

## Safety Protocol Plan

**\*Please note all the protocols are directly advised from the BC Ministry of Health and Work Safe BC.**

- Access to Childcare Facilities
  - Staff, children, and parents must not enter the workplace if they have symptoms of COVID-19 or have traveled outside of Canada in the last 14 days or have been identified by public health as a close contact of a person with a confirmed case of COVID-19.
  - Posted signage at all entrances to the workplace, reminding people not to enter the site if they have symptoms associated with COVID-19.
  - During drop off, a daily “yes/no” verbal confirmation that children do not have symptoms of common cold, influenza, COVID-19, or another respiratory disease. We do not accept a child drop off if the answer is yes. A checklist has been placed on each program’s room for keeping records.
  - All parents and guardians must assess their children daily for the presence of symptoms of common cold, influenza, COVID-19, or other infectious respiratory diseases before drop off. Parents and guardians must keep their children at home until they have been assessed by a health care provider to exclude COVID-19 or other infectious diseases, and their symptoms have resolved.
  - Any individuals with symptoms of COVID-19 must be excluded from work, stay home, and self isolates until they have been assessed by a health care provider to exclude COVID-19 or other infectious diseases, and their symptoms have resolved.
  - We are prohibiting visitors to the facility. We will use a telephone or video conferencing when possible to meet with individuals as needed.
  
- Pick up and Drop off
  - Avoid close greetings such as hugs and handshakes.
  - Drop off and pick up should occur outside of the childcare setting where the age of the child and building design make this reasonably practicable.
  - To ensure physical distancing is maintained at drop-off and pick-up areas, **WE REQUEST A 10 MIN HEADS UP CALL FOR PICK UP AND DROP OFF.**
    - Families or guardians wait patiently outside after knocking the door.
  - When transferring a very young child between a parent and a worker, plan and communicate the procedure in advance to ensure that time spent in proximity is minimized.
    - The procedure must be confirmed with the management and designated staff.

- Hand Hygiene and Respiratory Etiquette

- All staff and children to wash their hands or use alcohol-based hand sanitizer immediately upon entering the facility.
- Staffs must wash their hands regularly throughout the day, including:
  - When they arrive at the workplace and before they go home
  - Before and after handling food, preparing bottles, or feeding children
  - Before and after giving or applying medication or ointment to a child or self
  - After changing diapers
  - After assisting a child in using the toilet
  - After using the toilet
  - After contact with body fluids (e.g., runny noses, spit, vomit, blood)
  - Before donning and after doffing personal protective equipment
  - After cleaning tasks
  - After handling garbage
  - Whenever hands are visibly dirty
- Support children to wash their hands regularly throughout the day, including:
  - When they arrive at the childcare and before they go home
  - Before and after eating and drinking
  - After a diaper change
  - After using the toilet
  - After playing outside
  - After sneezing or coughing
  - Whenever hands are visibly dirty
- Provide education and direction to workers and children to:
  - Cough or sneeze into their elbow sleeve or a tissue.
  - Throw away used tissues and immediately perform hand hygiene.
  - Not touch their eyes, nose, or mouth with unwashed hands.

- Physical Distancing

- Staff will maintain a distance of at least 2 meters from each other. Where this is not possible, for example, when transferring a very young child from one staff to another, plan and communicate the work task in advance to ensure that time spent in close proximity is minimized.
  - The procedure must be confirmed with management and designated staff.
- Staffs break times are staggered.

- Activities involving books, individual games, and video that encourage physical distancing between children are in place.
- Consider the placement of children when using multi-seat strollers, for example keeping children within their smaller groupings were present and placing children with an empty seat beside them and diagonally between rows.
- It is not always possible for staff to maintain physical distance from children, and between children, when in care. We are adhering to the principle of physical distancing where possible, by:
  - Minimizing the frequency of direct physical contact with children.
  - Forming several separate play areas to space children apart. Note that children who live in the same home do not need to maintain physical distance from each other.
  - Creating smaller groups or cohorts of children and keeping these groups separate from each other.
  - Minimizing the number of different staff that interact with the same child or group of children.
  - Organizing snack/meal areas to space children apart.
  - Organizing nap areas to space children apart and placing children head-to-toe or toe-to-toe.
  - Staggering snack/meal and nap times.
  - Including the use of outdoor space for various activities, including snack/mealtime, while adhering to physical distancing and hygiene principles.
- **Cleaning and Disinfection**
  - Remove toys that have surfaces that are not easily cleaned, such as plush stuffed animals.
  - Parents and guardians can provide personal comfort items (e.g., stuffed animals) if they are clean and laundered at the end of each day.
  - Removing unnecessary items from the childcare to reduce surfaces that could become contaminated.
  - All common areas (e.g., washrooms) and frequently touched surfaces (e.g., doorknobs, cupboard handles, light switches, faucet handles, tables, chairs, toys) are cleaned and disinfected at least every two hours (except where children are present directly)
  - Any visibly, dirty surface will be cleaned and disinfected.
  - Commercially available detergents and disinfectant products will be used and instructions on the label will be followed (see the BCCDC Cleaning and Disinfectants for Public Settings guidance for more information).
  - Garbage containers will be emptied daily, at a minimum.

- All Educators will wear disposable gloves when cleaning blood or bodily fluids (e.g., runny nose, vomit, stool, urine). And will wash hands before wearing and after removing gloves.
  - All Cots and cribs after each use will be cleaned and disinfected, crib linens between children will be sent home to be washed and placed in sealed plastic or washable bag before bringing to the centre. (Do not shake the linens.)
  - When a staff prepares the bed, he/she will wash their hands after each bed prep.
  - Diapering stations will be cleaned after each use.
  - There is no evidence that the COVID-19 virus is transmitted via textbooks, paper, or other paper-based products. As such, there is no need to limit the distribution of books or paper-based educational resources to children because of COVID-19
  - Toys and objects that children have placed in their mouths are set aside in a “to be washed” bin until they are cleaned and disinfected. Toys, objects, and surfaces known to have been in contact with bodily fluids are cleaned as soon as possible and between uses by different children.
  - When holding young children, feeding, or rocking to sleep, the staff will use a blanket or cloth to cover clothing. Change blankets or cloths between children.
  - Wash blankets, face cloths, towels, and bibs between uses by different children.
  - If a staff or child leaves the workplace due to symptoms of COVID-19, clean areas those individuals were in, including surfaces they may have touched, immediately upon their departure.
  - Maintain an adequate supply of cleaning and disinfection products and materials.
- Use of Personal Protective Equipment (PPE)
    - COVID-19 Public Health Guidance for Child Care Settings states that personal protective equipment, such as masks and gloves, are not needed beyond those used by the staff as part of regular precautions for the hazards normally encountered in their regular course of work.
    - Where PPE has been identified for tasks before the COVID-19 pandemic, continue to use this PPE when performing these tasks.
    - PPE may be required for staff who are cleaning and disinfection.
- Meals and Snacks
    - Not to share food or drink with staff or among children.
    - Not allowing children to participate in food preparation.
    - Designated sanitized tabletop/countertop for receiving food containers area is paced.
    - Food provided by parents and guardians is stored with the child’s belongings or, if refrigeration is required, it is kept in an area designated for the child’s grouping or cohort.
    - Reusable dishware, glasses, and utensils are cleaned and sanitized after each use.

- Other Methods to Control Risk
  - Limiting the sharing of supplies and equipment (e.g., pens, telephone, tablets, computer mouse) between staff.
  - Providing adequate amounts of high touch materials, such as art supplies, to minimize sharing between children.
  - Store children's belongings separately, for example, using cubbies.
  - Not allowing sharing of soothers, bottles, sippy cups, toothbrushes, or other personal items. Label personal items with the child's name to prevent accidental sharing.
  - Frequent ventilation and open windows.
  - Children will be outside wherever possible, including playtime, snack time, and learning activities.
  
- Transportation
  - Staff and children will walk to, and from school, children who have any problem walking (Asthma, or any other difficulties) will transport with van, car seats will be sanitized before and after children enter the van. Each child will be sitting on their dedicated car seat (which has been labeled), separate from other children.
  - Staff will wear masks and sanitize their hands (before and after) while helping children to put their seatbelt on.