

## **Enhanced Health Measures Policies and Procedures**

### **Camp Waterdown**

**June 22, 2021**

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### **Purpose, Readership and Notes**

The purpose of this document is to serve as guiding, mandatory policies and procedures for staff of WDCC and Camp Waterdown programs. This document is intended to be read by staff members, and provide them with the procedures that are required by our organization, as well as by Ontario's Ministry of Education, Hamilton's Public Health Unit, and the Provincial Government of Ontario, in order to provide a safe child care environment for all members of the centre.

This document has been made available for parents, guardians, and other caregivers and members of the WDCC community to read, in order to ensure full transparency with the health measures WDCC is taking to keep the program safe.

The following set of policies and procedures has been revised from WDCC's original Enhanced Health and Safety Measures policy. The current version below has been informed by the city of Hamilton's Public Health unit, as well as the Ontario Ministry of Education. This version follows the most recent updates, which were updated in January 2021 and forward. These policies have also been updated to reflect past updates that have been made by Public Health and the Ministry of Education, as well as our own current practices in our day-to-day routine. For questions on specific policies, please contact [info@campwaterdown.com](mailto:info@campwaterdown.com).

## COVID-19 Screening Procedure

### Rationale

As an organization Camp Waterdown and the Waterdown District Children's Centre will conduct a multi-step screening procedure for children and staff prior to entry of the program to limit exposure of COVID-19 to our facilities. Each sites' supervisor is responsible to determine and document how the workplace will implement screening in a manner that meets screening requirements given to us by our local public health unit and Public Health Ontario. Site leadership will also communicate to all staff, parents/guardians and the Ministry about the expectations of our daily screening procedures.

To ensure a safe and secure environment for vulnerable individuals, only staff, children and custodians will be permitted entry into the facility. No parents, guardians or special visitors will be allowed inside the building, unless for an emergency.

### Safety Protocols

All individuals including children attending childcare, staff, parents/guardians, and visitors will be screened each day before entering the childcare setting. The following must be maintained to ensure a safe screening process:

- Screening will occur at a designated location for each site,
- Physical distancing must be maintained by all parties at the screening area. Masks are required to be worn by parents when dropping their children off unless otherwise exempted. Physical distancing markers may be used to guide physical distancing,
- All screeners will wear personal protective equipment, including a face shield or goggles, a gown, and a mask. Gloves may be worn as well. If gloves are not worn, the screener must maintain proper hand hygiene,
- Parents/guardians who are dropping children off for care in the morning (or picking children up in the afternoon) are required to wear masks during the process, as mandated by Hamilton Public Health,
- All childcare licensees must maintain daily records of screening results, and these records must be kept on the premises for 3 years with the daily written record (attendances) for each program.

### Screening Responsibilities

Before attending work, staff must screen themselves using the procedure below. Parents are required to follow the procedure below for screening their child(ren) before coming to the camp. All staff and parents should be aware of the main signs and symptoms of COVID-19, including but are not limited to: fever (temperature above 37.8 degrees Celsius), cough, loss of taste or smell and shortness of breath. Other symptoms include but are not limited to: sore throat, stuffy nose, headache, nausea/vomiting/diarrhea, fatigue, lethargy and muscle aches.

If a staff or parent notices one of the above symptoms in themselves or their child, the below screening procedure will inform the individual on how to proceed. Parents and staff will be required to

call in and notify camp staff of any absences. Children who do not attend care on any day they are scheduled to come, unexpectedly, will be screened by staff over the phone. This allows staff to ensure they are aware of all children's illness for proper tracking and contact tracing purposes, as well as the parent/guardian's intent for testing, healthcare provision and re-inclusion. Parents are also required to report symptoms in their children that occur on their non-scheduled days, and over the weekends. In addition, when a staff member calls in sick to a shift, they will also be screened over the phone, and will be required to exclude themselves from program according to the policy below.

### Visual Aids

Visual aids will be present at all screening areas. These visual aids will be in the form of:

- Public Health – provided posters for screening procedures and symptoms, handwashing etiquette, physical distancing procedures, travel alerts, self-isolating, proper PPE usage, and others,
- Site-specific posters and licensing requirements,
- Physical distancing markers.

Visual aids will be updated as directed from Public Health and the Ministry of Education.

### Infection Prevention and Control Measures

To help reduce the risk of COVID-19, the following will be implemented at camp:

- Signage will be posted in visible areas which clearly explains the screening process and the rules and conditions for entry.
- Alcohol-based hand sanitizer containing at least 70% alcohol content will be placed at all screening stations. Dispensers should not be in locations that can be accessed by children.
- We will use a consistent screener daily at each screening location, unless away or off sick. If a screener becomes ill, we will replace that screener with another educator.

### Screening Process

Screening will be done in a manner that treats people with respect and dignity, providing them with information so they fully understand the reason for the screening and impact of attending when not well. Parents/guardians must comply with the camp's process of completing the Daily Health Screen for each child in a designated area near the main entrance.

#### i. Location of Screening

The screening location at Camp Waterdown is the back gate of the kindergarten playground. The screening location will have a small trolley with hand sanitizer, contactless thermometer, disinfectant spray, extra gloves and masks, a binder with screening paperwork, and pens. A screener wearing full PPE will be stationed at the screening location. Traffic equipment, such as pylons, will be set up to designate physical distancing points while waiting to be screened.

### Screening Procedure

These recommendations are based on available guidance from the Ministry of Health and Ministry of Education documents. Please refer to the most current versions of these documents for the most accurate and up to date recommendations. All individuals entering the camp, beyond the screening area must be limited only to children, staff and essential visitors. Pre-screening by parents/staff should take place daily, prior to arrival at the camp using the online provincial screening tool. Please instruct parents/staff to follow the most up-to-date Ministry of Health screening tool found here (<https://covid-19.ontario.ca/schoolscreening/><sup>(1)</sup>).

Screening for Camp Waterdown will be conducted as follows:

1. All staff, parents and visitors **must** complete the Online Provincial School Screening Tool prior to coming to program in the morning.
  - a. Parents must complete the Online Provincial School Screening Tool for each of the children that they have attending care. They **cannot** complete it one time total for all children.
2. All staff and parents are required to screenshot their results each morning, with proof of date and time of completion. Parents and staff **must** show the screener their image of the completed and passed screening, with the proper date, in order to be admitted into program.
  - a. Parents must show passed screening results with the proper date for all children that are attending program,
  - b. Screeners must confirm the proper date and time are on each of the passed screening results before admitting the individual. Individuals cannot be admitted if they have a failed result.
  - c. If parents or staff refuse to prove that they have completed the screening in the morning, they should not be admitted to program.
3. Screeners must:
  - a. Verbally ask the parent or staff if they completed screening in the morning using the Online Provincial Screening tool, and will record yes or no on the form,
  - b. Visually confirm a passed screening result of the Online Provincial Screening tool with the proper date and time, and will record pass or fail on the form,
  - c. Obtain verbal confirmation from the parents or staff that they have thoroughly reviewed the Online Provincial Screening Tool, and the screener will record yes or no, with the date and time, on the form.
4. Screeners will then take the staff member's or child's temperature. If they have a fever, they should not be admitted. The cut off for a fever is 37.8 degrees Celsius. If they do not have a fever, they will be admitted. The screener will record the individual's temperature on the form.
5. The screener will also record the date, the child's name, the child's group on the form.

Entry will be denied to any individual who fails the screening procedure whether it was completed online or in person. Please see the testing and exclusion policy below for exclusion and return to program criteria when an individual fails the screening.

A separate copy of all attestations for return to school/child care following illness or self-isolation will be required by our program before returning to camp.

a. Screening Reception Area

Daily pre-screening should be conducted by parents/caregivers and staff prior to arrival at the summer camp program, however the summer camp program will continue to designate multiple entrances where screening can take place, as required. The screening area must have public health approved signage identifying the screening process, must be set up at the entrance of the facility, meeting the following criteria:

- All child care settings must have one of the following:
  - Space allowing for a minimum of 2 metres distance between provider conducting screening and the person being screened, or
  - Separation by a physical barrier (such as a plexiglass barrier) for the screener, or
  - Screener must wear personal protective equipment (PPE) i.e. surgical/procedure mask, eye protection (goggles or face shield), and gown
- Signage regarding proper hand hygiene, respiratory etiquette, and proper mask use are to be displayed at the screening area.
- Where possible, we may stagger drop offs to ensure physical distancing requirements can be met.
- The child care setting must have a plan in place to:
  - Ensure that a mobile device such as a tablet or laptop with a wi-fi connection is available at the entrance to facilitate access to the online screening tools if needed or provide a paper written process if this is not possible.
  - Efficiently process the number of people that need to be screened
  - Handle the volume while maintaining physical distancing (i.e. floor markers)
  - Have a contingency plan for inclement weather
  - Ensure a process is in place for cleaning and disinfecting the thermometer after each use using a disinfectant (spray into a cloth or using a disinfectant wipe) with a 1-3 minute contact time
- Alcohol-based hand rub containing at least 70% alcohol content must be provided at screening table or upon entry to the facility.
- Anyone entering the facility must perform hand hygiene upon entering.
- Staff to assist each child with hand hygiene upon entering program

Health Screening Procedure for Children/Staff

Upon arrival of a parent/caregiver and child(ren) or staff, the screener, with surgical mask, gown and eye protection, actively screens the individual based on the COVID-19 school and child care screening tool, and take each individuals' temperature using a contactless thermometer.

- If the individual passes the screening, which occurs by answering NO to every question on the screening form, the individual should be admitted into the program,
- If the individual fails the screening, which occurs by answering YES to ANY question on the screening form, the individual must return home immediately to self-isolate, and should follow the exclusion and return criteria as outlined in the testing and exclusion policy.
- If the child or staff is returning following an illness exclusion or self-isolation, they will be required to provide a signed copy of the "Attestation for return to school/child care following

illness or self-isolation” form by paper form, or emailed scanned photos to [info@campwaterdown.com](mailto:info@campwaterdown.com). They will then need to have passed that day’s Daily Screening.

- Each child’s arrival time and program departure time will also be logged.

### Health Screening Procedure for Essential Visitors

Upon arrival of an essential visitor, the screener, with a surgical mask, gown and eye protection, actively screens the visitor using the Ministry of Health’s COVID-19 self-assessment tool, and conducts a contactless temperature check. If the screening is passed, the visitor may enter the building. The screener logs the result, using the screening form, and visitor log.

### Failing the Daily Screening Test

Any individual who fails the screening process must be denied entry and should be advised to contact their health care provider and book a COVID-19 test by visiting [www.hamiltoncovidtest.ca](http://www.hamiltoncovidtest.ca). If unable to access the online booking site, individuals can call Public Health’s COVID-19 line at 905-974-9848 option 2 to book a testing appointment. Families of excluded children will be sent an email notification with information about the exclusion and procedures for returning to the program.

### Screening Records

In accordance with the Child Care and Early Years Act, 2014, every licensee of a child care centre or home child care agency shall ensure that a daily written record is maintained for each child and staff that includes a summary of any incident affecting the health, safety or well-being of that individual. Licensees must ensure that these daily records include the COVID-19 screening result (pass/fail).

The child care centre must also keep records of each person entering the facility in a daily log book. The record keeping will take place in the screening area. The supervisor of the centre will be responsible for overseeing the log book. Records must include name, contact information, time of arrival/departure, and the screening results (pass/fail). These records must be kept up to date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak.

In accordance with the above policies, the summer camp program will be keeping all written records on site, including screening results, daily logs, attestation forms, and test results. These records will be maintained daily and will be submitted to [dailycovidscreening@wdcc.ca](mailto:dailycovidscreening@wdcc.ca) at the end of each day. Tests results and attestation forms submitted by parents/guardians will be submitted to [covidupdates@wdcc.ca](mailto:covidupdates@wdcc.ca).

### Considerations

- Children or staff who have, through examination by their health care provider, been identified as having seasonal allergies, or who suffer from chronic runny nose/nasal congestion, or other chronic condition that manifests symptoms listed above and have been advised they are not required to self-isolate or go for a COVID-19 test, are not required to be excluded.
- Staff who refuse to be screened will not be permitted to attend work as scheduled. Payment for missed shifts will be at the discretion of the Direction, on a case by case basis.
- Any child whose parent or guardian refuses to screen them or does not provide verbal confirmation of the results will not be permitted to attend the program as scheduled.

- If the individual answers “Yes” to any of the screening questions that indicate they should not attend, they will be excluded from the child care centre, based on the exclusion policy below (and as directed by Public Health). Any excluded child’s principal registered parent/guardian will be provided with an email notification that will indicate what steps are required. If symptoms develop on site, WDCC educators will follow the directions for isolation and exclusion indicated in further policies.

#### Medication Use

- **We suggest that you do not administer common illness medications (such as Tylenol and antihistamines) to children in the morning before our pre-screening** that might mask screening symptoms, and if doing so, you should report this to the screener.
- A doctor can give us permission in writing to administer some medications (such as pain and allergy medications) on your behalf after screening. **WDCC educators still ask that you disclose to screeners when your child has been given medication, as a precautionary safety measure, in order to monitor your child for any hidden symptoms throughout the day.**

## **Testing and Exclusion Policy**

### Rationale

WDCC and Camp Waterdown programs will put in place the following Testing and Exclusion policy, to be implemented at all programs, in accordance with Hamilton Public Health, and the Ontario Ministry of Education.

### Testing

1. Symptomatic staff and program participants should follow the latest screening guidelines to be referred for medical assessment and/or for COVID-19 testing, in accordance with the Ontario Government's updated testing policy for symptomatic individuals.
2. Programs must consider two or more symptomatic, laboratory-confirmed case of COVID-19 in a staff member or child (or other visitor) as a confirmed COVID-19 outbreak with an epidemiological link within a 14 day period, in collaboration between the local public health unit, to ensure outbreak numbers are properly recorded, and contact tracing can occur.
3. Hamilton Public Health Services will work with the licensee to determine whether epidemiological links exist between cases and whether transmission may have occurred in the child care setting.
4. Program participants or staff who have been in contact with suspected COVID-19 cases should be monitored for symptoms, and further grouped together, until laboratory tests, if any, have been completed, or until directed by the local public health unit.
5. Staff members and program participants awaiting COVID-19 test results will be excluded.

### Exclusion of Sick Children/Staff Policy and Procedures

The City of Hamilton wants to ensure that all licensed child care centres are providing a safe and healthy environment for children, families, and providers. Licensed child care providers must be aware of, and adhere to, established exclusion criteria.

Information on different conditions and exclusion periods for other infectious conditions are available in City of Hamilton's Infection Control Guidelines for Child Care Centres (<https://www.hamilton.ca/sites/default/files/media/browser/2018-12-07/infection-control-guidelines-child-care-centres.pdf>). In response to COVID-19, it is critical for licensed child care providers ensure

#### When to Exclude

In alignment with the *COVID-19 Variant of Concern: Case, Contact and Outbreak Management Interim Guidance*, a more rigorous and cautious approach is being adopted to support a more comprehensive and enhanced school and child care screening program.

#### **Single-Symptom Screening**

Children and staff with any new or worsening symptoms of COVID-19, **even those with only one symptom**, must stay home until:

- They receive a negative COVID-19 test result,

- They receive an alternative diagnosis by a health care professional,
- Or it has been 10 days since their symptom onset and they are feeling better.

The provincial COVID-19 screening tool has been updated to reflect these changes:

<https://covid-19.ontario.ca/school-screening/>

You can also download the screening tool:

<https://covid-19.ontario.ca/download-covid-19-screenings#school-and-child-carescreening>

English: [https://covid-19.ontario.ca/covid19-cms-assets/2021-02/COVID19%20school%20and%20child%20care%20screening\\_ENG\\_AODA.pdf](https://covid-19.ontario.ca/covid19-cms-assets/2021-02/COVID19%20school%20and%20child%20care%20screening_ENG_AODA.pdf)

French: [https://covid-19.ontario.ca/covid19-cms-assets/2021-02/COVID19%20school%20and%20child%20care%20screening\\_FR\\_AODA.pdf](https://covid-19.ontario.ca/covid19-cms-assets/2021-02/COVID19%20school%20and%20child%20care%20screening_FR_AODA.pdf)

### **Isolation Requirement for Household Contacts of Symptomatic Individuals**

As outlined in the *COVID-19 Variant of Concern: Case, Contact and Outbreak Management Interim Guidance* all asymptomatic household contacts of symptomatic individuals are required to quarantine until the symptomatic individual receives a negative COVID-19 test or an alternative diagnosis by a health care professional. If the symptomatic individual does not seek COVID-19 testing, all household contacts must quarantine for 14 days from their last contact with that symptomatic individual.

#### a. How to Exclude

A written process must be developed to outline the steps required if a child/staff requires exclusion from the program.

- If a child or child care staff becomes sick while in the program, they should be isolated and family members contacted for pick-up. If the sick person is a child, a child care staff should remain with the child until a parent/guardian arrives,
- If tolerated and above the age of 2, the child should wear a surgical/procedure mask,
- The child care centre and summer camp program should specify where the isolation room will be and who will be responsible for monitoring the child,
- Anyone who is providing care to the ill child should maintain a distance of at least 2 metres or wear appropriate PPE (surgical/procedure mask and eye protection, gloves and gown if there is risk of exposure to infectious droplets),
- Staff member should also avoid contact with the child's respiratory secretions,
- Staff member must perform hand hygiene after any contact with the ill child,
- If a separate room is not available, the ill child should be kept at a minimum of 2 metres from others. This may be achieved by using physical barriers, floor markers, etc.,
- The ill child should be provided with tissues and reminded of hand hygiene, respiratory etiquette, and proper disposal of tissues,
- All items used by the ill person should be cleaned and disinfected by the cleaning staff designated for that cohort. Any items that cannot be cleaned (paper, books, cardboard puzzles) should be removed and stored in a sealed container for a minimum of 3 days,

- The ill individual and/or their parent or guardian be advised to use the online self-assessment tool, and follow instructions which may include seeking medical advice or going for testing for COVID-19,
- While an ill child self-isolates at home and their parent/guardian contacts health care provider for advice/assessment, asymptomatic household contacts and/or close contacts can continue to attend school/work and monitor for symptoms,
- **Children or staff who have been in contact with a confirmed or suspected COVID-19 case should follow Public Health’s recommendation on isolation and testing.**

b. End of Exclusion/Return to Child Care

Children and staff should follow the direction provided in the most current COVID-19 screening tool for school and child care from the Ministry of Health.

*Return to Care Scenarios:*

**1. For a child or staff who are waiting for test results**

- a. A symptomatic child or staff **MUST** self-isolate at home until test results are known
- b. All symptomatic household contacts of symptomatic individuals are required to quarantine until the symptomatic individual receives a negative COVID-19 test result, or an alternative diagnosis by a health care professional

**2. For a symptomatic child or staff who tests negative, they can return when ALL of the following apply:**

- a. They do not have a fever without using medication,
- b. It has been at least 24 hours since their symptoms started improving
- c. They were not identified as a “high risk” contact with someone who currently has COVID-19
- d. Additionally – all asymptomatic household contacts of symptomatic individuals can return to child care/summer camp if the symptomatic individual receives a negative COVID-19 test result and meets the above criteria for returning to the summer camp program.

**3. For a symptomatic child or staff who tests positive**

- a. Child or staff who test positive must complete a 10 day isolation period
- b. Asymptomatic household contacts and other close contacts of a COVID-19 positive case must complete a 14 day isolation period, even if they receive a negative COVID-19 test
- c. Child or staff who test positive can then return to child care setting after the 10 day isolation period provided that all of the following apply:
  - Child or staff does not have a fever (without using medication)
  - It has been at least 24 hours since the child or staff’s symptoms started improving

**4. For a symptomatic child or staff who is not tested**

- a. The symptomatic child or staff must complete a 10 day isolation period
- b. All household contacts must complete a 14 day isolation period from their last contact with that symptomatic individual
- c. They (symptomatic child or staff and household contacts) may return earlier if all of the following apply:

- A doctor diagnosed child or staff with another illness,
- Child or staff does not have a fever (without using medication)
- It has been at least 24 hours since child or staff symptoms started improving,
- They were not identified as a high risk contact with someone who currently has COVID-19

## **Reporting to Public Health Policy**

### Rationale

Child care centre licensees have a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. There are separate reporting requirements for the Ministry of Education and the City of Hamilton Public Health, as outlined below. Communication protocols to update and inform necessary stakeholders within the child care community while maintaining confidentiality of the ill individual should be initiated. Operators must ensure that staff are aware of the current reporting requirements.

Note: ill individuals should be excluded as per City of Hamilton COVID-19 Exclusion of Sick Children/Staff Policy and Procedures document.

### Reporting

The following policy is taken directly from the City of Hamilton's Reporting Requirements document, as updated on October 6, 2020. This policy specifically outlines the requirements for reporting to Public Health. Requirements for reporting Serious Occurrences appears after this policy.

#### a. Reporting requirements for City of Hamilton Public Health

Notification to Public Health of a child or staff failing a screening is no longer required. Child care licensees must contact Hamilton Public Health Services to report:

- Clusters of suspected cases (e.g. two or more children, caregivers, visitors or staff with COVID-19 symptoms within a 48-hour period).
- Cases of COVID-19 among staff or child attendees that are laboratory-confirmed or probable (i.e. symptoms occurring among a staff or child who has been exposed to a person with confirmed COVID-19, or, travelled to an affected area in the 14 days prior to symptom onset.)
- Public Health 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. Notification should be provided by calling the COVID-19 hotline, 905-974-9848 option 6.

## **Serious Occurrence Reporting Policy**

### Rationale

Child care centre licensees have a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. There are separate reporting requirements for the Ministry of Education and City of Hamilton Public Health, as outlined below.

### Serious Occurrence Reporting

The following policy is taken directly from the City of Hamilton's Reporting Requirements document, as updated on November 9, 2020. This policy specifically outlines the requirements for reporting serious occurrences to the Ministry of Education. Requirements for reporting to Public Health appears before this policy.

#### Reporting Serious Occurrences to the Ministry of Education

- Child care licensees are no longer required to report suspected cases of COVID-19 to the Ministry as serious occurrences.
- Child care licensees are required to submit serious occurrences to the Ministry of Education for confirmed cases of COVID-19 only
- A serious occurrence is required to be submitted when one of the following individuals has a confirmed case of COVID-19:
  - a child who receives child care at a home child care premises or child care centre,
  - a home child care provider,
  - a person who is ordinarily a resident of a home child care premises (e.g. the home provider's child, the home provider's spouse etc.; for complete definition please refer to the Home Child Care Licensing Manual)
  - a person who is regularly at a home child care premises (e.g. the home provider's friend who visits the premises once a week etc.; for complete definition please refer to the Home Child Care Licensing Manual),
  - a home child care visitor, or
  - a staff member at a child care centre
  - a student at a home child care premises or child care centre

While licensees are no longer required to report a serious occurrence for suspected cases; if the local public health unit determines that a full or partial closure is required (i.e., program room, home premises or entire child care centre must remain closed for a period of time), a serious occurrence report must be submitted under the "Unplanned Disruption of Service" category. Please also note there are requirements of employers to let workers know if they may have been exposed in the workplace. Please see the guide on developing a COVID-19 workplace safety plan for more information.

Should additional individuals at the child care program develop a confirmed case, licensees must either revise the open serious occurrence report to include the additional cases, or submit a new serious occurrence report if the first has been closed already. Licensees are required to post the serious occurrence notification form as required under the CCEYA, unless the local public health unit advises otherwise.

### Considerations

- WDCC has created an efficient communication procedure to ensure that all COVID-19 related information that is required to be tracked and reported as serious occurrences are reported according to WDCC's Serious Occurrence Policies (both COVID-19 and non-COVID-19 related policies), as well as the requirements from the CCEYA. This communication is done in a way that protects the identities of the individuals involved, informs only those who are required to know, and ensures all parties (educators, administrative staff, parents/families) have accurate information in a time sensitive manner.

## **Managing Children with Symptoms of COVID-19 Policy**

### Rationale

WDCC and Camp Waterdown programs have made this policy to comply with Public Health guidelines, to create a safe and supportive environment for staff and children when individuals exhibit COVID-19 symptoms.

### Managing Children with Symptoms of COVID-19

WDCC has taken our original Managing Children with Symptoms of COVID-19 Policy, and have only changed it in places that require updating to conform to more recent updates from Hamilton Public Health. Please contact [info@campwaterdown.com](mailto:info@campwaterdown.com) with any questions regarding this policy.

If a child begins to experience symptoms of COVID-19 while attending a program at WDCC, the following procedure must be adhered to:

1. The symptomatic child should be immediately separated from the group they were in, and taken to an isolated, supervised area until they can go home. Their staff member is to stay with the child until they are picked up.
2. The staff member should put on PPE as required (surgical mask, gown, gloves, and face shield/goggles). In addition, anyone who is providing care to the child should maintain a distance of at least 2 metres.
3. Contact your location supervisor to inform them of the symptomatic child. They will take the next steps to ensure that all the required steps have been taken to report, and notify all the relevant parties (administrative staff, parents/families, public health, Ministry of Education), and that it is tracked appropriately.
  - a. Other children and staff in the centre who were present while a child or staff member became ill should be identified as a close contact, and grouped together and monitored for symptoms. They should also be grouped together until they can be picked up, if pick up is required. For more information on exclusion of close contacts of symptomatic children, and close contacts of positive cases, please see the Exclusion policy.
  - b. Child care centres and summer camp programs must consider two or more, symptomatic, laboratory confirmed cases of COVID-19 in a staff member or child in a child care centre, with an epidemiological link, within a 14 day period, where at least one case could have reasonably acquired their infection in the child care centre as a confirmed COVID-19 outbreak, in consultation with the local public health unit. Outbreaks should be declared in collaboration between the centre and the local public health unit to ensure an outbreak number is provided.
  - c. Childcare centres and summer camp programs must consider a single confirmed case of COVID-19 in children, staff or parents as a serious occurrence, and must report the case to the Ministry, and the public health unit, following the Serious Occurrence policy.

- d. Children or staff who have been in contact with a suspected COVID-19 case should be monitored for symptoms and grouped together, until laboratory tests, if any, have been completed, or until directed by the local public health unit
4. Contact the symptomatic child's parents or emergency contact to pick them up immediately.
5. The following should be done while the staff member is with the child:
  - a. Hand hygiene and respiratory etiquette should be practiced while the child is waiting to be picked up
  - b. Tissues should be provided to the child for proper respiratory etiquette, along with proper disposal of tissues.
6. Environmental cleaning of the space the child was in should be conducted once the child has been picked up. Cleaning of the items and spaces the child had contact with throughout the day also must occur using enhanced cleaning measures.
7. Children and staff who had been exposed to a confirmed case of COVID-19 should be excluded from the child care centre and summer camp program according to the Exclusion policy, and should be referred to the local public health unit for next steps.
  - a. Those who are tested for COVID-19 should be excluded according to the Exclusion policy.
  - b. Testing of asymptomatic persons should only be performed as directed by the local public health unit as part of outbreak management.
8. Staff members awaiting test results, who are asymptomatic, may continue to work unless there is reason to believe they would be considered a case (e.g., potential exposure to an ill or positive case or household contact). Staff should also monitor for symptoms while waiting for test results; if they become symptomatic, they should be excluded from work. Staff awaiting test results should follow all direction that was provided to them by Public Health officials when they got their test.
9. Belongings of a child who became symptomatic must be cleaned and disinfected according to the enhanced cleaning measures policy. If items cannot be cleaned, they must be collected and stored in an airtight container for a minimum of 3 days.

Please contact Hamilton Public Health with any questions regarding testing, exclusion, and re-admittance to the program.

## COVID 19 Positive Cases and Contact Management Policy

### Rationale

To keep child care centres and our summer camp program a safe and healthy place for children, the Ministry of Health, and the Ministry of Education has created the following procedure for identifying positive COVID cases, and close contacts, as well as steps that child care centres and their programs should follow. WDCC commits to following the procedure as laid out below in order to keep our centres as safe as possible for the WDCC community.

### Procedure

In accordance with guidance provided by Hamilton Public Health, the following measures will be used to determine and manage positive cases, or close contacts of positive cases, in staff and children in the child care setting.

1. The COVID School Health team will now be responsible for all positive cases for children and staff who attend child care programs in the school and in the community
  - a. The COVID School Health team can be contacted at 905-974-9848 ex. 5
  - b. Hamilton Public Health acknowledges that staff, children and families often report a positive COVID-19 test result before public health reaches out to the child care centre and its programs. This is common because there is often a time delay between when the individual receives test results, and when public health receives test results.
2. The COVID school Health team often will learn that a child or staff attends or works at a child care centre during their initial case interview. During this interview, the COVID School Health team will determine any risks, and identify next steps, and then reach out to a child care operator **ONLY** when there is a risk of exposure to the child care community.
  - a. If there is no risk to the child care community, personal health information will not be released, and there is no need to isolate contacts.
  - b. Therefore, the child care centre would not be contacted by Public Health
3. If further action is required after the case interview, the COVID School Health team will email an early alert to our Divisional staff, which is sent out to the primary and secondary contacts that the child care operators provided last fall.
4. It may take up to **48 hours** for a public health staff member to contact you. In the meantime, child care centres should:
  - a. Isolate the positive child or staff, and follow the Managing Cases of COVID Policy
  - b. Determine who the child or staff has had close contact with,
  - c. Collect information on enrolment,
  - d. Complete enhanced cleaning of the areas of exposure,
  - e. Inform the school, if your child care centre is located in a school
5. When close contacts have been identified, Public Health will provide a spreadsheet to complete, which can be sent to a secure portal in order for Public Health to complete the risk assessment for staff.
6. If the child who tests positive attends school in the HWDSB, a meeting will take place that includes representatives from child care and school boards to determine the course of action that will be taken.
7. The COVID School Health team will issue a contact tracing letter which you are required to share with families and staff.

- a. For students in schools, the school boards take the lead for children attending Before and After School Programs and coordinate the timing of the messages with you to the school community, families and staff of your child care program
8. When a staff of a child care program located in a school tests positive, you are required to notify the school board designate to make them aware, and work with the COVID School Health team to determine next steps
  - a. If Public Health requires you to send out a Contact Tracing letter, please coordinate with the school board on the communication for both the school community and your child care program
9. If your centre makes a decision to close a classroom, or the centre, and it was an organizational decision, Public Health does not have a role in opening the centre or classroom. It is only when Public Health has required the closure that they would then be involved in decisions around reopening
10. Continue to notify Alex Madjeric of all positive cases via email at [alex.madjeric@hamilton.ca](mailto:alex.madjeric@hamilton.ca) and please do not share any identifying information in your email communication

## **Outbreak Response Policy**

### Rationale

WDCC has created the following Outbreak Response Policy to ensure proper safety measures and protocols are implemented, and in order to ensure the health and safety of all members of our program.

### Outbreak Case Definition

An outbreak will be declared when there are 2 or more lab confirmed COVID-19 cases in children and/or staff (or other visitors) in a summer camp program with an epidemiological link, within a 14-day period, where at least one case could have reasonably acquired their infection in the child care centre or summer camp program. Hamilton Public Health Services will work with the licensee to determine whether epidemiological links exist between cases and whether transmission may have occurred in the child care setting.

### Triggering an Outbreak Assessment

Investigate clusters of children, staff or visitors that have failed COVID-19 screening and tested positive for COVID-19 in the summer camp program and take the following steps:

1. 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 must contact City of Hamilton Public Health to report clusters of suspected COVID-19 cases and confirmed COVID-19 cases. 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.
  - a. Symptomatic staff/parents of symptomatic children should be advised to contact their local health care provider and book a COVID-19 test by visiting [www.hamiltoncovidtest.ca](http://www.hamiltoncovidtest.ca).
2. Where there is a confirmed case of COVID-19 in a child, staff, student, home child care provider, home child care visitor or a person who is ordinarily a resident /regularly present at a home child care premises the licensee must report this to the ministry as a serious occurrence
3. Enforce enhanced screening measures among children and staff. Screening should be conducted prior to arrival using the provincial tool and more frequent monitoring of staff/children should take place throughout the day.
4. If the local public health unit declares an outbreak, they will determine what happens next. This could include closing summer camp rooms or cohorts or an entire child care setting.
  - a. The public health unit will help determine which groups of children and/or staff/providers need to be sent home or if a partial or full closure of the child care setting is required.
  - b. If the public health unit determines that partial or full closure of the child care setting is required, the licensee must revise their existing serious occurrence report for a confirmed COVID-19 case to include information about the closure.

In addition, WDCC will take the following steps:

1. If a child or staff becomes sick while in program, they should be isolated, and the Managing Children with Symptoms of COVID-19 Policy, and the outbreak response, should be followed. Childcare staff should:
  - Remain with the child until a parent/guardian arrives. If the child is over the age of two, and can tolerate a mask, the child should wear a mask, provided by the summer camp program,
  - Specify where the isolation will be, and who will be responsible for monitoring the child,
  - Perform hand hygiene and put on a mask, face shield or goggles, and a gown and gloves,
  - Avoid contact with the child's respiratory secretions,
  - Staff members must perform hand hygiene after any contact with the ill child,
  - If a separate room is not available, the ill child should be kept at a minimum of 2 meters (6 feet), distance from others. This may be achieved by using physical barriers, floor markers, etc.
2. All items used by the ill person should be cleaned and disinfected by the cleaning staff designated for that cohort. Any items that cannot be cleaned (paper, books, cardboard puzzles), should be removed and stored in a sealed container for a minimum of 3 days.
3. One staff member must report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. Staff must contact their local public health unit to report a child suspected to have COVID-19, according to the Reporting policy guided by Hamilton Public Health. Revised guidance on reporting can be found above. Public Health 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.
4. Where there is a confirmed case of COVID-19 in a child, or staff, the licensee must report this to the Ministry of Education as a Serious Occurrence according to the Serious Occurrence policy. Where a COVID-19 outbreak is declared and a centre is closed, the licensee must report this to the Ministry of Education as a Serious Occurrence. Revised guidance on serious occurrence reporting can be found above.

### Required Steps in an Outbreak

An outbreak may be declared when, within a 14 day period, there are two or more confirmed cases of COVID-19 in a centre. If an outbreak is declared at a child care centre and any of its programs, including summer camp, the following measures must be taken:

1. Consult with and follow directions from the local public health unit.
2. Notify all family, staff and essential visitors of the facility's outbreak status (i.e. letters and signage).
3. Enhanced cleaning and disinfecting procedures.
4. Enhanced screening procedures.
5. More frequent hand hygiene.
6. Review staff training on proper PPE use.

### Outbreak Communication Procedure

The following procedure should be followed as closely as is possible, situation dependent, if a positive case of COVID-19 is reported in a WDCC program:

1. The executive director of the centre should be notified immediately if a staff member becomes aware of a positive case of COVID-19 in a child in any of WDCC's program.
2. The executive director will contact Hamilton Public Health in order to report the positive case and determine any next steps that should be taken, and any close contacts of the positive case.
3. The executive director will draft an email that will be sent to all staff to inform them of the positive case of COVID-19 with all details that are deemed necessary, including any direction from public health that is relevant.
4. The executive director will draft a notice that will be sent to all parents. Several notices may be drafted and sent out depending on the information that is deemed required to report to parents of children in unaffected programs.
5. The executive director will report the positive case as a serious occurrence on the Ministry of Education portal. This serious occurrence notification will be updated regularly and will be posted as required by the CCEYA.
6. The executive director will then inform all other relevant parties in the community, as deemed necessary.
7. Updates will be sent via email to parents and staff as frequently as new information becomes available, and in the event of other positive cases, or related centre closures.
8. The executive director should also provide staff with a briefing session, in order to support staff who may be receiving parent questions regarding the positive case, including what information staff are at liberty to share, and what information they are not.

#### Management of a Single Case in a Child/Staff

All members of the cohort are to be excluded from the child care setting for 14 days. In consultation with Public Health, cohort members may be referred for testing. If an additional case is identified, an outbreak may be declared. As well, the facility should increase surveillance and health checks to identify additional cases in other cohorts.

#### Management of Cases in Multiple Cohorts

If there are additional positive cases in other cohorts, an outbreak assessment will be done in consultation with Public Health. All staff and child in the child care centre may be referred for testing and the facility may be closed.

#### Declaring an Outbreak Over

In consultation with public health, the outbreak can be declared over if no new cases have occurred in 14 days from the last day of attendance of the most recent COVID-19 positive staff/child.

#### Past Updates

- In a revision from Hamilton Public Health on August 14, 2020, CMSMs/DSSABs must ensure that training that is aligned with local public health unit direction is provided to all child care staff/providers on the health, safety and other operational measures outlined in this document plus any additional local requirements in place as close to re-opening as possible. New training is not required with each iteration of this guidance but should be offered in a way that includes child care staff/providers at least once, whether they have re-opened through the summer or later into

the fall.” WDCC will be providing all staff with training when schools re-open in the fall, to provide staff with an opportunity to refresh our policies that stay the same, and to learn about updates that we made, and updates from the government. This will ensure all staff are fully up to date on all aspects of our new policies for the start of school.

## **Occupational Health and Safety Guidelines**

### Rationale

WDCC will implement the following Occupational Health and Safety Policy, in accordance with the local public health unit, for the safety of staff at WDCC.

### Occupational Health and Safety

1. Employers must have written measures and procedures for staff safety, including for infection prevention and control.
2. If a staff member is diagnosed with COVID-19, the staff member must remain off work for 14 days following symptom onset and has received clearance from the local public health unit.
3. If a staff member is a close contact of an individual diagnosed with COVID-19, the staff member must remain off work until 14 days from last exposure.
4. The staff member should consult with the local public health unit to determine when they can return to work. Staff members should also report to their Employee Health/Occupational Health and Safety department prior to return to work.
5. If the staff member's illness is determined to be work-related, in accordance with the Occupational Health and Safety Act, and its regulations, the employer must provide a written note within 4 days of being advised that a staff member has an occupational illness, including an occupationally-acquired infection, or if a claim has been made to the Workplace Safety and Insurance Board, or on behalf of the staff member with respect to an occupational illness, including an occupational infection, to the:
  - a. Ministry of Labour, Training and Skills Development
  - b. Joint health and safety committee
6. Any instances of occupationally acquired infection shall be reported to WSIB within 72 hours of receiving notification of said illness.

## Personal Protective Equipment Policy

### Rationale

For the purpose of this document “PPE” can refer to *any* of the following: gloves, gown, mask, face shield. Not all staff, roles or situations require the same PPE usage. When reading and following procedures, please use PPE for your role/situation, or as designated by Public Health (e.g. If you are only required to wear gloves, only gloves should be changed when policy indicates “PPE”).

WDCC staff will ensure that all staff members, essential visitors, and children (when applicable) are wearing the appropriate PPE at all times in the appropriate situations.

### Storage of PPE

PPE will be stored in the office, which is not accessible to children. Staff should do daily/weekly inventory, and sign out when a surplus of PPE is used, in order to keep a running inventory, to ensure enough PPE is always onsite. WDCC staff have received necessary training outlined by Public Health that indicates proper donning and doffing of PPE.

### Use of PPE

The following are WDCC-set guidelines, that align with Hamilton Public Health guidelines for the use of PPE when in the summer camp program:

- All Educators: All educators and staff within our summer camp program must wear a medical grade mask, and eye protection (face shield or goggles) at all times within the program, including in hallways and staff room (unless eating – but time with masks off should be limited and physical distancing should be maintained)
- Children: Children aged 2-3.8 years are encouraged to wear a mask, however, this remains at parent’s discretion. ALL children who are 3.8 years or older MUST wear a non-medical mask or face covering while inside the summer camp premises, including hallways and other shared areas. Guidance for child face masks is as follows:
  - Masks must cover the nose, mouth and chin without gaping. A properly fitted mask provided better protection,
  - School age children must wear a non-medical mask before they enter the summer camp premises. Masks are not to be shared or traded with others.
  - Families must provide the child with a sealed Ziploc bag with extra PPE in case the PPE they are wearing to the program becomes soiled throughout the day.
  - Families are encouraged to teach their children about proper PPE use, including putting it on and taking it off.
  - All reusable masks MUST be washed at home each night. Only fresh, clean masks will be permitted in the centre.
  - If the PPE becomes soiled, children must inform staff. If staff notice PPE is soiled, they will tell children to change their PPE. It is strongly recommended that children know how to change their own PPE, to prevent staff from having to come into close contact with children’s faces.

- If children are unable to change their own PPE, or they cannot abide by PPE etiquette (continuous touching, not changing it when required, etc.), staff will touch base with families about other accommodations.

### Face Mask Policy

To help ensure the safety of everyone at WDCC and Camp Waterdown programs, the following policy has been created. It takes into consideration all public health guidelines surrounding the use of masks, and indicates when, and where masks are required.

- Masks are not recommended for children under the age of 2
- Children between the ages of 2 and 3.8 are encouraged to wear a mask while inside program premises, however, this remains at the parent's discretion. WDCC had created communication to parents of children aged 2-3.8 regarding mask usage.
- All children from Kindergarten to Grade 12 are required to wear a mask while in school buildings. ALL staff and school age children will be required to wear masks while in any building that our programs run from.
- WDCC will ensure all program locations have a surplus supply of medical and non-medical masks to ensure staff and children have access to masks, as well as extra masks in the case that one becomes soiled throughout the day. Masks must be worn by staff AT ALL TIMES so it is important to have a surplus supply (at least enough for each staff for two per day per one week, must be on site at all times, as per public health guidelines).
- If staff use more masks than is typical, or they take the last mask in a box, we ask that staff inform a designated staff member (site supervisor, admin staff), so that it can be properly recorded, in order to keep track of PPE inventory.
- Staff must use proper donning and doffing techniques each time they use a new mask, and must dispose of it safely and in a clean way.
- Parents, guardians and caregivers will be required to wear a mask or face covering at both pick up and drop off each day. Signs will be posted at the screening area to remind parents about the face mask/covering requirement.

### Exceptions/Exemptions

Reasonable exceptions to the requirement to wear masks may be put in place by licensees and it is expected that these will be relatively rare cases. Exceptions to wearing masks could include circumstances where a physical distance of at least 2 metres can be maintained between individuals, situations where a child cannot tolerate wearing a mask, reasonable exemptions for medical conditions, etc., Licensees are asked to carefully review their masking exceptions policies and ensure that children are supported to wear masks to the greatest extent possible. Licensees may discuss with parents/guardians, in consultation with the child's health care provider, whether other types of face coverings might work for the child. In addition, resources are available that can be shared with parents/guardians on supporting children in wearing masks and on health and safety practices for children who cannot wear masks. All summer camp programs should document their requirements and exemptions related to masks (e.g. within their COVID-19 policy). Note that medical documentation is not required and should not be requested in these circumstances.

## Considerations

- Gloves are not required to be worn if proper hand hygiene is maintained frequently.
- Staff are aware that the use of masks is in place, not to protect themselves, but to protect others. Masks protect others from the spread of droplets, and do not protect the wearer from others.

### I. Past Updates

- In a revision from Hamilton Public Health on August 28, 2020, goggles are an appropriate substitute for a face shield. It is the responsibility of the operator to acquire substitute PPE such as goggles for staff, if needed. Prescription eye glasses or sunglasses are not a replacement for goggles. Staff who require prescription eye glasses are required to wear a face shield.
- In a revision from Hamilton Public Health on August 28, 2020, cloth masks can no longer be used. Medical masks and eye protection (e.g. face shield) are required for all adults in the child care setting.

## Physical Distancing Procedure

### Rationale

The following is a list of protocols to follow to ensure physical distancing is being maintained in our program. To ensure the safest and most supportive program for the children, families, and staff, it is important to incorporate physical distancing into our everyday routine. This policy *only* addresses physical distancing concerns (while touching on cleaning only slightly when required). For enhanced cleaning policies and procedures for the locations listed below, please see Enhanced Cleaning Procedures or the policy for the specific area.

### Terminology

**Physical Distancing:** In public health, physical distancing, also called social distancing, is a set of non-pharmaceutical interventions or measures intended to prevent the spread of a contagious disease by maintaining a physical distance between people and reducing the number of times people come into close contact with each other. This means making changes in your everyday routines in order to minimize close contact with others, including:

- avoiding crowded places and gatherings,
- avoiding common greetings, such as handshakes,
- limiting contact with people at higher risk (e.g. older adults and those in poor health),
- keeping a distance of at least 2 arms lengths (approximately 2 metres) from others, as much as possible.

#### I. Public Areas

Below is a list of guidelines that must be maintained in order to ensure physical distancing in our program.

##### I. Hallways

- Parents or guardians will not be permitted to enter the summer camp program, except in the case of an emergency.
- Educators will make sure that the hallway is completely clear before proceeding to their desired location.
- All hallways will be kept clear of any hazards.

##### II. Classrooms

- Parents will not be permitted into the classrooms unless necessary. If they *must* enter, 6 feet must be maintained between staff and other children.
- If children are rotating around to various activities, staff will be monitoring closely and will remove any materials that met bodily fluids or were touched to be sanitized.
- We will be reminding children not to touch their faces and to wash their hands after using shared items.

- Staff will incorporate more individual activities that encourage more space between children.
- Educators will be there to support the children during play to encourage conversations, reinforce the importance of physical distancing, and encourage open play.
- Common seating spaces and sleeping arrangements will be rearranged to maximize the space between children, such as:
  - Desks will be placed 6 feet apart from Monday-Friday.
- Visual aids will be arranged to maximize the space between children, such as:
  - Labels and name tags will be used to identify each child's belongings and materials.

### III. Outdoor

- We will increase outdoor time with activities that promote physical distancing.
- Each group of children will have their own designated outdoor equipment, which will be cleaned after each use.
- Proper cleaning and disinfecting protocols for any shared equipment that is used during outdoor play will be followed.
- Educators will remind children of physical distancing during their outdoor play.
- Games involving physical contact will be limited.
- No more than 1 group in each outdoor location at a time.

### II. Bathrooms

#### i. Children's Bathroom

- One child will be allowed in the bathroom area at a time, regardless of which group they are in.
- Educators must wear PPE as required when changing a child, and must dispose of it after changing a child and cleaning the bathroom.
- Children will wash their hands with soap and water, and will dry their hands and dispose of their paper towels in the bathroom.

Only one staff per group is designated to clean and sanitize the bathrooms, including sink, soap dispenser and paper towel dispenser.

#### ii. Staff Bathroom

- One staff in the bathroom at a time.
- Staff need to make sure the hallways are clear before entering the bathroom.
- All staff should clean and disinfect upon leaving the bathroom area, using the cleaning materials located in the bathroom.

### III. Staff Room

- The staff room will only be used by two staff members at a time, and in cases where a child becomes symptomatic. This will serve as the isolation area. It will be deep cleaned and disinfected upon the child being picked up.
- The staff room must be cleaned and disinfected in between use, and recorded on the cleaning log.

### IV. Office

- Minimal staff members will be permitted in the office per day. That staff member is responsible for the cleaning and disinfecting of the office that day.

### V. Kitchen

- Minimal staff will be permitted in the kitchen per day.
- Staff members are responsible for the cleaning and disinfecting of the kitchen that day.
- Kitchen staff members will prepare the snacks, organize the snack bins, and leave them outside the classrooms to maintain physical distancing.
- PPE is required when dropping off and picking up the trolley outside the classrooms.
- PPE is required to clean the dishes after each meal.

### Considerations

- Children will be placed into the same group each day,
- *Revision from Public Health as confirmed on Friday August 14, 2020:* “revised cohort size to maximum group sizes set out under the *Child Care and Early Year Act, 2014* as of September 1, 2020.” WDCC will update families promptly when decisions are made regarding increasing cohort sizes.
- The educators in each group will remain the same each day (unless on vacation or sick),
- At no point in time will groups be combined, as this will make it difficult to identify who was in contact with whom if someone becomes sick,
- A strategic schedule will always be adhered with certain guidelines
- Considerations have been made to alter or halt certain daily group activities that may promote cross-contamination and the following activities will not be permitted:
  - Special visitors,
  - Field Trips,
  - Special performances,
  - Sensory and water play,
  - Community playgrounds,
  - Outdoor play structure,
  - Games where children have close physical contact (i.e. tag),
  - Intermixing groups,

- Activities where physical distancing cannot be adhered to.

## Handwashing Procedure

### Rationale

Handwashing is the most effective way to prevent the spread of germs and bacteria. Below is the recommended procedure for washing your hands. Throughout this document, guidelines are provided on when to wash hands. In each instance, this procedure must be followed and was written in accordance with the Public Health Handwashing documents.

*Note:* Staff have been properly trained on the handwashing videos provided by Public Health. Staff should supervise and assist young children when necessary to ensure proper handwashing (e.g. hand over hand).

### How Germs Spread

- By touching your eyes, nose and mouth with unwashed hands,
- By preparing or eating food or drinks with unwashed hands,
- Touching items or surfaces that may have been contaminated.

### When You Should Wash Your Hands

- At all times while preparing food (before, during and after),
- Before and after eating food,
- Before and after taking care of someone who is sick or treating someone showcasing bodily fluids,
- After using the washroom, changing diapers, cleaning a child who was using the washroom,
- After blowing a nose, coughing or sneezing,
- After touching garbage or materials that do not belong to you,
- Whenever you feel as though you should wash your hands.

*Note:* during COVID-19, it is also important to clean your hands for the following reasons:

- After being in a public space, and touching an item or surface that may be frequently touched (e.g. door handles, faucets, tables, outdoor equipment),
- Before touching your face after you were in any public area, or after you were in a situation where you may have encountered COVID-19.

### Steps to Washing Your Hands

1. Wet your hands with clean running water (warm or cold) and then apply soap.
2. Lather your hands by rubbing them together with the soap and make sure to get the backs of your hands, in between your fingers, the tips of your fingers, your palms and wrists and under your nails.
3. Scrub your hands for at least 20 seconds (Do so with a timer or by singing the birthday song twice from beginning to end).
4. Rinse your hands thoroughly under clean running water.

5. Dry your hands using a clean paper towel or thoroughly air dry.

*Note:* Hand washing is the most important and best defense to get rid of germs in most situations. If clean running water is not readily available and you must clean your hands, using a hand sanitizer that contains at least 70% alcohol can help to reduce the amount of germs on your hands.

Steps to Using Hand Sanitizer:

Sanitizers can quickly reduce the number of germs in many situations, however, they do not get rid of all types of germs. Hand sanitizers may not be effective when hands are visibly dirty.

1. Apply the gel to the palm of your hand using the recommended amount located on the label of the bottle. To limit many children touching the pump or bottle, staff will apply to children or other staff when necessary.
2. Rub your hands together thoroughly covering all surfaces of the hand, like handwashing, until your hands are dry. This should take approximately 20 seconds.

## Enhanced Cleaning Measures Procedure

### Rationale

The following document outlines the necessary cleaning measures that will be used at WDCC. It is important to be aware that Public Health Regulations may provide additional requirements on these processes and in many situations will supersede the following. These cleaning measures and changes are in addition to our regular cleaning and disinfecting measures.

### Terminology

**Cleaning:** A strict cleaning procedure will be adhered to by using soap and water, which works to remove dirt and grease that can hide and protect germs from disinfectants. Cleaning with soap and water will reduce the number of germs that may be on surfaces. In all enhanced cleaning situations, cleaning with soap and water will ALWAYS be followed by disinfecting.

**Disinfecting:** After cleaning, disinfecting spray will be used to eliminate bacteria. A routine cleaning and disinfecting schedule is necessary to ensure these duties are completed, and will be maintained in a Cleaning and Disinfecting log that will be checked daily by the supervisor.

We will be following both cleaning and disinfecting procedures set out by the Public Health and the City of Hamilton. Wherever the word disinfecting is used, it will indicate that we have cleaned the items with soap and water first, and then disinfected them afterwards, following the instructions on the MSDS label.

### General Cleaning Requirements

- WDCC will use only approved disinfectant that includes a Drug Identification Number. Expired materials will not be used, and cleaning materials will be diligently monitored for replacement. Information for ALL cleaning materials used will be collected in the WHMIS binder. All cleaning products require a Safety Data Sheet which includes the expiry date. All cleaning materials will be kept out of reach of children,
- Hands must be washed before and after wearing gloves,
- The building and classrooms will be cleaned and disinfected at least twice daily. A designated staff will be assigned certain classrooms to clean each day, before and after program hours. They will ensure that each classroom has been cleaned and disinfected a minimum of twice per day. The staff will sign off on a cleaning schedule sign off sheet, located in the Cleaning and Disinfecting binder, which will be submitted at the end of each day,
- When cleaning and disinfecting it is necessary to follow the MSDS label for effective cleaning and allowing the disinfectant to remain wet on the surface for the required amount of time,
- Windows and classroom doors will remain open when possible for proper and necessary ventilation,
- Contaminated cleaning items will be disposed of in a lined garbage bag and reusable cleaning items will be washed regularly using the proper laundry procedures,
- Garbage will be emptied daily and as required to ensure a clean classroom,
- If staff/students are unable to practice physical distancing from each other while cleaning and disinfecting, PPE must be worn. It is recommended that staff review the MSDS sheets for health

and safety information about cleaning products, to determine whether additional PPE such as medical gloves should be worn,

- WDCC has produced specific cleaning and disinfecting schedules for each group, washroom, kitchen, common areas, indoor/outdoor play areas, and other areas accessed by the program,
- Existing cleaning and disinfection practices should be reviewed frequently to determine where enhancements might be required, including frequency and timing of cleaning and disinfecting, areas to clean, choice of cleaning products, and child safety, staffing, signage and PPE use when cleaning,
- WDCC has designated several staff, and backup staff, to clean and disinfect. Additionally, ALL educators are responsible for ensuring the classroom spaces are cleaned and disinfected thoroughly, and all staff are responsible for keeping cleaning and disinfecting records, which include the date, time, product used and the name of the staff.
- Children should not be permitted to help staff clean.

### High-Contact Surfaces and Classrooms

Frequently touched surfaces will also be cleaned at least twice daily, and more frequent cleaning and disinfection may be necessary, depending on the frequency of use and extent of soilage.

Frequently touched surfaces include, but are not limited to: washrooms, eating areas, doorknobs, light switches, handles, desks, phones, keyboards, touch screens, push buttons, handrails, computers, photocopiers, sports equipment, etc.,

Staff must adhere to toileting steps and ensure proper cleaning and disinfecting between changing soiled clothing or toileting processes.

- Only approved hard-surface disinfectants with a Drug Identification Number (DIN) will be used,
- Additional standard procedures for disinfecting will be followed using the disinfectant's MSDS label,
- If surfaces or objects are soiled with bodily fluids, use gloves and PPE as required, to avoid contact with the fluid. Remove the fluid immediately, and then clean and disinfect the surface. The object will be removed from play until safely disinfected.

### Steps to Cleaning High Contact Surfaces (including ALL washrooms)

1. Staff will wash their hands with warm running water and soap for 20 seconds.
2. Staff will don new PPE as required.
3. Staff will disinfect the high-contact surface with disinfectant, following the instructions on the MSDS label.
4. After the time indicated, staff will wipe down the high-contact surface with a paper towel or cloth. Staff must NOT use the same paper towel or cloth for every surface but use a different one for each surface.
5. Once staff has finished, staff will wash their hands with warm running water and soap for 20 seconds and don new PPE as required.

6. All high-contact surface areas will be cleaned a minimum of twice daily, and before and after the program is open.

#### Steps to Cleaning Garbage

1. Staff must ensure that at the beginning of the day before program begins there is a clean garbage bin with a lined bag.
2. When garbage appears almost full, inform the custodian so that a replacement bag can be replaced. Never let the bag become over filled.
3. If an item required to be disposed of is of high contamination, the staff must:
  - i. Wash their hands with warm running water and soap for 20 seconds and don new PPE as required.
  - ii. Take the high contamination item and put it in a plastic bag and tie it together.
  - iii. Put the plastic bag into the garbage and remove the garbage from the classroom.
  - iv. Inform the custodian that there is a high contamination bag in the garbage.
  - v. Dispose of their PPE in the garbage bag that is being removed.
  - vi. Wash their hands with warm running water for 20 seconds and don new PPE as required.
  - vii. Ask the caretakers to remove the garbage and replace with a new garbage bag.
4. Replace the garbage twice daily if possible, to avoid overfilling the garbage.

#### Toys and Materials

Toys and play structures must be cleaned daily. Each group will have designated toys and equipment when possible. Soft, fabric toys that cannot tolerate regular cleaning and disinfection must not be used.

- Water, sensory and cooking activities will be removed from program.
- Materials and toys provided will be child specific and single use when possible
- Multi-use materials will be disinfected daily.
- Outdoor materials will be provided per classroom and must be cleaned regularly before re-entering the building. No mixing of items outside of groupings.
- Any item that has been mouthed by a child will be removed from program immediately upon the child discarding the item. The item will be cleaned, and disinfected, and removed from program and placed in a bin for toys that were in a child's mouth.

#### 1. Hard Battery Toys

Toys which are electronic, have plugs or batteries, or otherwise cannot go into the dishwasher are included in this section.

1. Before cleaning, staff will wash their hands with soap and water, and will don new gloves.
2. Toys will be collected into a designated area before program, and after program. All will be sprayed with disinfectant, according to the MSDS label, and left to dry, twice daily.
3. During program, toys will be sprayed as needed throughout the day, while left on the shelf.
4. After handling toys directly, staff should remove their gloves, wash their hands, and put on new gloves.

ii. Dishwasher-Safe Hard Toys

Toys which can go into the dishwasher will be cleaned as follows:

1. Before and after program, and as needed throughout program, toys that can go in the dishwasher will be collected by a single staff wearing clean gloves.
2. They will be delivered to the kitchen, where the kitchen staff will collect the toys, sanitize them in the dishwasher, using gloves, and will return cleaned toys to outside the kitchen.
3. A classroom staff will pick up the sanitized toys from outside the classroom and return them to the classroom.

iii. Soft Toys

1. Soft or plush toys will be limited. To ease the transition back to child care, stuffed animals or blankets may be allowed in a limited capacity.
2. Soft or plush toys will be laundered, according to the laundry policy below, as follows:
  - Upon a child bringing them in on Monday morning. They must stay at the centre all week,

iv. Re-usable Art Materials

Children will have access to multi-use art materials, such as drawing utensils, scissors, glue sticks, and any other materials that children can use repeatedly. The summer camp program may also create small bags of these materials, labeled with each child's name, so they do not have to share as much. For *all* re-usable materials that children use, the following cleaning procedure will occur:

1. Staff will wash their hands with warm running water and soap for 20 seconds and then don new PPE as required.
2. The items to be cleaned will be removed from the shelf.
3. The items and the container will be cleaned and sprayed with disinfectant, according to the MSDS label.
4. Staff will return the items to the shelf.
5. Staff will remove their PPE, will wash their hands for 20 seconds with soap and water, and will put on new gloves.
6. This cleaning will happen twice daily before and after the program is open, and as needed throughout the day.

v. Books

Books will be limited because they are not easily cleaned. When deemed appropriate for use, staff will clean them as follows:

1. Staff will wash their hands with warm running water and soap for 20 seconds, don new PPE as required.

2. Before and after program, staff will collect all books from a classroom into a designated area, and will spray back and front and sides of book with disinfectant according to the MSDS label. This cleaning will happen twice daily, and as needed throughout the program.
3. After cleaning, staff will remove PPE as required, wash their hands for 20 seconds, and will put on new gloves.

vi. Phones and Tablets

1. Staff will wash their hands with warm running water and soap for 20 seconds, and don new PPE as required.
2. Staff will collect all tablets in their group to be disinfected twice daily before and after program, and as needed.
3. All classroom phones and tablets will be disinfected, following the MSDS label.
4. Once staff is finished, they will wash their hands with warm running water and soap for 20 seconds and don new PPE as required

Cubbies

1. Cubbies will be cleaned twice daily before and after program, and as needed throughout the day.
2. Staff responsible for cleaning cubbies will remove any gloves they are wearing, wash their hands for 20 seconds using soap and running water, and will put on new gloves.
3. Staff will spray the cubby areas that are in use with disinfectant spray according to the MSDS label, including the cubby bin, hook and bench area.
4. Staff should then remove gloves, and wash hands for 20 seconds with soap and water.

Kitchen

1. The kitchen will be cleaned by the kitchen staff twice daily before and after program, and as needed throughout the day.
2. Kitchen staff should don proper PPE as required, and wash their hands for 20 seconds with soap and water before and after cleaning.
3. Clean all hard, high contact surfaces (including counters, trolleys, etc..) with soap and water and a damp cloth upon entering the kitchen in the morning.
4. Follow this cleaning by using disinfectant, as appropriate and following the MSDS label. Please consider food preparation surfaces, in terms of food coming in contact with disinfectant.
5. Once the kitchen has been cleaned upon entry in the morning, kitchen staff should remove gloves, wash their hands for 20 seconds using soap and warm running water, and put on new gloves.
6. Kitchen staff will then sign off on morning cleaning, and should inventory all necessary cleaning and disinfecting materials before starting cooking. Ensure there is sufficient soap, disinfectant, clean cloths, hand sanitizer, paper towels and gloves in the kitchen, to avoid the kitchen staff running out while cooking.
7. Prior to starting to cook, staff will change their gloves, washing their hands for 20 seconds with soap and water in between changing gloves.
8. Prepare all food using proper food handling guidelines and enhanced hygiene.

9. Clean bins using the above listed method before placing any dishes or food on the trolleys, and ensure gloves are changed between touching food and touching clean dishes.
10. While children are eating lunches, kitchen staff can perform standard cleaning procedures, using enhanced measures.
  - a. All dishes that are dishwasher safe should be washed in the dishwasher
  - b. All other dishes must be washed according to the sanitizing procedure as listed in the kitchen.
  - c. All hard surfaces (counters, fridge and freezer handles, oven handles, door handles, etc.,) should be washed with soap and water, and again with disinfectant.
  - d. Enhanced sanitary measures will be used on surfaces such as food storage containers, stovetop, inside refrigerator/freezer as necessary, canned goods, and other food ingredients, based on proper food handling methods. This includes using food-grade surface disinfectant only on surfaces which it is safe for and using new cloths with soap and water on surfaces which disinfectant cannot be used.
11. Staff working in classrooms will ensure that when bins are returned, they are organized for the most efficient cleaning. Bowls or containers for food that can be thrown out may be provided on bins, if needed.
12. Before cleaning a bin, and in between each bin being cleaned, kitchen staff should remove gloves they are wearing, wash their hands for 20 seconds, and put on new gloves.
13. All food that has come into contact with children must be disposed of. All dishes that are dishwasher safe must be cleaned in the dishwasher. Dishes that cannot be cleaned in the dishwasher must be washed according to sanitary procedures located in the kitchen.
14. Bins will be cleaned in between use, using soap and water and a clean cloth, and disinfectant once dry. This includes bin handles.

### Laundry Room

1. Place ALL laundry, including possibly contaminated laundry, including non-medical cloth masks and facial coverings, into a container with a plastic liner and do not shake.
2. Wash with regular laundry soap and hot water (60-90°C), and dry well.
3. Any clothing, linens and non-medical cloth masks and facial coverings belonging to an ill person can be washed with other laundry.
4. A minimum of two daily cleaning and disinfecting procedures of ALL surfaces and containers in the laundry area will occur to ensure a safe environment, by a single designated staff.

### Outdoor Equipment

1. Each group will have their own set of outdoor materials that must be cleaned and disinfected before and after use.
2. Immediately following outdoor activity, the group must wash their hands with warm running water and liquid soap for 20 seconds.

### Cleaning and Disinfection Practices Following a Probable or Confirmed Case of COVID-19

WDCC has established the following protocol to determine contaminated areas, and how to carry out cleaning and disinfection, including timing, when to return to use, methods of cleaning, PPE to be used while cleaning, and waste disposal.

1. Following a probable or confirmed case of COVID-19, immediate cleaning and disinfecting of the classroom in which the child receives care will begin.
2. Classroom educators will identify all areas, toys and materials that require cleaning plus disinfecting, and will target those items first for immediate cleaning.
3. Classroom educators will also identify other areas the child passively came into contact with (such as a hallway), and those areas will receive cleaning and disinfecting following the higher-risk areas that were identified in step two.
4. Once the high-risk areas from step two, and passive areas from step three have been cleaned and disinfected, designated and back up cleaners will ensure ALL toys and materials in the classroom go through additional cleaning and disinfecting, including the use of the industrial dishwasher for ALL items possible.
5. After program ends, the classroom and other areas in the centre will receive an additional clean and disinfection. In addition ALL other classrooms and areas that the individual did not come into contact with will be thoroughly cleaned and disinfected.
6. All cleaning and disinfecting will be documented according to procedure. WDCC ensures enhanced cleaning happens thoroughly every day. The enhanced procedures used for cleaning will be enhanced further in the event of a probable or confirmed case of COVID-19.
7. Disposable cleaning equipment, such as disposable wipes, will be used where possible.
8. All items that cannot be cleaned (such as paper or books) will be removed from program and stored in a sealed container for a minimum of three days. This includes any child belongings that are present in the program.

*Note:* ALL cleaning that is completed before, during and after program MUST be recorded in the corresponding Cleaning Log, signed off by the supervisor daily, and filed in the Cleaning and Disinfecting Binder, which should be made available to Public Health upon request.

## Documentation Procedure

### Rationale

In order to comply with the Government of Ontario, the Ministry of Education, and Public Health, WDCC has included new procedures for documentation of daily health and safety measures.

### Documentation

WDCC will be documenting all of the following:

#### 1. Daily Health Screens

1. Daily health screening will occur as per the COVID-19 screening policy.
2. Screeners will record the following on a daily screening attendance:
  - a. Child name
  - b. Child entry and departure times
  - c. Result of screening
  - d. Contact information

#### 2. Visitor Logs

1. ANY visitor to the summer camp program, including special needs resources, custodians entering the summer camp program, and any other individual who enters the location MUST be health screened before they are allowed to enter.
2. Upon approval to enter the building, ALL visitors will be recorded on a visitor log, which will be signed off by a supervisor and filed *weekly*.
3. The visitor log MUST include: name, contact information, time they entered, time they left, status of their health check, reason for visit, and where they went. This makes contact tracing for possible COVID-19 cases easier for Public Health.

#### 3. Cleaning Logs

1. Cleaning logs will be maintained *weekly* (daily recording filed each week) for the following locations: classrooms that are open (including their toys and materials), all bathrooms (staff and child), kitchen areas, office, laundry area, entrances and exits, and any other high-contact areas.
2. The staff responsible for cleaning any given area at any time of the day must fill out the cleaning log upon finishing the clean. If the log is not completed, the staff will be asked to clean the area again and fill out the log.
3. The cleaning log should include: the date at the top, the time the area was cleaned, the staff who was responsible for cleaning it, the items they cleaned (for classroom mostly, e.g., entire classroom, vs high contact surfaces, vs materials), the type of cleaner used and any notes that are important to communicate (any extremely soiled areas, presence of bodily fluid, any materials that are running low in the area e.g., paper towels, disinfectant, etc.,).

#### 4. Inventory Tracking

1. An inventory tracking log will be used to keep track of all health, safety and cleaning materials we have at the summer camp. This can include: gloves, masks, advanced PPE, disinfectant, hand sanitizer, paper towels, cloths, etc.,
2. The inventory tracking log does not necessarily need to identify our entire supply of all materials, but should be used to identify when supplies are running low, so we can re-order materials before we run out of them.
3. The inventory list should include: who recorded the item into the list, the date they recorded the item into the list, how much of the item we have left, and the expiry date of the product, when applicable.
4. The inventory list for re-ordering will be reviewed by the supervisor as needed, will be double-checked to ensure we do not over order, and when confirmed, the supervisor can re-order the item.

#### 5. PPE Pick Up

1. PPE pick up form will be maintained *as needed*. This form will ensure that staff who require extra PPE outside their daily norm is recorded, to help with inventory tracking.
2. This log helps us keep track of the flow of PPE, ensures we have enough PPE for staff and can inform our decisions on when to re-order.
3. It also helps ensure all staff receive the correct amount of PPE, and no staff is getting more than others or more than is required by their position.
4. This log will be reviewed by a supervisor.

#### vi. Staff Training

1. Staff training on mandatory Public Health videos regarding the safe and correct use of PPE and handwashing procedures, as well as on site specific policies and procedures will occur every three months OR whenever a policy change occurs, whichever comes first.
2. A designated staff will be responsible for staff training records. These records will be collected and stored electronically, and will be kept for a minimum of one month.
3. A designated individual will conduct visual checks to verify staff understanding and compliance with training materials and operational measures

## **Drop Off Procedures**

For our camp program, we have decided the following method for drop off would suit our needs, and the needs of our families. The summer camp hours of operation will be 7:30am – 5:30pm, with drop off times between 7:30-8:25am.

### Drop Off

1. All staff should arrive at least 10 minutes before their shift.
2. Upon arrival, staff must wash their hands for 20 seconds with warm running water and liquid soap.
3. The screener will safely and correctly don all PPE that WDCC provides, including masks, gloves, gown, and face shield. The screening checkpoints will be set up with posters, clear signage, hand sanitizer and screening forms.
4. Parents must complete the Ontario School Screening for each of their children prior to arriving at camp each day. Parents are asked to take a screenshot of their child(ren)'s passed screening results.
5. When parents arrive at screening, the screener will approach them. The screener will confirm they have completed the screening online for that day for each child, and will confirm that all children have passed. Screeners will also confirm that parents actively engaged in the screening each morning, and did not simply click through all the results.
6. When the screener confirms the children have passed, the screener will conduct a contactless temperature check. If the child does not have a fever, they will be admitted into the program. If the child does have a fever, the screener may ask the child to stand in the shade and cool down from the outside heat before taking their temperature again. If the child continues to have a fever, they will not be admitted into the program.
7. Once the child has been cleared to enter the program, the screener will record all the screening information on the form.
8. The parent and their child(ren) will enter the playground. They will approach the external door to the classroom, where they will be greeted by their group's educator.
9. After dropping off their children, and parent will continue through the kindergarten playground to exit out the other side.

## Pick Up

### Rationale

To correspond with our increased hours and the needs of the families in our program, Camp Waterdown has designated 2 pick up times from which parents can choose from. Parents are asked to let us know daily at drop off when they intend to pick up, and this will change, with advance notice, to a pick up time for the foreseeable future, as chosen by the parents.

Pick up times to choose from are 4:30 and 5:25.

### Pick Up

1. Parents will let the screener know what time they intend to pick up their child each day.
2. Cohort educators will be aware of when their child's pick up times are, so children can be ready in advance.
3. Parents are not required to call when they arrive, unless their pick up time changes throughout the day, as staff will be aware of what time each child will be picked up.
4. If a pick up time does change, we ask parents call the camp as early as possible, and to call when they arrive, so educators can be prepared for pick up.
5. Parents are strongly encouraged to wear masks at pick up, and must maintain physical distance from other families.
6. When parents arrive at the designated pick up times, educators will ensure all children who are returning home at that time have all their belongings, and will bring their entire group outside to drop the children off.

## Snack and Mealtime Procedure

### Rationale

The following is a list of protocols for snack time, and mealtime for summer camp to ensure the safety of our children and educators. These policies are to ensure that we are handling food safely, as well as to continue to physical distance.

#### I. Mealtime

Twice daily, children will be permitted to eat snack and lunch from their lunch boxes provided from home. The following procedure will outline how mealtime will be executed during the day:

1. All children will wash their hands with warm running water and soap for 20 seconds before getting their lunches from their backpacks.
2. Children will place their lunches at their labeled desk.
3. Children will then wash their hands with warm running water and soap for 20 seconds.
4. Children will eat their snack or lunch while maintaining physical distancing measures.

*Note:* children will NOT move chairs or desks to be closer to their friends.

5. Once finished, children will wash their hands with warm running water and soap for 20 seconds before returning their lunch bags to their backpacks.
6. Children will use hand sanitizer before re-entering the classroom.

#### II. Snack Time Procedures

At a designated time, Camp will provide children with a snack. The following procedure will be maintained by all staff when dispersing snack to ensure the safety of all staff and children:

1. Only one staff will be in the kitchen per day to prepare all snacks.
2. The kitchen staff will ensure they are wearing PPE as required while preparing snack, as well as washing hands with warm water and liquid soap for 20 seconds anytime they are taking off or changing gloves.
3. Kitchen staff will prepare snack for each classroom.
4. Kitchen staff will place snack on the cart in snack bins and will deliver snack outside each classroom for one educator to bring into the classroom.
5. The educator will wash their hands for 20 seconds with warm running water and soap and will hand out the snack to each child.
6. The educators will ensure children are not sharing any of the snacks.
7. If children need help opening snack, one educator will open the snack for them while trying not to touch the food, while wearing gloves.
8. Once snack has been delivered the educator will place the snack bin outside the classroom door.
9. Kitchen staff will retrieve the bins, as well as wash and sanitize any equipment used to prepare, eat and deliver snack – including snack trolley.

### III. Considerations

- It is important to ensure no children are sharing food, and that all children are eating their own snacks that are given to them by the educator.
- The kitchen staff will be responsible for cleaning all surfaces, using proper disinfecting and cleaning techniques, including counters, handles, knobs, food packages, dishes, snack bins, carts, etc., before, and after preparing snacks, as well as any other times necessary, and will record cleaning in the Cleaning Log.

## Bathroom Procedure

### Rationale:

The following document is a list of cleaning, scheduling, and staffing protocols to ensure the proper maintenance of the bathroom during COVID-19. These procedures will be used at Guy B. Brown Elementary School to ensure the safety of our children, staff, and families within our summer camp program.

### I. Cleaning Bathroom Protocols

Below is a list of cleaning protocols that will be performed throughout the day as well as at the beginning and end of the day by staff.

- i. ALL Bathrooms (classroom, hallway, staff)
  1. Staff will don full PPE when cleaning the bathroom.
  2. One staff will clean the bathroom in the morning, that staff will be responsible for the cleaning that bathroom area until the end of their scheduled shift to avoid cross-contamination.
  3. Staff MUST follow the MSDS instructions on the label of the disinfectant when disinfecting ALL areas, including:
    - each sink,
    - each faucet (if this applies),
    - all stall doors, inside and out, as well as door handles,
    - all toilets,
    - all walls inside the stalls,
    - all dryers/paper towel dispensers,
    - all soap dispensers,
    - all mirrors (in case of contact),
    - all countertops.
  4. Staff will wash their hands with warm running water and soap for 20 seconds, and then don new PPE as required after completing the morning clean.
  5. Staff will monitor the children from the classroom when they go to the bathroom and remind children of proper handwashing etiquette.
  6. After a child has gone to the bathroom, one staff will don PPE as required and clean the designated stall, sink, and dryer or paper towel dispenser with disinfectant, ensuring to follow the MSDS instructions on the label of the disinfectant.
  7. After each clean, staff will wash their hands for 20 seconds with soap and water.
  8. At the end of program, staff will don new PPE as required and staff MUST follow the MSDS instructions on the label of the disinfectant when disinfecting ALL areas listed above.
  9. After closing the bathroom, staff will don new PPE as required and assist wherever needed.
  10. Staff will record each time they cleaned the bathroom in the Cleaning and Disinfecting Binder for that day.

## II. Bathroom Procedure

1. In *all* bathrooms, only one child will be permitted to use the bathroom at a time.
  - a. For bathrooms in the classroom, staff will ensure that no children are in the bathroom before letting a child use the bathroom.
  - b. For bathrooms in the hallway, staff will ensure no children are in the bathroom. In addition, a staff member must stand in the doorway and supervise the child using the washroom to ensure they do not wander, or touch anything.
2. After a child is finished using the bathroom, the staff who is designated to clean the bathroom will clean the bathroom using the above procedure.
3. If a child has an accident, the staff should enter the bathroom and help the child, using the Procedures for Assisting Children. If a child has an accident and needs help being changed *and* is using the hallway bathroom, an educator from that cohort can enter the bathroom to assist.

*Note:* it is recommended, especially for the hallway bathroom, that only one stall is available to children to use. Because only one child will be permitted to use the bathroom at a time, there should be no conflicts. This is to limit the amount of cleaning a staff would need to do. Instead of cleaning all toilets in the bathroom because they are unsure which stall the child used, it limits the choice to one. In the case that two children are having bathroom emergencies, staff should use their discretion to allow two children in the bathroom at once. Staff should supervise them in the washroom (even in the hallway) to make sure they are maintaining physical distancing as much as possible. Extra cleaning measures should be taken in this situation.

## Sunscreen Procedure

### Rationale

This document outlines the sunscreen protocol that will be enforced to eliminate the spread of COVID-19 at Waterdown District Children's Centre and Camp Waterdown.

### Protocol

The sunscreen protocol will be as follows:

1. Before going outside, children will be required to wear sunscreen.
2. Children and educators must first wash their hands with warm water and soap for 20 seconds before putting sunscreen on,
3. If child is able to, they can apply their own sunscreen while being closely monitored by an educator.
4. Educators will dress in PPE as required and sunscreen one child at a time, using the sunscreen provided from home.
5. After the educator has finished applying sunscreen to one child, they must dispose of their PPE as required, wash their hands with warm water and soap for 20 seconds, and put on new PPE as required before continuing on to the next child.
6. Once all children have their sunscreen on, they will wash their hands with warm water and soap for 20 seconds.
7. Educators will (one at a time), wash their hands with soap and water for 20 seconds before continuing outside.

*Note:* Communal sunscreen is PROHIBITED. Children MUST bring their own sunscreen from home.

## Outdoor Procedure and Policy

### Rationale

The following document will outline safe and fair guidelines for all outdoor play for the children and staff. All groups at Camp Waterdown must adhere to a strict outdoor schedule to ensure physical distancing is being maintained between each group. At Camp Waterdown, we are committed to keeping group outdoor schedules as consistent as possible.

#### I. Designated Areas

All groups will have a designated outdoor section as well as staggered outdoor times to reduce the number of groups outside at a time. Each section will be labeled with a large sign with each group. If an area is shared between two groups, an outdoor schedule will be created to ensure that those groups do not go outside at the same time. Each group will have designated entrance and exits, as well as a designated hallway that they must use when proceeding to their outdoor area.

*Note:* At NO point in time may two different groups go to the same area at the same time. Staff MUST follow their outdoor schedule to ensure physical distancing. These groupings are subject to change based on registration numbers.

#### II. Considerations

- Staff must create outdoor games that promote physical distancing and limit the amount of equipment.
- Each cohort will have their own outdoor equipment that must be cleaned and disinfected after each use. Cohorts will not share equipment,
- The use of the outdoor play structure is PROHIBITED,
- Staff must follow First Aid Procedures, located in their staff binders, if a child gets hurt while outside.

#### III. Daily Schedule

Each staff will have an outdoor schedule located in their staff binder, along with a general outline of the floor plan of the school, with directions. Staff must not use any other directions but their own.

1. Prior to their scheduled outdoor time, the group will get ready to go outside. This includes:
  - a. Filling up their water bottles if needed.
  - b. Going to the bathroom, following the Bathroom Procedure.
  - c. Following the directions of the Sunscreen Procedure.
  - d. Donning hats or any other sun protective wear they might need.
  - e. Grabbing their equipment to take outside with them.
2. Directly before leaving, ALL staff and children will wash their hands following public health protocols for handwashing.
3. Staff will check to make sure that the hallways are all clear.
4. Staff will then lead their group down the designated hallway.
5. Staff will lead their group to designated doors.
6. Staff will then lead the group to their designated outdoor area.

7. After outdoor time is over, children will gather up all the outdoor equipment.
8. They will use the SAME designated doors and hallways that they used to exit the building, to re-enter the building.
9. Upon arrival back into classroom, staff and campers will follow handwashing protocols before any other activities
10. Staff will then follow cleaning and disinfecting procedures as directed by public health and the Enhanced Cleaning Procedure to clean and disinfect all the outdoor equipment.

#### IV. Enhanced Cleaning Outdoor Equipment

All groups will have their own designated bag of outdoor equipment. At NO point may staff share this bag with another group. Please refer to our Enhanced Cleaning Procedures and Policy on how to properly clean and disinfect all outdoor equipment. Each group will be responsible for the cleaning and disinfecting of their own equipment, and this procedure must be done at least twice daily, and after each use.

## **Materials Procedure**

### Rationale

The following procedure will be maintained in order to ensure the safety of our staff, children and families at Waterdown District Children's Centre when buying, dispersing, and using materials in our programs.

### Communal Materials

When able, each child will have a labeled bin of art materials that are theirs to use throughout the day. Communal materials may also be provided.

Communal materials must be cleaned and disinfected according to the Enhanced Cleaning Protocol provided above. These items should be cleaned and disinfected in between each use, if they have come into contact with any bodily fluids, and at least twice daily. These materials will be closely monitored by educators to ensure that proper use is being maintained, and that cleaning and disinfecting is being maintained between each use. Communal materials will include:

- Scissors,
- Glue Sticks,
- Paintbrushes,
- Paint,
- Drawing materials,
- Toys, manipulatives, books, etc...

## **Procedures for Assisting Children with Individual Needs**

### Rationale

To ensure the safety of our staff and children, we have created enhanced procedures for assisting children with individual needs. These policies are to ensure that our staff and children stay as safe as possible where physical distancing guidelines cannot be maintained.

### Changing Soiled Clothes

1. Before assisting a child, staff must change their gloves and wash their hands for 20 seconds with warm running water and liquid soap and put on new gloves and will don all required enhanced PPE.
  - If staff and child are outside, then staff will use hand sanitizer and change gloves.
  - Staff will then bring the child into the classroom.
2. The staff will then change the child, safely put the child's clothing into a bag that is labeled. Staff and child will then wash their hands for 20 seconds with running water and liquid soap, and staff will remove and dispose of any PPE as required, and apply new gloves. The child's soiled clothes will be placed directly in their cubby, not hanging on a hook, or hanging out of backpack.
3. The staff will ensure all surfaces in the bathroom are disinfected, including sink, soap dispenser and paper towel dispenser.
4. If surfaces or objects are soiled with bodily fluids, the staff will don all PPE as required, to avoid contact with the fluid and ensure that the fluid is cleaned up quickly, while the other staff is changing the child. Staff will remove the fluid immediately, then clean and disinfect the surface, object or area.
5. Staff will then wash their hands and remove and dispose of any PPE as required and don new PPE as required.

### Helping with Shoes and Other Items

1. Before assisting a child, staff must remove their gloves, wash their hands for 20 seconds with soap and water, and put on new gloves.
  - If staff and child are outside, then staff will use hand sanitizer and change gloves.
2. Staff will assist the child by turning their face away to the side with their mask on while helping the child where physical distancing guidelines cannot be maintained. Staff should keep as much distance from the child's face as possible.
3. Staff will then wash their hands or use hand sanitizer if outside and will remove and dispose of any PPE.

### Wiping Bums

1. If a child requires assistance with wiping their bum, one of the educators in that group will assist that child.

2. Before a staff can assist a child, they must change their gloves and wash their hands for 20 seconds with warm running water and liquid soap before putting on new PPE gloves.
3. If the child is younger, the staff will assist the child in wiping by having the child face away from them so they can assist them as safely as possible.
4. The child will then wash their hands.
5. The staff who changed the child in the bathroom will disinfect the toilet, sink and paper towel holder before any other child uses the bathroom.
6. Staff will remove and dispose of any PPE as required, wash their hands and put on new PPE as required.
7. For children who are older, staff can demonstrate and model how the child can wipe, while physically distancing. The staff can also use verbal and visual cues to help.

### Filling Water Bottles

Drinking from communal water fountains will be off limits to all individuals and hallway water fountains will be closed. All campers and staff will be encouraged to bring a water bottle from home and fill it up.

1. If a child needs assistance opening or closing the lid of their water bottle, one of the educators in that group will assist that child.
2. Before a staff can assist a child, they must put on a pair of gloves, help fill up their water bottle and then wash their hands for 20 seconds with warm running water and soap.
3. A detailed cleaning must be done after touching the sink surface, including all faucets, handles and other contacted surfaces.
4. If a camper can fill their own water bottle, they may do so. They must first inform their teacher that they need to fill their bottle.
5. They can fill their bottle if no one is at the sink.
6. Once they are finished, they must wash their hands for 20 seconds with warm running water and soap.
7. A detailed cleaning must be done after touching the sink surface, including all faucets, handles and other contacted surfaces.

### Personal Belongings

There may be cases where children need assistance with their personal belongings, such as opening containers from their lunches or zipping up a zipper to their coats and packing/unpacking backpacks

1. If a child requires assistance with something, one of the educators in that group will assist that child.
2. The educator must correctly don all required PPE (gloves and masks a minimum requirement), and use proper hand hygiene.
3. If close contact is required with the child directly (e.g. Zipping a zipper), it is recommended that the staff turn their face away from the child, and to maintain physical distancing as much as possible.
4. Staff must wash their hands with soap and water for 20 seconds and put on new gloves.

## First Aid Procedure

### Rationale

This document outlines the First Aid protocol that will be enforced to eliminate the spread of COVID-19 at Waterdown District Children's Centre and Camp Waterdown. In addition to the First Aid protocols that WDCC already has in place, we will be adding these measures to ensure the safety of our staff and children during an outbreak such as COVID-19.

### Protocol

1. When assisting a child with first aid, educators will wear PPE as required.
2. The staff leading the group will be the staff that conducts first aid to the child. No other staff from a different group will perform first aid unless absolutely necessary.
3. If transporting a child, staff must wear full PPE (gown, gloves, mask, face shield).
4. First Aid will be performed wherever the child has injured himself/herself, unless otherwise not possible.
5. After the child has been addressed, educators will dispose of their PPE as required and wash their hands with warm water and soap for 20 seconds.
6. Children will also dispose of their PPE as required and wash their hands with warm water and soap for 20 seconds.
7. Children and educators will then put on new PPE as required.
8. If a child is able to, child will perform first aid on themselves while the educator monitors the child. This is NOT applicable in emergency situations, it is only applicable in cases where mild First Aid is needed, such as:
  - Applying Band-Aids (Educator will provide Band-Aids to child),
  - Applying Ice Packs to an injury (Educator will provide ice pack to child).

*Note:* All groups will have a portable, full first aid kit. The first aid kit will travel everywhere the group travels. It should include all standard first aid materials, and should include COVID-19 first aid materials, including gloves, masks, hand sanitizer for situations where sinks are not available, and other enhanced hygiene items. This will also accompany staff in case of emergency evacuation.

*Note:* Staff will don PPE as required when administering medication to a child who has written permission by the parent (following regular Medication Policy and Procedures). After administering medication, both the child and the educator will wash their hands with warm running water and soap for 20 seconds.

*Note:* For Emergency Protocols, refer to the Emergency Protocols section in the Policies and Procedures. Staff must be aware of both the First Aid Protocols and the Emergency Situation Protocols.

## **Emergency Procedures**

### Rationale

These emergency protocols have been established in accordance with the Emergency Management Policy at WDCC, with modifications to ensure that the health and safety of children, staff and families is not compromised in the case of an emergency situation.

#### I. Fire Drill

1. The centre has a written policy for fire drills that has been approved by the local fire department. Each staff member is familiar with this procedure and each program room has specific instructions for moving children safely out of the building. In the case of an emergency evacuation, physical distancing (including using exits consistent with exits assigned to groups for pick up and drop off) will try and be maintained as much as possible *without hindering the evacuation process or compromising the physical safety of anyone in the building.*
2. In case of an emergency that makes the centre's premises unsafe, the children will be evacuated from the building. Ensure that 911 has been contacted and the appropriate emergency personnel are informed of the situation. Other emergency numbers include:
  - Poison Control: 1-800-268-9017,
  - McMaster Children's Hospital: 905-521-2100.

The centre has arrangements for the following emergency evacuation locations:

- Guy Brown Before and After Care will go to Waterdown District Children's Centre,
- Mary Hopkins Before and After Care will go to Waterdown District Children's Centre,
- Waterdown District Children's Centre will go to Guy Brown Elementary School.

*Note:* Camp Waterdown's Summer Camp program will evacuate to Waterdown District Children's Centre if the need should arise. Accommodations will be made to ensure physical distancing between children at the daycare centre and children at camp is maintained, as well as between separate groups of children from camp. Children from camp will not be permitted inside the centre unless deemed absolutely necessary by the director, or by emergency service personnel.

The children will remain at these locations until the premises are safe for their return, or until children can be picked up by their parents or guardians.

3. Immediately inform emergency personnel if any occupants are missing.
4. Additional support, including consideration of special medical needs, will be provided in respect for any child or adult who needs it in case of emergency. For example, all life sustaining medication and any necessary equipment that would be required, would be communicated to all parties. Where possible, this will be given by the staff who has had

the most contact with that individual throughout the day, in order to limit the amount of people coming into contact with others, *without further endangering the health or wellbeing of the individual.*

5. If a child is injured, the staff who's group that child is in will ensure that the child receives appropriate first aid and medical attention. If the situation requires medical attention, staff will contact parents/guardians (or emergency contact if parent/guardian is not available). An accident report will be completed and filed in the records and a copy will be given to parents.
6. Staff will ensure children's safety at all times and maintain appropriate levels of supervision during the evacuation. This includes maintaining appropriate physical distancing from other groups within your evacuation site, and between staff members at the location. When and if possible, staff should help children sanitize their hands, if necessary and available.
7. When it is safe and appropriate, staff will contact all families to advise of the evacuation and make arrangements for the children to be picked up.
8. Record the date, time of day and the time to complete the evacuation in a daily log.
9. Debrief children and parents after an emergency.
10. Set out a plan to resume normal operations of the centre. A plan will be established setting out how to resume normal operations of the childcare centre, including a plan to support children and staff who may have experienced distress during the emergency.
11. In compliance with the Child and Family Services Act, any staff member who has reasonable grounds to suspect a child has suffered from, is suffering from, or is at risk for suffering from child maltreatment (sexual or physical abuse, physical or emotional neglect), must report the suspected maltreatment to the Children's Aid Society of Hamilton-Wentworth.
12. The centre will ensure that outdoor playground environment complies with Canadian Standards Association (CSA) Standard.
13. The centre will ensure the indoors is safe by performing a monthly centre inspection.
14. The centre must report any serious occurrence incident to the provincial childcare advisor responsible for licensing the centre.

## II. Lockdown Procedure

1. The staff member who becomes aware of the threat will inform the site supervisor **immediately**, while trying their best to maintain physical distancing standards until absolutely impossible. All other staff members will be informed of the threat as quickly and safely as possible.
2. Any staff who are outdoors will ensure that everyone who is outdoors moves to a safe and secure location as quickly and safely as possible. (This should now include considerations where possible about physical distancing and possible contamination of outbreak).
3. Staff who remain in the centre will:
  - Remain calm,
  - Contact the proper authorities as soon as safely possible,

- Gather all children into secure location, maintaining physical distancing when and if at all possible. The safety of the children and staff from the immediate threat of danger is the priority and should not be compromised in any way, for any individual, by physical distancing precautions when they are not feasible,
- Keep children away from any doors or windows,
- Close and lock any doors and windows when possible and turn off all the lights,
- Take attendance of all the children and confirm everyone is accounted for,
- Take shelter with children in a safe location (under desks, in closets, in cupboards),
- Keep children calm and ensure children remain in a safe and sheltered location,
- Wait for further instructions.

### III. Hold and Secure

1. A hold and secure is any threat in the vicinity of the childcare centre that could pose as a potential threat to the centre but has not occurred in or on the premise of the centre. This procedure is also applied to external environmental threats, such as gas leaks, oil spills, chemical release or forest fires. The Hold and Secure Procedures is as follows:
  - Inform the site supervisor **immediately**. All other staff members will also be informed of the threat as quickly and safely as possible. Notification of the situation should be provided to staff keeping in mind relevant and possible physical distancing and handwashing measures,
  - Any staff and children that are outdoors must return with their children to their classrooms immediately. Ensure the children and staff follow proper building re-entering and hand washing protocols, as well as note any materials that were left outside. These materials should be collected as soon as safe to do so, before any other group goes outside, and should be disinfected as directed in the Enhanced Cleaning Measures policy by the group which they belong to,
  - Staff will remain calm and take attendance to ensure all children are accounted for,
  - Staff will close all windows and will continue normal operations of the program and wait for further instructions,
  - The supervisor will ensure that entrances are locked, with a note placed on the door, informing parents and staff that no one may enter or leave the centre while the centre remains under a hold and secure,
  - The supervisor will contact any appropriate services, if necessary.

### IV. Bomb Threat

1. A bomb threat includes any threat (phone call, social media post, email, etc.) to detonate an explosive device to cause damage, death or injury. The bomb threat procedure is as follows:

- The staff member who is made aware of the threat will call 911 and report the threat to emergency services and the director or supervisor. Follow the direction of emergency service personnel,
- Staff will take attendance to ensure all children are accounted for,
- If the bomb threat is in the form of a package, no one is to touch the package,
- Staff will wait for instructions from the appropriate emergency service personnel and will follow proper evacuation protocol if needed.

#### V. Disaster Requiring Evacuation

1. Evacuation may be required if any of the following situations occur: fire, flood, power failure. The disaster requiring evacuation procedure is as follows:
  - The staff who becomes aware of the situation must inform the supervisor **immediately**. All other staff will be informed as quickly and safely as possible. Notification of the emergency should be given to all staff while keeping in mind physical distancing protocols wherever possible,
  - If the disaster is a fire, pull the fire alarm,
  - Everyone should evacuate the building as quickly and calmly as possible, and meet at the designated meeting spot, either outside the building or at the emergency evacuation locations. All attendances, emergency contact information and emergency medications should be collected, and staff should exit with their children through the nearest exit. *Only when possible without posing additional risks to staff and children*, physical distancing should occur during evacuation. Upon arrival at the designated meeting location, it is recommended that each group maintain 6 feet distance from each other, when possible,
  - Staff must take attendance upon arrival at the evacuation location to ensure every child is accounted for,
  - Staff will help ensure children remain safe and calm and will wait for further instructions,
  - As soon as possible, the supervisor will inform parents of the incident. The supervisor will also notify parents when an all clear has been given and will provide information on emergency situations that did not require evacuation, if necessary.

#### VI. Procedure during an Emergency Situation

1. The procedures during an emergency situation are as follows:
  - If emergency services are needed, they must be contacted and made aware of the situation as soon as possible, and given as much detail as possible,
  - If there are staff who are not present at the centre, they must be contacted and informed of the situation, and when applicable, be given the address or location of the emergency evacuation site,

- Staff will provide any necessary first aid to anyone requiring medical treatment. Staff should only treat children who are in their own group, when possible, and should use applicable PPE, if readily available. Do not re-enter the centre in order to obtain PPE,
- When given an all clear by emergency services, the following procedures will be taken:
  - a. All staff will be informed when an all clear has been given.
  - b. Staff will take attendance and then bring their children back to the childcare centre, or their designated room, and attendance will be taken.
  - c. Staff will notify parents of the all clear and parents will be informed on how normal operations will continue, if they are unable to continue as planned.
- When given an “unsafe to return”, the following procedure will be taken:
  - a. All staff will be notified that it is unsafe to return to centre.
  - b. In the case of a fire, if the program is unable to return to the location, staff will take attendance and take their children to the emergency evacuation site.
  - c. Parents will be informed of the emergency situation and the evacuation site, and a note will be placed on the childcare centre door when it is safe.

## VII. Considerations

1. Centre Specific Considerations:
  - Daycare – in the event of an emergency requiring evacuation, follow the emergency evacuation plan. Maintain distance between each group, as much as possible. Each daycare group should be assigned a location within their designated meeting place, six feet apart from one another to maintain physical distancing (eg. one group in toddler playground, two groups in preschool playground spread out, or one group evacuating through back staff doors),
  - Camp – in the event of an emergency requiring evacuation, follow the emergency evacuation plan. If possible, within the safety plan, groups may be able to exit the school through the same doors they are assigned at pick up and drop off (consultation with emergency services may be needed to confirm). Upon arrival at meeting place, staff should orient their group as close to the meeting place as possible while maintaining physical distancing from all other groups.
2. Fire Drill/Evacuation: Included with staff attendance binders should be a portable first aid kit. This could include all standard first aid materials, in addition to extra gloves, masks and emergency hand sanitizer. These should be saved in case of emergency. Upon safely reaching meeting place, staff can clean their hands with sanitizer, apply new gloves and masks when necessary, and can provide children in their group with hand sanitizer.
3. Lockdown: In the event of a lockdown, once all staff and children are safely secure in their location, staff can change their gloves, using hand sanitizer, and can provide children with hand sanitizer, after touching lights, door handles, locks and children’s

hands. This should only be done when safe. Avoid using sinks and paper towel dispensers as these require movement in the classroom and add additional noise.

4. **Hold and secure:** In the event of a hold and secure which occurs during the designated pick up or drop off time of any group in any program, ALL parents dropping off or picking up their child should be contacted via telephone and email/eblast. As parents are not permitted to enter the playground, or approach main entrances, they may not see a note placed on the door. Staff would not be permitted to leave the building to pick up or drop off children, or to place a sign on a pylon in the arrival area. Continue to call parents who are due to be dropping off or picking up, or other guardians/emergency contacts in urgent situations, until the message has been passed on to a person.
5. **Bomb threat:** In the event of a bomb threat, maintain physical distancing during the notification of other staff of the situation. Follow the direction of emergency services, and when this requires evacuation, bring your first aid kit with PPE and hand sanitizer. Upon arrival at the evacuation location, use hand sanitizer if necessary and maintain as best as possible physical distancing from other groups.
6. **Evacuation:** In the event that an evacuation occurs, and parents must pick up their children from a new location, the following procedure will be used:
  - Parents will be contacted in the event of an evacuation requiring pickup. They will be given an emergency evacuation location, as well as the following specific pick up instructions:
    - a. Pull up behind the car in front of you. If there is no car in front of you, pull up as far as the parking lot allows – you are the front of the line.
    - b. Call the phone number for the centre you are picking your child up from (daycare or camp). ONLY call when you are at the front of the line. Only the car at the front of the line will be able to pick up the child(ren) one at a time.
    - c. Give the staff who answers the phone your name, your child’s name and when able, your child’s group, or staff member’s name.
    - d. Your child’s staff member will bring your child to your car. If it is possible, they will give your child some hand sanitizer before they enter your car.
    - e. In the event that the staff does not have access to PPE, please remain in your car, or as far away from the staff as possible, until your child is close enough to your car that you can safely pick them up.
    - f. In the event that your child has belongings that need to come home that were not collected during the evacuation (e.g. in an evacuation which did not cause property damage, but required safe and quick evacuation and where staff are not permitted to re-enter the building at time of pick up), staff will re-enter the building when given the all clear by emergency services, or when operations are allowed to resume. Classroom educators will re-enter their classroom with gloves, will collect your child’s *clearly labeled* items, place them in a plastic bag labeled with your child’s name, and they will be returned as soon as able at the next program day.