



Reopening Child Care Frequently Asked Questions

9/14/2020

This document has been prepared by Halton Region Children's Services and Halton Region Public Health to support child care centres and home care providers in reopening. This document will be updated and distributed, as needed.

If you have questions that are not included below, please send your questions to childcareservices@halton.ca.

NEW questions are noted in green font.

Table of Contents

Considerations for Reopening Child Care Centres/Homes	2
Centre Operations	3
Public Health	
Parent Fees	5
Policy Updates	
Cleaning and Disinfecting	7
Staffing	9
Screening	11
Classroom Programming	12
Supporting Families with the New Normal	
Before and After School	15
Summer Day Camps	16
EarlyON Child and Family Centres	17
Services for Children with Special Needs	19
Useful links	

Considerations for Reopening Child Care Centres/Homes

1. Will I need to update my current license?

- Operators should review their current license capacity with the Ministry of Education <u>guidelines</u> to determine if their license needs to be updated. Operators may require a Director's Approval or a change to the conditions listed on their license, such as approval for family age grouping.
- Operators can apply for a revision on the Child Care Licensing System. For further assistance, operators can contact their Program Advisor, Child Care Quality and Assurance and Licensing Branch.

2. Will I require additional supplies to reopen my child care centre/home?

- Operators will require personal protective equipment (PPE) and other supplies to ensure they are providing a safe and healthy environment for children, families and staff. These may include but are not limited to:
 - Latex-free gloves;
 - Medical grade face masks and/or face shields;
 - Chlorine bleach and spray bottles;
 - Disinfectants with a Drug Identification Number (DIN) or low-level hospital grade disinfectant
 - Sanitizer wipes;
 - o Hand sanitizer (with 60-90% alcohol content); and
 - Paper towels.

Operators may be required to purchase activities/toys that stand up to additional cleaning.

As of September 1, 2020, all adults in a child care setting (i.e., child care staff, home child care providers, home child care visitors, and students) are required to wear medical masks and eye protection (i.e., face shield or goggles) while inside in the child care premises, including in hallways. The Ministry of Education will be providing child care and EarlyON Child and Family Centre operators with masks and face shields. Shipments will occur monthly. Please note: typical eye glasses are not considered appropriate eye protection.

3. Where can I buy personal protective equipment?

- Personal protective equipment (PPE) may be purchased from vendors who
 provide materials and supplies to the child care community. In addition, the
 Ontario Together Portal has a <u>Workplace PPE Supplier Directory</u> that lists
 Ontario businesses that provide personal protective equipment.
- Should operators have challenges sourcing PPE prior to opening, please contact: childcareservices@halton.ca

 Beginning September 2020, the Ministry of Education will be providing child care and EarlyON Child and Family Centre operators with masks and face shields. Shipments will occur monthly.

4. Are child care centres required to pass an onsite inspection by Halton Region Public Health prior to re-opening?

 Halton Region Public Health is contacting each licensed child care centre by phone close to the planned re-opening date. An onsite inspection is not mandatory prior to re-opening in Halton.

Centre Operations

5. Can child care centres offer part-time and full-time child care?

- Operators may provide care to both full-time and part-time children but must follow the Ministry of Education's guidelines for maximum group size and ratios
- As of **September 1, 2020**, child care centres can operate at their licensed capacity. Centres must continue to comply with ratios and group sizes outlined in the *Child Care and Early Years Act*, 2014. It continues to be important to keep children in a classroom together. Different groups of children should avoid interacting with one another.

6. Do children and child care staff need to wear masks?

- The following applies to both licensed child care centres as well as licensed home child care providers:
- As of September 1, 2020, all adults in a child care setting (child care staff, home child care providers, home child care visitors, and placement students) must wear medical masks and eye protection (i.e. face shield or goggles) inside the child care premises.
- Children in grades four and above must wear non-medical or cloth masks while inside the child care premises.
- Younger children are encouraged, but not required, to wear a mask while inside the child care premises. For more information, please see the <u>Public</u> Health Ontario factsheet on non-medical masks.
- The use of masks is not required outdoors if physical distancing of two meters can be maintained.
- Operators should document their requirements and exceptions related to masks. Exceptions to wearing a mask indoors could include but are not limited to: circumstances where two meters of physical distance can be maintained, situations where a child cannot tolerate wearing a mask, or reasonable exceptions for medical conditions.

 For more information on mask wearing in licensed home child care settings, please see the <u>Tip Sheet for Licensed Home Child Care</u>

7. When might mask wearing in a home child care setting be optional?

- Children and the home child care provider are playing indoors and everyone is at least 2 metres apart
- When the provider is preparing an activity while the children play independently at least 2 metres away
- The provider is outdoors with children and everyone is 2 metres apart
- The provider has a medical condition that causes difficult breathing with a mask on
- A resource consultant is working one on one with a child who is deaf or hard of hearing and relies on lip reading for communication
- A family member is in a separate space where no children are present
- A child who is exempted from wearing a mask during the school day due to a medical condition would also be exempt in the home child care setting

8. What is the most appropriate eye protection to wear in a child care setting?

- Effective September 1, all adults in a child care setting must wear masks and
 eye protection. The primary purpose of eye protection is to prevent respiratory
 droplets from entering the eye. Face shields and goggles are considered
 appropriate for eye protection. The World Health Organization provides
 technical descriptions and specifications for face shields and goggles,
 including recommendations that they cover the sides of the face/eye.
- The Ministry of Education will supply masks and face shields to operators.
 Goggles will not be provided.

9. Can children engage in sprinkler play?

 Yes, children can play in outdoor sprinklers as long as they are able to physically distance.

Public Health

10. Is there evidence that children in child care transmit COVID-19?

Based on <u>available evidence</u> to date, young children are not a major source
of transmission of COVID-19. Analyses of infection clusters revealed that for
children who were infected, transmission was traced back to community and
home setting or adults, rather than amongst children within child care and
school settings. Within households, adults were much more likely to be the
source than children. The recommended child care operator's infection
prevention and control (IPAC) measures provided by Public Health are

intended to provide safe and healthy child care services and to reduce the spread of COVID-19.

11. What is Public Health's role should there be a positive case of COVID-19?

In the event of a confirmed case of COVID-19, public health will declare an
outbreak in collaboration with the child care centre. Public health will provide
specific advice on what control measures should be implemented and will
conduct case/contact and outbreak management with the child care centre.

12. Are Public Health Inspectors permitted to enter child care centres?

Public Health Inspectors are required by law to inspect child care centres. To
ensure the safety of children and staff in child care settings and prevent the
spread of COVID-19, Public Health Inspectors are screened daily before
coming into work and use face masks at all times inside child care centres.

13. What type of attestation is needed when COVID-19 is ruled out by a physician?

• From Halton Region Public Health's perspective, a verbal attestation from parents is sufficient. However, if operators prefer an attestation in writing, they can develop a form and policy that meets their needs.

Parent Fees

14. Can parents pay fees to hold their children's place until September?

• As per Ontario Regulation 137/15 under the Child Care and Early Years Act, 2014, operators that are reopening are prohibited from charging a fee or deposit prior to September 1, 2020. For child care spaces available after September 1st 2020, operators may charge a fee to use or hold the space whether the child attends or not. Parents must be given 14 days to accept or decline any child care placement available from September 1st onward. Operators can begin to charge fees after the 14-day notice period.

15. Can I inform parents that they must make a decision about their child's return to care?

- Where a child who was receiving care in a child care centre immediately prior
 to the closure is offered a child care space for September 1st or later, parents
 will have 14 days to accept or decline the placement. If the placement is
 declined, operators may offer the space to another child.
- As per the Ministry of Education Operational Guidance released in June, licensed home child care providers must provide parents with 30-days' notice when a spot is available for a child. If after 30 days, parents do not want the

space, providers may fill the space. Families on fee subsidy will be placed on a break in service. Halton Region will work with those families to find a new place when they return to care

Policy Updates

16. Are operators required to develop new policies and procedures to open child care centres/homes?

- In order to reopen child care, current policies may need to be updated and new policies may need to be created to ensure operators are in compliance with the enhanced health and safety requirements. This includes:
 - Health Screening Policy and an Entrance Screening Tool.
 - Refer to <u>COVID-19 Reference Document for Symptoms</u> to support with the development the Health Screening Policy and Entrance Screening Tool;
 - Sanitary Health and Safety Protocols (e.g. cleaning of classrooms, toys, equipment, diapering, cleaning of children's bedding/cots/cribs);
 - Hand Hygiene Policy and Procedures (e.g. including proper glove use, hand washing and when and how to use hand sanitizer); and,
 - Exclusion Policy (how to exclude children and staff who experience illness and procedures for reporting illness to the Ministry of Education, Halton Children's Services and Halton Region Public Health)
- Policies and procedures must include:
 - How physical distancing will be encouraged (e.g. set up of outdoor and indoor play space that encourages physical distancing);
 - o How staff shifts will be scheduled, where applicable;
 - Scheduling of group events and/or in-person meetings; and,
 - o Parent drop off and pick up procedures.

Note: Support for required policies and procedures can be found in the Ministry of Education guidelines. Halton Region provided sample policies as an attachment to the memo dated Friday, June 12, 2020.

Note: Policies and procedures related to COVID-19 must be shared with families for their information and to ensure they are aware of expectations, including keeping children home when they are sick. Staff must be trained on the policies and procedures.

There is a <u>resource document for child care providers</u> that includes guidance on how to safely conduct daily screening and keep daily attendance records that may inform policy and procedures.

17. When do I report a serious occurrence related to COVID-19?

 If a child, parent, staff member, placement student, home child care provider, home child care visitor, or a person who is ordinarily a resident of the home child care provider exhibits symptoms of COVID-19, they should be excluded and referred to their health care provider or Telehealth. The health care provider will recommend whether the individual should get tested for COVID-19 or not.

- When to report to Public Health:
 - i. Confirmed case of COVID-19; or
 - ii. Two or more children/staff sick with similar symptoms within the same classroom
- When to report to the **Ministry of Education**:
 - i. If the individual reports 1 or more symptoms and is referred for testing, a serious occurrence should be reported. If a child or staff member has one symptom of COVID-19, but is not referred for a test, it is not a reportable serious occurrence.
 - ii. Where a room, centre, or premises closes due to COVID-19, licensees must report this to the Ministry of Education as a serious occurrence.

15. What is the recommended exclusion time for a symptomatic child or staff member?

- If a person presents with symptoms, please follow the <u>Child Care Flow Chart</u> to assess next steps with exclusion and Public Health involvement.
- If the program is located in a school or shared space, follow Public Health advice on notifying others using the space of suspected illness.

Cleaning and Disinfecting

16. How can operators maintain the health and safety of their child care program/home?

- To maintain the health and safety of the program, operators and providers should ensure that all current infection prevention and control practices are adhered to. This includes, but is not limited to:
 - Ensuring all toys used at the centre are made of material that can be cleaned and disinfected (i.e., avoid plush toys);
 - Increasing the frequency of cleaning and disinfecting objects, toys and frequently touched surfaces;
 - Frequently touched surfaces are most likely to become contaminated, including doorknobs, light switches, toilet handles, and tabletops, and must be disinfected at least twice a day;
 - Using only disinfectants that have a Drug Identification Number (DIN).
 Low-level hospital grade disinfectants may be used;
 - Checking expiry dates of products and always following the manufacturer's instructions;

- Performing proper hand washing (including assisting children with hand washing); and
- Incorporating additional hand washing opportunities into the daily schedule.
- Only one group should use the bathroom at a time and the bathroom must be cleaned in between groups.
- It is recommended that operators keep a hard copy of a daily cleaning and disinfecting log to track and demonstrate cleaning schedules.

17. How can operators clean and disinfect surfaces or items?

- When cleaning and disinfecting surfaces and/or items remember to:
 - o **Clean**. It is important to clean articles first with soap and warm water to remove any visible dirt before using the disinfectant.
 - Rinse. Rinse items with clear water. Disinfectants do not work effectively unless soap or detergent is removed.
 - Disinfect. A commercial disinfectant or household bleach may be used to kill viruses.
 - Contact time. Contact time is the amount of time that a product must remain on the surface in order to kill the virus. Follow the manufacturer's instructions for recommended contact time.
 - Wash hands. After cleaning and/or removing gloves, wash hands with soap and water or use an alcohol-based hand sanitizer with 60 – 90% alcohol.

18. What are the steps for properly disinfecting classrooms and outdoor play structures?

Indoors:

- i. Clean and disinfect frequently touched surfaces including doorknobs, light switches, electronic devices and tabletops at least twice a day.
- ii. Items that are not easily cleaned (books, paper, cardboard puzzles) should be used individually by children and then sealed for 7 days before re-use
- iii. Create and maintain a cleaning and disinfecting log.
- iv. Visit Halton.ca for a list of approved disinfectants under "Public Health Guidance" and "Child Care Centres".

Outdoors:

- v. Clean and disinfect items and equipment or play structures between use by different groups of children or when visibly dirty.
- vi. Clean items that cannot be immersed in a disinfectant solution with soap and water using a cloth. Wipe with a clean wet cloth to rinse.
- vii. Disinfect with approved disinfectant and have it remain wet on the surface for the appropriate contact time. A final rinse may be required using a single-use wet paper towel and allow to air dry.

19. How can operators clean toys to prevent the spread of the COVID-19 virus?

- Toys that have been mouthed should be washed and disinfected between users. Toys that come in contact with children's mouths should be rinsed after disinfecting.
- Wash, then disinfect hard surfaced toys (plastic, rubber) with either a commercial disinfectant or chlorine bleach solution.
- Toys that are dishwasher-safe may also be cleaned in the dishwasher.

20. What other steps can operators take to help stop the transmission of COVID-19?

- Wash your hands frequently with soap and water or use an alcohol-based hand rub with 60-90% alcohol;
- Cough and sneeze into your sleeve or tissue;
- Avoid touching your eyes, nose or mouth without having washed your hands;
- Stay at home if ill; and,
- Frequently clean commonly touched surface.

Staffing

21. Can staff work in more than one classroom?

- To limit the spread of COVID-19, staff should limit their work to one classroom. Children and educators together are to form one group and avoid interacting with other groups of children and staff. Staff should work at only one location.
- Supervisors and/or designates should limit their movement between rooms.

22. Can a supply staff work with different groups during the week?

 No. One supply teacher can be part of only one group. Changes to the group should be minimized wherever possible.

23. Can I begin to welcome placement students into my program again?

 Students are now permitted to complete post-secondary educational placements at a child care centre or home child care location. Students are required to abide by all health, safety, and personal protective equipment measures, including being assigned to a single group. Students must review any new or updated policies and procedures.

24. Are mixed age groupings allowed?

 Mixed age groupings are permitted as set out in the Child Care and Early Years Act, 2014, where a Director's Approval has been granted and is identified on the centre license.

25. Have ratios changed?

- Ratios have not changed and must be maintained as set out under the Child Care and Early Years Act (CCEYA), 2014.
- Reduced ratios are permitted as set out under the CCEYA provided groups are not mixed with other groups.
- Reduced ratios are not permitted at any time for infants.

26. Can Director Approvals for staff be transferred from one child care centre to another child care centre that is operated by the same licensee?

- Yes, if operators have a Director's Approval for staff at one centre, and wanted the specific staff member to work at another location, operators are not required to submit a new Director's Approval request to the Child Care Licensing System.
- Operators should inform their Program Advisor, Child Care Quality and Assurance and Licensing Branch, if they would like to have staff work at an alternate location.

27. Will a staff who covers another staff during a lunch or break also be considered part of the group?

 No. Cover offs can happen although they should be avoided. Due to the shorter duration of time for coverage, staff should be able to maintain physical distancing.

28. Can an assistant help support children in different groups, if necessary, provided the assistant is wearing appropriate personal protective equipment?

Yes, however, the assistant should limit their movement between rooms.
 When providing coverage for brief periods, physical distancing is recommended for staff who are covering these periods of time.

29. My staff's first aid expired during the closure. What can I do?

• The Workplace Safety and Insurance Board has advised that all First Aid/CPR certificates that expired after March 1, 2020 have been extended to December 31, 2020 (previously extended to September 30, 2020). Operators are encouraged to monitor the WSIB website for any updates on First Aid/CPR certificate extensions for any staff, home child care providers or inhome service providers whose certification would have expired after March 1, 2020.

Screening

30. Who should be screened before entering the child care centre?

- All individuals, including children, parents/guardians, staff and essential visitors must be screened upon arrival.
- Parents /guardians should drop-off and pick up their child outside the child care setting unless it is determined that there is a need for the parent/guardian to enter the setting.

31. When conducting an in-person screen, do staff need to wear personal protective equipment?

- Yes. Screeners should be wearing personal protective equipment such as, surgical/procedure mask; and eye protection (goggles or face shield). A gown and gloves could also be worn for additional protection.
- Screeners should take appropriate precautions when screening, including maintaining a distance of at least two meters (6 feet) from those being screened, or being separated by a physical barrier (such as a plexiglass barrier).
- Operators and providers are required to keep attendance records of arrival and departure times of all people entering the centre.

32. Who should be denied entry to the child care setting?

- Children, staff, and essential visitors who fail the entrance screen are not allowed into the child care setting/home.
- Do not permit children, staff, or essential visitors who are ill to enter into the child care setting.

33. Do I need to inform Public Health when a person does not pass the entrance screen?

 No, where an individual does not pass the entrance screen, this does not need to be reported to the Halton Region Public Health.

34. What are the requirements for screening maintenance and cleaners who are on site after hours?

 The Ministry of Education guidelines address attendance records, noting that daily records for anyone entering the facility must be maintained. Some centres have established protocols whereby the after-hours maintenance or cleaners complete the screening via telephone with centre staff. Each centre is encouraged to establish its own protocol for maintaining records and screening of everyone on premise.

35. Can I use an electronic or email screening tool?

- Yes, operators are encouraged where possible, to conduct daily screening electronically prior to arrival. Parents and guardians should be reminded of the screening requirements at time of registration and through visible signage at the entrance of the child care centre/home.
- Records must be must be kept of all daily screening results, whether screening electronically or in person.

36. What type of thermometer should be used?

- On-site temperature taking is not required as it has not been shown to be an
 effective strategy to screen for COVID-19 in children. For staff and visitors,
 temperature taking is not required. If used, this should be part of a more
 comprehensive screening approach including an inquiry about symptoms,
 exposure to individuals who have COVID-19 and travel history as outlined in
 COVID-19 Public Health Guidelines: Child Care Settings.
- If the child appears sick or feverish, a temperature check is recommended.
 Use the least intrusive method (for example, non-contact thermometers) and
 ensure the person using the thermometer is wearing a surgical/procedure
 mask and eye protection. At this time, for non-contact thermometers, it is
 recommended that the forehead is used to take the temperature. If using a
 single-use protective cover for thermometers, properly dispose of the cover
 after each use, or clean and disinfect the thermometer before re-use.

Classroom Programming

37. How can operators encourage physical space between children?

- It is difficult to encourage physical distancing with young children. However, there are different activities operators and providers can undertake to support physical distancing, such as:
 - Spreading children out into different areas, particularly at meal and dressing time;
 - Incorporating more individual activities or activities that encourage more space between children (for example prepare separate art kits for each child):
 - Using visual cues to promote physical distancing (for example tape markings with arrows/circles on the floor, signs promoting physical distancing);
 - Where possible, offer more activities outside to allow for more space.
 - In shared outdoor space, groups must maintain a distance of at least two meters between groups and other individuals outside of the group.

38. What types of activities should operators avoid?

- Operators and providers should avoid activities to reduce the spread of COVID-19 such as:
 - Do not use water or sensory tables or outdoor sandboxes;
 - Avoid singing activities indoors; and,
 - Do not use community playgrounds; however outdoor play at licensed child care sites is encouraged in small groups to support physical distancing.

39. Can centres continue to offer extra activities provided by external, contract staff, such as Music, French and Art?

 No. As noted in the Ministry of Education guidelines, there should be no nonessential visitors at the program.

40. Do children need to maintain physical distancing when they are playing outside?

Yes. Children in a group should be encouraged, where possible, to physically
distance in both the indoor and outdoor learning environments. Physical
distancing between children in child care may be difficult. Centres are
encouraged to maintain a welcoming and caring environment for children.

41. Are there new requirements for meal time?

- Yes. There are new requirements for mealtime. If meals or snacks are
 provided, operators must ensure each child has their own individual meal or
 snack. Children are not permitted to self-serve; meals should be served in
 individual portions to children. Additionally,
 - o Multi-use utensils must be sanitized; and
 - "No food sharing" policies should be reinforced.
- Children must not be allowed to share soothers, bottles, sippy cups, toothbrushes, facecloths, etc. Label these items with the child's name to discourage accidental sharing.

42. Can children bring their own lunch and snacks?

As noted in the guidelines from the Ministry of Education, families are
prohibited from providing food outside of the established meal provision.

Exceptions may be made where required, with precautions in place for safe
handling and serving of food.

43. Are there new requirements for rest time?

 Yes. At rest times operators and providers should increase the distance between cribs and cots, if possible. If space is tight, children can be placed head-to-toe or toe-to-toe.

- Operators should consider removing cribs or placing infants in every other crib to support physical distancing. Cribs and cots should be disinfected after each use. Please refer to section 4 of the <u>Ministry of Education's Child Care</u> Centre Licensing Manual (September 2019) for more information.
- Linens must be laundered on a daily basis.

44. Can children continue to bring their own linens? How often should they be laundered?

• Linens should be washed every day. Children may continue to bring their own linens, although washing linens on site is preferred.

45. Can educators pick up and/or soothe children?

- Yes, educators can still pick up and soothe children to support a nurturing environment.
- Educators should try to avoid getting close to faces of all children, where possible.

46. Can different groups share a washroom?

 Yes. Shared spaces, including washrooms, must be thoroughly cleaned between groups. Only one group should use the washroom at a time.

47. Can I put more than one group in a room?

 Each group must be separated by a physical barrier indoors. The physical barrier must begin at the floor and reach a minimum height of 8 feet to ensure that it will always be 12 inches taller than the tallest person in the facility. It must be as wide as the space/room will allow.

Supporting Families with the New Normal

48. How should operators communicate with families?

- When communicating with families, be respectful of their current realities. For example, some families may not have time to chat at drop-off, or some might be later than usual picking up their child(ren). It is important with the changes that families will experience during re-opening, that they continue to feel that they belong, can contribute to their children's learning, and are engaged in meaningful ways with the child care centre. Consider reaching out to your families in a virtual manner to keep them connected with the centre.
- Communication about the child's health is crucial. If a child is feeling unwell or showing symptoms, be sure to follow protocols when a child or staff/home child care provider has symptoms of illness or becomes sick <u>Ministry of</u>

<u>Education Operational Guidance During COVID-19 Outbreak</u> (page 12). Communicate all relevant information with families as soon as possible.

49. What supports can operators offer to families?

- Get to know new families to the best of your ability and build respectful and responsive relationships, as you normally would.
- Be there to support children and families, while remembering that we are not the experts on what is unfolding with the pandemic nor are we experts on mental health.
- Refer a child or family that is struggling to <u>Reach Out Centre for Kids</u> (ROCK), if the child and family would benefit from some additional support.

50. Can chid care centres offer tours to parents?

 As noted in the Ministry of Education guidelines, there should be no nonessential visitors at the program. As an alternate to onsite tours, some centres are offering virtual tours or using pictures of the centre to help parents visualize the space.

Before and After School

51. What information is available to support before and after programs for school aged children?

- All before and after school programs operated or contracted by the school board should follow the health and safety requirements of the Ministry of Education, guidance provided by the school board, and Halton Region Public Health. Information can be found in the <u>Before and After School Programs</u> Operational Guidance document.
- Licensed child care operators should follow the guidelines set out in the Operational Guidance During COVID-19 Outbreak document.

52. What do I do if my program and after school program is comprised of children from different day-time classes?

- It is recognized that it may be difficult to limit students in the before and after school program to their groups from the core day. In circumstance where groups of children from different classes must be a part of the same before/after group, an effort should be made to limit interactions. This includes:
 - i. Making an effort to group children from the same core classes together in the before and after school program
 - ii. Making use of large, well-ventilated spaces as much as possible
 - iii. Encourage physical distancing

53. What policies do I need to share with families?

 All new policies relating to COVID-19 health and safety protocols need to be shared with families.

54. Are there other screening procedures I need to follow?

- Please see above screening section for best practices with regards to screening procedures.
- Please note, all individuals attending a before and after school program need to be screened each day.
- Protocols should be in place to allow for communication between school and before and after school programs regarding screening.
- 55. Given my board has families self-screening with no record being kept of the results, how can I maintain daily records of screening results for children who only attend the after school program?
- Where a before/after school program is located in a school, licensees and school boards should work together to establish, coordinate and implement health and safety policies and protocols, including how information will be shared and communicated about children being screened.
- Records must be must be kept of all daily screening results, whether screening electronically or in person.

56. How do I coordinate the transportation of children to school and from school to after care?

 Information on transportation can be found in the <u>COVID-19 Public Health</u> Guidelines: Student Group Transportation

Summer Day Camps

57. What guidelines would operators follow to operate a Summer Day Camp?

The Ministry of Health released a <u>COVID-19 guidance document for summer day camps</u>. The guidance includes requirements for health and safety, screening, management of participants with COVID-19 symptoms, testing for COVID-19, and occupational health and safety.

EarlyON Child and Family Centres

58. When can EarlyON Child and Family Centres re-open to the public and provide in-person services?

 EarlyON Child and Family Centres may begin re-opening as early as September 1, 2020. Centres may take a phased or gradual approach to resuming in-person services, in order to ensure appropriate health and safety measures are in place. Centres will also continue to offer virtual services. EarlyON Child and Family Centres are required to submit a re-opening plan, including updated policies, to Halton Region's Children's Services for review prior to reopening.

59. What information is available to support EarlyON Child and Family Centres as they re-open?

 EarlyON Child and Family Centres will be required to follow the Ministry of Education's <u>COVID-19 Operational Guidance for EarlyON Child and Family Centres</u>. Each EarlyON Child and Family Centre is required to have a screening process that is supported by Halton Region Public Health and available to families to complete prior to their arrival.

60. Will staff, parents/caregivers and children be required to wear masks when attending EarlyON programming?

 All EarlyON staff will be required to wear medical masks and eye protection (i.e., face shield) while inside an EarlyON premises. All other adults (i.e. parents/guardians and visitors) are required to wear a face covering or non-medical mask while inside the premises. Masks are not recommended for young children who are under the age of two. The use of masks is not required outdoors for adults or children if physical distancing of a least two metres can be maintained between individuals. Reasonable exceptions to the requirement to wear masks are to be put in place and documented by EarlyON Child and Family Centres.

61. Are EarlyON Child and Family Centres required to follow physical distancing guidelines?

Yes. All EarlyON programs must be planned and offered in a way that
maintains physical distancing of two metres between individuals at all times
and providers must have a policy on physical distancing. If physical distancing
cannot be maintained, mandatory usage of a medical mask and eye
protection as an additional protective measure is required for staff, in addition
to observing proper hand hygiene, respiratory etiquette, and avoiding
touching of the face. All other adults (i.e. parents/guardians and visitors) are

required to wear a face covering or non-medical mask while inside the premises.

62. What changes should EarlyON Child and Family Centres consider to the use of equipment and toys?

EarlyON Centres are encouraged to limit usage of equipment and toys, particularly the sharing of toys, where possible. Centres should remove and not use any toys made of porous materials (e.g. plush toys) as they cannot be effectively cleaned and disinfected. Toys and equipment should be cleaned and disinfected between users. If sensory materials (e.g., playdough, water, sand, etc.) are offered, they should be provided for single use. Blankets or sheets should be laundered in-between uses. Items that cannot be easily cleaned and disinfected (e.g. books) should be removed and stored in a sealed container for a minimum of 7 days.

63. When should the EarlyON Child and Family Centre submit a serious occurrence to Halton Region Children's Services?

 Where a child, parent, caregiver, or staff person is suspected (i.e. has symptoms and has been tested) of having or has a confirmed case of COVID-19, EarlyON Centres must report this to the Region as a serious occurrence. In addition, where a room, centre or premises closes due to COVID-19, Centres must report this to the Region as a serious occurrence. The Region will be required to notify the Ministry of Education of all serious occurrences related to COVID-19.

64. What is the role of Public Health in the event of a suspected or confirmed case of COVID-19?

 There is a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. EarlyON Child and Family Centres will be required to contact Halton Region Public Health by calling 311 to report a child or parent/caregiver or staff is suspected to have COVID-19. 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, parent/caregivers, and children.

65. How should EarlyON Child and Family Centres communicate with parents and caregivers about the changes to in-person programming?

Communication with families regarding enhanced health and safety measures in EarlyON Centres is important to promote transparency and to ensure children and families are safely interacting in EarlyON Centres. Health and safety policies and procedures, and information regarding program operation should be shared with families prior to attending a centre, and could be shared as part of the program registration process. Providers should also remind attendees of health and safety measures, including requirements and exceptions related to masks, and related centre policies and procedures when they arrive at a centre for programming and/or services.

Services for Children with Special Needs

Inclusion supports with a resource consultant will be phased in slowly and services provided will be based on the advice of Halton Region Public Health and Ministry of Education guidelines. As child care centres reopen, services will be virtual to limit contact and transmission. If a centre requires support for a returning child, they can reach out directly to their resource consultant or the agency supervisor. New referrals to inclusion services can continue to be made by calling 311.

- 66. Will the resource consultant that was working with us prior to the closure contact us to start visiting again?
- In the initial phase of re-opening of child care, any requests for support should be initiated through the supervisor of the agency your centre has been working with. Given the lower enrolment numbers across the region and smaller class sizes, operators may find that they don't require immediate support.
- 67. A child who was receiving support from a resource consultant has returned to the centre and is struggling with the transition back into child care. We would like the resource consultant to assist us with this. How do we arrange for support?
- The supervisor of the childcare centre should contact the supervisor of the inclusion agency they have been working with. The inclusion supervisor will have the appropriate resource consultant contact the centre to provide consultation.
- 68. When I call the resource consultant we have worked with there is a message to say they are not available or they are working limited hours. How do we get the support we need?
- Resource consultants will gradually return as the number of centres reopening increases and the requests for consultation increase. Please contact
 the inclusion supervisor of the agency you have worked with and you will be
 connected with a resource consultant. There may be situations when it will
 not be the same resource consultant you worked with prior to COVID-19, but
 you can be confident you will receive the support you require
- 69. Should we be asking parents to call the resource consultant they had been working with if their child is returning to care?

- No. Through the closure resource consultants continued to communicate with families. The resource consultants have explained the reopening process to families and indicated that the centre will initiate consultation with the resource consultant when they feel it is required.
- 70. We know that a family called to make a referral to inclusion services prior to the COVID-19 closure. The child has started back at the centre and we need some support. Can we get support if there was not a resource consultant assigned to the child prior to the closure?
- Yes, if a child was referred prior to COVID-19, contact the supervisor of the inclusion agency you work with and a resource consultant will be assigned to support you. New referrals are also being accepted by calling 311.
- 71. There are a number of children struggling with the transition back to child care. We would like some support to make this a positive experience for the children. Who can provide us with that?
- We recognize this may be difficult transition for children and parents/caregivers. A resource consultant can work with you to support a successful transition back to child care for all children. Contact the supervisor of the inclusion agency you work with and a resource consultant will be assigned to support you.
- 72. The consultation with the resource consultant has been helpful but we need someone to observe the child in the classroom.
- Inclusion supports with a resource consultant will be phased in slowly and services provided will be based on the advice of Public Health and Ministry of Education guidelines. As child care centres reopen, services will be virtual through use of phone, e-mail and the Zoom platform to limit contact and transmission. Prior to implementing a virtual approach, it is important to meet all aspects of confidentiality and make sure the approach is feasible for the child care staff to participate in.

If you have any questions related to inclusion services, please contact the supervisor of the agency that provides support to your centre:

Community Living Burlington

Wendy Pavao pavao wendy@clburlington.ca 905-979-8162

Community Living North Halton

Evelyn Bursey <u>ebursey@clnh.on.ca</u> 905-699-1579

Halton Region

Genevieve McMurdie <u>genevieve.mcmurdie@halton.ca</u> 905-464-6180

Fran Middleton <u>fran.middleton@halton.ca</u> 905-464-5676

Useful links

- Halton Region COVID-19 (Public Health Guidelines: Child Care Settings (July 7, 2020)
- Halton Region Public Health Child Care FAQS
- Halton Region COVID-19 (2019 Novel Coronavirus)
- Government of Canada Coronavirus disease (COVID-19): Outbreak update
- Ministry of Health COVID-19 Reference Document for Symptoms
- Ministry of Education Operational Guidance During COVID-19 Outbreak Child Care Re-Opening
- Ministry of Education Operational Guidance During COVID-19 Outbreak EarlyON Re-Opening
- Ministry of Education Before and After School Kindergarten to Grade 6 Policies and Guidelines for School Boards
- Ministry of Health COVID-19 Provincial Testing Guidance Update
- Government Personal Protective Equipment (PPE) Directory
- ROCK Resource Kit for Families Ages 0-6
- Zero to Three At-Home Activity Guide
- College of Early Childhood Educators COVID-19 heroes: RECEs in emergency care
- College of Early Childhood Educators COVID-19 FAQs for Members