

Manor Road Co-operative Nursery School (MRNS)	Initial Issue Date:	August 31, 2020	
Covid-19 Policy and Procedures	Revision #:	Initial Version	

Covid-19 (Novel-Coronavirus) – Policies and Procedures

Pre-Planned Group Events/Outings and In Person Parent Meetings

Until further notice, due to the Covid-19 Virus, all 2020/2021 field trips, group fundraisers, and In-person Parent Teacher Interviews will be postponed, reschduled or available through virtual platforms eg. Zoom. Ideas on how we can continue special events and fundraising initiatives virtually or while social distancing are welcome by MRNS an can be emailed to the Supervisor at supervisor@manorroadnurery.com

Screening at Drop Off and Pick up

- -MRNS will use orange pylons spaced 2 meters apart at the Main entrance at 111 Manor Road East to indicate where to stand for drop off (between 8:30am and 9:00am) and pick up from our school (11:30am). Children will be received by the Screener and dissmissed by staff one at a time as their family arrives.
- -MRNS will actively conduct either in-person, virtually (by reviewing an electronic submission) daily screening of all staff, children and essential visitors, including temperature checks, upon arrival, prior to entry/drop-off in the main Vestibule which will be clearly identified as the Screening Station with at least 2 meters of space between the screener and the screenee.
- -At the discretion of the MRNS Board of Directors, daily screening may be completed and submitted electronically (e.g. via online form, survey, or e-mail) prior to arrival at MRNS.
- -MRNS staff and parents/guardians of children attending our program will be reminded when children are first registered for the program and through visible signage at the entrances and drop-off areas that they must not attend the child care program when they are ill, and that they should report any symptoms associated with COVID-19 to the child care operator.
- -MRNS will screen all children, child care staff/students and any other individuals prior to entry by asking about the following:
- *Do you/does the child have any of the following symptoms: fever/feverish, new onset or worsening of cough, shortness of breath, difficulty breathing, sore throat, difficulty swallowing, decrease or loss of sense of taste or smell, chills, headaches, unexplained fatigue/malaise/muscle aches, nausea/vomiting, diarrhea, abdominal pain, pink eye (conjunctivitis), runny nose/nasal congestion without other known cause?
- *Have you/has the child tested positive for COVID-19 or had close contact with a confirmed case of COVID-19 without wearing appropriate PPE?
- * Have you/has the child travelled outside of Canada, including the United States, within the last 14 days?
- MRNS will record screening results daily and will keep records on site for 12 months.
- MRNS screeners will take appropriate precautions when screening and escorting children to the program, including maintaining a distance of at least 2 metres (6 feet) from those being screened, or being separated by a physical barrier (such as a plexiglass barrier). If a 2 metre distance or physical distancing cannot be maintained, personal protective equipment (PPE) (i.e., medical mask and eye protection (i.e., face shield)) will also be worn.
- Where an individual does not pass the screening and is not permitted to attend the program, this does not need to be reported to the local public health unit. MRNS will follow advice from our local public health unit regarding precautions to have in place as listed above.



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Enhanced Attendance Reporting Practices

- -MRNS will maintain daily attendance records of all individuals entering the child care centre. This includes, but is not limited to, staff, children, maintenance workers, cleaning/environmental staff, and government agency employees (e.g. public health inspectors, program advisors, fire inspectors).
- -MRNS Records will include the following information: name, company, contact information, date, time of arrival/departure, reason for visit, rooms/areas visited and screening results and will be kept on file for at least 12 months.
- -MRNS Records will be updated when a child, child care provider or staff is absent.
- -MRNS will follow-up with all individuals to determine the reason for any unplanned absences, and if the absence is due to illness, to note any symptoms (e.g. fever, sore throat, cough).
- -MRNS will encourage parents/guardians of ill children and child care staff who are ill to seek COVID-19 testing at assessment centres. They can also contact Telehealth at 1-866-797-0000 or their primary care provider to determine if further care is required.
- -Non-essential visitors must not be permitted to enter the child care centre.
- -MRNS will monitor attendance records for patterns or trends (e.g. children and child care staff in the same group or cohort absent at the same time or over the course of a few days).
- -MRNS will ensure attendance records will be available on-site at all times.

Cohorting Staff and Children

Child care staff and children will be assigned to designated cohorts or groups, as applicable and required.

- -MRNS will assess the available space in program areas in relation to group sizes and programming activities to ensure that physical distancing can still be practiced as best as possible.
- Cohorts will be designated to a specific "home room" or area.
- Child care staff and students are not included in the maximum cohort size, however, they are still considered a member of their assigned cohort or group.
- -Staff to child ratios must comply with the Ontario Regulation 137/15 under the Child Care Early Years Act.
- -If applicable, programming will be planned in a manner that limits cohorts from mixing throughout the morning and over the course of the child care program/session.
- -MRNS will Stagger/alternate scheduling for the following as requried:

☐ Shared washroom facilities. If washrooms are shared, only one cohort must access the washroom at a time.
☐ Drop-off will be between 8:30am and 9:00am to prevent parents/guardians from gathering or grouping ogether.
□Snack will be served individually at individual tables by MRNS Staff.
Outdoor playgrounds and play spaces (dedicated to the child care).

-If different cohorts are using the same indoor area (e.g., gymnasium) child care staff must ensure that physical distancing is maintained between the cohorts and that the groups do not mix.



Manor Road Co-operative Nursery School (MRNS)	Initial Issue Date:	August 31, 2020
Covid-19 Policy and Procedures	Revision #:	Initial Version

o If physical distancing cannot be maintained, MRNS will consider using temporary physical barriers to prevent mixing of groups. The height of the barrier will take into account the tallest user and will consider the users breathing zone.

o The breathing zone is defined as a pocket of air from which a person draws breath and generally extends 30 centimeters or 12 inches around (and above) the mid-point of a person's face.

Physical Distancing

The Ministry of Education recognizes that physical distancing between children in a child care setting is difficult and encourages child care staff and providers to maintain a welcoming and caring environment for children.

- -MRNS will practice physical distancing (i.e. a two metre/six feet distance) as best as possible between children during activities while still permitting interaction and socializing to occur.
- -MRNS acknowledges that physical distancing must not compromise supervision or a child's safety, emotional or psychological well-being.
- MRNS will maintain physical distancing as best as possible between cohorts in common areas by:
- o Using visual markers/cues spaced two meters/six feet apart (e.g. tape on the floor, pylons, signs) in common areas such as entrances and corridors.
- MRNS will encourage children to greet each other using non-physical gestures (e.g. wave or nod or a verbal "Hello") and to avoid close greetings (e.g. hugs, handshakes).
- MRNS will regularly remind children to keep "hands to yourself" and stay "Eagle Wings Apart" and in their "Own Special Bubble."
- MRNS will reinforce "no sharing" policies and procedures. This includes the current practice of not sharing food, water bottles or other personal items.
- MRNS will limit the number and types of personal items that can be brought into the child care setting, and provide individually spaced hooks for each child's belongings.
- MRNS will ensure personal items such as backpacks will be clearly labeled with the child's name to prevent accidental sharing.
- MRNS will plan activities and games that increase spacing between children while promoting social interaction.
- MRNS will avoid activities that involve shared objects or toys, activities involving singing or shouting indoors.
- MRNS will use visual cues such as pylons, individual tables, chairs, hula hoops, mats, placemats, numbered people, stickers and/or tape to encourage physical distancing by the children.
- MRNS, whenever possible will be moving activities outside to allow for more space.

Hand Hygiene and Respiratory Etiquette

- MRNS will ensure that all staff, children and visitors clean hands thoroughly with soap and water or use hand sanitizer (70-90% alcohol concentration) provided hands are not visibly soiled.
- MRNS will encourage all staff, children and visitors to avoid touching their face, nose and mouth with unwashed hands and to cover their cough or sneeze with their elbow or a tissue. Immediately throw the tissue in the garbage and wash your hands.
- MRNS will provide additional hand sanitizer (70-90% alcohol concentration) stations in supervised areas where children cannot access it independently.
- MRNS staff will ensure that proper hand hygiene is practiced often and when necessary (e.g. before and after eating, after using the bathroom, after covering a cough or sneeze). This includes supervising and/or assisting children with hand hygiene.



Manor Road Co-operative Nursery School (MRNS)	Initial Issue Date:	August 31, 2020
Covid-19 Policy and Procedures	Revision #:	Initial Version

- MRNS Child care operators and Supervisor will monitor hand hygiene supplies to ensure adequate amounts of liquid soap, paper towel, hand sanitizer, tissues, and waste receptacles lined with plastic bags.

Food Safety Practices

-MRNS will modify meal practices to ensure that there is no self-serving or sharing of food at meal times. □ Meals will be served in individual portions to the children. □ Utensils will be used to serve food.
☐ MRNS will not provide shared utensils or items (e.g. serving spoons, condiments).
□ Children will not be allowed to prepare nor provide food that will be shared with others.
☐ There must be no food provided by the family/outside of the regular meal provision of the program (except
where required and special precautions for handling and serving the food are put into place)
□ MRNS will ensure proper hand hygiene is practiced when staff are preparing food, and for all individuals before and after eating.
Enhanced Cleaning and Disinfecting Practices
-MRNS has and will continue to review Public Health Ontario's Cleaning and Disinfection for Public Settings fact sheet, available here: https://www.publichealthontario.ca/-/media/documents/ncov/factsheet-covid-19-environmental-cleaning.pdf?la=en
-MRNS has and will continue to refer to Health Canada's lists of hard surface disinfectants for use against coronavirus (COVID-19) available at https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html . Disinfectants must have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada.
-MRNS will check the expiry dates of products and always follow the manufacturer's instructionsMRNS may also use Chlorine bleach solutions which may also be used for disinfection if appropriate for the surface.
-If using Beach Solution, MRNS will:
 □ prepare chlorine bleach solutions according to the instructions on the label or in a ratio of: □ 1 teaspoon (5 mL) bleach per cup (250 mL) of water, or
□ 4 teaspoons (20 mL) bleach per litre (1000 mL) of water.
☐ Ensure a minimum of two minutes contact time and allow to air dry.
□ Prepare fresh bleach solutions daily.
☐ Educate staff on how to use cleaning agents and disinfectants:
□ Required disinfectant contact times (i.e. amount of time that the product will need to remain wet on a surface to achieve disinfection).
☐ Take all safety precautions and use required personal protective equipment (PPE).
□ Read directions for where and how to securely store cleaning and disinfectant supplies.
-MRNS staff will conduct environmental cleaning and disinfecting throughout the morning by:
□ Cleaning and disinfecting all high-touch surfaces and objects (e.g. doorknobs, light switches, toilet handles, sink faucets and tabletops) at least twice a morning or when visibly dirty.

☐ Cleaning and disinfecting high-touch surfaces (i.e. faucets, toilet handles)

electronic devices, toys and balls between users.

□ Cleaning and disinfecting individual items that may be handled by more than one individual such as

-MRNS will maintain logs to track cleaning and disinfecting activities for each room/area, individual/play items.



Manor Road Co-operative Nursery School (MRNS)	Initial Issue Date:	August 31, 2020	
Covid-19 Policy and Procedures	Revision #:	Initial Version	

□ As MRNS is located in a shared space, we will make arrangements with *The Church of The Transfiguration* to ensure enhanced cleaning and disinfecting practices can be maintained (i.e. frequency of cleaning appropriate disinfecting agents are used).

Requirements for toys, equipment/other materials and outdoor play

MRNS will:
□ Provide toys and equipment that are made of materials that can be cleaned and disinfected.
□ Not use plush toys.
 Assign specific toys and play structures to one cohort at a time if possible: Consider using identification systems to prevent the sharing of items between cohorts (e.g. Name tags) Ensure the outdoor large play structures will only be used by one cohort at a time.
$\ \square$ Ensure play equipment and large play structures (e.g. indoor play structures, playhouses, climbers) will be cleaned and disinfected between cohorts or after each use.
 □ Ensure toys will be cleaned and disinfected between users as much as possible. □ Ensure mouthed toys will be separated, cleaned and disinfected immediately after the child has finished using it.
☐ Clean and disinfect toys in a two compartment sink. Washing and rinsing will be done in the first sink and toys will be washed and rinsed prior to disinfection.
□ Ensure required disinfectant contact times are achieved or alternatively allow toys to air dry.
$\ \square$ Dry toys in a designated area that is separate from bathrooms, change tables and protected from sources of contamination.
□ Suspend group sensory play activities.
□ Ensure items that cannot be readily cleaned and disinfected (e.g. books) will be batched. Batched items can be rotated on a weekly basis. o Items will be taken out of rotation after use, placed in a sealed container and set aside for seven days before
reusingMRNS will provide individualized bins for sensory play and caddies for art materials and supplies for each child and will label the caddies to prevent accidental sharing.
Use of Masks and Personal Protective Equipment
- MRNS will provide personal protective equipment (PPE) for use by staff, as required and when necessary MRNS will maintain a one to two week supply of PPE at all times.
□ All adults in a child care setting (i.e. child care staff) are required to wear a surgical/procedure mask (i.e. medical mask) and eye protection (e.g. face shields, safety glasses and goggles) while inside in the child care premises, including in hallways.
☐ The use of masks and eye protection is not required for staff/students, home child care providers or children when outdoors if physical distancing can be maintained.
□ Exceptions to wearing a mask and eye protection indoors may include medical conditions that make it difficult to wear a mask or eye protection (e.g. difficulty breathing, low vision), a cognitive condition or disability that prevents wearing a mask, and hearing impairments or when communicating with a person who is hearing impaired and where the ability to see the mouth is essential for communication.
☐ Gloves must be worn when it is anticipated that hands will come into contact with mucous membranes, broken skin, tissue, blood, bodily fluids, secretions, excretions, contaminated equipment or environmental surfaces.
□ Although they are not required to, school-aged children (kindergarten to grade three) should be encouraged to wear a non-medical mask or face covering while indoors at the child care centre. Isolate children and staff/students that become ill



Manor Road Co-operative Nursery School (MRNS) Covid-19 Policy and Procedures Revision #: Initial Version

☐ It is recommended that MRNS staff and children with symptoms of COVID-19 go to an assessment centre for testing as soon as possible, and to self-isolate at home until their result is available.
☐ If a child becomes ill with symptoms while in care, MRNS will immediately separate them from the rest of their group in a designated room and supervise them until they are picked-up.
□ MRNS will notify parents/guardians or emergency contacts to pick up the ill child as soon as possible.
☐ The designated room/space must have a hand washing sink or hand sanitizer (70-90% alcohol concentration) available.
☐ MRNS will provide tissues to the ill child to help support respiratory etiquette.
□ MRNS will open outside doors and windows to increase air circulation in the area if it can be done so safely.
□ Children older than two years should wear a medical mask (if tolerated) and they are able to use it properly (e.g. donning and doffing carefully, avoiding touching while on).
□ MRNS staff supervising the ill child should maintain physical distancing as best as possible, and wear PPE, including a surgical/procedure mask (i.e. medical mask) and eye protection (e.g. face shield, safety glasses and goggles).
□ MRNS Stff will clean and disinfect the area immediately after the child with symptoms has been picked-up. Items that cannot be cleaned and disinfected (e.g. paper, books, cardboard puzzles) should be removed from the program and stored in a sealed container for a minimum of seven days.
Exposure to someone with COVID-19
□ Child care staff/students and children exposed to a confirmed case of COVID-19 must be excluded from
the child care setting for 14 days: □ These individuals must self-isolate at home and monitor for symptoms for the next 14 days.
☐ Individuals who have been exposed to a confirmed case of COVID-19 should get tested as soon as any symptoms develop.
☐ If asymptomatic, individuals who have been exposed to a case should are also encouraged to get tested within 14 days of the potential exposure. They will need to continue to self-isolate for 14 days even if the test is
negative.
Return to Child Care Centre
☐ If an ill child/staff has tested for COVID-19 and their test result is negative , they can return to the centre after being symptom free for 24 hours and they pass the screening.
☐ Child care staff and children who have been exposed to an individual who became ill with symptoms (i.e. suspect COVID-19 case) must continue to be grouped together (i.e. cohorted), and monitored for signs and symptoms of illness:
☐ Child care staff will not be assigned to other groups or work in other child care settings. They must also be advised to avoid being in contact with vulnerable person or settings where there are vulnerable people.
□ Child care staff must ensure that mixing of children is prevented.
□ Supervisors must inform parents/guardians of children who were exposed to the ill child, and advise that they should monitor their child for symptoms.
 □ The Supervisor may consult with Toronto Public Health as necessary. □ Child care staff and children who are being managed by TPH (i.e. confirmed or probable cases of COVID-19, close contacts of cases) must follow TPH instructions to determine when to return to the child care
centre/home: Staff must also report to their occupational health and safety department prior to return to work when applicable.

-Clearance tests are not required for staff or children to return to the child care centre.



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Report cases and outbreaks to Toronto Public Health

Services Health & Safety Association website.

-A single symptomatic lab confirmed case of COVID-19 in a child care centre staff member or child would be considered a confirmed COVID-19 outbreak, in consultation with TPH.
-Child care centre supervisors will immediately report the following to TPH at 416-392-7411 during work hours (8:30 a.m. to 4:30 p.m., Monday to Friday) or 3-1-1 after hours:
□ Cases of COVID-19 among staff or child attendees that are laboratory-confirmed.
□ Probable cases of COVID-19 (i.e. symptoms occurring among a staff or child who has been exposed to a person with confirmed COVID-19).
□ Clusters of suspected cases (i.e. two or more children or staff with COVID-19 symptoms within a 48-hour period).
Staff Shifts
Staff shifts will be scheduled to minimize the risks with respect to Covid-19 by having the same staff on a regular weekly basis. Our School does not typically have shifts as we are small and a morning only program. Supply staff will be hired from an agency eg. Book Jane, Sentient.
Communicate with Families/guardians and other stakeholders
<u>-</u> MRNS will:
□ Develop and implement communication platforms to provide program information and protocols on health and safety measures (e.g. screening practices, physical distancing, staying home if you're sick). Communication platforms may include the websites, the Covid Co-ordinator Parent Volunteer, email, or possibly social media accounts.
☐ Use telephone or video conferencing when possible for meetings between child care staff and with parents/guardians.
□ Post signs at all entrances instructing participants and their families not to enter if they are sick.
□ Communicate with stakeholders such as building owners/property managers on a routine basis to provide updates about policies and procedures and to align any gaps or concerns regarding IPAC practices.
-Toronto Public Health will provide further advice about information that should be shared with other staff, parents/guardians and other stakeholders (e.g. school boards) in the event there is a case or outbreak of COVID-19 in the setting.
Worker Health and Safety
☐ MRNS Employers must provide written measures and procedures for staff safety, including for IPAC. The
provincial government has general information on COVID-19 and workplace health and safety on employers' responsibilities and how to protect workers at work.
□ Workers can also get information about health and safety protections at the workplace.

□ Additional health and safety guidance for employers of child care centres is available from the Public