

Our Children  
Our Future

Nos enfants  
notre avenir



# COVID-19 After School Program Reopening Plan

*(This is a living document. As new legislation and recommendations become available, the document will be revised.)*

Revised: September 27, 2021

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# Background

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This plan is a result of working collaboratively with the City of Greater Sudbury (CMSM) and Public Health Sudbury and Districts (PHSD) to provide consistent guidance for the delivery of the After School Program (ASP) at 1960 Paris Street, Building C, and follows enhanced health and safety measures and restrictions as necessary. These guidelines will include requirements and best practices to provide effective programming. Programming will be delivered in the safest way possible while still engaging children in physical activity, nutrition and healthy eating, wellness, and personal health programming. Although this program is not licensed by the Ministry of Education, the guidelines below are based on MEDU requirements.

OCOF/Nena will ensure that programming is based on Ministry Tourism and Culture directives, health and safety protocols, service levels, and reporting requirements as well as any changes in a timely manner. OCOF/Nena will determine program standards, pre-registration, consistent program content and a promotions/communication plan.

This is a living document. As new legislation and recommendations become available, the document will be revised.

## Program Standards

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### Service Levels:

The ASP operates on school days and the hours are 3:00pm to 6:00pm, 5 days a week. Due to COVID-19 and the need to cleanse, sanitize, etc. our staff will be sanitizing a half hour before the program and a half before the end of the program. School age children will be in program from 3:30pm to 5:30pm, 5 days a week. Children transitioning from school to ASP will be informally screened by ASP staff (i.e. how was your day?). These children were self-screened by their parents before entering the school. Children that have not attended school on any given day will not be allowed to attend the ASP. Staff will monitor children closely for symptoms.

### ASP Core Elements

- Physical activity
- Healthy eating and nutrition
- Wellness and personal health

### Communication with Families

Policies and processes will be communicated to families as part of the online registration process. In person registration will be avoided unless absolutely necessary. If necessary, physical distancing will be encouraged, PPE will be used, hand washing will be practiced, face coverings will be used, and ensuring cleaning and disinfecting of frequently touched surfaces.

Policies will be shared with families for their information and to ensure they are aware of our expectations including keeping children home when they are sick, which is aimed at helping to keep all children and staff safe and healthy.

OCOF/Nena will ensure that families are aware of the enhanced health and safety measures prior to the opening of the program. It is important for families to be aware of the expectations and feel confident regarding the health and safety measures that have been put in place. ASP staff are encouraged to communicate with families using methods that ensure physical distancing including telephone, etc.

OCOF/Nena will ensure that there is visible signage at the entrance to explain the health and safety protocols.

## Space Set-Up and Physical Distancing

- ASP staff are encouraged to maintain a welcoming and caring environment while encouraging social distancing.
- When setting up the space, physical distancing of at least 2 metres must be maintained between groups and should be encouraged, where possible, between children within the same group:
  - spreading children out into different areas, particularly at meal time;
  - incorporating more individual activities or activities that encourage more space between children; and
  - staff may use visual cues to promote physical distancing.
- Staff will wear a medical mask and face shield/goggles.
- All children are required to wear a **non-medical or cloth mask**.

## Food Provision

- Ensure compliance with Ontario Regulation 493. A public health inspector will conduct an inspection of the food premises.
- OCOF/Nena's meal practices will ensure there is no self-serve or sharing of food at meal times.
- ASP staff will ensure safe/sanitary delivery of meals to the group.
- Utensils will be used to serve food.
- Meals will be served in individual portions to the children.
- There should be no items shared (i.e., serving spoon, etc.).
- Children will neither prepare nor provide food that will be shared with others.
- ASP staff will ensure proper hand hygiene is practiced when preparing food and for all individuals before and after eating.
- Where possible, children will practice physical distancing while eating.
- There will be no sharing of utensils.
- OCOF/Nena will provide each child with a water bottle to be labelled and left at the site.

## **Health & Safety Requirement**

OCOF/Nena must ensure that there are written policies and procedures outlining health and safety protocols. These policies and procedures must be consistent with any direction of a medical officer of health.

Note:

- All guidelines and policies must be reviewed by staff.
- OCOF/Nena must follow all advice of Public Health Sudbury Districts regarding protocols and restrictions.

# Appendix A: COVID-19 Operation - Health Screening

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## **Purpose**

In order to help reduce the risk of COVID-19, a health screening is an essential step. This procedure applies to all staff and children. Everyone must be self-screened prior to entering the ASP.

This tool was developed by the Ministry of Health and the Ministry of Education to assist in preparing and administering health screening for all those who enter the building. The screening tool will be reviewed on a regular basis for any updates.

## **Policy**

OCOF/Nena is committed to providing a safe and healthy environment for staff, children and families. This screening policy will include the drop off and pick up procedure.

It will be reviewed and signed off by all staff prior to commencing employment, or returning to work, at any time when a change is made and annually.

OCOF/Nena has a duty to report suspected or confirmed cases of COVID-19 under the Health Protection and Promotion Act. OCOF/Nena will contact Public Health Sudbury and Districts, and City of Greater Sudbury to report a child or staff suspected to have COVID-19. Public Health Sudbury and Districts will provide specific advice on what control measures should be implemented to prevent the potential spread, and how to monitor for other possible infected staff members and children as well as who needs to be informed and when.

## **Drop-Off and Pick-up/Screening Procedure**

- Personal belongings (e.g., backpack, clothing, etc.) should be minimized.
- Procedures support physical distancing.
- Parents/guardians will not enter the premises and most children have permission to arrive and depart on their own.
- Pick up and drop off of children should occur outside when possible.
- The entrance should have hand sanitizer available.
- Parents/guardians will use face coverings when dropping off or picking up their child.
- ASP Staff must wear PPE (i.e. medical mask and eye protection).

# Appendix B: Environmental Cleaning and Disinfecting

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## **Purpose**

To ensure that all staff are aware of, and adhere to, Our Children, Our Future/Nos enfants, notre avenir (OCOF/Nena) Sanitary Policies and Procedures and direction by the PHSD regarding cleaning and disinfecting.

## **Policy**

OCOF/Nena is committed to providing a safe and healthy environment for staff, children and families. OCOF/Nena will take every reasonable precaution to prevent the risk of communicable diseases.

This policy applies to all staff and children. This policy and procedure will be reviewed and signed off by all staff prior to commencing employment and annually thereafter and at any time where a change is made.

## **Definitions**

Cleaning: refers to the physical removal of foreign material (i.e. dust, soil) and organic material (i.e. blood, secretions, microorganisms). Cleaning removes, rather than kill microorganisms. Warm water, detergent and mechanical action (i.e. wiping) is required to clean surfaces. Rinsing with clean water is required to complete the cleaning process to ensure the detergent film is removed.

Disinfecting: describes a process completed after cleaning in which a chemical solution (i.e., SABER) is used to kill most disease-causing microorganisms. In order to be effective disinfectants must be left on a surface for a period of time (contact time). Contact times are generally prescribed by the product manufacturer. Any items children may come into contact with, requires a final rinse after the required contact time is observed.

## **Procedures**

All products including cleaning agents and disinfectants must be out of reach of children, labelled, and must have Safety Data Sheets (SDS) up to date (within three years), which are stored in the WHMIS binder. Cleaning and Disinfecting will be done twice a day and as needed. Staff will be responsible for the cleaning and disinfecting.

### **Saber:**

- Routine General Sanitizing when sanitizing toys/tables/counters/mouthed toys:  
Use Saber with a 30 second contact time. Let the surface dry or wipe remaining liquid. Submerging mouthed toys is preferable.
- High Level Disinfection during an outbreak or when dealing with bodily fluids/contamination (i.e. diapering areas, washrooms, kitchen areas):  
Use Saber with 5 minute contact time. Wipe dry.  
NOTE: Food contact surfaces disinfected with Saber must be thoroughly rinsed with water.
- Available in wipes, ready-to-use 1L spray bottles, or concentrated 4L (diluted at 1:16, this solution remains stable for 30 days).

# Appendix C: Toy Disinfecting

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## **Purpose**

To ensure that all staff are aware of, and adhere to, Our Children, Our Future/Nos enfants, notre avenir (OCOF/Nena) Policy regarding toy disinfecting.

## **Policy**

OCOF/Nena is committed to providing a safe and healthy environment for staff, children and families. OCOF/Nena will take every reasonable precaution to prevent the risk of communicable diseases. This policy applies to all staff and children. This policy and procedure will be reviewed and signed off by all staff prior to commencing employment and annually thereafter and at any time where a change is made.

## **Definitions**

Cleaning: refers to the physical removal of foreign material (i.e. dust, soil) and organic material (i.e. blood, secretions, microorganisms). Cleaning removes, rather than kills microorganisms. Warm water, detergent and mechanical action (i.e. wiping) is required to clean surfaces. Rinsing with clean water is required to complete the cleaning process to ensure the detergent film is removed.

Disinfecting: describes a process completed after cleaning in which a chemical solution (i.e. Saber) is used to kill most disease-causing microorganisms. In order to be effective disinfectants must be left on a surface for a period of time (contact time). Contact times are generally prescribed by the product manufacturer. Rinse with clean water after the contact time is achieved in order to remove any chemical residue.

## **Procedures**

It is important to clean and disinfect all toys, especially toys that may have been placed in children's mouths. Each toy should be cleaned and disinfected before being placed back into circulation.

- Choose toys that are washable, sturdy, and too large to be swallowed to prevent choking.
- Choose toys that can be cleaned and disinfected.
- Avoid plush toys.
- Clean toys when visibly dirty and daily.
- Remove toys from circulation that children have put in their mouths or that have other body fluids on them until they can be cleaned and disinfected. Put in labeled mouth toy bin.
- When cleaning toys, check them for sharp, jagged edges or small pieces that can be easily broken off. If toys cannot be fixed, throw them away.

## **Cleaning**

- Plastic toys that can be submersed in a sink or bucket must be cleaned with dish soap and water.
- Use soap and warm water to clean visibly soiled surfaces.
- Rinse the toys with clean water (warm to tepid temperature preferred) to ensure soap is removed.
- Allow toys to air dry.



## Disinfecting

1. using the sink method:
  - 1<sup>st</sup> step – Sink with a solution of liquid soap and hot water
  - 2<sup>nd</sup> step – Sink with a solution of water and Saber for 30 seconds
  - 3<sup>rd</sup> step – Toys are placed on towels to air dry
2. using the commercial dishwasher method:
  - 1<sup>st</sup> step – Dishwasher cycle
    - Please note that for toys smaller than one square inch, this step will be deleted as small pieces may cause damage to the dishwasher.
    - Pre-rinse sensory toys (i.e. sand, clay, etc.) prior to placing in the dishwasher.
  - 2<sup>nd</sup> step – Toys are placed on towels to air dry

# Appendix D: Hand Hygiene

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## **Purpose**

To ensure that all staff are aware of, and adhere to, Our Children, Our Future/Nos enfants, notre avenir (OCOF/Nena) the direction by the PHSD regarding cleaning and hand hygiene.

## **Policy**

OCOF/Nena is committed to providing a safe and healthy environment for staff, children and families. OCOF/Nena will take every reasonable precaution to prevent the risk of communicable diseases. This policy applies to all staff and children. This policy and procedure will be reviewed and signed off by all staff prior to commencing employment and annually thereafter and at any time where a change is made.

## **Definitions**

Hand Hygiene: is a general term referring to any action of hand cleaning. Hand hygiene relates to the removal of visible soil and removal or killing of transient microorganisms from the hands. Hand hygiene may be accomplished using soap and running water or a hand sanitizer (60-90% alcohol based is acceptable). Hand washing with soap and running water must be performed when hands are visibly soiled.

## **Procedures**

Hands carry and spread germs. Touching your eyes, nose, mouth or sneezing or coughing into your hands may provide an opportunity for germs to get into your body or spread to others. Keeping your hands clean through good hygiene practice is one of the most important steps to avoid getting sick and spreading germs.

## **Hand Washing Procedure**

Hand washing is the best way to prevent the spread of infection. Proper hand washing significantly reduces the spread of colds, influenza, and diarrhea illnesses. When you wash your hands, you wash away the germs that you may have picked up from other people, surfaces, or from animals.

## **Children should wash their hands:**

- upon arriving
- before and after eating
- before and after handling food
- after handling garbage
- after using the washroom
- after sneezing, coughing, or wiping their nose
- when their hands are dirty
- after playing with commonly used toys
- after playing outdoors or in a sandbox
- after coming in contact with bodily fluids
- after coming in contact with any soiled/mouthed items
- after gardening

**Staff should wash their hands:**

- upon arriving at work or returning from a break
- after sneezing, coughing, or blowing your nose
- before preparing, serving, or eating food
- after diapering a child or checking a diaper
- after cleaning up messes
- after wiping a nose
- after going to the bathroom or assisting a child to use the bathroom
- after playing outdoors with children
- before giving any medications
- after assisting a child with handwashing
- after handling garbage
- before and after handling raw foods
- after outdoor play
- after handling soiled laundry or dishes
- after handling soiled toys or other items
- after coming in contact with bodily fluids
- after coming into contact with any soiled/mouthed items
- after gardening

**Staff Handwashing**

- Leave jewelry at home or remove it upon handwashing.
- Use liquid soap and warm running water.
- Rub hands vigorously as you wash.
- Wash all surfaces including backs of hands, wrists, between fingers, and under fingernails for a minimum of 15 seconds.
- Rinse hands well. Leave water running.
- Dry hands on a single-use paper towel.
- Turn off faucet with a dry paper towel. Do not use bare hands to turn off faucet.
- Nail brushes are not to be used.

**School-Age Handwashing**

- Ask the children to wash their hands correctly.
- Show the children how to wash their hands if they do not know how or have forgotten.
- Remind the children that handwashing will help keep them from getting sick.

**Hand Hygiene Monitoring**

To ensure that employees are using proper hand hygiene methods, supervisors will review hand hygiene practices on a regular basis and provide feedback to employees as required.

**Hand Sanitizing Information**

When your hands are not visibly dirty, a 60-90% alcohol based hand sanitizer can be used. Hand sanitizers can only be used on children who are over the age of two and must always be used under

adult supervision. Adults must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity.

Please ensure that written parent consent is obtained before applying hand sanitizer to any child.

Note: washing hands with soap and water is the preferred method of hand hygiene for children.

### **Glove Use**

Gloves shall 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. Nitrile gloves are single use only.

### **Gloves and Hand Hygiene**

Hand hygiene shall be practised before applying and after removing gloves. Gloves shall be removed and discarded after each use.

To reduce hand irritation related to gloves:

- Wear gloves for as short as time as possible
- Ensure that hands are clean and dry before wearing gloves
- Ensure gloves are intact, clean and dry inside
- Gloves are single use only, and must be task specific such as nitrile gloves for diaper changes

### **Covering Your Cough Procedure**

Germs, such as influenza and cold viruses, are spread by coughing and/or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs.

Attempt to keep your distance (preferably more than 2 metres/6 feet) from people who are coughing or sneezing. Follow these steps to stop the spread of germs:

- If you have a tissue, cover your mouth and nose when you cough, sneeze or blow your nose.
- Put used tissues in the garbage.
- If you don't have a tissue, cough or sneeze into your sleeve, not in your hands.
- Clean your hands with soap and water or hand sanitizer (60-90% alcohol-based) regularly and after using a tissue on yourself or others.

# Appendix E: Monitoring and Responding to Reports of COVID-19 Symptoms

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## Purpose

To ensure that all employees are aware of and adhere to Our Children, Our Future/Nos enfants, notre avenir (OCOF/Nena) policy in regarding to the monitoring and responding to reports of COVID-19 symptoms.

## Policy

OCOF/Nena is committed to providing a safe and healthy environment for children, families and employees. OCOF/Nena will take every reasonable precaution to prevent the risk of communicable diseases. This policy applies to all staff and children. This policy and procedure will be reviewed and signed off by all staff prior to commencing employment and annually thereafter and at any time where a change is made.

## Procedures

- All child care and early years sector partners, together with Ministry of Health and Public Health will work closely to monitor and respond to reports of COVID-19 symptoms.
- Anyone who is symptomatic, does not pass screening, or has been advised to self-isolate by the local public health unit must not be permitted to attend the program and should stay at home (this includes children, child care centre staff, students completing post-secondary placements, home child care providers and those ordinarily resident/regularly at the home child care premises).
- If an individual becomes ill while in the child care setting:
  - The ill individual must be immediately separated from others, in a separate room where possible (i.e., an isolation room).
  - Parents/guardians must be contacted for pick-up of symptomatic children.
  - Symptomatic children who are separated from others must be supervised.
  - Anyone providing care to the ill individual should maintain as much physical distance as possible. If physical distancing is not possible (e.g., if a young child needs comfort) staff/providers should consider added PPE (i.e., gloves, gown).
  - The person caring for the individual should wear a medical mask and eye protection and be trained on proper use of PPE, including donning and doffing.
  - 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 child care setting where the ill individual was should be conducted as soon as reasonably possible after the ill individual leaves.
  - The ill individual and/or their parent or guardian be advised to use the online self-assessment tool and follow instructions which may include seeking medical advice or going for testing for COVID-19. Note that individuals do not require a medical note or proof of negative test to return back to the program.

- Communication protocols to update and inform necessary stakeholders within the child care community while maintaining confidentiality of the ill individual should be initiated (e.g., contact the school, home child care agency, service system manager and/or ministry through a Serious Occurrence Report as applicable).
- Regular child care operation can continue unless directed otherwise by the local public health unit.
- If a child develops symptoms and their self-screening indicates they should stay home but their sibling(s) do not have symptoms, the siblings do not need to isolate until the other child tests positive for COVID-19. However, check your local public health unit's website or call to see if those without symptoms should go to school/child care. Some public health units have different rules based on local risk.
- If a child is tested for COVID-19, follow the guidance of the local public health unit, health care provider and related direction for isolation and returning to the program. If there are other siblings or members of the household that attend school or child care, the local public health unit will provide any further direction on returning to school/child care.
- Persons who test positive may not return to the child care setting until they are cleared by the local public health unit. Note that individuals do not need to provide a medical note or proof of negative result to return to the program.

### **Returning from Exclusion Due to Illness**

Staff/children who are being managed by PHSD (i.e., confirmed cases of COVID-19, household contacts of cases) should follow instructions from PHSD to determine when to return to the facility.

### **Outbreak Management**

- An outbreak may be declared by the local public health unit when:
  - within a 14-day period, there are two or more laboratory-confirmed COVID-19 cases in children, staff or other visitors with an epidemiological link (e.g., cases in the same room, cases that are part of the same before/after school care cohort) where at least one case could have reasonably acquired their infection in the child care setting.
- The local public health unit will work with the licensee to determine whether epidemiological links exist between cases and whether transmission may have occurred in the child care setting.
- If the local public health unit declares an outbreak, they will determine what happens next. This could include closing particular child care rooms or cohorts or an entire child care setting.
  - The public health unit will help determine which groups of children and/or staff need to be sent home or if a partial or full closure of the child care setting is required.
  - If the public health unit determines that partial or full closure of the child care setting is required, the licensee must revise their existing serious occurrence report for a confirmed COVID-19 case to include information about the closure.

### **Occupational Health & Safety**

If the care provider's illness is determined to be work-related: In accordance with the Occupational Health and Safety Act and its regulations, an employer must provide a written notice within four days of being advised that a worker has an occupational illness, including an occupationally-acquired

infection, or if a claim has been made to the Workplace Safety and Insurance Board (WSIB) by or on behalf of the worker with respect to an occupational illness, including an occupational infection, to the:

- a. Ministry of Labour;
- b. Joint Health and Safety Committee (or health and safety representative); and
- c. Trade union, if any.

Any instances of occupationally acquired infection shall be reported to WSIB within 72 hours of receiving notification of said illness.