

Public Health Policies and Procedures

Routine Practices

Routine practices are based on the assumption that everyone is potentially infectious; including blood, body fluids, excretions and secretions. Routine practices are universally recognized strategies to prevent and control infection. All staff should use routine practices while providing care and during any activity that may result in the spread of infection.

The steps that are listed below should be followed by all staff to prevent exposure to blood, body fluids, secretions, excretions, etc. and to prevent the spread of illness:

- Assess the risk of exposure to disease-causing microorganisms and take appropriate action
- Clean and disinfect all contact surfaces
- Keep your hands clean
- Cough or sneeze into your sleeve, practice respiratory etiquette (use tissue, wash hands, etc.)
- Monitor symptoms of staff and children who are ill
- Identify trends/outbreak and report them to Toronto Public Health
- Staff and children who are ill are required to stay home
- Stock appropriate personal protective equipment for staff to use

Infection Prevention and Control (IPAC)

Immunization Requirements

Under the Child Care and Early Years Act, section 35 (1) of O. Reg. 137/15 (General) requires that, every licensee shall ensure that before a child is admitted to a child care centre, the child is immunized as recommended by the local medical officer of health. All children who attend child care centres should be immunized according to Ontario's Publically Funded Immunization Schedule. Children's immunization records will be kept in their emergency files.

Exemptions

For medical exemptions, a legally qualified medical practitioner must provide medical reasons in writing as to why the child should not be immunized

For religious or philosophical exemptions such as a parent who chooses not to immunize their child "on the ground that the immunization conflicts with the sincerely held convictions of the parent's religion or conscience" can submit their objections in writing.

*In the case of an outbreak of a vaccine preventable disease children who are not up-to-date with their immunizations may be excluded from care.

Risk Assessment

When performing activities and providing care, staff should be assessing the risk of:

- contamination of skin or clothing by microorganisms in the environment
- exposure to blood, body fluids, secretions, excretions, body tissues
- exposure to non-intact skin

- exposure to mucous membranes
- exposure to contaminated equipment or surfaces
- recognition of symptoms of infection

Respiratory Etiquette

The Director and staff shall reinforce with other staff, children and visitors personal practices that help prevent the spread of microorganisms that cause respiratory infections. These personal practices include:

- Not attending the centre when ill with a respiratory infection (for example pneumonia, bronchitis)
- Minimizing contact with bodily fluids by sneezing and coughing away from others (into your sleeve, into a tissue and/or moving at least two meters away from others)
- Immediately disposing of tissues after use
- Washing your hands

Hand Hygiene

Hand hygiene refers to any action of hand cleaning (hand washing, hand sanitizer).

Every person has two types of microorganisms on their skin; transient and resident. Resident bacteria do not generally cause infections; however, transient bacteria is on the upper layers of the skin and are acquired from direct contact between people, equipment and the environment.

When Adults/Children Should Wash Hands

- upon arrival and/ or entry to a room
- before initial contact with children or handling items in the room
- before / after glove use
- after diapering and/or toileting
- before preparing, handling or serving food or giving medication
- after treatment/care involving blood, body fluids, secretions and excretions of children or staff, even if gloves were worn
- before and after handling pets
- whenever in doubt

How To Wash Hands

Turn on tap. Wet hands. Use liquid soap. Lather for fifteen seconds. Rinse. Dry hands with paper towel. Turn off taps with paper towel. Dispose of paper towel.

Hand Sanitizer

Hand sanitizer is available to toddlers, preschoolers, staff and parents. Sanitizer is 70-90% alcohol. Hand sanitizer is used when hand washing is not possible and to clean hands when not visibly soiled.

Gloves and Hand Hygiene

Gloves must be worn when it is anticipated that the hands will be in contact with mucous membranes, broken skin, tissue, blood, body fluids, secretions, excretions, or contaminated equipment and environmental surfaces. Improper glove use can be linked to the transmission of pathogens. Gloves are for **single-use** only. Remember that gloves are not completely free of leaks and hands can become contaminated. Gloves must be disposed of immediately after use followed by hand washing.

Putting on Gloves

1. Clean your hands (following hand washing or sanitizing routine)

2. Put on gloves, be careful not to tear or puncture the glove

Taking off Gloves

1. Remove gloves using a glove-to-glove/skin-to-skin technique (see poster)
2. Discard gloves immediately into the garbage
3. Clean your hands

Diapering and Toileting

Diapering and toileting can pose a risk of communicable disease transmission. The following are necessary elements to prevent the spread and control of diseases:

- A designated diaper changing area/toileting area with a suitable diaper change table/mat
- Each diaper change area has a separate hand washing area for staff and children to use after diaper changing-the hand washing area is separate from the food preparation area and never used for food service or storage-hand washing area disinfected daily and when necessary
- Single use disposable gloves always available
- Separate diapers and ointments/creams for each child which are labelled
- A suitable disinfectant- changing surface/toilets are disinfected between each change/use, with disinfectant remaining on change surface for one minute and then wiped with a paper towel
- Garbage disposal unit-soiled diapers to be placed in an airtight container-B.M. diapers to be bagged-diaper pails to be cleaned and sanitized daily

Each area requires hand washing sinks equipped with soap in a dispenser, running hot and cold water and paper towels. Each sink washed and disinfected daily and as necessary. It is not for food preparation, rinsing clothing or toy washing. Diapering surfaces shall be constructed of a smooth material that is easy to clean. These surfaces should be free of cracks and disinfected after each use. All diapering and toileting procedures must be posted. Staff to follow all infection prevention and control procedures. Garbage pails in diaper change areas must have a leak proof plastic liner and shall be foot activated. All adults and children to follow hand washing procedures that are posted at each sink. After washroom routines, the area must be disinfected and left in a tidy manner.

Expressed Breast Milk

Breast milk is a body fluid and may potentially contain pathogens acquired both intrinsically (from the mother) and extrinsically (contaminated during collection and handling). Improper handling of breast milk has been shown to result in contamination with pathogens associated with infections. Safe handling, thawing, storage and administration are required in order to minimize the risk of infection to children and staff. All breast milk containers must be labelled with the correct child's name.

Handling Expressed Breast Milk

- Frozen EBM shall be thawed in a refrigerator and used within twenty four hours (do not use a microwave)
- Keep refrigerated at a temperature of 4 degrees Celsius or colder until used
- Ensure bottles/containers are labelled (date, name of child and name of mother)
- Wash hands before handling EBM
- Gloves must be worn while handling expressed breast milk (e.g. dispensed into a cup or from one container to another)
- Children drinking expressed breast milk from a cup must be supervised
- Discard any leftover expressed breast milk not consumed by the child

Environmental Cleaning and Disinfecting

Please follow the sequence for all cleaning and disinfecting; first wash your hands and put on gloves, secondly remove any clutter/soil prior to cleaning and disinfecting and third, clean and disinfect all surfaces.

HIGH TOUCH SURFACES and LOW TOUCH SURFACES

High touch surfaces are those that have frequent contact with hands. Examples include door knobs, toys, cribs/cots, light switches and computer keyboards. High touch surfaces require more frequent cleaning and disinfecting. Cleaning and disinfecting is usually done at least daily and more frequently if the risk of contamination is higher.

Low touch surfaces are those that have minimal contact with hands. Examples include floors, walls and window sills. Low touch surfaces require cleaning on a regular (not necessarily daily) basis. Many low touch surfaces are cleaned on a monthly basis rather than daily, or when necessary.

OTHER SURFACES

Carpeted floors and floor mats must be vacuumed as necessary and shampooed/steam cleaned every 3-6 months.

SANITIZING AND DISINFECTING SOLUTION

1. Ensure spray bottles and bleach containers are labelled clearly.
2. Bleach solutions to be mixed according to Public Health Guidelines.
3. As bleach (javex) has a shelf life of thirty (30) days, each room has a separate bleach container (labelled). Fill the container from the bleach bottle in the laundry room. Mark the date on the bottle (using a piece of masking tape and indelible marker). Dispose of any leftover bleach after thirty days.
4. Each thirty days, a new jug of bleach (in the laundry room) will be opened and dated (write date on jug with indelible marker). Dispose of any leftover bleach when a new jug is opened (after thirty days).

TABLES and CHAIRS and HIGHCHAIRS

Tables to be sanitized (using bleach solution) before and after serving lunch and snacks. Chairs are to be sanitized (using bleach solution) daily after lunch. Highchairs to be sanitized (using bleach solution) after each use.

CARPETS

Steam cleaned every three months and replaced when necessary.

BEDS

Cots and cribs are labelled for individual use and are disinfected before being assigned to another child. Sheets are laundered and beds disinfected at least weekly or as needed. Blankets are laundered weekly (sent home). All blankets to be labelled. Linens are stacked on cots or in cribs. Beds are disinfected weekly. Children sleep in a head to toe pattern. Cribs and cots are cleaned and disinfected before being used by another child. Crib mattresses are made of cleanable material and are sanitized when soiled or wet.

TOOTHBRUSHES AND PACIFIERS

Each child's toothbrush/pacifier has its own storage and is not to be shared. Each is labelled with the child's name.

TOYS

Children and staff wash hands before and after handling toys and equipment. Hand sanitizer and hand washing areas are accessible to staff and children during play. All toys and equipment are disinfected, recorded and posted on the list by the late shift staff in each room. Each room has their own chart for mixing bleach solution for disinfecting toys and equipment.

Preschool and toddler toys and bins are made of materials which can and are washed and disinfected weekly (or as necessary). Toy shelves and large equipment are disinfected weekly.

Infant toys and bins are made of materials which can and are disinfected on a daily basis (or when necessary). This includes large equipment. Toy shelves to be disinfected weekly.

Any “mouthed” toys are to be put in the sink and disinfected before being used again.

Pillowcases and drama dress up clothes to be washed weekly.

Non-waterproof items (books, games, puzzles, etc.) to be sprayed and sanitized as needed.

On a regular basis, staff inspect toys for damage, cracked or broken parts and discard them when necessary. All toys and equipment are disinfected following the information sheet “Bleach Solutions for Disinfecting”. Toys are left to air dry before being used.

CUBBIES

Cubbies should be checked weekly for garbage and creative work. Tidy and clean out as necessary.

Cubbies should be washed at least once a month and prior to a new child starting.

SENSORY PLAY

Children must wash hands before and after sensory play.

Infants and Toddlers must have individual play for food sensory items.

Water bins must be emptied, disinfected and air-dried after each group use. Refer to posting by sensory bin. Stop sensory play during any period of outbreaks.

DEALING WITH HUMAN BITES

Biting incidents can be very emotional for the children, parents and staff involved.

The following are the recommended steps to take after a biting incident:

- wash area thoroughly with soap and water
- if the wound is bleeding, wear gloves
- contact the parents of those involved
- if the skin has been punctured, you can contact Toronto Public Health for assistance.

For further information, refer to handout “Dealing with a Human Bite”

LAUNDRY

Staff to complete laundry daily based on the schedule.

-Each room has their own bin for collecting dirty laundry-any items that have come in contact with bodily fluids should be placed in a bag first

-Gloves to be worn when transporting the dirty laundry from the room

-Gloves to be worn when putting dirty clothing in the washing machine, after removing gloves follow hand hygiene by washing your hands

-Gloves to be worn when placing laundry from the washer into the dryer, after removing gloves follow hand hygiene by washing your hands

- There are baskets available in the laundry room for clean and dry laundry to be transported-hands washed before handling dry laundry
- Children's soiled clothing shall be sent home rolled up and in a plastic bag (do not rinse, solid stools can be disposed of in toilet prior to bagging) and hand hygiene shall be followed
- Laundry is done in a separate space from the kitchen

PEST CONTROL

Yonge Hearts Child Care Centre employs a monthly (or when necessary) service which addresses, inspects and maintains pest control inside and outside of the building. In addition, on a regular basis, the staff ensures that all food service areas are cleaned and disinfected. Food sensory materials are kept in plastic storage containers. Rooms and common areas are kept tidy and free of clutter (includes outdoor areas).

PETS

Dogs and cats visiting or on the premise of the centre must be trained and fully immunized against rabies.

The following animals are prohibited to be kept as pets and not recommended to be involved in activities with children under the age of 5:

- Exotic animals (hedgehogs, monkeys)
- Wild/stray animals (bats, racoons, stray dogs or cats, squirrels)
- Inherently dangerous animals (lions, cougars, bears, etc)
- Venomous or toxin-producing spiders and insects
- Reptiles (e.g. turtles, snakes and lizards)
- Amphibians (e.g. frogs, toads, newts, salamanders)
- Live poultry (e.g. chicks, ducklings and goslings)
- Ferrets
- Farm animals (e.g. calves, goats and sheep)

Yonge Hearts Child Care Centre employs a service for after hours cleaning and maintenance. The following list details the responsibilities of the cleaning company:

WASHROOMS:

Floors will be swept and washed nightly.

Toilet seats, bowls and wash basins are to be disinfected and cleaned nightly.

Mirrors will be cleaned nightly.

FLOORS:

All floors to be swept and washed nightly.

Mats to be removed vacuumed and washed nightly.

Carpets will be vacuumed nightly.

All floors will be stripped, waxed and buffed as needed.

GENERAL MAINTENANCE:

All cubbies will be washed as needed.

All garbage will be disposed of nightly and cans disinfected.

All flat surfaces to be cleaned nightly (including desk tops, window sills, counter tops, etc.)

All sinks will be cleaned and disinfected nightly.

Light fixtures to be dusted weekly.

Carpets to be steam cleaned as needed, not less than quarterly.
Doors and walls to be washed as needed.
Windows to be cleaned as needed.

Management and Reporting of Communicable Diseases

All staff and children's immunization records are submitted when they enter the centre and are updated when necessary. Immunization records of children and staff are reviewed annually by the Director and/or designate.

Staff conduct daily surveillance health checks on all children upon arrival and throughout the day, looking for symptoms such as: runny noses, cough, wheezing, vomiting, unusual behaviours, diarrhoea, dehydration, rash, fever, etc. The staff then fill out an illness form and make note of it in the communication book.

Staff to notify the Director of any signs of illness and will call parents to inform them. Depending on the symptoms, parents may be asked to pick their child up or staff will monitor the child and if the symptoms increase, the parent will be notified to come and pick their child up.

If a reportable communicable disease or outbreak is suspected/confirmed, notify Public Health (refer to list of "Reportable Diseases" – call 416 392 7411). Fill out and fax (416-392-0047) in updated line list. The Guidelines for Common Communicable Disease and Critters states whether or not and for how long an adult or child should be excluded from the centre. These are posted in each room.

Exclusion

Yonge Hearts will follow the guidelines provided by Public Health as it relates to communicable diseases and critters with regards to excluding a child/staff from the centre. Signs and symptoms of communicable disease may include but are not limited to the following:

- Rash
- Diarrhea
- Fever
- Malaise

Staff will contact parents if child displays any of these symptoms. Children who display symptoms may be put to rest in a quiet area of the room or taken to the office if possible. If a child is diagnosed with a communicable disease, and it is recommended by Public Health that the child be excluded then Yonge Hearts will advise the parents. Yonge Hearts also recommends the exclusion of children that are not well enough to participate in the program.

Outbreak Management

Identifying an Outbreak

A suspected outbreak exists when there is an increase in the baseline incidence indicating there are a higher than expected number of children and staff experiencing similar symptoms of illness. For example, if there are two or more children/staff in the same room with the same symptoms on the same day a Toronto Public Health Consultant should be notified by the Director and/or designate. The Director and/or designate will provide the following information: date and time of first case, date and

time of most recent case, total number of children and staff per room, total number of ill children and staff per room, signs and symptoms and control measures that have been implemented so far.

If a child or staff becomes ill at the centre:

- Ill child will be isolated (in the office or room as much as possible). Staff displaying symptoms will be sent home as soon as possible.
- The parent of the ill child will be notified to pick up the child as soon as possible.
- Child/staff to be excluded from care according to Public Health/Centre guidelines (symptom free for 24 or 48 hours, able to fully participate in the programme, etc.).
- All parents will be notified of illness (as applicable - notice on door and in cubbies) and symptoms. Toronto Public Health will also provide a letter to parents of the outbreak and what actions can be taken.
- Start a line list. Record illness (signs and symptoms), names and dates of children, gender, symptoms, room, date and time of illness-update list daily
- If a reportable communicable disease or outbreak is suspected/confirmed, notify Public Health (refer to list of "Reportable Diseases" – call 416 392 7411). Fill out and fax (416-392-0047) in updated line list. Once this is done the Director and/or designate will work with a Public Health Inspector to assist in environmental control measures and a Disease Investigator who will assist with case management (reviewing the line list)-Director and/or designate must advise Toronto Public Health if there are any deaths related to the illness
- Contact ill staff and parents of ill children who were at home prior to the outbreak to see if they are experiencing the same signs and symptoms and to inform them of the outbreak. Add it to the line list if applicable.
- Start additional control measures: be vigilant regarding sanitizing and disinfecting of toys, equipment etc. Use stronger bleach solution. Toys and equipment that cannot be soaked in water will be cleaned with wiped. Suspend group sensory activities. Reinforce the importance of proper and frequent hand hygiene. Review of diapering and toileting procedures.
- If necessary, obtain permission forms from parents to submit specimen samples to Toronto Public Health-this will be done at the discretion of the Toronto Public Health consultant

When is an Outbreak Over?

The outbreak will be declared over when the day nursery is clear of new cases that meet the case definition for the period of communicability of the causative agent plus the incubation period. The incubation period varies depending upon the communicable disease.

FOOD SERVICE

Kitchen appliances will be cleaned daily, equipment and shelves cleaned and disinfected monthly. Kitchen counters will be sanitized with bleach solution each day prior to food preparation and throughout the day as required.

Staff and children to wash their hands prior to handling food.

Housekeeper, while in contact with food, to wear hair covering and apron.

Food, fridge and freezer temperatures to be monitored and recorded daily.

Temperature of food to be checked prior to service and recorded. Food samples to be retained for forty eight hours. Garbage can to be emptied at end of each day. Dishes cleaned with soap and hot water rinse in dishwasher. If dishwasher is not available, follow triple sink washing instructions. Disposable drinking cups available for the children.

KITCHEN DUTIES

DAILY

Turn on warming trays

Make up bleach solution as per public health requirements

Sanitize all counters

Spray and clean front of fridge/freezer

Prepare bins/carts for each room

Monitor food temperature and record

Divide up food for lunch and p.m. snack, deliver to rooms

Monitor food in fridge/freezer/cupboard (by date)

Check thermometer in fridge and freezers and record

Wipe down food carts

Wash front of dishwasher

Sweep floor as necessary

Rinse out/disinfect food bins

Prior to serving food, take samples of perishable food, put in ziploc bags, label (date, name) and store in fridge in bin. Discard after three days.

MONDAY

Put water in warming trays

Put away delivery items

Fold boxes

TUESDAY

Disinfect/scrub food carts

Clean cupboards (inside and out)

Do food order list

WEDNESDAY

Clean drawers (including cutlery baskets, inside and out)

Bleach and water solution for any stained dishes

THURSDAY

Clean laundry room (wipe down washer/dryer inside and out)

FRIDAY

Clean out fridge and freezer (wipes out all shelves and drawers, check dates on food, dispose of any unused/dated food)

AS REQUIRED

Bundle and take out cardboard as needed (at least weekly on Friday)

Ensure that bulletin board/postings are neat

WASH HANDS BEFORE AND DURING FOOD HANDLING WEAR A HAIR NET AND APRON WHILE SERVING FOOD

PERISHABLE FOOD SAMPLES

A sample of each perishable food (main course – meat, rice, potato, pasta, etc.) must be kept on hand for seventy-two hours after serving.

DAILY

Place two to three tablespoons of each perishable food in separate ziploc bags. Label each bags in the fridge (in the container marked “Food Samples”) for seventy-two hours. Throw the bags out after seventy-two hours.

UNSERVED PERISHABLE FOOD

If a perishable food item is returned from the rooms (lunch and snack), it is to be disposed of immediately.

If a perishable food is not served, any unopened containers can remain in the fridge for up to two days. All open containers/food must be disposed of on a daily basis.

All perishable food (other than milk, bread, margarine, cheese, condiments) must be disposed of every Friday.

Food such as bread and milk is checked on a daily/weekly basis (expiration date) and is stored according to that date (new supplies at the back of fridge or cupboard, older food at the front).

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