and fill out the “Back to Child Care” Attestation form: <https://www.toronto.ca/wp-content/uploads/2021/06/98ef-Attestation-for-Return-to-Child-Care-Day-Camp-School-Parents.pdf>. Staff must submit a photo of their 2 negative test results prior to returning to work.

Caring for a Child who is Self-isolating or who has COVID-19:

If you are caring for a child who is self-isolating or has COVID-19, everyone in the home should practice everyday prevention measures such as washing hands often and covering your cough or sneeze. Anyone in your household who is infected with COVID-19 should follow guidance for what to do if you are sick and when it is safe to end your isolation such as not eating meals in the same room with others in your home and staying in a separate room as much as possible.

If a child in your household is sick with COVID-19, has symptoms, or is self-isolating because they were a close contact of someone who tested positive, parents and caregivers should continue attending to their child and looking after their needs, however they should **follow some additional steps for self-protection** to prevent further spread of COVID-19 in their household, including:

- Wearing a mask inside the home if you are a caregiver, or parent, or child infected with COVID-19 (if able).
- Isolating as much as possible from family members who are at high-risk of serious illness from COVID-19.
- Increasing ventilation by opening up windows if it is safe to do so.
- Disinfecting non-food items such as dishes and utensils.
- Maintaining physical distancing as much as possible without compromising care.
- Caregivers and parents should also monitor themselves for symptoms of COVID-19 and get tested if they develop symptoms.

SERIOUS OCCURRENCE REPORTING

As of February 14, 2022 confirmed COVID-19 cases are no longer reportable Serious Occurrences. Centres are still to report closures related to COVID-19 where they result in an “Unplanned Disruption of Service” to the normal operation of our centre, but only ENTIRE centre closures, not if only 1 or 2 rooms are closed. Important information such as reason for the closure (i.e., lack of staff due to staff isolating, high number of COVID cases, entire community closed due to COVID, etc.) and capacity impacted by closure will be required.

ENHANCED CLEANING AND DISINFECTING OF CENTRE

Definitions

Cleaning: refers to the physical removal of foreign material (i.e., dust, soil) and organic material (i.e., blood, secretions, microorganisms). Cleaning removes, rather than 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 film is removed.

Disinfecting: describes a process completed after cleaning, in which a chemical solution is used to kill most disease-causing microorganisms. To be effective disinfectants must be left on a surface for a period of time (contact time). Contact times are prescribed by the product manufacturer. Any items children may touch, requires a final rinse after the required contact time is observed.

Regular cleaning and disinfecting of objects and high-touch surfaces will help to prevent the transmission of viruses from contaminated objects and surfaces. The Director/designate or Health and Safety Rep will ensure monitoring of hand cleaning supplies is increased to ensure all sinks in the washrooms, and classrooms are well always stocked with handwashing supplies (i.e., hand soap and paper towels, etc.)

As per standard procedures, MACCP will ensure that high-touch objects and surfaces (e.g., doorknobs, shelves, faucets, light switches) will be cleaned and disinfected daily by a designated staff member.

A cleaning/disinfecting log is kept by each classroom to track and demonstrate cleaning schedules.

When possible, only one classroom will access the washroom at a time and the toilets and faucets will be cleaned in between each use, as different classrooms will be using the same washroom.

The water fountain in the hallway remains permanently closed. Each child will be asked to daily provide a spill proof water cup to use at the centre. Staff will keep it filled with water throughout the day as needed. This cup will go home with the child at pick up time to be washed at home and returned to the centre the following day.

Cleaning

- Use dish detergent and warm water to clean visibly soiled surfaces
- Rinse the surface with clean water (warm to tepid temperature preferred) to ensure dish detergent is removed
- Let the surface dry

Disinfecting Products

- The disinfecting products used at MACCP are Alcohol/Disinfecting wipes and Public Health- approved bleach and water solution which is mixed **daily** by opening shift staff in each classroom to these ratios:
 - 5 ml to 495 ml bleach to disinfect Toys, Play Mats, Diaper Change Tables, Sensory Play Tables/buckets) (**currently this dilution is not in use during COVID**)
 - 10 ml of bleach to 490 ml of warm water for Outbreaks/regular disinfection during COVID (**this strength is mixed and used daily for general cleaning during COVID**)
 - 50 ml of bleach to 450 ml of warm water to clean Blood & Body Fluid Spills (**this strength is mixed daily for use during COVID**)
- **Contact time for bleach and water solution is 2 minutes** and allow to air dry.
- Both bleach and disinfecting wipes are considered high-level disinfectants which is defined as the complete elimination of all microorganisms in or on a surface.
- For all toy cleaning & general environmental disinfection of high touch surfaces, large toys and equipment that cannot be immersed in a disinfectant solution, use disinfectant wipes, which come ready to use. Allow surface to remain wet for 10 minutes and allow surface to air dry. Toys or surfaces that children will touch are to be rinsed with water after using the disinfecting wipes.
- Bleach solutions will be prepared every morning in the kitchen; bleach bottles are kept under the sink in a locked cabinet away from children.

Disinfecting using Alcohol/Disinfecting wipes or bleach solution

- Put on gloves and mask.
- Spray bleach solution or use wipes and leave on the surface for the appropriate disinfecting contact time (2 minutes for bleach / 10 minutes for disinfecting wipes). Ensure the spray setting is on stream and not mist
- Once the disinfecting contact time has elapsed, the surface has now been disinfected
- Any surface children may touch immediately requires a final rinse or wipe with a single-use paper towel (i.e., lunch tables, chair, floor, toy shelves)
- If the surface continues to be wet, you may wipe it dry with a single-use paper towel

The following areas will be cleaned and disinfected throughout the day:

- **Tables and countertops:** used for food preparation and food service must be cleaned and disinfected before and after each use
- **Cots & Cribs:** must be disinfected **weekly** and stored in a manner where there is no contact with the sleeping surface of another cot. Cot and crib sheets and blankets will be washed **weekly**.
- **Chairs:** must be cleaned and disinfected before and after serving food
- **Spills** must be cleaned and disinfected immediately
- **Hand washing sinks and toilets:** staff and children washroom areas must be cleaned and disinfected a minimum of at least two times per day (caretaking staff) and as often as necessary (e.g., when visibly dirty or contaminated with body fluids). Due to the shared washroom area, the toilet flush handles, seats and faucets will be disinfected after each child's use.
- **Floors:** cleaning and disinfecting must be performed as required, i.e., when spills occur, and at the end of each day.
- **Outdoor play equipment:** Any outdoor play equipment that is used must be easy to clean and disinfect. Outdoor play equipment and materials will be sorted for each classroom. Play materials will be cleaned and

disinfected once a week. Outdoor play structures will only be used by one group at a time and children must perform hand hygiene before and after using outdoor play structures.

- **High-touch surfaces:** any surface that has frequent contact with hands (e.g., light switches, shelving, containers, handrails, doorknobs etc.)
- **Other shared items:** e.g., phones, CD player, laptops, attendance boards etc., these can be disinfected between users.

Note: Most areas are best cleaned with bleach and water and do not require a final rinse if children do not come into contact with them. Cleaning and disinfecting routines must be increased as the risk of environmental contamination is higher.

Cleaning List

The following areas are cleaned/sanitized:

- Appliances (Microwaves, kettle, fridges) – by cook before she starts
- Children’s Chairs, “couches” – each room responsible for their own
- Countertops in all spaces – each room responsible for their own
- Cubby area – each room responsible for their own
- Doorknobs - caretakers
- Floors - caretakers
- Food storage areas - cook
- High touch wall surfaces – caretakers and staff
- Laptops, computer – each room responsible for their own
- Light switches - caretakers and staff
- Mats – Infant teachers
- Mirrors – caretakers and staff
- Photocopier – staff
- Tables - each room responsible for their own
- Telephones, Walkie talkies - each room responsible for their own
- Wall-mounted items (e.g., soap and sanitizer dispensers) - caretakers
- Washrooms - caretakers
- Window air conditioners (wipe down monthly) - each room responsible for their own
- Windowsills – wipe down monthly - each room responsible for their own

TOY WASHING

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

Plush toys which include, stuffed animals, hand puppets, cloth toys etc. are to be laundered weekly.

Procedures for Cleaning and Disinfecting using Dishwasher

It is recommended that the dishwasher be used for toy washing whenever possible:

- The rinse cycle must meet a minimum of **82 degrees Celsius**
- Only use the dishwasher in the kitchen when it is not being used for any other purposes (i.e., washing dishes, food preparation, serving)
- Toys are placed evenly on the dishwashing racks and are an appropriate size to ensure they will not fall into the basin
- Toys are removed carefully once the wash cycle is complete as they may be hot or contain hot water
- Toys are air dried in a designated area that is separate from bathrooms or change tables and protected from sources of contamination

Procedures for Manual Cleaning and Disinfecting

1. Wash with soap and warm water to clean visible dirt
2. Rinse soap off with clean water
3. Soak in bleach and water mixture for **2 minutes** to disinfect
4. Air dry toys

Cleaning and Disinfecting Large Toys or Equipment In-Place

Large toys, wooden toys, cots, cribs, etc. that cannot be immersed in a disinfectant solution will use the following method for washing:

1. Clean with soap and water using a cloth
2. Wipe with a clean wet cloth to rinse
3. Disinfect by spraying bleach and water solution and let it sit for **2 minutes**
4. Allow toys to air dry

Frequencies and Toy Cleaning Schedules

- Toy cleaning schedules will be posted in each area and updated daily by the staff person responsible for the area.
- Infant (under 18 months): Frequently touched toys in infant rooms must be cleaned and disinfected daily (or more often as necessary)
- Toddler (18 – 30 months) & Preschool (>30 months – 5 years): Frequently touched toys in toddler and preschooler rooms must be cleaned and disinfected weekly (or more often as necessary).

Handling Used Toys

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

Preparing Your Child for Entry into the Childcare Program

After you enroll your child in our program, you may notice that your child begins to experience a degree of separation anxiety. This may be compounded by the fact that during the pandemic, children have become used to having extra attention while having you around most of the time. In many cases, their exposure to non-family members has been very low. It is important to prepare your child emotionally so their transition into care will be as smooth as possible. The key to reducing your child's separation anxiety about this new normal is to be open and calm.

Some of the most common signs and symptoms you may notice are:

- Clinginess or whining
- Stomach aches
- Headaches
- Feeling stressed or worrying excessively
- Being reluctant to participate in activities
- Difficulty sleeping
- Acting out
- Needing to keep a parent in sight or at arm's reach at all times

How to Support Your Child:

Continue the structure at home

When you see your child in the mornings and evenings, continue to maintain structure at home to get them back in the habit of following routines. During COVID, many families' routines became unpredictable as parents juggled online classes and working from home. Now that your child is in care, a structured routine is best so that they can learn a rhythm to their day.

Speak enthusiastically about returning

Talk about seeing their friends and teachers and having fun. Ask them what they are most excited to do that day. By talking to them about positive experiences, it will help ease their anxiety. Avoid framing any comments or questions negatively.

Allow them to have some control

Let them pick out what clothes to wear or what type of food they want for dinner, or what special activity they can do when they get picked up. This will help them get excited for the day ahead while also allowing them to feel like they are making their own choices.

Let them know it is okay if they miss you

Let them know that their teachers are there to help them and make them feel better while you are at work. Give your child extra attention when they come home by planning something special for them, even if it is just cuddling.

Do not prolong goodbyes during drop-off

Some parents think that it puts their child's mind at ease to linger for a long goodbye or promise to pick them up if they do not like being at daycare, but this can actually upset your child more as they focus on the thought of you leaving. Most children will adjust fairly quickly after you leave them as they begin to play and have fun! A warm hug and kiss and a confident goodbye from you will set them up for success.

DROP-OFF PROCEDURE

Daily, each parent must self-screen their child and themselves at home using the current TPH screening checklist for any signs or symptoms of illness.

Parking for childcare parents is in the bus loop driveway using the parallel parking spaces adjacent to our playgrounds (NOT the main parking lot for the building).

Please enter and exit the centre at **Door #7** only.

At this time, **only one** (1) parent per child may enter the centre and the parent is required to wear a mask.

Each parent is to take their child to their own cubbie to take off jackets etc., take your child to the children's washroom to wash their hands (toilet-trained children are to use the toilet) and then drop them off to the classroom door.

Please ensure your child's teacher sees you and receives your child as they will be marked onto the attendance at that point.

Once your child is signed in, you will be asked to say your goodbyes and the staff will welcome your child into the classroom to start their day.

We recognize the requirements around drop-off procedures may cause increased separation anxiety for new children. Although this can be an incredibly stressful time for children, it can also be an opportunity for the staff to connect with them through conversation.

Some strategies we will consider are:

- ***Labelling the child's emotions*** (e.g., "I know you are sad to leave Mommy.")
- ***Using a song or fun way of walking into the Centre*** (hopping, walking backwards)
- ***Giving the child a role*** (e.g., helping bring something to the classroom, etc.)
- ***Wearing masks with funny designs*** (e.g., cat's whiskers) that could distract the child and stimulate a brief conversation
- ***Engaging a child in a brief guessing game*** to guess who or what is waiting for them in the childcare room.

The drop-off process and preparing children to enter the Centre will take some time. Parents arriving with their child will be expected to park in the parallel parking spaces on the West side of the building along our playgrounds. Please **DO NOT IDLE YOUR CAR**, as some individuals walk to the centre, and we do not want them to have to breathe in the exhaust fumes while there!

You are encouraged to arrive at the Centre between 7:30 a.m. and 9:30 a.m. so your child can enjoy the planned activities prepared for them.

Children's Personal Belongings

Personal items from home will be limited to the following:

- Toileting supplies (diapers, wipes, ointments)
- 2 sets of extra clothing
- Outdoor clothing (sun/winter hat, jacket, etc.) to be left at centre
- Sunscreen (summer only) to be left at centre
- Reusable water bottle (will be sent home every night for cleaning)
- Masks for Preschoolers – while these are no longer mandatory, we are strongly encouraging the use of masks to help prevent the spread of viruses
- * Blankets are now provided by the centre and laundered weekly

These items will be stored in the child's cubby. Staff will notify you when replacements are needed. At this time, please do not bring any further items (toys etc.) from home.

PICK-UP PROCEDURE

Parents typically arrive between 3:00 p.m. and 6:00 pm. to pick up their child/ren. If you need to pick up your child/ren earlier due to an appointment, please phone the Centre when you arrive, as Door #7 will be locked between 10:00 a.m. - 3:00 p.m. Late pick-up fines (\$1.00 per minute) will be fully enforced as of 6:00 p.m.

End of the day pick-ups will be planned to be from the outdoor play spaces whenever possible to support a smooth spaced-out transition. Again, for indoor pick-ups, **only one** (1) parent per child may enter the centre and the parent is required to wear a mask.

PROGRAM

Program Statement

MACCP values the commitments and guidelines that make up our program statement. As health and safety restrictions are slowly lifting, still some of the approaches outlined in our program statement may not be possible to implement. At this time, we are committed to continuing to provide a safe and welcoming environment for children that includes the four foundations of How Does Learning Happen: Belonging, Well-being, Engagement, and Expression. We have overcome the COVID-related obstacles and continue to do everything possible to ensure the values in our program statement are reflected within the enhanced health and safety protocols still in place.

AUGMENTATIONS TO PLANNED ACTIVITIES

Program Planning

Teachers will modify planned activities to promote physical distancing where possible to do so. Communal sensory play activities are permitted to resume with emphasis on performing hand hygiene before and after. Art materials no longer need to be designated to individual students, but emphasis will be placed on enhanced cleaning and hand hygiene when using these materials. Circle times will be reinstated and will be structured to promote physical distancing where possible.

Classroom environment

MACCP staff have now reinstated toys that had been removed during the past 2 years. Toys and materials that are frequently mouthed will be set aside to be washed daily. Where possible, designated toys and equipment will be provided to each classroom. Communal toys and equipment are now back in place. Fabric items (puppets, dress-up clothing etc.) have also been reinstated and will be laundered weekly.

Outdoor Play

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

Food Safety Practice and Service

Meals will be served family-style and proper food handling procedures will be followed. Children will not be permitted to self-serve food at this time.

There should not be any food provided by the family/outside of the regular meal provision of the program. Birthday items usually provided by parents (treats, loot bags etc.) are currently prohibited during the pandemic.

Parents will be provided with a copy of the menu. Occasionally, due to supply issues or cook's absence, it is necessary to change the menu on any given day. Any changes will be marked on the posted menus on each classroom's bulletin board. Your child's daily chart will also indicate what food items were eaten on any specific day. The Centre will continue to reinforce routine food safety and sanitation practices during the pandemic by:

- Planning for alternative catering services if food preparation is interrupted.
- Using disposable cutlery, cups, and plates if staffing levels are low.

Rest Time

Children's cots will be arranged further apart where possible. Cot sheets and blankets will be laundered weekly by the staff. Staff will disinfect the cots weekly. Children's blankets are now provided by the Centre and remain at the Centre.

Washroom Routine / Toilet Training

Facilitating toilet training is a bit more difficult during COVID. Children who are in the process of toilet training prior to re-entry into the daycare should speak with the Director/designate to discuss their child's toilet training progress. As there is no washroom inside the Preschool classroom, Preschoolers should be toilet trained (or close to trained) to be in the Preschool program.

FEEDBACK REGARDING YOUR CHILD'S PROGRESS

Infants and Toddlers:

Now that parents are able to come inside, your child's daily report will be completed and available for you to read each day at pick up time. You will find the clipboard on top of your child's cubbie basket in the hallway. Information on a.m. and p.m. snacks, lunch, diaper changes and observations of your child's day at school (as applicable) will be recorded by the teachers daily.

Photos of their activities and weekly documentation of his/her development and emerging skills, will be recorded in your child's Portfolio which you will find on the clipboard on top of your child's cubbie basket.

In turn we ask YOU as the parents of our Infants and Toddlers to **complete the "Parent Report" side when dropping your child off each morning** to ensure clear communication and to allow the staff to be informed about your child's morning.

Preschoolers:

The Preschool teachers will continue to provide you with a **verbal daily update** at pick up time on your child's sleep time and servings of food eaten at snacks and lunch. Staff will continue to weekly document your child's development and emerging skills in their portfolio to show your child's progress. The portfolios are hanging in a file folder just inside the classroom door on the right-hand side and you are welcome to look through your child's portfolio during pick up/drop off times.

Parents are able to send a message to their child's classroom teachers via email. Please copy Lynn on the email if it is something that is time sensitive (as staff are often not on the computers until mid or end of the day).

Classroom emails:

infantroom@mcnicollchildcare.com

toddlerroom@mcnicollchildcare.com

preschoolroom@mcnicollchildcare.com

lynnlewis@mcnicollchildcare.com and office@mcnicollchildcare.com (Office)

Provision of Special Needs Resource (SNR) Services

The Centre recognizes that children with special needs and their families continue to require additional support and services in our childcare setting. The provision of in-person special needs services at the Centre will continue where appropriate, and on-site visits are once again permitted. We will work with our resource consultant to explore alternative modes of service delivery where in-person delivery is not necessary.

All SNR staff will complete their own self-screen prior to entering the childcare setting as per the protocol outlined in our Screening policy and procedure and must follow the same health and safety measures of our staff, including wearing a medical mask, practicing proper hand hygiene, and maintaining physical distance where possible.

MACCP's Immunization Disclosure Policy

Effective March 14, 2022 the Ministry of Education revoked the need for centres to have a COVID Immunization Policy. As such, centres are no longer required to report vaccination status to the Ministry of Education. Until the Board of Directors amends or updates this policy, it remains in place at this time.

Purpose & Background

The purpose of this policy is to outline organizational expectations with regards to COVID-19 immunization policy.

McNicoll Avenue Childcare Program (MACCP) recognizes the importance of immunization of individuals regularly interacting and providing services to children due to the nature of their work and potential for exposure in the community. This policy aims to protect the childcare program's population including children, staff, volunteers, students on educational placements and any person providing childcare or other services to a child in care.

COVID-19 is an acute respiratory illness caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It may be characterized by fever, cough, shortness of breath, and several other symptoms. Asymptomatic infection is also possible. The risk of severe disease increases with age but is not limited to the elderly and is elevated in those with underlying medical conditions.

Application of the Policy

The policy will apply to all employees of MACCP and any volunteers which include:

- Students on an educational placement,
- Any licensee who regularly interacts with children or staff, and
- Any person who provides childcare or other services to a child who receives childcare (e.g., special needs resourcing consultant).

Policy

March 14, 2022 Revoked: *The Chief Medical Officer of Health has directed all licensed childcare programs to develop, implement and ensure compliance with a COVID-19 immunization policy.*

All individuals covered by this policy must provide **one** of the following:

1. Proof of all required doses of a COVID-19 vaccine approved by the World Health Organization to the Executive Director by October 31, 2021.

OR

2. Written proof of a medical reason, provided by either a physician or nurse practitioner that sets out:
- a. that the person cannot be vaccinated against COVID-19; and
 - b. the effective time period for the medical reason (i.e., permanent, or time-limited).

AND

3. Proof that the individual has completed Toronto Public Health's (TPH's) educational session (certificate is provided at the end) approved by MACCP (see the following Educational Session for the link).

As a condition of new employment, student placement, or volunteer activities, proof of full vaccination or medical exemption must be submitted to the Director seven (7) calendar days prior to start date.

This policy remains in effect until further notice or until it is superseded by government legislation or other public health orders.

Those who are not in compliance with the policy requirements will be subject to progressive discipline, which may include unpaid leaves of absence or termination of employment.

Proof of Vaccination

The following documentation will suffice as proof of vaccination:

- A copy of the receipt of vaccination for each dose received. Receipts for first and second doses received in Ontario are available from the provincial portal. Individuals who did not receive a vaccine in Ontario should contact their local public health unit for assistance with obtaining proof.
- **March 14, 2022 Revoked:** *Contractors are required to sign an attestation only and will not be required to upload receipts of vaccination. Documentation may be redacted to exclude any unnecessary and sensitive information.*

Medical Exemption from Vaccination Requirement

The Ministry of Health advises there are very few medical exemptions to COVID-19 vaccination. Individuals requesting a medical exemption will be required to provide substantive evidence from a family physician, specialist physician, or nurse practitioner clearly specifying the reason why the individual should be exempted from being vaccinated and the applicable time period. MACCP reserves the right to have an independent third party adjudicate claims for medical exemption. Employees will be reimbursed for the cost of medical notes upon confirmation that the medical exemption has been approved.

Continued Compliance with all Health and Safety Precautions

This policy does not replace any COVID-19 protocols currently in place. Unless a legislated or regulatory exemption applies, all personnel are expected and required to continue to comply with applicable health and safety measures to reduce the hazard of COVID-19, including but not limited to compliance with established screening protocols, wearing required PPE, maintaining appropriate physical distancing and self-monitoring of potential COVID-19 symptoms when at work or otherwise engaged in MACCP business.

MACCP will continue to closely monitor its COVID-19 risk mitigation strategy in conjunction with the evolving public health information, to ensure that it continues to protect the health and safety of all individuals in the workplace.

Rapid Antigen Testing

March 14, 2022 Revoked: *All individuals who have not provided proof of all required doses of a COVID-19 vaccine and are less than 14 days after their last dose, including those who have a medical exemption, are required to complete Rapid Antigen Testing twice per week. Proof of a negative test must be submitted to the Executive Director in person or at lynnlewis@mcnicollchildcare.com.*

- *Testing is to take place at an individual's residence prior to attending work.*
- *Testing should be implemented consistently on a weekly basis with at least 3 days between tests and conducted Sunday to Friday.*
- *Testing should not take place more than 48 hours before attending work.*

This handout explains how an individual can self-administer a COVID-19 rapid test kit:

<https://www.ontariohealth.ca/sites/ontariohealth/files/2021-08/PASP-COVID19-Self-Testing%20Instrucitons.docx>

Positive Rapid Antigen Test Results:

A positive result on a rapid antigen test is considered a preliminary (presumptive) positive.

Any individual that receives a positive result on a COVID-19 rapid antigen test, is required to isolate as per current TPH guidelines.

If an individual has had a laboratory-confirmed (PCR) COVID-19 infection, they should not participate in antigen testing for 90 days following the date of their positive COVID-19 test result. These individuals should immediately resume COVID-19 rapid antigen testing after the 90th day from the date of their positive COVID-19 PCR result.

Individuals that are covered by this policy, but are not directly employed by MACCP, must provide their attestations or negative test results directly to the Executive Director/designate, but are not required to duplicate testing if their own employer also has a rapid antigen testing policy.

Alternatively, third-party employers/agencies could also provide the attestation of the employee or negative test results to the Director/designate.

Educational session

All individuals who have not provided proof of all required doses of a COVID-19 vaccine including those who have an approved non-medical exemption are required to provide signed confirmation that they have watched the video on COVID-19 vaccine information for educators provided by the Ministry of Education at this link: [MOE Vaccine Information Session](#)

These education sessions have been approved by MACCP and addresses all of the following learning components:

- how COVID-19 vaccines work.
- vaccine safety related to the development of the COVID-19 vaccines.
- benefits of vaccination against COVID-19.
- risks of not being vaccinated against COVID-19; and
- possible side effects of COVID-19 vaccination.

Vaccination Status of Clients and Family Members

At this time, MACCP will not require clients or their family members to provide proof of vaccination; however, all TPH pandemic safety protocols that have been established will be maintained at the discretion of MACCP.

Reporting – As of March 14, 2022 monthly reporting to the Ministry of Health and Ministry of Education has been revoked.

Privacy

Information regarding vaccination status or exemptions will be stored in the office in each person's personnel file with access restricted to the Executive Director on a need-to-know basis.

Clients who request vaccination status of a MACCP employee can be provided with a copy of this policy and advised that the employee is compliant.

Revoked: *Statistical reporting to the government ministries will be in the aggregate without individual identification. MACCP cannot guarantee absolute anonymity. There may be circumstances where vaccination status must be disclosed.*

Confidentiality Statement

Revoked: *As per s. 77 of O. Reg 137/15 made under the Child Care and Early Years Act, 2014, MACCP is required to report such statistical information to the Ministry of Education as may be required. No identifying information will be provided to the ministry in relation to this policy; all statistical information will be provided in aggregate form.*

Revised March 9, 2022 as per current Ministry guidelines on the use of RATs and no longer reporting positive results.

Revoked March 14, 2022- Centres no longer are required to have a COVID Immunization Disclosure Policy

For Centre Use:

To report:

- Child/staff **PCR**-confirmed COVID case (**NOT RAT results**)

OR

- Childcare absenteeism of children/staff that rises to approximately 30% above baseline absenteeism, fill out the survey at the following link:

<https://s.tphsurvey.chkmt.com/?e=256719&h=96B99AD68A950B9&l=en>