



ELEMENTARY PARENT HANDBOOK

COVID-19 Health and Safety Policies & Procedures

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INTRODUCTION

At Central Montessori School (CMS), we are committed to providing a safe and healthy environment for children, families, and employees. We will take every reasonable precaution to prevent the risk of communicable diseases within all of our campuses. The health & safety protocols entailed in this document apply to all employees, students, community members, and any other persons engaging in business with CMS. The purpose of these policies and procedures is to ensure that all persons are aware of, and adhere to, the directives established by our local health departments, the Ministry of Education and various children's services (i.e. Sick Kids). Policies and Procedures will be modified as applicable when COVID-19 restrictions can be lifted and/or amended to reflect new advice from the appropriate authorities.

HEALTH SCREENING

To help reduce the risk of respiratory infections (including COVID-19), health screening is an essential step. This procedure applies to all employees, students, clients, community members, and any other persons engaging in business with CMS. Everyone must be screened before entering the childcare centre.

- Every staff, student, and visitor (maintenance related) must be screened before being admitted into the school. Staff must follow the screening checklist for each person and record the outcome (pass or fail).
- There will be screening stations at all entrances.
- A 2-metre distance between staff conducting the screening and the person being screened must be maintained. If a 2-meter distance (or physical distancing) cannot be maintained, personal protective equipment (PPE) (i.e., medical mask and face shield) should be worn.
- Health screening areas will be disinfected regularly throughout the day.
- As persons enter the school, they will be asked to sanitize hands and change their shoes.
- Parents/Guardians are not permitted past the health screening line to ensure physical distancing. Only one parent/guardian is permitted to stay with the student while screening.
- Health screening questions are for parents/guardians to answer on their child's behalf.
- Only students and staff will have their temperatures taken, not parents/guardians.
- Students are not permitted past the health screening line until they have been cleared to enter the school.
 - Staff will take temperatures using a laser thermometer, then record the temperature. If questions have been answered satisfactory, and the staff member or student does not have a fever (37.8 degrees C and above), they have passed the screening and can enter the building.
 - If questions have **not** been answered satisfactory, or answers are refused, and/or a fever has been noted, entry into the building will be denied. The person or family will be asked to review the self-assessment tool on the Ministry of Health or Toronto Public Health websites to determine if further steps are required. Resources will be handed out as well.
 - We will then ensure that door handles and any other surfaces the ill individual has touched are disinfected immediately. Personal protective equipment (PPE), a medical mask, gloves, and eye protection (i.e. face shield) must be worn for this, with hand hygiene performed before and after donning and doffing the mask and eye protection.

HAND HYGIENE

Definition

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 (70-90% alcohol-based). Handwashing with soap and running water must be performed when hands are visibly soiled.

Procedures

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

CMS will ensure that employees and students are always practicing good hand hygiene when hands are visibly dirty and/or after:

- Sneezing, coughing, or blowing nose
- Using the washroom
- Handling garbage
- Handling raw food
- Handling classroom materials or other items
- Coming into contact with bodily fluids
- Handling, serving and eating food
- Handling animals (classroom pets)
- Touching a cut or open sore
- Before and after giving medication
- After communal play activity (recess), or outdoor play

Teachers will be instructing students on how to clean and wash their hands properly. Hands should be cleaned using soap and water or hand sanitizer.

When hands are visibly soiled, the following steps should be taken:

- Wet hands
- Apply soap
- Lather for at least 15 seconds. Rub between fingers, back of hands, fingertips, under nails
- Rinse well under running water
- Dry hands well with a paper towel or hot air blower
- Turn taps off with a paper towel, if available

When hands are not visibly soiled:

- Apply hand sanitizer (70-90% alcohol-based)
- Rub hands together for at least 15 seconds
- Work sanitizer between fingers, back of hands, fingertips, and under nails.
- Rub hands until dry

Hand Sanitizing Information

When hands are not visibly dirty, a 70-90% 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.

Glove Use

Gloves should be worn by staff 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.

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

Covering Mouth when Coughing/Sneezing

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

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:

- When tissues are available, mouth and nose must be covered whiles coughing, sneezing or blowing your nose
- Put used tissues in the garbage

- If you do not have a tissue, cough or sneeze into your sleeve, not in your hands
- Clean your hands with soap and water or hand sanitizer (70-90% alcohol-based) regularly and after using a tissue on yourself or others

CLEANING, SANITIZING, AND DISINFECTING

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) are required to clean surfaces. Rinsing with clean water is required to complete the cleaning process to ensure the detergent film is removed.

Sanitizing is defined as the reduction of microorganisms to levels considered safe from a public health viewpoint. Sanitizing takes place after the cleaning step because it is most effective on a minimally soiled surface.

Disinfecting describes a process completed after cleaning, in which a sanitizer 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). The product manufacturer generally prescribes contact times. Any items children may come into contact with may require a final rinse after the required contact time is observed.

PROCEDURES

All products including cleaning agents and disinfectants must be kept in a secured location that is out of reach of children. All cleaning agents and disinfectants must be labelled and must have Safety Data Sheets (SDS) up to date (within three years), which are stored in a binder in a designated space. The following procedures will be conducted by staff:

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.
- A sanitizing solution using 1 litre of water (4 cups) to 10 ml of bleach (2 tsp) is an acceptable sanitary solution. Solution strength can be checked with test strips.
- Sanitizing solution will be mixed fresh every day since it loses its strength and effectiveness after 8 hours. Contact time is 2 minutes.

In the event of an outbreak, the solution is 1 litre of water with 125 ml (8.45 tbsp) of bleach.

Disinfecting Surfaces

For general environmental disinfection of high-touch surfaces use the bleach and water mix, in a ready to use spray bottle - the contact time for disinfecting is **2 minutes**.

How to Disinfect

- Use rubber gloves (a medical mask can be used if there are any scent sensitivities).
- Spray or wipe on the bleach solution and leave on the surface for the appropriate disinfecting contact time (**two minutes**). Once the contact time has elapsed, the surface has now been disinfected.
- Any surface that food or children may come in contact with requires a final rinse with a single-use paper towel (i.e. counters, trolleys, sinks).
- If the surface continues to be wet, it may be wiped dry with a single-use paper towel.

CLEANING AND DISINFECTION FREQUENCY REQUIREMENTS

Cleaning and disinfecting upon ENTRY to school (for staff):

- Any hard surfaces such as water bottles, travel mugs, cell phones, containers

Frequencies:

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
- High touched surfaces** must be cleaned at least twice per day and as often as necessary (i.e., when visibly contaminated). Examples include:
 - trolleys
 - sinks, water fountain knobs/faucets, toilets
 - door handles, knobs, light switches
 - countertops/table tops

EXCLUSION OF SICK CHILDREN

Procedures

We must separate children of ill health and contact parents/guardians to take the child home.

When children are ill and/or exhibit COVID-19 related symptoms, staff will ensure the following:

- Ill children will be separated from all other children to a designated isolation room, and will be supervised and monitored by staff until they are picked up from school by a parent/guardian
- The parent/guardian of the ill child will be notified of the child's symptoms and of the need to pick the child up immediately; or
- If it appears that the child requires immediate medical attention, the child will be taken to the hospital by ambulance and examined by a legally qualified medical practitioner or a nurse registered under the Health Disciplines Act. R.R.O. 1990, Reg. 262, s. 34 (3).

If we suspect that a child has symptoms of a reportable communicable disease, we will report these immediately to the local Health Unit (416-392-2489 in Toronto).

When to exclude

A sick child must be excluded when displaying any signs and/or symptoms that are greater than normal, or the symptoms stated by Public Health, or if the child is unable to participate in regular programming because of illness.

Exclusions:

- If the child has one or more of the following symptoms: fever, cough, muscle aches and tiredness or shortness of breath
- An example of a symptom greater than normal would be if a child has diarrhea and has an addition symptom such as lethargy.

How to exclude

- The child will be supervised in a designated room with a hand washing sink and/or hand sanitizer available
- Parents/guardians/emergency contact will be notified of the sick child for pick up
- Only one staff should be in the designated isolation room and attempt physical distancing wearing PPE to include: mask/screen and gloves. In addition, staff will perform hand hygiene and attempt to not touch their face with unwashed hands.

- If possible, a mask should be placed on the ill child, but only if the child is able to understand that they cannot touch it
- Ventilation should be increased in the designated isolation room if possible (e.g. open windows)
- The area must be cleaned and disinfected immediately after the child has been sent home
- Staff will self-monitor for symptoms for the next 14 days. During this period, they should avoid contact with vulnerable persons or settings where there are vulnerable persons (i.e. long-term care homes)
- Staff will inform parents/guardians of children who were in the same room of possible exposure and should monitor their child for symptoms
- Children who are being managed by Public Health should follow their instructions to determine when to return to school

Surveillance

Ensuring that all environmental conditions are constantly monitored is essential in prevention and reducing illness. Employees must monitor for an increase in the number of illnesses among other employees and children by looking at the normal occurrence of illness at that location and during the specific time period.

Ensure surveillance includes the following:

- Observing children for illness upon arrival
- Recording symptoms of illness for each child including signs or complaints the child may describe (e.g., sore throat, stomachache, headache, etc.)
- Recording the date and time that the symptoms occur
- Recording the room the child attends (e.g., room number/description)
- Recording attendances and absences

Returning from Exclusion Due to Illness

Staff/children who are being managed by Public Health (e.g., confirmed cases of COVID-19, household contacts of cases) should follow instructions from Public Health to determine when to return to school.

If not advised by Public Health, staff/children will not be permitted back to the facility for a minimum of 14 days from symptoms onset. Past the 14 days mark, they must be 48 hours symptom-free.

CLOSING STATEMENT

New policies and procedures will be in place to minimize the risk of COVID-19 transmission. At times, this will be frustrating for all of us. Please be patient as we do our best to keep your children and our teachers as safe as possible.