COVID-19 Policy

Policy Statement:

The Cooperative Nursery School of Almonte is committed to providing a safe and healthy environment for children, families, and staff. Every reasonable precaution will be taken to prevent the risk of communicable diseases within our program. This policy statement is broken down into the following categories:

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Highlight of changes in the following sections:

2: Masks
4: Pick up & drop off procedure
6: Becoming ill at school.
9: Reporting of Confirmed Cases of COVID-19
16:Staff Scheduling to ensure safety
21: Return to School form

Purpose

To ensure that all employees, families, and other community members are aware of, and adhere to, the directives established by Leeds, Grenville and Lanark Health Unit and Ministry of Educations Operational Guide During COVID-19 Outbreak, regarding the health and safety measures and communication plans for The Cooperative Nursery School of Almonte.

Application

This policy applies to all employees, students, community members, and any other persons engaged with The Cooperative Nursery School of Almonte

1. Procedures for Sanitization of space, toys and equipment:

1.a General Cleaning and Disinfecting Requirements:

Staff should refer to Public Health Ontario's <u>Environmental Cleaning fact sheet</u> and thePublic Services Health and Safety Association's <u>Child Care Centre Employer Guideline</u>for information on cleaning. Staff will keep a cleaning and disinfecting log to track and demonstrate cleaning schedules. In general:

Cleaning:

- Use detergent and warm water to clean visibly soiled surfaces
- Rinse the surface with clean water (warm to tepid temperature preferred) to ensure detergent is removed
- Let the surface dry

Disinfecting:

• For general environmental disinfection of high touch surfaces, large toys and equipment that cannot be immersed, a disinfectant spray solution of 4tsp of bleach to a litre of water will be used, the contact time for disinfecting is **1 minute**

Air Circulation/Filtration:

 Staff will continue optimizing air quality in the classroom environment through improvements to ventilation and/or filtration, including opening windows at intervals for fresh air intake (where seasonally appropriate), and running the standalone HEPA-filter units while students are present in the space. These units will be maintained as required, including replacing filters as needed/indicated by the unit

1.bCleaning and Disinfection frequency requirements:

Clean and disinfect frequencies for other surfaces and items:

Cleaning and disinfecting routines **must** be increased as the risk of environmental contamination is higher:

- **Tables and countertops**: used for food preparation and food service must be cleaned and disinfected before and after each use
- **Spills** must be cleaned and disinfected immediately
- Handwash sinks: staff and children washroom areas must be cleaned and disinfected at least two times per day and as often asnecessary (e.g., when visibly dirty or contaminated with body fluids).
- **Floors**: cleaning and disinfecting must be performed as required, i.e., when spills occur, and at the end of the program.
- High-touch surfaces: any surfaces that have frequent contact withhands (e.g., light switches, shelving, containers, handrails, doorknobs, sinks, toilets etc.,) should be cleaned at least twice per day and as often as necessary (e.g. when visibly dirty or contaminated with body fluids)
- Other shared items: (phones, IPADs, attendance binders etc.)these must be disinfected between users)

Clean and disinfect daily:

- Low-touch surfaces (any surfaces that has minimal contact with hands), must be cleaned and disinfected daily (e.g. Window ledges, doors, sides of furnishings etc.)
- Carpets are to be vacuumed daily

Clean and disinfect as required:

Blood/Bodily Fluid Spills: Using the steps below, the surface must becleaned first then disinfected:

- 1 Isolate the area around the spill so that no other objects orindividuals can be contaminated
- 2 Gather all supplies, perform hand hygiene, then put on single-usenitrile gloves
- 3 Scoop up the fluid with disposable paper towels, check the surrounding area for splash/splatter and dispose of in separategarbage bag
- 4 Clean the spill area with detergent, warm water, and single-usetowels
- 5 Rinse to remove detergent residue with clean water and single-usetowel
- 6 Discard used paper towels and gloves immediately in a tied plasticbag
- 7 Spray approved disinfectant in and around the spill area and allow the appropriate **1-minute** disinfecting contact time
- 8 A final rinse is required if children come into contact with the area
- 9 Remove gloves as directed and discard them immediately.

Equipment and Toy Usage and Restrictions:

Shared Objects

The risk associated with transmission with shared objects is now considered low. Objects will continue to be washed daily and when needed however, focus will be made more on regular and properhand hygiene as well as respiratory etiquette to reduce the risk of infection related to shared objects and equipment.

• Toys and equipment which are made of materials that can becleaned and

disinfected (e.g., avoid plush toys) will be used.

- Reduced clutter and limited toys to those that can be disinfecteddaily
- Mouthed toys will be cleaned and disinfected immediately after use.
- Prior to rotating toys and equipment, it will be cleaned and disinfected.
- When sensory materials (e.g., playdough, water, sand, etc.) are offered, they will be for single use only (i.e. available to the child for the day) and labelled with child's name.
- A log will be used to keep track of disinfecting schedules asrequired.

1.C Additional Infection Prevention and Control Practices for Hygiene Items

• For creams and lotions during diapering, hands are not to be put directly into lotion or cream bottles, instead use a tissue or single-use gloves.

1.d Cleaning and Disinfecting where Suspected case of Covid-19

If an individual is suspected of having Covid-19 in the childcare setting:

- Identify areas that may require cleaning plus disinfection (items used by the individual and all surfaces within 2 metres of the ill person) versus cleaning alone (such as a hallway or room wherethe individual has passed through).
- PPE should be used while cleaning and waste disposal.
- Use disposable cleaning equipment, such as disposable wipes, where possible.
- All items that cannot be cleaned (paper, books, cardboard puzzles)will be removed and stored in a sealed container for a minimum of 7 days

2. Use of Masks, Personal Protective Equipment (PPE) and Hand Hygiene 2a. Use of Personal Protective Equipment

- All staff, students (completing post-secondary placements) or visitors are required to wear medical masks or N95 masks while inside the school, including hallways (unless eating – but time with masks off should be limited and physical distance should be maintained). Proper eye protection approved by the health unit such as face shield or goggles are required to be worn while in the nursery school rooms and when with the children indoors (i.e., hallways).
- All other adults (i.e., parents/guardians and visitors) are required to wear a face covering or non-medical mask while inside the premises (see information about the proper use of face coverings on the provincial <u>COVID-19 website</u>)
- The use of medical masks (not N95 masks) is required outdoors for staff, students who are completing post-secondary placements and visitors while interacting with children.
- Eye protection is not required outdoors for staff or students who are completing postsecondary placements as long as a physical distance of 2 meters can be maintained.
- Staff may briefly remove masks to eat or to have a mask break provided that a physical distance of 2 meters can be maintained between individuals while the mask

is off.

• The Nursery School Director will consider exemptions to wearing masks on a caseby-case basis for medical conditions and where a physical distance of 2 meters can be maintained between individuals and where an exemption is granted it will be documented.

2b. Child Masking

 Masks are recommended but continue to be optional for all children enrolled in the program. If a child chooses to wear a mask, parents/guardians are responsible for providing tight fitting, non-medical masks, or face coverings each day and a container/bag labeled with their name to store masks in when not in use. The child must be able to put on and remove the mask with little to no assistance.

2c. Replacing a Mask

•Medical and non-medical masks should be replaced when they become damp or visibly soiled and/or if it has lost some of its integrity (damaged elastic).

- Non-Fitted N95 Masks for staff should be replaced:
 - \circ $\;$ when it is no longer tolerated or accepted
 - o If the filtering part of the mask gets wet
 - If it has lost some of its integrity (elastic or damaged filter)
 - o If there were potential infectious droplets expressed onto mask.

2d. Hand Washing

• Appropriate hand hygiene and respiratory etiquette are among the most important protective strategies to prevent the spread of germs. Staff will implement strict hand washing practices. Alcohol-based hand sanitizers of 60% may be used if hand soap isnot readily available. Hand washing with soap and water should be first choice if available. Activities where hand washing should be implemented are included but notlimited to:

- Upon entering the program
- After screening each individual upon entry to the program
- Before/After direct physical contact with children
- o After each transition whenever possible
- After diapering a child, cleaning up messes or wiping a nose
- o After toileting
- After sneezing or coughing
- After a child sneezes or coughs in proximity
- After taking out garbage
- After contact with blood/body fluids
- When hands are visibly soiled
- After using protective gloves
- o After completion of work
- After cleaning

Staff will be trained and able to assist children on appropriate hand hygiene and respiratory etiquette, including the use of alcohol-based hand rub and reinforcing its use.
Support or modifications will be provided to allow children with special needs to regularlyperform hand hygiene as independently as possible.

Staff will use correct hand washing procedures as outlined below:

- 1 Use a hand wash sink supplied with hot and cold running water, paper towels, and liquid soap in a dispenser.
- 2 Use soap and water for soiled hands. Wet hands under running water.
- 3 Apply soap to palm of hand.
- 4 Use friction to clean between fingers, palms, backs of hands, wrists, forearms, under nails and base of thumbs for a minimum of 20 seconds.
- 5 Rinse under running water for a count of 5 seconds.
- 6 Dry with paper towel.
- 7 Turn taps off with paper towel.
- 8 Dispose of paper towel in an appropriate container.

Alcohol-based sanitizer 60% or more may be used following the procedure below:

Alcohol-based hand sanitizers should only be used if hands are not visibly soiled and if soap and water are not readily available.

- 1 Apply one to two pumps of hand sanitizer (about the size of a loonie) onto one palm. Rub your hand together. Clean all surfaces of your hands, concentrating on fingertips, between the fingers, nail beds, back of your hands and the base of your thumbs.
- 2 Continue rubbing hands until product is dry; this will take a minimum of 20seconds if enough product is used.
- 3 If your hands look dirty and running water is not available, use a moistened towelette to remove dirt, followed by using an alcohol-based hand sanitizer.

2e. Disposable Glove Use

Staff will adhere to the following guidance on the use of disposable gloves:

- Wash hands before/after glove use.
- Gloves are intended for single use
- Gloves are to be stored in a cool, dry place.
- Follow recommendations of the manufacturer.
- Remove after use and dispose of in the garbage (never wash and reuse).
- Wash hands as indicated above after removal.

Note: Remove gloves from wrist and peel inside out prior to disposal.

3. Screening for Symptoms:

NOTE: As of January 3rd, 2022 in-person screening at drop off is required until further notice.

3a. Daily Self-Screening

- Once in person screening is no longer required, all parents must self-screen their child for symptoms <u>daily</u>, using the Google Document provided, <u>by 8:30am</u> (prior to arrival at the Nursery School). If access to the internet is not an option, in person screening will be completed at drop off.
- Staff will continue to monitor for symptoms daily prior to arrival and will complete in person screening and temperature taking each day upon arrival.

Note: The daily self-screening Google Document is adapted from the COVID-19 School and Childcare screening tool from the Ontario Government. Guidance and information regarding screening results can be found there and must be followed: <u>COVID-19 school and child care</u> <u>screening tool</u>

Individuals who do not pass the screening or who do not complete a screening are not permitted to attend the program and must stay home. Please see below section on Return to School for rules on when staff and children may return to the Nursery School following an illness or isolation.

Children with any communicable illness are not able to enter the Nursery School while infectious. Staff, parents, and children must not attend the program if they are sick, even if symptoms resemble a mild cold.

It is important for everyone's safety that the daily self-screening of your child prior to sending them to Nursery School is completed. If a child is sent to Nursery School when they should have failed the self-assessment, the Nursery School may, in its discretion, permanently remove the child from the program.

3b. Pre-existing Conditions

If a child or staff member has a pre-existing medical condition which may present as a symptom of COVID-19, such seasonal allergies, prone to headaches etc, a medical note from a physician should be kept in the individual's file.

4. Pick Up and Drop off Procedure

4a. Daily Student Drop off

Parents/guardians are encouraged not to enter the school at this time. Staff will continue to greet students at the entrance each morning and bring them into the school.

- Drop off / entering the building must be through the front glass doors. The intake process will take place outside these doors.
- Only 1 family is able to be checked in at a time.
- A minimum of 2 metres distance must be maintained between staff conducting the intake and the child and parents/guardians.
- Visual guides will assist with physical distancing between families if a line-up forms (e.g., lines on the sidewalk).
- Staff will ensure that each parent/guardian has conducted the online daily self-

screening document if applicable at that time. If a self-screening has not been done on a given day, staff will conduct an in-person screening using questions similar to those in the self- screening tool.

- A failed screening does not need to be reported to the local health unit but guidance from the provincial screening tool must be followed.
- Individuals may refer to the <u>Province's COVID-19 website</u> for information and resources on COVID-19 symptoms, protections, and seeking health care.
- Temperatures will be taken and logged daily. The discretion to conduct temperature checks inside the classroom rather than at the entrance (particularly in winter) may be used. General health checks are also completed at least once daily and recorded.
- Alcohol-based hand rub containing 60% to 90% alcohol content will be placed at the front entrance.
- Families are requested to only have **one** parent or guardian drop off the child to avoid crowds (siblings are allowed).
- Staggered drop off times may also be assigned to each child to avoid overcrowding.
- As much as possible, parents are encouraged not to enter past the entrance. If parents do enter the building, physical distance of 2 meters must be maintained and a mask/face covering is required.
- Personal belongings (e.g., backpack, clothing, etc.) need to be minimized. Any belongings that are brought need to be labeled and kept in the child's hook.

4b. Pickup Procedure

•Individuals must maintain a physical distance of 2 meters from each other while waiting for pickup (members of same household can stay together).

•Pick up and exiting the building is through the side red doors.

5.Attendance Records

- Daily attendance records are kept for all students at the Nursery School.
- Records all individuals visiting the nursery school program will be screened in as a visitor and these records are kept. (e.g. People doing maintenance work, people providing supports for children with special needs).
 - Records are to be kept on the premises and along with name and contact information must include an approximate time of arrival and of departure for each individual.
 - Records must be kept up to date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak.

As of January 2022, an attendance calendar has been created. Staff will attempt to update daily, but due to unforeseen circumstances (short staffed etc), there may be a delay.

Parents/Guardians may access the calendar, to view as a Google Document, for daily attendance numbers with non-identifying information, including the reason for any absenteeism (such as illness, self-isolation or 'Other reasons'). The link to view the calendar has been sent to families by the school. Availability of the Attendance Calendar is at the discretion of the Director.

6. Becoming III while at Nursery School

Anyone who is symptomatic, does not pass screening, or has been advised to self-isolate by a public health unit is not permitted to attend the program and should stay home (this includes staff and students).

If an individual becomes ill while at the Nursery School:

- The ill individual will separated from others, in a separate room or the hallway if able to.
- If the ill individual is a staff member they must be separated from others and use proper hand hygiene and wear PPE until they are able to leave.
- Parents/guardians will be contacted to pick up any symptomatic children, in accordance with the COVID Response Protocol outlined in section 10 below.
- A staff member will supervise the separated child.
- Anyone providing care to the ill individual should maintain as much physical distance as possible and wear a medical mask and eye protection. If physical distancing is not possible (e.g., child needs comfort) staff should consider adding additional PPE (e.g., gloves, gown).
- If tolerated, the ill individual should also wear a medical mask.
- Hand hygiene and respiratory etiquette should be practiced while the ill individual is waiting to be picked up.
- Cleaning of the area the separated individual was in and other areas of the Nursery School where the ill individual was should be conducted as soon as reasonably possible after the ill person leaves (see above Cleaning section).
- Staff will advise the ill individual or their parent/guardian to use the online self-assessment tool and follow instructions which may include seeking medical advice or going for testing for COVID-19.
- Regular operations may continue unless directed otherwise by the local public health unit or by vote of executive members within 12-24 hours of incident.

7.Attendance of Sibling(s) of an ill Student

If a child develops COVID-19 symptoms or their self-screening indicates that they should stay home but their sibling(s) do not have symptoms, all household members <u>do</u> need to be isolated for at least 5 days and until the other child showing symptoms completes their 5-day isolation period. If another household member develops symptoms during that time the 5 days must restart. However, check with your local public health unit or call their hotline (1-866-236-0123) to see if those without symptoms should go to school. Some public health units have different rules based on local risk.

8. Return to School after Illness or Isolation

An ill individual who has a known alternative diagnosis provided by a health care professional may return to childcare if they do not have a fever or cough and their symptoms have been improving for at least **24 hours** or at least **48 hours** for gastrointestinal symptoms.

Individuals do not require a medical note or proof of a negative test to return to the program. However, Staff and parents/guardians are expected to follow the advice of the Ministry of Education, the provincial guidelines and the local public health unit on when returning to school after illness or isolation. Staff and parents/guardians are encouraged to call Lanark Leeds and Grenville Health Unit's schools and childcare hotline with any questions **1-866-236-0123.**

If the child has any of the Covid 19 symptoms, complete the provincial tool <u>https://covid-19.ontario.ca/school-screening/</u> and follow the guidance given for isolation rules.

<u>Ba. Return to Child Care Confirmation Form.</u> The nursery school has made the decision that a return to child care form must be completed for children absent due to illness or isolation. (Form is below) For more information, visit the Lanark Leeds and Grenville Health Unit's website for the latest rules on when an individual may return to school. Also, please see our COVID-19 Screening Tool for more information on identifying common COVID-19 symptoms.

NOTE •This advice may change as risk levels change, follow the most current advice before returning to the Nursery School.

•The advice of our local public health unit may differ from the general advice for the province contained in the screening tool. Staff and parents/guardians must follow the advice of the local public health unit. If staff or students live outside of the Lanark Leeds and Grenville Health Unit boundaries, they must also consult the advice of their local public health unit.

<u>8b. Rapid antigen testing kits</u> are tools that may be used for screening with or without symptoms being present. If symptoms that require testing families have been provided with rapid antigen home kits which can be used, or the public health isolation guidelines must be followed. If an individual receives a positive result with a rapid antigen testing kit, they must isolate and should seek medical advice from a doctor or local public health and follow the provincial isolation rules.

If parents/guardians send their child back to school after illness or isolation against the current advice of the Ontario government and our local public health unit, their child may be permanently removed from the program.

9. Reporting of Confirmed Cases of COVID-19

- Currently the Director does not need to report positive PCR or Rapid Antigen Tests cases of COVID-19 to the medical officer of health or the Ministry of Education.
- The director may contact public health officials to help to determine if any additional steps required, including but not limited to how to monitor for other possible infected staff and students and the possibility of closure of the Nursery School.

•While the nursey school is no required to report a serious occurrence for positive cases of Covid-19, if the local public health unit determines that a full or partial closure is required, a serious occurrence must be submitted to the Ministry of Education under the "Unplanned Disruption of Services" category.

•The Director must inform other staff and families if they have been potentially exposed to Covid-19, including the date of possible within a way that does not identify the infectious individual.

10. Contacting Parents and Staff of Confirmed Cases of COVID-19

• The Director must ensure that all staff and families are informed if there is reason to suspect individuals have been potentially exposed to COVID-19, using the following protocol.

Note: Confirmation of a "suspected or confirmed case of COVID-19" in this context may include but is not limited to observation of symptoms by school staff, and/or a positive for COVID-19 result on a Rapid Antigen Test or PCR test.

10a.Contacting Parents of individual(s) with suspected COVID-19 at while at School.

- The procedure outlined in Section 6 "Becoming III while at Nursery School" must be followed.
- Contact must be made with the Parents/guardians of the child who is showing symptoms of COVID-19 by <u>telephone</u> within <u>1 hour</u> of showing symptoms. In so doing, the following information must be conveyed:
 - Details on when to pick-up the child and reminders about pick-up procedure
 - Actions taken (isolation/separation and cleaning of areas involved), if applicable
 - o Record of date(s) and time(s) above actions were taken, if applicable
 - Summary of symptoms associated to the suspected case
 - o Reminder of applicable isolation period, and symptoms to watch for
 - Next steps, including reminder of the <u>Return to Child Care Confirmation Form</u>

10b. Contacting All Parents/guardians regarding a suspected or confirmed COVID-19

- Contact must be made by <u>telephone and/or email</u> with all Parents/guardians of students enrolled in the Co-op, within <u>12 hours</u> of confirmation of the suspected or confirmed case of COVID-19, and must convey the following information while <u>taking care to maintain privacy and</u> <u>confidentiality (withholding all names)</u>:
 - Number of suspected cases within the student body or staff
 - \circ $\;$ Number of confirmed cases within the student body or staff
 - Reminder of symptoms to watch for
 - Details on when to pick-up children, if applicable, and reminders about pick-up procedure
 - \circ Known details, if applicable, on the expected closure and/or isolation period
 - \circ When to expect the next notification from the school, if applicable.

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Note: The decision to contact all Parents/guardians of students enrolled will be made at the discretion of the Director and the executive members of the board, taking into consideration a

variety of factors including but not limited to type of symptoms present, number of people affected, duration and recency of symptoms.

11.Outbreak Management

- An outbreak at the Nursery School may be declared by the local public health unit AND/OR at the discretion of the Director in consultation with the executive board.
- If in the event, the nursery school has an overall absenteeism of 30% due to illness including all students and staff, the health unit will be contacted. A decision will be made in collaboration with the Director or Staff and the health unit whether a templated letter from the local medical officer of health with information on public health measures needs to be sent to families and staff.

Note: An "outbreak" may be defined in this context as either 30% absence of the total number of enrolled students and staff AND/OR as determined by the Director according to reporting of factors including absence of multiple individuals displaying 2 or more symptoms of COVID-19. If the local public health unit declares an outbreak, they may help to determine what happens next and may help to determine if the school needs to close and for how long.

12.Visitors/Parents

- Parents are continued to be encouraged not to enter the nursery school.
- Non-essential visitors are unable to enter the program at this time.
- There will be no volunteers (parents, high school students, etc) until furthernotice.
- Telephone or email conversations will be used to interact with families when possible, rather than in person. The nursery school is committed to maintaining communication and relationships with all families and visitors as best as possible.
- Ministry staff and other public officials (e.g. fire marshal, public health inspectors) are permitted to enter while following this policy and procedures.
- A visitor screening form will be maintained for any visitors, which will include name, company, reason for visit, length of visit and contact information

13. Refunds due to Closure and Isolation

- If your child is absent due to illness, mandatory isolation, appointments or medical testing, the Nursery School will not provide a refund of tuition for misseddays.
- If the nursery school needs to close by order of the local public health unit and/orthe Ministry of Education, tuition will not be refunded if the closure is less than 14days. If the closure will be for longer than 14 days, the Executive Board will holdan emergency meeting to discuss any further decisions.

14. Encouraging Physical Distancing

- The Nursery School is committed to continuing to provide a welcoming and caring environment for all children.
- Play spaces will be set up to try to maintain, physical distancing of at least 2

meters where possible.

- Children will be spread out into different areas, particularly at meal and dressing time when possible.
- Individual activities may be set up to encourage more space between childrento try to promote physical distancing

15. Food Provision

- Proper handwashing and hygiene will be practiced before and after food is prepared.
- Children will be spaced appropriately at snack to discourage accidental sharing and to maintain physical distancing when possible.
- Children and staff will wash their hands before eating.
- Children are not able to help prepare or serve snack. Staff will use utensils to serve snack on individual plates and cups.
- No items will be shared, such as dishes/utensils, serving utensils etc

16. Staff Scheduling to ensure safety

Scheduling:

- The Nursery School preschool program operates for 2.5hrs a day, with 3 teaching staff and 2 rotating cleaning staff therefor staggered staffing times is notrequired at this time.
- The ratios set out by the CCEYA of 24 children plus staff for our program will be maintained.

Note: This does not include special needs resource staff on site, such as consultants or enhanced staff. (see below)

• All staff are trained on the health, safety, and operational measures prior to commencing every fall or prior to reopening in the event of a closure.

17. Provision of Special Needs Resources (SNR) Services

- In-person special needs services will continue where appropriate. Alternative modes of service delivery where in-person delivery is not possible will be explored.
- SNR staff (consultants and enhanced staff) do not count towards a cohort's total while on site (e.g: if they are not counted towards staff to child ratios, they are not included in the maximum capacity rules)
- All SNR staff must be screened before entering the program, as per the protocol in the screening section.

18. Staff Training, Policy and Procedure Review:

•Training on the most current health, safety and other operational guidelines are aligned from Leeds, Grenville and Lanark District Health Unit, Ministry of Education including their resources.

•All training documents, policies and procedures will be reviewed and discussed with all staff annual or as required. The COVID-19 policy will be signed off by all staff annually, before reopening and any time where a change is made.

•Parents will be informed of all aspects of the COVID-19 Policy by email, accessible on our website and paper copies if required. Parents will need to sign a review form stating the Covid-19 Policy has been reviewed annually.

19. Executive Committee and Monthly Meetings

•The monthly executive meetings are typically held the 2nd Tuesday of each month with all families welcome to attend to offer ideas and suggestions. However, in person meetings are not being held at this time due COVID-19, and all meetings are virtual untilfurther notice.

Established July 2020 6th Revision February 2022

20. Covid-19 Immunization Disclosure and Rapid Antigen Testing Policy

Purpose

The purpose of this policy is to outline organizational expectations with regards to COVID-19 immunization disclosure.

Contingent upon vaccine availability, all eligible individuals, are strongly encouraged to receive a COVID-19 vaccine, unless there is a medical reason to not receive a vaccine.

Background

The Cooperative Nursery School of Almonte recognizes the importance of immunization of individuals regularly interacting and providing services to children due to the nature of their work and potential for exposure in the community. This COVID-19 immunization policy aims to protect the childcare program's population including children, staff, volunteers, students on educational placements and any person providing childcare or other services to a child in care. COVID-19 is an acute respiratory illness caused by the severe acute respiratory syndrome

coronavirus 2 (SARS-CoV-2). It may be characterized by fever, cough, shortness of breath, and several other symptoms.

Asymptomatic infection is also possible. The risk of severe disease increases with age but is not limited to the elderly and is elevated in those with underlying medical conditions.

Application of the Policy

The Immunization Disclosure Policy will apply to the following groups of individuals, except where the individual works remotely and the individual's work does not involve in-person interactions: •Employees of the Cooperative Nursery School of Almonte

- •Volunteers;
- •Students on an educational placement;
- •Any licensee who regularly interacts with children, staff or providers;

•Any other person who provides childcare or other services to a child who receives childcare (e.g., special needs resourcing consultant)

Policy

The Chief Medical Officer of Health has directed all licensed childcare programs to develop, implement and ensure compliance with a COVID-19 immunization disclosure policy. All individuals covered by this policy must provide one of the following:

1. Proof of all required doses of a COVID-19 vaccine approved by the World Health Organization.

2. Written proof of a medical reason, provided by either a physician or nurse practitioner that sets out:

a. that the person cannot be vaccinated against COVID-19; and

b. the effective time period for the medical reason (i.e., permanent or time-limited).3. Proof that the individual has completed an educational session approved by The Cooperative Nursery School of Almonte.

Educational session

The educational session has been approved by The Cooperative Nursery School of Almonte using resources provided by the Ministry of Education and addresses all of the following learning components:

- •how COVID-19 vaccines work;
- •vaccine safety related to the development of the COVID-19 vaccines;
- •benefits of vaccination against COVID-19;
- •risks of not being vaccinated against COVID-19; and
- possible side effects of COVID-19 vaccination.

Upon completion of the Educational Session (without a documented medical reason) an attestation must be completed.

The following are resources for the Educational Session provided by the Ministry of Education.

• Covid 19 Vaccine Information for Educators <u>https://www.youtube.com/watch?v=lylv8yFnjcM</u> (Ministry of Education in collaboration with 19 to Zero)

• Covid 19 Vaccine Safety Video- with certificate (Kingston Health Sciences Center) https://elearning.kingstonhsc.ca/SpokeandHub/story_html5.html

Support for Vaccination

It strongly encouraged that staff receive the vaccine if eligible and to consult with a doctor on individual health history and review any resources that are available to make an informed choice about each individual's personal health. The Cooperative Nursery School of Almonte supports staff in getting access to vaccination.

If necessary, paid time off will be provided for staff to receive the vaccination. Other support will be provided if needed, with resources from the Leeds, Grenville & Lanark Health Unit as well as the Province of Ontario.

Testing Requirements

Individuals subject to the policy who are not fully vaccinated must regularly complete an antigen point of care testing for COVID-19 and demonstrate a negative result 3 times per week and provide verification of the negative test result by completing an attestation of negative results.

In supporting this process, those required to undertake testing of the following instructions:

• Testing is to take place at an individual's residence prior to attending work.

• Testing should be implemented consistently on a weekly basis with at least 3 days between tests and conducted Sunday to Friday.

• Testing should not take place more than 48 hours before attending work.

If an individual receives a positive result with the rapid antigen kits, they must isolate following the provincial guidelines.

If an individual receives a laboratory-confirmed COVID-19 result, they should not participate in antigen testing for 30 days following the date of the positive COVID-19 test result. These individuals should immediately resume COVID-19 rapid antigen testing after the 30th day from the date of their positive COVID-19 PCR result.

Statistical Information

In accordance with the instructions from the Ministry of Education, the following information must be collected and maintain:

- the total number of individuals subject to the licensee's policy;
- the number of individuals that provided proof of full vaccination against COVID-19;

• the number of individuals that provided a documented medical reason for not being fully vaccinated against COVID-19; and,

• the number of individuals that completed an educational session.

Communicate to all individuals who are subject to this policy will be informed that the information listed above will be shared with the ministry in aggregate form, without any identifying information.

All employee's vaccination status is personal and confidential and will not be shared with other staff or families of the Cooperative Nursery School of Almonte Inc., as well as, in accordance with the Notice of Collection of Personal Information, which is reviewed annually.

Confidentiality Statement

As per s. 77 of O. Reg 137/15 made under the Child Care and Early Years Act, 2014, the Cooperative Nursery School of Almonte is required to report such statistical information to the Ministry of Education as may be required. No identifying information will be provided to the ministry in relation to this policy; all statistical information will be provided in aggregate form

Established September 2021 4th Revision February 2022



Return to Child Care Confirmation Form

Please complete this form confirming that your child is healthy and able to return to childcare. By adding your signature, you are verifying that the information is true. (Must be completed prior to returning.)

Child's Name:

Date:

My child was ill with: (check all that apply)

One or more of the following				
fever and/or chills	🗖 cough	\square shortness of breath	decrease or loss of taste or smell	
Or two or more of:				
runny nose/nasal congestion	🗖 headache	extreme fatigue	sore throat	
muscle aches/joint pain	gastrointestinal symptoms (vomiting, diarrhea)			

□ Or other symptom(s) not listed above, have isolated for 24 hours and have been improving within the past 24hrs without the aid of over-the-counter medications (fever reducing medication, etc)

AND/OR(check all that apply)

□ My child's household has self-isolated for the appropriate length of time under the current guidelines and my child has been symptom free for more than 24 hours (or 48 hours in the case of nausea/vomiting/diarrhea).

 \square My child tested positive for COVID-19 (PCR or Rapid Test) and the household self-isolated for the appropriate length of time under the current guidelines.

 \square My child does not have a fever (without the use of medication), and they have been symptom free for over 24 hours (or 48 hours in the case of nausea/vomiting/diarrhea).

Someone in my household was ill with symptoms of COVID-19:

□ The household has self-isolated for the appropriate length of time under the current guidelines. My child has been symptom free for over 24 hours (or 48 hours in the case of nausea/vomiting/diarrhea).

Close contact of someone who tested positive for COVID-19 outside the household:

□ My child was a close contact of someone who tested positive for COVID-19 and has completed the appropriate length of self-isolation under the current guidelines. My child is well with no symptoms.

□ A household member was a close contact of someone who tested positive for COVID-19. The household has completed the appropriate length of self-isolation under the current guidelines. My child and household are well with no symptoms.

Recent travel outside of Canada:

□ My child or member of my household returned from travel outside of Canada. My child stayed home for the 14 day travel quarantine period. My child and household are well with no symptoms.

I declare that my child is well and is able to return to the childcare setting.

Name of Parent/Guardian:_____

Signature of Parent/Guardian_

January 2022