

COVID-19 INFORMATION

GUIDANCE FOR DAY CARE/OUT OF SCHOOL CARE (CHILD CARE)

Overview

Under current Chief Medical Officer of Health Orders, businesses and entities are required to:

- implement practices to minimize the risk of transmission of infection among attendees;
- provide procedures for rapid response if an attendee develops symptoms of illness;
- ensure that attendees maintain high levels of sanitation and personal hygiene;
- comply, to the extent possible, with the [COVID-19 General Relaunch Guidance](#), this guidance, and any other applicable Alberta Health guidance found at: <https://www.alberta.ca/biz-connect.aspx>.

This document has been developed to support licensed child care centres in reducing the risk of transmission of COVID-19. This guidance builds upon the [Alberta Health Services Health and Safety Childcare Guidelines](#), which all child care operators are required to follow. All re-opened licensed child care centres will also be required to be in compliance with applicable zoning and health and safety legislation, including the [Child Care Licensing Act](#) and [Child Care Licensing Regulation](#).

In the event of a conflict between this document and the AHS Health and Safety Childcare Guidelines, this document will prevail.

COVID-19 Risk Mitigation

Before Re-opening	<ul style="list-style-type: none">• Many buildings where child care centres are located have had reduced or no water flow through the plumbing system during the pandemic, leading to the stagnation of water in the pipes. Prior to re-opening, each site needs to ensure fresh water replaces the stagnant water in the water lines. See Appendix A for instructions.
Staff and Screening	<ul style="list-style-type: none">• Before every shift at a child care centre, a staff member must assess themselves for symptoms of COVID-19 (see Appendix B).
Additional Public Health Measures	<ul style="list-style-type: none">• Child care programs may operate in cohorts of 30 people. This includes both staff and children.<ul style="list-style-type: none">○ A cohort is defined as a group of children and staff members assigned to them who stay together throughout the day.○ Cohorts cannot mix with other cohorts or be within in the same room/space at the same time, including pickups and drop-offs, mealtimes, playtime, outdoor activities, staff rooms, naptime, etc.○ Separate cohort groups may be divided by non-permeable physical barriers. These barriers must be at least 2 metres high or 2 metres apart.• In order to ensure that child care centres maintain licensing requirements for child/staff ratios, allow coverage for staff lunch and coffee breaks, and to protect the separation between cohorts, child care operators should adopt the following staffing practices:<ul style="list-style-type: none">○ Designated room staff are assigned a cohort and must stay with that cohort and not interact with staff or children from any other cohort.○ Where possible to do so and maintain ratio requirements, programs should avoid having substitute or “float” staff that work with multiple cohorts.○ If float staff members are required to maintain adequate coverage each float staff person should be assigned to no more than three designated cohorts and should limit physical interactions with children where possible.

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	<ul style="list-style-type: none"> ○ Any person (director, float staff, etc.) who will enter the space of more than 1 cohort must wear a mask any time they are in the presence of other staff/children and they must wash their hands (or use alcohol-based hand rub) when entering or exiting each room. Information on how to use a mask can be found here: www.alberta.ca/masks
<p>Use of shared spaces</p>	<ul style="list-style-type: none"> ● Shared spaces and structures that cannot be cleaned and disinfected between cohorts should not be used. ● If play structures are to be used by more than one group, the structures can only be used by one cohort at a time and must be cleaned and disinfected before and after use by each cohort. ● Only one cohort at a time may use a licensed outdoor play space. Centres are encouraged to also use alternatives to licensed outdoor play spaces, such as walks and supervised play in parks and safe open spaces (not playgrounds). Follow physical distancing practices when possible. ● Each cohort should have designated equipment (e.g., balls, loose equipment) or clean and disinfect equipment between cohort uses. ● Naps should take place within the cohort’s designated room. ● The centre should establish a plan to prevent mingling of cohorts in washrooms and no unnecessary items should be stored in washrooms. ● Programs that utilize a space that has other after-hour user groups (e.g. programs in churches, community centres) must ensure the space is cleaned before and after using the space. It is recommended that cleaning be done by one person within the cohort directly before the group enters the space and after it exits the space. A cleaning log must be posted and used to track cleaning. ● Programs that are located in seniors centres that do not have the ability to operate as a stand-alone program (separate entrance, separate washrooms, and separate play areas) will not be able to open.
<p>Entering and exiting the centre</p>	<ul style="list-style-type: none"> ● Develop procedures for drop off and pick up that support physical distancing and separate cohorts to the greatest extent possible. Possible strategies include separate cohort entrances, having one designated parent/guardian pick up and drop off each child, staggering entry, or limiting the numbers of people in entry areas. ● Records should only be kept for 2 weeks. An organization must make reasonable security arrangements to protect the personal information. ● Any personal information that is collected for COVID-19 contact tracing can only be used for this purpose, unless an individual provides their consent <ul style="list-style-type: none"> ○ For more information, the Office of the Information and Privacy Commissioner has released Pandemic FAQ: Customer Lists about collecting personal information from customers during the COVID-19 pandemic. ● There should be no non-essential visitors and no volunteers at the program. Parents or guardians are able to enter the program when needed, but should minimize the time spent there and stay two metres away from staff and other children at all times. <ul style="list-style-type: none"> ○ Facility operators and staff should use telephone or video conferencing when possible to meet with staff and parents.

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	<ul style="list-style-type: none"> ○ Parents picking up children from more than one cohort at the centre should not be allowed to enter the cohort room unless absolutely necessary, if they must enter, a distance of 2 metres must be maintained between staff and other children. ● Alcohol-based hand rub (with at least 60% alcohol) must be placed in all entrances to the program area in for use by staff, parents doing pick-ups/drop-offs, and any visitors to the centre. Dispensers should not be in locations that can be accessed by children as there is a risk of accidental ingestion. The manufacturer’s instructions for each product must be followed. ● Signs should be posted at the entrance reminding persons not to enter if they have signs or symptoms of COVID-19
<p>Sick parents, staff or children</p>	<ul style="list-style-type: none"> ● Parents and children must not enter the child care space if they have COVID-19 symptoms. ● The child care centre must ask parents to check children’s temperatures daily before coming to the program. Parents should be reminded of this requirement when children are first registered for the child care program, and through visible signage at the entrance to the child care centre. For reference, normal temperatures are: <ul style="list-style-type: none"> ○ Mouth: 35.5-37.5°C (95.9-99.5°F) ○ Underarm: 36.5-37.5°C (97.7-99.5°F) ○ Ear (not recommended in infants): 35.8-38.0°C (96.4-100.4°F) ● Parent or guardian conducting drop off must fill out attached screening tool (Appendix B) for each child every morning, and child care staff must review the screening tool with the parent to ensure the child is able to enter the centre. ● If a child develops symptoms while at the facility, the child should be isolated in a separate room and the parent or guardian should be notified to come and pick up the child immediately. If a separate room is not available, the child needs to be kept at least 2 metres away from other children. <ul style="list-style-type: none"> ○ If the child is young and requires close contact and care, staff can continue to care for the child until the parent is able to pick the child. Staff should wear a mask during all interactions with the child and should avoid contact with the child’s respiratory secretions. ○ Staff should wash their hands before donning a mask and before and after removing the mask (as per Alberta Health mask guidance), and before and after touching any items used by the child. ○ All items, bedding, toys etc. used by the child while isolated should be cleaned and disinfected as soon as the child has been picked up. Items that cannot be cleaned and disinfected (e.g. paper, books, cardboard puzzles) should be removed from the centre and stored in a sealed container for a minimum of 10 days. ● Programs should keep records of children’s known pre-existing conditions. If a child develops symptoms that could be caused by either COVID-19 or by a known pre-existing condition (e.g. allergies), the child should be tested for COVID-19 to confirm that it is not the source of their symptoms before entering or returning to the program. <ul style="list-style-type: none"> ○ A child that has tested negative for COVID-19 does not need to be retested unless new or different symptoms develop.

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	<ul style="list-style-type: none">• If two or more children are identified as having symptoms consistent with COVID-19, the child care program should follow outbreak notification procedures as per routine zone protocols.• Any cohort connected to a confirmed or probable case of COVID-19 will be required to close for a minimum of 72 hours to allow contact tracing, and then adhere to recommendations from Alberta Health Services.
Safe practices onsite	<ul style="list-style-type: none">• Activities cannot violate a public health order. To help plan activities, staff should ask themselves the following questions to determine the risk of the activities and whether they are allowed to proceed:<ul style="list-style-type: none">○ Does the activity involve shared surfaces or objects frequently touched by hands?○ Can an activity be modified to increase opportunities for physical distancing?• Where possible, physical distancing practices should occur, for example:<ul style="list-style-type: none">○ Avoid close greetings like hugs or handshakes and encourage physically-distant greetings such as “air fives” and waves,○ Plan for physically-distant activities such as shadow tag and where possible avoid activities that require clustering around a particular item or part of the room. Consider ways to set up rooms to avoid clustering or traffic jams○ Consider staggering individual participation in activities or use of equipment to avoid clustering in any specific area.○ For naps, increase distance between sleeping mats/cots up to 2 metres if possible, and always practice head-to-toe placement.• Use of masks by program staff is only encouraged for prolonged close interactions with children (e.g. changing a diaper or assisting with feeding).<ul style="list-style-type: none">○ If masks are worn, Alberta Health mask guidance must be followed and can be found here: https://www.alberta.ca/prevent-the-spread.aspx.○ Once a mask has been removed, it should be thrown in a lined trash bin (disposable masks) or placed in a sealed container to be laundered (reusable masks).○ Young children are unlikely to be able to wear a mask properly and not touch it so mask wearing is not recommended.• Staff and children should be frequently reminded to follow proper hand hygiene and respiratory etiquette (wash hands frequently, sneeze/cough into their elbow, put used tissues in a waste receptacle and wash hands immediately after using tissues)<ul style="list-style-type: none">○ Post signs with visual cues around the program area to remind staff and children to perform proper hand hygiene and respiratory etiquette.• Child care programs must adhere to handwashing guidelines outlined in the AHS Health and Safety Child Care Guidelines. While alcohol-based hand sanitizer is not typically recommended for routine use in child care, it has been proven effective for hand hygiene when soap and water is not readily available. Access to hand sanitizer needs to be monitored at all times and can result in accidental poisoning if ingested. Children must be closely supervised when using alcohol-based hand sanitizer. Manufacture instructions for each product must be followed.

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	<ul style="list-style-type: none">• For food service, meals and snacks:<ul style="list-style-type: none">○ Programs may provide food to children, however no family style meal service and they must not allow the children to self-serve.○ Food provided by the family should be stored with the child’s belongings or, if refrigeration is required, should be kept in an area designated for the child’s cohort and should not be handled by other cohorts’ staff.○ Close the kitchen/nourishment areas off that could be accessed by children, non-designated staff, or essential visitors.○ Cease activities involving child participation in food preparation.○ Ensure that food handling staff practice meticulous hand hygiene and are excluded from work if they are symptomatic.○ Where possible, children should practice physical distancing while eating.○ There should be no common food items (e.g. salt and pepper shakers).○ Meals should be served in individual portions by a designated staff member to each child.○ Utensils should be used to serve food items (not fingers).• Field trips, group transportation, holiday events, performances or celebrations must be postponed or cancelled until further notice, as these events offer fewer possibilities for physical distancing and may lead to the mingling of cohorts.
Cleaning and disinfecting items	<ul style="list-style-type: none">• Programs should engage in frequent, thorough cleaning and disinfecting each day.• With the exception of diaper change tables, clean and disinfect frequently touched objects and surfaces as per AHS’ Guidelines for Environmental Cleaning of Public Facilities during Respiratory Illnesses in the Community https://www.albertahealthservices.ca/assets/info/ppih/if-ppih- covid-19-environmental-cleaning-public-facilities.pdf.<ul style="list-style-type: none">○ Cleaning and disinfection of diapering areas must continue to be done as per usual protocols.• Cleaning and disinfecting of toys should be done by:<ul style="list-style-type: none">○ Commercial dishwasher○ OR :<ul style="list-style-type: none">▪ Wash with detergent and water▪ Rinse with clean warm water▪ Wipe, spray or immerse for 2 minutes in an approved disinfectant.▪ Air dry• Discontinue shared use of items that cannot be cleaned and disinfected (natural materials such as acorns, sticks, cardboard etc.)• Ensure mouthed toys are immediately put into a designated bucket to be cleaned and disinfected.• Soft toys (plush toys and blankets) should not be shared at this time. Launder in hot water and dry thoroughly between children or discontinue use.

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	<ul style="list-style-type: none">• Close all shared sensory tables including water tables, sand tables, shared play dough.<ul style="list-style-type: none">○ Individual sensory bins or activities that are not shared between children may be used (play dough labelled for individual child use, small individual water bowl with sensory activities)• Items such as books and puzzles should not be moved between rooms and should stay within each cohort room only as they cannot be fully cleaned and disinfected between cohort uses.• Regarding items that travel with the child from home to the child care centre on a daily or regular basis:<ul style="list-style-type: none">○ Children bringing in non-essential personal items should be discouraged.○ Equipment that is required for children’s day-to-day use (e.g. mobility or feeding devices, weighted blankets, headphones) should be cleaned and disinfected at drop off and pick up, and should not be used by anyone other than the child.
Other resources	<ul style="list-style-type: none">• General information regarding COVID-19 (Government of Alberta) www.alberta.ca/coronavirus-info-for-albertans.aspx• How to hand wash (AHS) https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-flu-handwash-how-to.pdf• How to use alcohol-based hand sanitizer (AHS) https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-flu-hand-rub-how-to.pdf• Diapering procedures poster (AHS) https://www.albertahealthservices.ca/assets/wf/eph/wf-eph-diapering-procedure-poster.pdf• Hand washing posters (AHS) https://www.albertahealthservices.ca/assets/wf/eph/wf-eh-you-d-clean-em.pdf https://www.albertahealthservices.ca/assets/wf/eph/wf-eh-you-d-clean-em-2.pdf• Arts and crafts safety (AHS) https://www.albertahealthservices.ca/assets/wf/eph/wf-eh-arts-crafts-safety.pdf

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APPENDIX A

Drinking water safety

During the response to the COVID-19 pandemic, many buildings where child care facilities are located have had reduced or no water flow through the plumbing water system. Under these conditions, water may stagnate, disinfection residuals may decline and water temperatures change, creating environments with poor water quality. As a result, each site needs to ensure fresh water replaces the stagnant water in the water lines.

Child care facilities in larger buildings

If the child care facility is located within a large building that has been vacant or at significantly reduced occupancy, speak with the building owner/operator to ensure:

- The water feed lines to the premises have been thoroughly flushed, the plumbing system and fixtures in common areas of the building have been thoroughly flushed,
- HVAC, humidifiers etc. in the building have been maintained and operating effectively,
- Any hot water tanks, reservoirs are replenished with fresh water as needed.

After the above is confirmed, flush the child care facilities water supply, this will refresh the child care facilities area's water supply and disinfectant residual.

- Flush all water faucets in the premises for 5 minutes. Flush cold water supply first.
- Drain the hot water tank if one is present in the child care facilities.
- Flush all hot water taps for 5 minutes.
- Run any automatic dishwashers through one cycle. Flush other water equipment. For example, refrigerators with ice makers and ice machines should be flushed and the first batch of ice discarded.
- At the end of each hot and cold timed flushing process, water temperature should be stable and water should not be discolored or have any sediment.
- Report any observations of discolored water or problems with the water to the building operator.

Child care facilities in stand alone sites

If the child care facility is located within a stand-alone building the following needs to be completed:

- Flush the feed line to the premises first by opening the closest faucet to the water line coming into the premises. Flush this faucet for at least 10 minutes. Flush the remaining cold water taps for 5 minutes. *Guidance for Hunting and Fishing Lodges, Camps and Outfitters*
- Drain the hot water tank.
- After draining the hot water tank, flush all hot water taps for 5 minutes.
- Run any automatic dishwashers through one cycle. Flush other water equipment. For example, refrigerators with ice makers and ice machines should be flushed and the first batch of ice discarded.
- At the end of each hot and cold timed flushing process, water temperature should be stable and water should not be discolored or have any sediment.

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APPENDIX B - Screening Questionnaire

PARENTS/ GUARDIANS MUST FILL OUT THIS QUESTIONNAIRE TO DECIDE IF THE CHILD SHOULD ENTER TODAY

Risk Assessment: Initial Screening Questions

		CIRCLE ONE	
1.	Do you, or your child attending the program, have any of the below symptoms:	YES	NO
	• Fever	YES	NO
	• Cough	YES	NO
	• Shortness of Breath / Difficulty Breathing	YES	NO
	• Sore throat	YES	NO
	• Chills	YES	NO
	• Painful swallowing	YES	NO
	• Runny Nose / Nasal Congestion	YES	NO
	• Feeling unwell / Fatigued	YES	NO
	• Nausea / Vomiting / Diarrhea	YES	NO
	• Unexplained loss of appetite	YES	NO
	• Loss of sense of taste or smell	YES	NO
	• Muscle/ Joint aches	YES	NO
	• Headache	YES	NO
	• Conjunctivitis (Pink eye)	YES	NO
2.	Has your child travelled outside of Canada in the last 14 days or has someone in the household travelled outside of Canada in the last 14 days and is ill?	YES	NO
3.	Have you or your children attending the program had close <u>unprotected</u> * contact (face-to-face contact within 2 metres/6 feet) in the last 14 days with someone who is ill with cough and/or fever?	YES	NO
4.	Have you or anyone in your household been in close <u>unprotected</u> contact in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19?	YES	NO

* “unprotected” means close contact without appropriate personal protection equipment (PPE).

If you have answered “**Yes**” to any of the above questions, please **DO NOT** enter at this time.

If you have answered “**No**” to all the above questions, please sign in and out and practice hand hygiene (wash hands for 20 seconds, and or use hand sanitizer) before and after your visit.

Our goal is to minimize the risk of infection to our staff and children, thank you for your understanding and cooperation.

Name

Signature

Date _____

