

## **SANITARY PRACTICES: INFECTION PREVENTION AND CONTROL**

### **1. OVERVIEW**

In accordance with Public Health, this policy is intended to support the health and well-being of Upper Canada Child Care (UCCC) clients and employees through the implementation of practices that maintain a high standard of sanitary conditions and prevent the spread of infection and disease.

### **2. REVIEW**

- 2.1 All employees must review this policy with the manager/People and Talent department prior to providing care to children and/or at the discretion of UCCC.
- 2.2 A written record of the review must be signed and dated by those participating in the review.
- 2.3 This policy is reviewed annually by the organization to ensure that it is current and meets requirements.
- 2.4 Records of reviews are to be kept on file in a secure location for at least three years from the time of entry.

### **3. SCOPE**

This statement of policy applies to all employees, students, and volunteers.

### **4. RESPONSIBILITY**

- 4.1 **Employees** are responsible for:
  - 4.1.1 cleaning, disinfecting, and maintaining areas of responsibility (e.g. kitchen/washrooms) as assigned and in accordance with this policy;
  - 4.1.2 following all personal hygiene requirements;
  - 4.1.3 conducting wellness checks of all children upon arrival and follow exclusion guidelines; and
  - 4.1.4 wearing appropriate PPE as required.
- 4.2 **Supervisors** are responsible for:
  - 4.2.1 ensuring all employees receive training, are monitored, and are provided feedback and that sanitary practices are up to date in centre;
  - 4.2.2 ensuring that exclusion guidelines are communicated and followed;
  - 4.2.3 ensuring timely documentation, reporting, and record keeping; and
  - 4.2.4 maintaining a supply of current personal protective equipment at the centre.
- 4.3 **Assistant supervisors or designates** are responsible for:
  - 4.3.1 assuming all duties of the supervisor in the absence of the supervisor.

### **5. DEFINITIONS**

- 5.1 **Acute Respiratory Infection**  
Any illness that affects the human respiratory system and results in symptoms such as sore throat, cough, runny nose, nasal congestion, and fever.
- 5.2 **Cleaning**  
The physical removal of foreign material (e.g. dust, soil) and organic material (e.g. blood, secretions, and micro-organisms), using warm water, detergent, and mechanical action (e.g. scrubbing).
- 5.3 **Diarrhea**  
The condition of having two or more loose or liquid bowel movements per day.
- 5.4 **Disinfecting**  
The use of a chemical solution to kill most disease-causing micro-organisms.
- 5.5 **Enteric Infection**  
Any illness that affects the human intestines and results in symptoms such as nausea, fever, loss of appetite, vomiting, and/or diarrhea.
- 5.6 **Fever**  
When body temperature is above its normal level (37°C/98.6°F). It is generally accepted that the following temperatures represent a fever:
  - 5.6.1 oral: 37.5° C (99.5°F) or higher;
  - 5.6.2 underarm: 37.5°C (99.5°F) or higher; or
  - 5.6.3 ear: 38°C (100.4°F) or higher.

## 5.7 Outbreak

An outbreak is suspected when any of the following occur:

- 5.7.1 two or more people (employees or children) in the same classroom exhibit the same symptoms of enteric infection;
- 5.7.2 an elevated (above baseline) number of people in the same classroom exhibiting similar symptoms of acute respiratory infection within a two day period; or
- 5.7.3 two or more people (employees or children) in the same classroom exhibit symptoms of influenza OR there has been one lab confirmed case of influenza (see *Cold or Flu: Know the Difference*).

## 5.8 Personal Protective Equipment (PPE)

Clothing or equipment worn by employees for protection against hazards.

## 5.9 Safety Data Sheet (SDS)

A document that contains information on potential hazards of a chemical product, and how to safely use, store, and handle the product.

## 5.10 Standard Precautions

Guidelines established to reduce the risk of exposure to infectious blood or body fluids through the use of safe handling procedures, personal protective equipment, and appropriate cleaning and disinfecting procedures.

## 5.11 Workplace Hazardous Materials Information System (WHMIS)

A plan for providing information on the safe use of hazardous materials used in Canadian workplaces. Information is provided by means of product labels, safety data sheets (SDS), and worker education programs.

## 6. POLICY

- 6.1 Rates of childhood infections are influenced by physical environments. Scheduled, routine cleaning and disinfecting of toys, equipment, and surfaces is an important measure to help control the spread of pathogens and contribute to a healthy environment for educators and children.
- 6.2 Good hygiene practices limit the spread of infection. UCCC follows procedures outlined by local Public Health authorities.
- 6.3 Upper Canada Child Care seeks to safeguard the health of children and employees through daily wellness screening and exclusion of ill individuals.
- 6.4 UCCC maintains a healthy environment while incorporating animals into our programs by carefully assessing and addressing the risks involved, including the possibility of injury, allergies, or illness resulting from zoonotic infection.
- 6.5 Standard precautions are implemented to reduce the risk of spreading infectious diseases through contact with blood and bodily fluids.

## 7. PROCESS

### 7.1 Cleaning and Disinfecting Procedures

#### 7.1.1 Standard Cleaning

- 7.1.1.1 Detergent, warm water, and scrub brushes/paper towels/clothes will be used to clean visibly soiled surfaces. Cloths may be reused if they are laundered after each use.
- 7.1.1.2 Surfaces will be rinsed with clean warm water to remove all detergent and remaining dirt.
- 7.1.1.3 Surfaces will be allowed to dry prior to disinfecting to prevent the dilution of disinfectant solution.

#### 7.1.2 Standard Disinfecting

- 7.1.2.1 Personal protective equipment (gloves and masks as necessary) will be used when handling disinfectants.
- 7.1.2.2 Disinfecting solutions will be prepared daily according to the *Preparing Disinfecting Solutions* posting. Test strips will be used to ensure proper concentrations, and disinfecting solutions will be transferred into labelled squirt bottles for surface cleaning.
- 7.1.2.3 Disinfectant solution will be applied and left on the surface for the appropriate disinfecting contact time according to *Preparing Disinfecting Solutions*, noting that the surface should remain wet for the full contact time. If the surface dries, the disinfectant solution will be reapplied.
- 7.1.2.4 Surfaces will be wiped dry with a paper towel or a dry clean cloth once the contact time has elapsed.

### 7.1.3 Standard Classroom Maintenance

- 7.1.3.1 All spaces and materials used by the children including classrooms, toys, and furnishings will be maintained using the following methods:
  - 7.1.3.1.1 A weekly schedule will be maintained for cleaning spaces, materials, and surfaces
  - 7.1.3.1.2 Floors will be kept clean by damp-mopping/vacuuming daily. Supervisors will ensure that carpets are steam cleaned a minimum of twice annually, and records of cleaning maintained.
  - 7.1.3.1.3 Tables used for eating will be washed and disinfected before and after each use.
  - 7.1.3.1.4 Toys and equipment will be cleaned and disinfected regularly or more often as necessary:
    - 7.1.3.1.4.1 infant rooms daily
    - 7.1.3.1.4.2 toddler and preschool rooms weekly
    - 7.1.3.1.4.3 kindergarten and school age rooms weekly (monthly in Toronto centres)
  - 7.1.3.1.5 Toys mouthed by children will be cleaned and disinfected after every occurrence.
  - 7.1.3.1.6 All cots, cribs, and bedding will be cleaned and disinfected weekly, or immediately when soiled.
  - 7.1.3.1.7 Areas around garbage cans will be kept clean.
  - 7.1.3.1.8 Recycled items suspected of being used in a non-hygienic environment (e.g. toilet rolls or egg cartons) are prohibited from use at the centre.
  - 7.1.3.1.9 Fridges and microwaves located in infant rooms will be cleaned and disinfected weekly.

### 7.1.4 Sensory Play

- 7.1.4.1 Tubs/bins used to provide sensory experiences must be easy to move, clean, and disinfect.
- 7.1.4.2 All employees and children will wash hands prior to engaging in sensory play.
- 7.1.4.3 Sensory bins will be emptied, cleaned, and disinfected regularly. Sensory bins containing wet material will be cleaned after each use; sensory bins containing dry materials will be cleaned on a weekly basis.
- 7.1.4.4 Sensory materials that can be reused will be kept in a sealed, labelled container. Food materials used for sensory play will be stored separately from food intended for eating.
- 7.1.4.5 Individual bins will be provided for children with coughs/colds or intestinal upset.
- 7.1.4.6 Sensory play will be suspended during centre outbreaks.

### 7.1.5 Loose Parts and Natural Materials

- 7.1.5.1 Materials will be obtained from a safe source in a manner that ensures there is no potential for contamination. Items from outdoor locations should be obtained away from garbage/waste, animal feces, chemical contamination etc.
- 7.1.5.2 Use of items that, due to their function, carry an increased risk of contamination (e.g. toilet paper rolls, egg cartons) are prohibited.
- 7.1.5.3 Employees will check ingredient labels on empty cardboard food containers and prohibit use if there is potential of exposure to allergens.
- 7.1.5.4 Where possible, all materials will be cleaned and disinfected prior to use, and according to the classroom disinfecting schedule for toys.
- 7.1.5.5 Materials will be discarded if they cannot be cleaned and disinfected after one week of use, or immediately if they are contaminated with blood or body fluids, or in the event of an outbreak.
- 7.1.5.6 Non-washable materials that carry a high risk for contamination (e.g. birds' nests, eggs, insects, sticks with insect holes etc.) will be kept in a closed container to be observed but not handled.

### 7.1.6 Sleep Equipment and Arrangement

- 7.1.6.1 Cots/cribs will be placed in an arrangement that minimizes the spread of respiratory infection (e.g. head to toe).
- 7.1.6.2 Cots/cribs will be labelled and assigned to each child. Where cot use must be alternated between children, due to part-time enrollment and lack of storage space, cots will be labelled accordingly and will be cleaned and disinfected between uses.
- 7.1.6.3 Cots/cribs must be made of cleanable materials, and will be cleaned and disinfected weekly, when wet or soiled, or before being used by another child.

7.1.6.4 Each child's cot/crib and bedding will be stored in a manner that avoids contact between those used by other children.

**7.1.7 Children's Washrooms and Changing Areas**

7.1.7.1 Children's washrooms and changing areas will be maintained in a clean and sanitary condition daily or more frequently if needed.

7.1.7.2 A weekly schedule for cleaning and disinfecting materials and surfaces will be maintained.

7.1.7.3 The change table will be cleaned and disinfected after diapering a child using a disposable cloth and in accordance with the posted diapering procedures.

7.1.7.4 All tissues and disposable diapers will be disposed of immediately into an acceptable trash container.

7.1.7.5 Toilets and sinks will be cleaned and disinfected using a disposable cloth, daily or more frequently if required.

7.1.7.6 A constant supply of soap in soap dispensers and disposable paper towels will be maintained in the washroom. Dispensers will be maintained in a clean and sanitary manner.

**7.1.8 Kitchen/Servery**

7.1.8.1 The kitchen area and equipment will be maintained in a sanitary condition (e.g. free of dirt, mold, and pests).

7.1.8.2 A weekly schedule for cleaning and disinfecting materials and surfaces will be maintained.

7.1.8.3 A *Monthly Pest Inspection* will be completed.

7.1.8.4 The supervisor will be notified immediately upon evidence of pests (e.g. insects, rodents).

7.1.8.5 All freezers will be defrosted and cleaned two times per year.

7.1.8.6 All refrigerators will be cleaned weekly and food will be rotated according to the expiry date.

7.1.8.7 All expired food will be disposed of immediately.

7.1.8.8 The pantry will be kept clean and organized.

7.1.8.9 Ventilation/exhaust fans will be cleaned regularly by the appropriate maintenance personnel.

7.1.8.10 Kitchen waste will be disposed of daily.

**7.1.9 Garbage Cans**

7.1.9.1 Each centre will have suitable containers with a lid for waste disposal. All garbage will be removed daily from the premises.

7.1.9.2 All waste disposal containers will be lined with garbage bags.

7.1.9.3 All areas surrounding garbage cans are to be kept clean.

**7.1.10 Laundry**

7.1.10.1 In centres with laundry facilities, employees will launder all fabric materials including sheets, blankets, towels, clothes, paint shirts, and plush toys weekly, or when soiled or wet.

7.1.10.2 In centres without laundry facilities, employees will send all laundry offsite to be laundered weekly.

7.1.10.3 Laundry will be transported in a laundry basket or bags.

7.1.10.4 Employees will wash and dry laundry in a timely fashion to avoid bacterial growth.

**7.1.11 Cleaning Products**

7.1.11.1 All cleaning and disinfecting products on the centre premises must be approved for use by the supervisor. SDS sheets for all products will be filed in the WHMIS binder on site.

7.1.11.2 The supervisor will ensure that all employees receive WHMIS training and are made aware of the location of the WHMIS binder for their reference.

7.1.11.3 Disinfecting solutions will be prepared according to local Public Health guidelines.

7.1.11.4 Low-level solutions will be used for general disinfecting of toys, diaper change surfaces, sensory play bins, animal cages, tables, and other classroom surfaces.

7.1.11.5 High-level solutions will be used for blood and bodily fluid spills, and for regular surfaces, toys etc. in the event of an enteric outbreak.

**7.2 Personal Hygiene**

**7.2.1 Hand Hygiene**

7.2.1.1 Each room will have a designated handwashing sink with hot and cold running water that is maintained in a clean and sanitary manner.

7.2.1.2 Single-use disposable paper towels and liquid soap in dispensers will be available at each handwashing sink. Dispensers for hand hygiene products will be maintained in a clean and sanitary manner.

- 7.2.1.3 Employees will follow handwashing procedures outlined by local Public Health authorities. Current handwashing procedures will be posted by all handwashing sinks.
- 7.2.1.4 Adults should always wash hands thoroughly with soap and water:
  - 7.2.1.4.1 upon arrival to the centre, and each individual room;
  - 7.2.1.4.2 before and after preparing, handling, or serving food (including expressed breastmilk), or dispensing medication;
  - 7.2.1.4.3 before and after eating;
  - 7.2.1.4.4 after outdoor play;
  - 7.2.1.4.5 after personal use of the washroom;
  - 7.2.1.4.6 after diapering, toileting, or changing a soiled child;
  - 7.2.1.4.7 after wiping a child's nose, or coughing, sneezing, or blowing own nose;
  - 7.2.1.4.8 prior to and after giving first aid;
  - 7.2.1.4.9 after cleaning up feces, vomit, or any bodily fluids;
  - 7.2.1.4.10 after handling pets or other animals;
  - 7.2.1.4.11 after handling garbage;
  - 7.2.1.4.12 before and after glove use;
  - 7.2.1.4.13 upon entering the centre's kitchen; and
  - 7.2.1.4.14 anytime hands feel dirty or are visibly soiled.
- 7.2.1.5 Educators will teach children, assisting where necessary, to wash their hands thoroughly with soap and water:
  - 7.2.1.5.1 before and after eating;
  - 7.2.1.5.2 after going to the toilet or having a diaper change;
  - 7.2.1.5.3 when sneezing, coughing, and wiping nose;
  - 7.2.1.5.4 after playing outside;
  - 7.2.1.5.5 after handling pets or other animals;
  - 7.2.1.5.6 after messy play experiences; and
  - 7.2.1.5.7 before and after use of communal sensory materials.
- 7.2.1.6 Alcohol-based hand rub (ABHR) may be used according to manufacturer's directions, in some circumstances, and when hands are not visibly soiled. If ABHR is used on children, educators will directly apply and supervise use. Sanitizers must have a minimum 60% alcohol base.
- 7.2.1.7 To ensure that employees are using proper hand hygiene methods, the supervisor will monitor hand hygiene practices on a regular basis and provide feedback as required.
- 7.2.2 Diapering**
  - 7.2.2.1 Each designated diaper changing area will be equipped with a change table and pad (where applicable) in good repair, with a smooth, non-porous surface.
  - 7.2.2.2 Designated diaper changing areas will be separate from children's activity, feeding, and food preparation areas.
  - 7.2.2.3 Each designated diaper changing area will be in close proximity to a handwashing sink with hot and cold running water, soap dispenser, and paper towels. Handwashing sinks will be maintained in a clean and sanitary manner (disinfected daily or more frequently if necessary), and used for the sole purpose of washing hands before and after diapering and toileting.
  - 7.2.2.4 Each designated diaper changing area will be equipped with:
    - 7.2.2.4.1 easily accessible single-use disposable gloves (to be worn for all diaper changes);
    - 7.2.2.4.2 suitable labelled disinfectant;
    - 7.2.2.4.3 paper liner; and
    - 7.2.2.4.4 garbage pail with a tight fitting lid and leak proof plastic liner.
  - 7.2.2.5 Personal items such as diapers, ointments, and wipes will be clearly labelled with each child's name, stored in a manner that prevents cross-contamination and kept out of reach of children.
  - 7.2.2.6 Educators will follow diapering procedures, as outlined by local Public Health authorities. Current diapering procedures will be posted in diaper changing area.
  - 7.2.2.7 Where a child's diaper is not excessively soiled, and where the child is comfortable doing so, educators may perform a diaper change with the child standing up according to the following guidelines:

**7.2.2.7.1** The diaper change is done in a diaper change area or washroom that meets all criteria required for diapering or toileting procedures.

**7.2.2.7.2** Aside from placing the child on a change table, all other steps outlined in local Public Health guidelines for diapering procedures are followed.

### **7.2.3 Toileting**

**7.2.3.1** All toileting and toilet training procedures must take place in a washroom with a handwashing sink equipped with hot and cold running water, soap dispenser, and paper towel.

**7.2.3.2** Washrooms will be equipped with:

**7.2.3.2.1** easily accessible single-use disposable gloves;

**7.2.3.2.2** suitable labelled disinfectant; and

**7.2.3.2.3** garbage pail with a tight fitting lid and leak proof plastic liner.

**7.2.3.3** Potty chairs and toilet inserts should be made of smooth, non-absorbent plastic that is easy to clean, and will be stored in a sanitary manner. Toilet seat inserts that have vinyl covered padding should be checked frequently, and discarded if damaged.

**7.2.3.4** Soiled clothing will not be rinsed or washed on site (educators will dispose of stool in the toilet), and should be sent home in a securely tied plastic bag.

**7.2.3.5** Educators will follow proper toilet training and toileting procedures, as outlined by local Public Health authorities. Current toileting procedures will be posted in toileting area.

### **7.2.4 Dental Health/Tooth Brushing**

**7.2.4.1** If a parent/guardian requests that a child be supported in tooth brushing, the parent/guardian will provide a toothbrush and toothpaste in a labelled travel container. These items will be kept out of reach of other children, and measures will be used to avoid contamination.

## **7.3 Ill Child or Employee**

### **7.3.1 Exclusion of Ill Children**

**7.3.1.1** Educators will screen children upon arrival for signs and symptoms of illness, and will note concerns in the daily log.

**7.3.1.2** Children will not be permitted to attend if they exhibit symptoms of communicable illness including, but not limited to:

**7.3.1.2.1** diarrhea (two or more loose/watery stools);

**7.3.1.2.2** vomiting of an unexpected nature;

**7.3.1.2.3** fever accompanied by lethargy or an inability to participate fully in activities;

**7.3.1.2.4** severe cough or difficulty breathing;

**7.3.1.2.5** unusual spots/sores/rashes; or

**7.3.1.2.6** pink eye with yellow discharge.

**7.3.1.3** The supervisor will ensure that a symptomatic child is isolated from other children. Where possible, the symptomatic child will be isolated in a room separate from the play area (e.g. staff room or centre office). Where this is not possible, the symptomatic child will be isolated in a quiet area of the classroom in which other children will not be permitted to play.

**7.3.1.4** A parent/guardian (or emergency contact) will be contacted to pick up a symptomatic child from the centre. When it is not possible for the family to pick up the child or when it appears that the child requires immediate medical attention, employees will take whatever actions may be necessary to obtain medical care, when warranted. Steps may include, but are not limited to, the following:

**7.3.1.4.1** contacting the family (emergency contact);

**7.3.1.4.2** taking the child to a hospital; and/or

**7.3.1.4.3** calling an ambulance.

**7.3.1.5** The supervisor will ensure that a child remains away from the centre according to the exclusionary timeframes outlined in *Recommended Exclusion Guidelines for Common Communicable Illnesses*.

**7.3.1.6** The supervisor **may** request a doctor's note prior to a child's return to the child care centre.

### **7.3.2 Exclusion of Ill Employees/Students/Volunteers**

**7.3.2.1** Employees who cannot capably perform their daily duties, or who are experiencing symptoms that meet exclusionary criteria, are to remain at home. The supervisor will encourage employees to consult a physician at the onset of illness to obtain a diagnosis.

### 7.3.3 Reporting Requirements

**7.3.3.1** The supervisor will ensure that reportable communicable diseases under the *Health Protection and Promotion Act* are reported in a timely manner to the Public Health Authority as specified by Ontario Regulations: 559/91. Refer to *Diseases of Public Health Significance* for guidelines regarding reportable illnesses, and public health contact information.

### 7.3.4 Administrative Procedures

**7.3.4.1** An *Illness Report* will be completed to document the circumstances of the child's illness.

**7.3.4.2** Details of the child's illness will be entered onto an *Individual Illness History* attached to the child's file.

**7.3.4.3** Details of the child's illness will be entered into the classroom daily log.

**7.3.4.4** Where there is a confirmed diagnosis of an exclusionary illness, the supervisor will communicate with families about the status of the communicable disease, the exclusion requirements for affected children, and characteristic symptoms of the illness.

## 7.4 Outbreaks

**7.4.1** The best way to manage an outbreak is to be prepared and take immediate action to help prevent further spread of illness. Outbreaks cannot always be prevented; however, they can be managed and controlled with minimal disruption to scheduling or enjoyment of children and employees.

### 7.4.2 Reporting Procedures

Employees will alert the supervisor when they identify an increase in the number of children/employees with similar signs and symptoms in their classroom or throughout the centre.

**7.4.2.1** A suspected enteric outbreak will be reported when two or more people (employees or children) in the same classroom are exhibiting the same symptoms of enteric infection, such as vomiting and/or diarrhea within a two day period.

**7.4.2.2** A suspected respiratory outbreak will be reported when:

**7.4.2.2.1** The number of individuals (employees or children) exhibiting similar symptoms of acute respiratory infection within a single classroom within a two day period has surpassed the classroom's baseline (usual) rate of similar symptoms; **or**

**7.4.2.2.2** Two or more people (employees or children) in the same classroom exhibit symptoms of influenza; **or**

**7.4.2.2.3** There has been one laboratory-confirmed case of influenza. (See *Cold or Flu: Know the Difference*).

**7.4.2.3** The supervisor will report a suspected outbreak to the representative (or designate) from the appropriate local health authority:

**7.4.2.3.1** Simcoe Muskoka District Health Unit Reporting Line: 705-721-7520 ext. 8809

**7.4.2.3.2** Toronto Public Health: Communicable Disease Surveillance Unit 416-392-7411

**7.4.2.3.3** York Region Public Health: Infectious Disease Control Division: 905-830-4444 ext. 73588 (after hours 905-953-6478)

**7.4.2.4** In the event that an outbreak results in disruption of service, the supervisor will report the outbreak to the Ministry of Education Child Care Quality and Assurance Licensing Branch as a serious occurrence.

### 7.4.3 Administrative Procedures upon Confirmation of an Outbreak

**7.4.3.1** The supervisor will complete all documentation required by UCCC and the local Public Health Authority. Documentation will include a line listing form that allows the local Public Health Authority to evaluate the progress of the outbreak, including the number of new cases occurring each day. The line listing form typically includes:

**7.4.3.1.1** name of child/employee;

**7.4.3.1.2** date/time that child/employee became ill;

**7.4.3.1.3** symptoms exhibited by child/employee; and

**7.4.3.1.4** date of resolution of each case.

**7.4.3.2** The supervisor will add the names of children/employees daily to the line list.

**7.4.3.3** The supervisor will fax daily updated lists to the local health authority prior to the deadline specified by the local Public Health Authority.

**7.4.3.4** The supervisor will communicate with families about the status of the outbreak, the exclusion requirements for affected children, the return of children to the centre, and monitoring for signs and symptoms of the illness.

- 7.4.3.5 The supervisor will post signs at the entrance of the child care and/or affected classroom when an outbreak is suspected or confirmed. The signage will list the characteristic symptoms of the illness. It will also stipulate that children should not be brought to the centre if they exhibit the specified symptoms until they have been symptom-free for the recommended exclusion period.
- 7.4.3.6 The local Public Health Authority representative (or designate) provides services that may include, but are not limited to, the following:
  - 7.4.3.6.1 a list of the documentation required from the centre;
  - 7.4.3.6.2 an onsite visit to conduct an inspection of food preparation and handling;
  - 7.4.3.6.3 an onsite visit to reinforce basic infection prevention and control measures;
  - 7.4.3.6.4 daily communication to provide support documentation and answer questions related to outbreak management;
  - 7.4.3.6.5 exclusion recommendations for ill children/employees;
  - 7.4.3.6.6 provision of literature in the form of guidelines or fact sheets related to outbreak management, specific illness etc.;
  - 7.4.3.6.7 arrangement of samples for testing to be picked up and transported to a laboratory; samples may include stool and/or food specimens;
  - 7.4.3.6.8 stool samples: the local Public Health Authority may provide enteric outbreak kits, labeled with an expiry date, to the centre. Permission from the parent/guardian is required for submission and analysis of stool samples. Families may also be provided with outbreak kits and specimens may be picked up from them directly by local Public Health authorities.
  - 7.4.3.6.9 food samples: samples (min 200g) of each high risk food item are refrigerated for 72 hours following meals on a regular basis (for example, ground beef used for tacos on a Tuesday lunch will be refrigerated until Friday lunch); high risk food items include the following:
    - 7.4.3.6.9.1 meat, poultry, and seafood;
    - 7.4.3.6.9.2 mixed salads (chicken, tuna, or egg);
    - 7.4.3.6.9.3 rice dishes;
    - 7.4.3.6.9.4 dairy products (excluding hard cheese);
    - 7.4.3.6.9.5 cream-filled deserts
- 7.4.3.7 In the event of an enteric outbreak the local Public Health Authority will facilitate the submission of food samples for analysis to determine if food is involved in the illness.
- 7.4.3.8 Additional resources may be found on the websites of local Public Health authorities. Sample resources may include, but are not limited to, the following:
  - 7.4.3.8.1 checklists for tracking ill children/employees during an outbreak
  - 7.4.3.8.2 instructions on using the outbreak line listing forms
  - 7.4.3.8.3 outbreak signage
  - 7.4.3.8.4 stool collection technique information, including consent form
  - 7.4.3.8.5 information on preventing the spread of influenza in child care settings
  - 7.4.3.8.6 outbreak management information for child care settings
- 7.4.4 **Exclusion of Ill Children/Employees During an Outbreak**
  - 7.4.4.1 Upon confirmation of an outbreak, the supervisor will ensure that the exclusion of ill children/employees follows the length of time based on the identified germ (if known) **and** local Public Health service recommendations. Standard exclusion guidelines are to be followed (see Section 7.3).
- 7.4.5 **Measures for Control of a Confirmed Outbreak**
  - 7.4.5.1 Increased hand washing will implemented increased by employees and children (e.g. upon arrival to the centre) for the duration of an outbreak. Hand sanitizer may be used in addition to regular hand washing when hands are not visibly soiled (sanitizer must meet the requirements of the local Public Health Authority).
  - 7.4.5.2 Interactions between groups that have experienced illness and groups that have not experienced illness will be suspended for duration of outbreak.
  - 7.4.5.3 Increase cleaning and disinfecting of common touch surfaces (e.g. door handles, handrails, and sink/toilet handles etc.) will be increased for duration of outbreak).



- 7.4.5.4 Sensory play activities (e.g. water tables, sand tables, sensory play tables, play dough etc.) will be suspended for duration of outbreak.
- 7.4.5.5 Toys in outbreak-affected areas will be washed and disinfected on a daily basis. Toys handled by a child who has become ill while in care will be immediately removed from circulation until they have been washed and disinfected. Mouthed toys will be cleaned and disinfected after each occurrence.
- 7.4.5.6 Surfaces contaminated with feces or vomit will be immediately cleaned and disinfected using high level disinfectant prepared according to the guidelines in the *Preparing Disinfecting Solutions* posting. Employees will use standard precautions when in contact with blood, body fluids, and chemical disinfectants.
- 7.4.5.7 Clothing that is contaminated (e.g. with feces, vomit) will be put in a plastic bag and sent home with the child's family for laundering.
- 7.4.5.8 Play clothing/costumes will be washed on a hot cycle with detergent.
- 7.4.5.9 Soft furnishings, carpets, and cloth-covered mattresses will be cleaned with detergent and hot water.
- 7.4.5.10 Hard surfaces will be cleaned with detergent, hot water, and a single-use cloth then wiped with a disinfectant, and allow to air dry.
- 7.4.5.11 Non-disposable mop-heads will be laundered on a hot cycle with detergent.
- 7.4.5.12 Normal activities will only be resumed once an outbreak has been declared over by the local Public Health Authority.

## 7.5 Exposure to Blood or Bodily Fluids and Standard Precautions

7.5.1 As employees may not know if someone has an infectious illness (e.g. Hepatitis B or HIV), it is critical to behave as if every individual might have an infectious illness in all situations where there is exposure to blood or body fluids.

### 7.5.2 Hand Washing

- 7.5.2.1 Employees will use proper handwashing procedures when handling blood and body fluids, including:
  - 7.5.2.1.1 during diapering and toileting routines;
  - 7.5.2.1.2 before and after giving first aid (e.g. cleaning cuts and scratches or a bloody nose); and
  - 7.5.2.1.3 after cleaning up spills or objects contaminated with body fluids.

### 7.5.3 Personal Protective Equipment

7.5.3.1 The supervisor will ensure that there is a constant and adequate supply of personal protective equipment available at the centre, and that equipment has not expired.

#### 7.5.3.2 Single-Use Disposable Gloves

- 7.5.3.2.1 Single-use disposable gloves should be used when it is expected that employees will come into contact with broken skin, blood, body fluids, secretions, or excretions.
- 7.5.3.2.2 Hands will be washed prior to and after use of gloves.
- 7.5.3.2.3 Gloves should be removed using the "glove-to-glove/skin-to-skin" technique:
  - a. Grasp palm of one glove near wrist. Peel glove away from hand, turning inside out.
  - b. Hold glove in opposite gloved hand. Slip two fingers under wrist of remaining glove. Pull glove until it comes off inside out (first glove should be inside of second glove).

#### 7.5.3.3 Masks

7.5.3.3.1 Masks may be worn to protect employees from pathogens that may enter through the mucous membrane of the mouth or nose.

#### 7.5.3.4 Eye Protection

7.5.3.4.1 Eye protection should be worn to protect the mucous membranes of the eyes when there is a chance of splashes or sprays of body fluids.

#### 7.5.3.5 Gowns

7.5.3.5.1 Gowns should be worn to protect uncovered skin and prevent the soiling of clothing during activities likely to generate splashes or sprays of body fluid.

## 7.5.4 Cleaning and Disinfecting Items and Areas Contaminated with Bodily Fluids (Human and Animal)

7.5.4.1 Gloves must be worn while cleaning a contaminated area.

- 7.5.4.2 Soiled objects such as clothing, towels, or toys will be placed in a plastic bag until ready to be cleaned. Employees will remove all sharp objects or broken glass from the contaminated area and place them in a puncture resistant, leak proof container. Employees will place the container in a disposable plastic bag, sealed, and discarded in the regular garbage receptacle.
- 7.5.4.3 Excess blood/bodily fluids will be removed using paper towels, the contaminated area will be washed with soap and water, and rinsed thoroughly afterwards. Employees will disinfect the area with a high level disinfectant (e.g. 1:10 bleach solution for a 10 minute contact period) and discard paper towels used for cleaning and disinfecting in a disposable plastic bag.
- 7.5.4.4 All contaminated reusable items will be cleaned and disinfected using a high level bleach solution. Employees will dispose of any item that cannot be cleaned.
- 7.5.4.5 Soiled laundry will be transported in a leak-proof plastic bag. Employees will rinse soiled articles in cold water using gloves, and machine wash in hot water using regular laundry detergent. Employees will clean and disinfect sinks and counters in laundry area after rinsing.
- 7.5.4.6 Gloves will be removed and disposed of in a lined garbage receptacle. Employees will wash hands according to proper handwashing procedures.

## 7.6 Animals

- 7.6.1 The following animals meet the criteria of acceptable classroom pets:
  - 7.6.1.1 fish;
  - 7.6.1.2 small domestic rodents (e.g. guinea pigs, hamsters, gerbils, mice, rats);
  - 7.6.1.3 non-venomous, non-toxin producing invertebrates (e.g. snails, worms, caterpillars/ butterflies) Note: these must not be handled by children.
- 7.6.2 The following animals are not recommended for children and must not reside in or visit **any centre**:
  - 7.6.2.1 exotic animals (e.g. hedgehogs, monkeys);
  - 7.6.2.2 wild/stray animals (e.g., bats, raccoons, stray dogs or cats, squirrels);
  - 7.6.2.3 inherently dangerous animals (e.g., lions, cougars, bears);
  - 7.6.2.4 venomous or toxin-producing animals (e.g. venomous or toxin producing spiders, insects, reptiles and amphibians);
  - 7.6.2.5 ill animals or animals under medical treatment;
  - 7.6.2.6 young animals (e.g., puppies and kittens less than one year old);
  - 7.6.2.7 animals that have been fed raw or dehydrated foods, chews, or treats of animal origin within the past 90 days;
  - 7.6.2.8 birthing or pregnant animals;
  - 7.6.2.9 animals from shelters or pounds unless they have been in a stable home for at least six months;
  - 7.6.2.10 aggressive animals;
  - 7.6.2.11 animals in estrus (i.e. animals in heat); and
  - 7.6.2.12 rabies reservoir species (e.g. bats, skunks, raccoons, foxes).
- 7.6.3 The following animals are not recommended for **children less than five years of age** and must not reside in or visit centres that share employees or programming areas with children **under five years of age**:
  - 7.6.3.1 reptiles (e.g., turtles, snakes, and lizards);
  - 7.6.3.2 amphibians ( e.g., frogs, toads, and salamanders);
  - 7.6.3.3 live poultry (e.g., chicks, ducklings, and goslings) including hatchery equipment;
  - 7.6.3.4 ferrets; and
  - 7.6.3.5 farm animals (e.g., calves, goats, and sheep).
- 7.6.4 **Classroom Pets**
  - 7.6.4.1 Educators will develop a *Pet Care Checklist*, which outlines care requirements for any classroom pet, including who will care for the animal on weekends and holidays. Pets will not be sent home with families as supervision cannot be ensured and the home environment, including other family pets, may pose a risk.
  - 7.6.4.2 A *Veterinary Care Statement for Resident Animals and Service Animals in Child Care Settings* will be completed on an annual basis for all classroom pets, with the exception of fish and invertebrate species.

- 7.6.4.3 Educators will ensure that classroom pets these are housed in a suitable enclosure that can be easily cleaned and disinfected, and that all tanks and cages are cleaned and disinfected on a weekly basis. Where possible, tanks are preferable to cages.
- 7.6.4.4 Animal enclosures will be kept separate from food preparation/eating areas and from sleep equipment/sleeping areas.
- 7.6.4.5 Prior to arranging for a classroom pet, educators will ensure that adequate space/storage is available for keeping the animal/food/treats etc. Animal food and treats will be stored in a sealed container, in a cupboard, off of the floor and away from where human food is stored, served, or prepared.
- 7.6.4.6 All individuals will follow proper handwashing routines both before and after contact with animals, their feed, toys, bedding and/or environment.
- 7.6.5 Visiting Animals**
  - 7.6.5.1 Visiting dogs, cats, and ferrets must be fully immunized against rabies, be up-to-date with any other applicable vaccinations and medications, and be on a flea, tick and intestinal parasite control program.
  - 7.6.5.2 A *Veterinary Care Statement for Animals Visiting Child Care Settings* will be completed for all visiting animals. Completed forms will be kept on site for one year, and made available to any Public Health inspector or parent who request it.
  - 7.6.5.3 Visiting animals must be trained and in good health, and must have an appropriate temperament to be around children.
  - 7.6.5.4 Visits should be held in an area outside of the regular space (where possible), and on flooring that is easily disinfected (e.g. linoleum, tile).
  - 7.6.5.5 Children will only be allowed to interact with domesticated household pets (e.g. cats, dogs etc.) under the instruction of the owners.
  - 7.6.5.6 Educators will verify that travelling animal exhibits are a member of Canada's Accredited Zoos and Aquariums (voluntary accreditation program).
  - 7.6.5.7 All individuals will follow proper handwashing routines both before and after contact with animals, their feed, toys, bedding and/or environment.
- 7.6.6 Service Animals**
  - 7.6.6.1 Service animals (dogs, cats, ferrets) must be fully immunized against rabies, be up-to-date with any other applicable vaccinations/medications, and be on a flea, tick and intestinal parasite control program.
  - 7.6.6.2 A *Veterinary Care Statement for Resident Animals and Service Animals in Child Care Settings* will be completed on an annual basis for all service animals. Completed forms will be kept on site for one year, and made available to any Public Health inspector or parent who requests it.
  - 7.6.6.3 Service animals must be trained and in good health and must have a temperament appropriate for being around groups of children.
  - 7.6.6.4 The care and control of a service animal is the primary responsibility to the individual client or employee whom the animal accompanies.
    - 7.6.6.4.1 Employees with a service animal will take sole responsibility for providing adequate food and water, cleaning and maintaining animal enclosures/environments, and for disposing of animal waste.
    - 7.6.6.4.2 Families will work with supervisors to develop a plan for the care and control of a service animal to addresses any limitations in a client's ability to manage the care of their service animal while in our program. Plans must address the provision of food/water, the cleaning and maintenance of enclosures/environments, and the disposal of animal waste.
  - 7.6.6.5 The owner or handler must instruct children directly on how to interact with and conduct themselves around the service animal. Expectations must be developmentally appropriate, provided to the centre in writing, and enforced by centre employees.
  - 7.6.6.6 Service animals will be kept separate from food preparation areas. The individual responsible for the care and control of the service animal should not be involved with food preparations, unless absolutely unavoidable.
  - 7.6.6.7 Food for the service animal will be stored in a sealed container, in a cupboard, off of the floor and away from areas where human food is stored, prepared, or served. The service animal must have access to fresh water which is kept in an area inaccessible to children.

**7.6.6.8** All individuals will follow proper handwashing routines both before and after contact with service animals, their feed, toys, bedding and/or enclosure.

**7.6.7 Consultation with Families**

**7.6.7.1** Prior to purchase or to the scheduling of an animal visit, the supervisor will ensure communication occurs with families to determine any additional considerations (e.g. allergies/phobias, and to identify potential risks).

**7.6.8 Child and Animal Interaction**

**7.6.8.1** All contact between animals and children must be supervised.

**7.6.8.2** Children must be taught humane and safe procedures to follow when in close proximity to animals, including:

**7.6.8.2.1** treating animals gently and calmly;

**7.6.8.2.2** not chasing or kissing animals; and

**7.6.8.2.3** never disturbing an animal while they sleep or eat.

**7.6.8.3** When visiting locations where animals reside (farms, petting zoos etc.), educators will bring wet wipes and hand sanitizer (60-90% alcohol) in the event there are no facilities for proper hand washing.

**7.6.9 Bite and Scratch Protocol**

**7.6.9.1** Standard first aid treatment will be applied promptly to any animal bite or scratch.

**7.6.9.2** All animal bites will be promptly reported to the local Public Health Unit, and the incident will be documented using an *Accident Report*.

**7.6.10 Cleaning and Disinfecting Animal Enclosures**

**7.6.10.1** Employees will assemble all required supplies, and put on gloves and protective outer garments.

**7.6.10.2** The animal will be removed to a temporary holding area.

**7.6.10.3** Food, droppings, bedding material, etc. will be disposed of in a garbage bag.

**7.6.10.4** Animal enclosures, food containers, toys etc. will be cleaned in a utility sink with soap and water, using a scrub brush to remove dirt, and rinsed thoroughly with fresh water. Sinks used for food preparation or hand washing will not be used for cleaning animal enclosures and related items.

**7.6.10.5** Items will be disinfected and rinsed thoroughly to remove chemical residue (if recommended on product label), and dried.

**7.6.10.6** Fresh bedding material, food, water, etc. will be used when preparing the enclosure and before returning the animal to the enclosure.

**7.6.10.7** The area(s) surrounding the enclosure and the animal's temporary holding area will be cleaned and disinfected.

**7.6.10.8** Sinks used will be cleaned and disinfected.

**7.6.10.9** Employees will discard single-use gloves and wash hands.

**7.7 External Supporting Resources**

**7.7.1 Hygiene Postings**

**7.7.1.1** The following postings are provided by local Public Health units, and can be accessed on their respective websites:

**7.7.1.1.1** *Diaper Changing Procedures*

**7.7.1.1.2** *Hand-Washing Procedures*

**7.7.1.1.3** *Toileting and Toilet Training Procedures*

**7.7.2 Outbreak Documents**

**7.7.2.1** Outbreak management checklists and line listing forms, along with guidance documents outlining further details for infection control, can be accessed on the websites of local Public Health units.

**7.7.3 Websites**

**7.7.3.1** Simcoe Muskoka District Health Unit [simcoemuskokahealth.org](http://simcoemuskokahealth.org)

**7.7.3.2** *Infection Prevention and Control in Child Care Centres* (City of Toronto) [toronto.ca](http://toronto.ca)

**7.7.3.3** *A Public Health Guide for Child Care Providers* (York Region Public Health) [york.ca](http://york.ca)

## 8. ENFORCEMENT

An employee found to have violated this policy may be subject to disciplinary action, up to and including termination of employment.

## 9. RELATED DOCUMENTS

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|---|--|
| <b>9.1</b> <i>Classroom Cleaning and Disinfecting Log</i> | <b>9.11</b> <i>Policy Review and Acknowledgement</i>   |
| <b>9.2</b> <i>Cleaning and Disinfecting Guidelines</i>    | <b>9.12</b> <i>Preparing Disinfecting Solutions</i>  |
| <b>9.3</b> <i>Cold or Flu: Know the Difference</i>        | <b>9.13</b> <i>Recommended Exclusion Guidelines for Common Communicable Illnesses</i>                |
| <b>9.4</b> <i>Diseases of Public Health Significance</i>  | <b>9.14</b> <i>Veterinary Care Statement for Animals Visiting Child Care Settings (e</i>             |
| <b>9.5</b> <i>Health Protection and Promotion Act</i>     | <b>9.15</b> <i>Veterinary Care Statement for Resident and Service Animals in Child Care Settings</i> |
| <b>9.6</b> <i>Illness Report</i>                          | <b>9.16</b> <i>Washroom Cleaning and Disinfecting Log</i>  |
| <b>9.7</b> <i>Individual Illness History</i>              |  |
| <b>9.8</b> <i>Kitchen Cleaning and Disinfecting Log</i>   |  |
| <b>9.9</b> <i>Monthly Pest Inspection</i>                 |  |
| <b>9.10</b> <i>Pet Care Checklist</i>                     |  |