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GENERAL

Using this document

Q: If changes are made to this FAQ document, will these be highlighted to alert the reader to a recent change?

A: This document has been updated to include sub-topics. We will also highlight new information for one week after it has been added, to facilitate identification of new information. Helpful hint: If searching for a specific keyword, use Ctrl + F to search the document for your topic of interest.

CLEANING & DISINFECTING

Room

Q: How often do baseboards, walls, and ceilings require cleaning and disinfecting?

A: Clean these surfaces only as needed (e.g. visibly soiled).

Equipment

Q: How do we clean and disinfect shared equipment (i.e. art supplies, recess toys, books)?

A: Use of shared objects should be limited, where possible. Shared items are to be cleaned (when visibly soiled) and disinfected between cohorts. Use of appropriate disinfectants would apply for items that can be disinfected. Single use disinfecting wipes are appropriate. It is recommended to leave books and other materials that cannot be disinfected for 72 hours.

Q: Do outdoor play structures and toys need to be cleaned and disinfected in the cold weather?

A: The requirement to clean and disinfect outdoor play structures between each group has been removed, child care licensees are encouraged to schedule outdoor play by groups in order to facilitate physical distancing and in a way that shared play structures are only used by one group at a time.

Child care licensees and home child care providers are encouraged to have designated toys and equipment for each room or group of children. This could include sleds and other outdoor winter toys. Where outdoor toys and equipment

are shared between rooms or groups of children, they should be cleaned and disinfected prior to being shared, where feasible, however a focus on hand hygiene before and after outdoor play is important to reduce the risk of contaminating surfaces.

ENVIRONMENT & PLAY

Children

Q: Are comfort toys from home allowed (e.g. plush toy for sleep)?

A: It is recommended to limit the number of personal items brought into the centre. Comfort toys and plush toys are not permitted throughout the centre as they cannot be properly cleaned and disinfected.

Q: Can children bring personal items?

A: Personal belongings should be minimized and should be labeled and stored separately in cubbies/designated areas.

Q: Can children use hand sanitizer?

A: Handwashing using soap and water is recommended over **alcohol-based hand rub** (ABHR) for children. If handwashing supplies are inaccessible, ABHR containing 60-90% alcohol can be used, only if hands are not visibly soiled. If ABHR is used on children, they must be supervised when using the product. To ensure proper use follow the manufacturer's directions.

Q: Can children make their own playdough and how long can it be stored for use?

A: Yes, if they are given their own ingredients. Materials (e.g. playdough, water, sand, art supplies) should be single use (i.e. available to one child for the day) and discarded at the end of each day.

Indoor

Q: Can HEPA filters be used inside the child care centre to reduce the spread of COVID-19?

A: Currently, there is no current public health guidance which recommends the use of HEPA filters. Guidance continues to evolve with emerging evidence.

Q: Our washroom is only accessible by going into another classroom. How do we handle this?

A: Designate a walking space that provides 2 or more meters from a group/cohort in their program area.

Outdoor

Q: Can we use our playground/play structure?

A: Play structures on-site can be used.

Q: Can programs operate in outdoor parks without access to washroom facilities?

A: There is no requirement under Public Health for programs to have a washroom. Programs require access to perform hand hygiene (i.e. ABHR or handwash basin).

Q: Can we sing with children if they are outdoors and physically distancing?

A: Yes, outdoor singing with proper physical distancing may be permitted, as the Ontario Ministry Guidance does not prohibit singing outdoors. Centres may choose to refer to the Ontario Music Educators' Association resource for suggestions on using music while remaining in line with current public health recommendations.

EXCLUSION & REPORTING

Q. When is a Child Care Centre required to notify HPEPH of COVID-19 case?

A. Child Care Centres must report to HPEPH when:

- A child or staff has been identified as a laboratory confirmed COVID-19 case.
- A child or staff has been identified as a suspect COVID-19 case
 - A suspect COVID case is an individual has one or more symptoms AND an exposure (i.e. travel history, contact with a probable or confirmed COVID case, lives or attends an institution in a COVID-10 outbreak).
- Individuals that fail screening do NOT need to be reported to HPEPH. Please ensure all individuals with symptoms are advised to self isolate and contact their local CAC to arrange for appropriate testing or contact their health care provider.

Q. Who to contact if a Child Care Centre needs to report a positive case?

A: Infectious and Communicable Diseases Program Intake Line at 613-966-5500 ext. 362 Monday – Friday, 8:30am to 4:30pm. Weekends, evenings and holidays follow the prompts from our 613-966-5500 to reach the After Hours Public Health Inspector.

Q: Can a child or staff member enter the child care centre if the person has a household contact who travels internationally for work?

A: Children of parents who travel internationally **and** who have been exempted from the Quarantine Act may attend, provided their parents are healthy and have no symptoms of COVID-19.

Children are required to self-isolate if their parent has travelled outside Canada in the previous 14 days and is ill with COVID-19 symptoms.

Q: What happens if a child has a symptom of COVID-19?

A: If a child has a symptom indicated on [Ontario's Covid-19 School and Child Care Screening Tool](#) refer to the [Protocol for Staff or Children with Symptoms of Covid-19](#).

MASKS & PERSONAL PROTECTIVE EQUIPMENT (PPE)

General

Q: When should staff/children wear masks and eye protection?

A: 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 safety glasses (e.g. trauma glasses) with extensions to cover the side of the eyes) while indoors on the child care premises, including in hallways. Extensions on prescription eye glasses are not acceptable by themselves as eye protection; they may be worn underneath face shields and some types of protective eye wear.) while indoors on the child care premises, including in hallways.

- All children in grades 4 and above are required to wear a non-medical or cloth mask while indoors on the child care premises, including in hallways.

- All school-age children, Kindergarten to Grade 3, are encouraged but not required to wear a mask while inside in the child care premises, including in hallways. Masks are not recommended for children under the age of 2 years.
- The use of masks is not required outdoors for adults or children if physical distancing of a least 2-metres can be maintained between individuals.

Children

Q: Can staff wear a face shield in place of a medical mask?

A: All staff are required to wear medical masks with reasonable exemptions for medical conditions. Wearing eye protection or a face shield alone does not provide enough protection.

Staff

Q: Can staff remove their masks when outside?

A: Yes, staff can remove their masks outdoors if they are able to maintain physical distancing.

Q: Are staff required to change their clothes before or after work?

A: There is currently no clear evidence demonstrating the transmission of COVID-19 by inanimate objects or fomites. Porous material such as fabrics represent lower-risk materials. It is not recommended that individuals perform work functions in a separate set of clothing.

Q: How can staff provide accessible instruction to children who use facial expression to communicate and understand others?

A: Staff can consider using masks with clear windows. Transparent Face Masks have recently been added to [Health Canada's list of Authorized Medical Devices](#) for Uses related to COVID-19.

SCREENING

Screening Process

Q: How do daycares complete the screening and documentation?

A: HPEPH recommends that parents/staff complete daily screening of their children/themselves prior to entry using [Ontario's Covid-19 School and Childcare Screening Tool](#). Additionally, it is recommended that centres post the Child/Student and Employee/Visitor posters at entrances to remind visitors to screen before entry.

Child care staff should verbally confirm that the screening tool was completed and that the child/visitor passed. This can be documented and retained using the [COVID-19 Child Care Screening Tracking Tool](#).

Caregivers who prefer an electronic version can request the [Fillable – Ontario's Covid-19 School and Childcare Screening Tool](#).

Q: Do I keep a Screening Tool for every child/visitor to the centre?

A: No. Although you must confirm that every entrant self-screened prior to entry you can use the COVID-19 Child Care Screening Tracking Tool as a record for all screening completed daily.

Q: How do we screen children who are attending before school programs?

A: Children entering a before school program should follow the same process as daycares. Parents have an obligation to screen children before entry to ensure they are free of COVID-19 symptoms. This screening is sufficient for transition into school and after school care.

Q: Do we have to screen children again before they go to after school care?

A: Screening must be completed once per day. However, under the CCEYA, providers have a requirement to document that the parent has confirmed that the child has passed screening.

Examples:

If a child attends the before school program the staff will confirm/complete screening with the parent and document that the child has passed the screening. When the child returns for after school, they would not need to be re-screened. In this case, staff would just conduct regular surveillance of the child's health.

If a child **only** attends an after-school program –the licensed child care program is required to verify that the daily screening was completed. Therefore, staff can complete the screening with the child where able (child is capable of answering the questions) or receive an attestation from the parent/guardian.

Temperatures and Thermometers

Q: Are child care centres required to have thermometers?

A: No, thermometers are not necessary or required.

Q: Are temperature checks required before entry?

A: No.

Q: If you screen a family and one child has a fever and one does not, are both children excluded from the child care centre?

A: No. If a child or staff member is low risk (i.e. symptoms and no known exposure) siblings and household contacts are not required to self isolate. Ill child must be excluded and follow [Child Care Centre Protocols for Staff or Children With Symptoms of COVID-19](#).

STAFFING & VISITORS

Staff

Q: Can staff work at another place of employment (e.g., grocery store, restaurant) or another child care centre?

A: Child care centre staff should work at one child care centre or institutional setting (e.g. hospital, long term care home, retirement home) but where necessary to meet ratios or operational needs, operators should mitigate risks by ensuring all health & safety requirements are in place and staff should continue to follow requirements for screening, hand hygiene and mask wearing.

Staff are permitted to have a secondary job at a grocery store, restaurant, salon or non-healthcare related setting.

Q: Can staff work in multiple rooms?

A: Try to limit the number of rooms as much as possible and continue to follow requirements for screening, hand hygiene and mask wearing.

Q: What about staff who are pregnant, are they safe to return to work?

A: There are no specific restrictions or guidance for individuals who are pregnant. We advise the same infection prevention and control measures regarding physical

distancing where possible, hand hygiene, and use of personal protective equipment such as medical masks.

Q: Can lunch breaks be covered using another staff member from another room?

A: Additional staff can provide lunch coverage. Stagger lunch times to accommodate for hand washing or ABHR use at communal stations (e.g. washrooms) and in shared spaces.

Q: Is it a public health concern if a child coughs, sneezes or spits on another child or staff member? What can be done to protect children and staff if this happens?

A: While unpleasant, exposure to body secretions is not a public health concern unless the individual was determined to be a suspected or confirmed case of COVID-19. Staff should perform a personal risk assessment regarding personal protective equipment needs when possibly coming into contact with bodily fluids. Follow your organization's health and safety procedures.

Visitors

Q: Can Child Care Centres complete tours of the facility for new families?

A: Yes, however only essential visitors are permitted in centres during hours when children are in care therefore tours should take place outside of these hours and should follow the guidance for visitors. Window and virtual tours are also recommended.

SYMPTOMS

Q: What do I do if a child has a runny nose?

A: If the child only has a runny nose and it is related to a known cause or condition (e.g. seasonal allergies or being outside in the cold) no action is required.

If the runny nose is new, worsening, or not related to a known medical condition the child should remain/be sent home for 24 hours. If the runny nose has improved and they are feeling well they can return to childcare and they do not require a test.

If after 24 hours the runny nose is persisting, worsening or they have developed another symptom they should continue to stay home and self-isolate and contact and assessment centre or their health care provider. Refer to the Return to School Protocols for Children and Students When Testing is Recommended.

Q: Does a child who tested negative and returned to daycare with mild symptoms that come and go need another test?

A: Additional testing is only required if a child has new or worsening symptoms or if there is concern about an exposure to a confirmed case of COVID-19.

Q: Do centres have to report to public health when a child becomes ill while attending?

A: No. For more information refer to [Child Care Protocol for Staff or Children With Symptoms of COVID-19](#).

Q: I run a home-based daycare. Can I still provide child care if a member of my household has symptoms?

A: If the family member is able to follow the [How To Self Isolate](#) document, the daycare can continue to have children in the home.

However, if the symptomatic member is unable or the daycare provider is required to attend to the family member and cannot maintain the 2 m distance then no, as they are unable to ensure the family member is self-isolating.

Q: If a child has experienced GI symptoms, what is the protocol for returning to day care?

A: We recommend that the child returns 48 hours after their last episode.

TESTING & ISOLATION

Q: If a parent or sibling is awaiting a test result, can the asymptomatic child be admitted to daycare?

A: Yes, asymptomatic siblings can attend child care. Family contacts do not have to isolate if the symptomatic individual has been tested and they are waiting for results, and the family has not recently travelled or been in contact with someone who has tested positive.

Q: Do children or staff members have to self-isolate for 14 days if they have travelled within Canada?

A: No, isolation is not currently required for general travel within Canada.

OTHER

Q: Can child care staff transport children in strollers and are they required to wear PPE?

A: Children in a shared stroller should be in the same cohort, and space between them should be maintained as much as possible. Strollers should be dedicated to a cohort where possible and should be cleaned and disinfected after use and between cohorts. The use of masks is required for adults if physical distancing of at least 2-metres cannot be maintained therefore caregivers are required to wear PPE while pushing strollers and within 2-meters of the child.

Q: Can a child attend more than one centre?

A: It is strongly recommended that children attend only one centre.

Q: I operate a home daycare which also provides before and after school care. I provide transportation of several children to different schools Can I still do that?

A: Yes, however we recommend that children wear a mask and you try as much as possible to ensure physical distancing in the vehicle.

Q: How can we maintain cohorts when children from different groups attend at the same time? (example: cohort A attends on Mondays and Wednesdays and cohort B attends on Tuesday and Thursday and children from each cohort attend on Fridays)?

A: Children and staff should be assigned to one specific group and as much as possible not mix with other groups.

Having assigned groups is an operational challenge for many programs and each program should to the best of their ability limit children's interactions to only one group. If children from separate groups are required to share the same space at the same time due to program restrictions the following precautions should be in place:

- physical distancing between children from separate groups (ie. separate activity centers or tables)
- designated areas and toys for separate groups

- mask use for all children in grade 4 and up
- frequent hand washing for all children and staff
- cleaning and disinfection of high touch surfaces and shared items before use by children from a separate group

Q: How many individuals can physically attend parent and child programs (ie. Early On, Mom & Tot, etc.) at one time?

A: The number of participants must be limited so that every member of the public is able to maintain a physical distance of at least two meters from every other person.

A program operated by a business or organization the maximum number of people allowed to gather indoors is 50 and outdoors is 100.

For individual gatherings (ie. parents/guardians and children meeting together on their own) the maximum number people allowed to gather indoors is 10 and outdoors is 25.

The requirements for gathering sizes are set out by the Province of Ontario in Regulation 364/20: Rules for Areas in Stage 3 under the Reopening Ontario (A Flexible Response to COVID-19) Act, 2020, S.O. 2020, c. 17.

<https://www.ontario.ca/laws/regulation/200364>

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