

Bridge Kids Covid-19 Guidance Policy



Dated: December 2020

Note 1: This guidance policy is informed by BC's Restart Plan: Next Steps to Move BC Through the Pandemic and the BC COVID-19 Go-Forward Management Strategy, and is also in keeping with BC's COVID-19 Go-Forward Management Checklist and information on WorkSafe BC's COVID-19 Information and Resources and COVID-19 Frequently Asked Questions government websites.

Note 2: This is a fluid, working Guidance Policy. As new information arises, we will be adapting and making changes to best follow up-to-date government and licensing orders and suggestions.

Note 3: Following this policy is correspondence between Licensing and Bridge Kids clarifying this policy and other questions on how to best proceed during Covid-19.

Covid-19 and Children Facts & Information

- COVID-19 virus has a very low infection rate in children. In B.C., less than 1% of children and youth tested have been COVID-19 positive. Most children are not at high risk for COVID-19 infection.
- Children under 1 year of age and older children with immune suppression and medical complexity are considered more vulnerable and at higher risk for illness.
- Children who are considered more vulnerable can attend child care. Parents and caregivers are encouraged to consult with their health care provider to determine if their child should attend child care if they are uncertain.
- Children and youth typically have much milder symptoms of COVID-19 most often presenting with low-grade fever and a dry cough. GI symptoms are more common over the course of disease, while skin changes and lesions are less common.
- Many children have asymptomatic disease. However, there is no conclusive evidence that children who are asymptomatic pose a risk to other children or to adults.
- Evidence indicates transmission involving children is primarily limited to household settings, and from COVID-19 positive adults to children. Most cases in children have been linked to a symptomatic household member.
- Clusters and outbreaks involving children and youth are unusual and tend only to occur in areas where there are high levels of community spread.
- Children are not the primary drivers of COVID-19 spread in child care facilities,

schools or in community settings. Childcare facility closures have significant negative mental health and socioeconomic impacts on vulnerable children and youth.

- Prevention measures and mitigation strategies involving children and youth must be commensurate with risk.
- Maintaining physical distancing for younger children is not very practical and the focus should be on minimizing physical contact instead.

Covid-19 and Adults Facts & Information

- While COVID-19 impacts adults more than children, some adults with specific health circumstances are at an increased risk for more severe outcomes, including individuals:
 - Aged 65 and over,
 - With compromised immune systems, or
 - With underlying medical conditions.
- Most adults infected with COVID-19 will have mild symptoms that do not require care outside of the home.

Self-isolation and Quarantine

Should children, youth and staff have symptoms similar to the common cold, influenza or COVID-19, they will be encouraged to stay home, encouraged to be assessed by their healthcare provider and tested for COVID-19.

However, we understand that allergies are common, especially during this season. If the child and/or staff has known seasonal allergies, we will encourage them to use the on-line self-assessment tool to rule out Covid-19 and continue to take their allergy medication. They will be allowed to continue to attend Bridge Kids.

BC's Self-Assessment Tool: <https://bc.thrive.health/covid19/en>

If a person is found to be a confirmed case of COVID-19, our local public health staff will ensure there is robust contact tracing and management of any clusters or outbreaks. They will also ensure that children, staff and parents have access to healthcare providers and that appropriate supports are in place. We will be complying with any directives from Interior Health.

Self-isolation is also advised for those who are considered a close contact of a confirmed case and are waiting to see if they develop COVID-19 illness. Quarantine is a term typically reserved for persons who return from travel outside the country are at risk of developing COVID-19.

Environmental Measure

Outdoor Spaces

- **Have children outside often**, including for fun learning activities, and play time.
- Our activities are organized in a thoughtful way, taking into consideration personal measures.
- BC Health Authorities reassure us that **playgrounds are a safe environment**. We encourage appropriate hand hygiene practices before, during, after outdoor play.

Cleaning and Disinfection

Regular cleaning and disinfection are essential to preventing the transmission of COVID-19 from contaminated objects and surfaces. is cleaned and disinfected in accordance with the BCCDC's Cleaning and Disinfectants for Public Settings document. As such:

- General cleaning and disinfecting of Bridge Kids occurs at least **once a day**.
- Frequently-touched surfaces are cleaned and disinfected at least **twice a day**. These include door knobs, light switches, faucet handles, table counters, chairs, electronic devices, and toys.
- Clean and disinfect any surface that is visibly dirty.
- We use common, commercially-available detergents and disinfectant products, following the instructions on the label.
- We have removed toys and other items that cannot be easily cleaned (e.g., plush/stuffed toys).
- We empty garbage containers daily, at minimum.
- We wear disposable gloves when cleaning blood or body fluids (e.g., runny nose, vomit, stool, urine). Wash hands before wearing and after removing gloves.
- As there is no evidence that the COVID-19 virus is transmitted via textbooks, paper or other paper-based products, we continue to provide paper crafts and book resources with the children.

Administrative Measures

General

We have a Covid-19 assessment policy in place:

- We ask that all parents and caregivers assess their children daily for symptoms before sending them for child care.

- We have informed parents and caregivers that by allowing their child to be picked up from the school or signing them in the the day, they are stating that the child does not have symptoms of influenza, Covid-19, or other respiratory diseases.

CHILD WITH SYMPTOMS OF COVID-19

If a child develops symptoms at home: Parents or caregivers must keep their child at home until they have been assessed by a health care provider to exclude Covid-19. The child is allowed back at the center with a negative Covid-19 test result. We encourage using the on-line self-assessment tool to determine if symptoms are Covid-19.

<https://bc.thrive.health/covid19/en>

If a child develops symptoms while at Bridge Kids:

1. We will identify a staff to supervise the child.
2. This staff member will immediately separate the symptomatic child from the others in a supervised area until they can go home.
3. The child's parent or caregiver will be contacted to pick them up immediately.

Note: Parents or caregivers must pick up their child promptly once notified that their child is ill.

4. Where possible, a distance of 2 metres will be maintained from the ill child. If this is not possible, the staff may use a mask if available and tolerated, or use a tissue to cover their nose and mouth.
5. We will provide the child with tissues, and support as necessary so they can practice respiratory hygiene.
6. Staff will avoid touching the child's body fluids. If they do, they will wash their hands.
7. Staff will wash their hands once the child is picked up.
8. Staff will clean and disinfect the space where the child was separated and any areas used by the child.

STAFF WITH SYMPTOMS OF COVID-19

If a staff member develops symptoms at home they must be excluded from work, stay home and self-isolate until they have been tested for Covid-19. Once their Covid-19 test is negative, they are allowed back to work. We encourage using the on-line self-assessment tool to determine if symptoms are Covid-19. <https://bc.thrive.health/covid19/en>

If staff develops symptoms while at work: Staff should go home right away where possible.

If unable to leave immediately, the symptomatic staff person should:

1. Separate themselves into an area away from others.
2. Maintain a distance of 2 metres from others.
3. Use a tissue or mask to cover their nose and mouth while they wait for a replacement or to be picked up.
4. Remaining staff must clean and disinfect the space where staff was separated and any areas used by them.

Physical Distancing and Minimizing Physical Contact

The physical space requirements for licensed child care settings set out in the Child Care Licensing Regulation mean that child care centres have sufficient space to support physical distancing (i.e., maintaining a distance of 2 metres between each other) between staff without reducing the number of children in care at any one time.

- Staff should minimize the frequency of direct physical contact with children and encourage children to minimize physical contact with each other.
- Staff should maintain physical distancing from one another.

It is reasonable to establish different expectations based on age and/or developmental readiness. For example:

- Younger children should be supported to have minimized direct contact with one another, while older children should be supported to maintain physical distance whenever possible.
- Children from the same household (e.g., siblings) do not need to maintain physical distance from each other.

The following physical distancing strategies will be implemented where possible:

- **Avoid close greetings** (e.g., hugs, handshakes). Regularly remind children to keep “Hands to yourself”.
- **Strive to minimize the number of different staff that interact with the same children throughout the day.**
- **Organize children into smaller groups and/or spread children out** to minimize direct physical contact.
 - We use different room configurations (e.g., separating tables).
 - We have set up a more small group environment to reduce the number of children in a group, for example, setting up 2 or 3 areas for colouring or doing crafts.

- We have incorporated more individual activities or activities that encourage more space between children and staff.
- We have removed toys that encourage group play in close proximity or increase the likelihood of physical contact.
- We have kept toys that encourage individual play.
- We are helping younger children learn about physical distancing and less physical contact by creating games that include basic principles such as “two arm lengths apart”.
- We have a separate, supervised area (homework/sunday school room) available for children who have symptoms of illness rest until they can be picked up and ensure these areas are cleaned and disinfected after the child has left.
- We allow spacing between children during snacks and lunch.
- We **minimize the number of additional adults** entering the centre.

Transportation

- Buses or vans used for transporting children are cleaned and disinfected according to the guidance provided in the BCCDC’s Cleaning and Disinfectants for Public Settings document. We have assigned seating for pickups at schools. We have notes of where children are sitting during out-trips.
- Before entering buses or vans, we have the children either wash their hands or use hand sanitizer.
- Transportation is limited to the transport of children to and from care and out trips.

Pick-up and Drop-Off

- **A “parent zone” is established by the entrance of Bridge Kids.** Parents must enter here only, maintain physical distance from staff and other children present and be reminded to practice diligent hand hygiene and maintain physical distance when they are in the facility.
- Parents and caregivers that are symptomatic must not enter the child care facility.
- **Daily check at drop-off** - parents and caregivers confirm their child is healthy by signing them in or allowing them to attend after school. We may also ask parents and caregivers to confirm that their child does not have symptoms of common cold, influenza, COVID-19, or other respiratory disease. **We assume that if the child is at school for pickup, the child is healthy.**
- If we use paper: Parents and caregivers should use their own pen when possible and avoid touching the sign in/out sheet directly. Parents and caregivers should practice hand hygiene before and after touching the sign in/out sheet.
- If we use the i-pad: the i-pad will be wiped down after each use with a bleach solution on a cloth.

Personal Measures

Daily Checks for Respiratory Illness and Staying Home When Sick

- All parents, caregivers, children and staff who have symptoms of COVID-19 **OR** travelled outside Canada in the last 14 days **OR** were identified by Public Health as a close contact of a confirmed case **must stay home and self-isolate**.
- **Parents and caregivers** must assess their child daily for symptoms of common cold, influenza, COVID-19, or other infectious respiratory disease before sending them for child care. We recommend using the On-line Assessment to help in this process. <https://bc.thrive.health/covid19/en>
- Children who are ill, including children of essential service providers, should not be permitted to attend child care.
- **Staff** must assess themselves daily for symptoms of common cold, influenza, or COVID-19 prior to working and stay home if they are ill. We recommend using the On-line Assessment to help in this process. <https://bc.thrive.health/covid19/en>
- **Child care providers:**
 - We will attempt to clearly communicate with parents and caregivers to assess their children daily for symptoms before sending them for child care.
 - We have established procedures for children and staff who become sick while at the facility.
- If a parent, caregiver or staff member is unsure if they or a child should self-isolate, they are directed to use the BC COVID-19 Self-Assessment Tool, contact 8-1-1 or the local public health unit. They can also be advised to contact a family physician or nurse practitioner to be assessed for COVID-19 and other respiratory diseases.

Hand Hygiene

Rigorous hand washing with plain soap and water is the single most effective way to reduce the spread of illness. Children and staff can pick up germs easily from anything they touch, and can spread those germs to objects, surfaces, food and people. Everyone should practice diligent hand hygiene. Parents and staff teach and reinforce these practices amongst children.

How to perform hand hygiene:

- Wash hands with plain soap and water for at least 20 seconds (sing the “ABC’s” or “Twinkle Twinkle Little Star”).
 - Antibacterial soap is **not** needed for COVID-19.
- If sinks are not available (e.g., children and staff are outside), supervised use of alcohol-based hand sanitizer containing at least 60% alcohol may be considered.

- If hands are visibly soiled, alcohol-based hand sanitizers may not be effective at eliminating respiratory viruses. Soap and water are preferred when hands are visibly dirty.

Strategies to ensure diligent hand hygiene:

- Hand hygiene stations will be set up at the entrance, so that children can clean their hands when they enter. If a sink with soap and water is not available, we will provide hand sanitizer with at least 60% alcohol. We will keep hand sanitizer out of children's reach and supervise its use.
- Incorporating additional hand hygiene opportunities into the daily schedule.
- We will ensure the centre is well-stocked with hand washing supplies at all times including plain soap, clean towels, paper towels, waste bins, and where appropriate, hand sanitizer with a minimum of 60% alcohol.
- We recognize that children regularly forget about proper hand washing. Therefore, staff and children will practice often and staff should model washing hands properly in a fun and relaxed way.
- Staff will assist young children with hand hygiene as needed.

CHILDREN WILL PERFORM HAND HYGIENE:

- When they arrive at Bridge Kids and before they go home
- Before and after drinking and eating
- After using the toilet
- After sneezing or coughing
- Whenever hands are visibly dirty

STAFF WILL PERFORM HAND HYGIENE:

- When they arrive at Bridge Kids and before they go home
- Before and after handling food
- Before and after giving or applying sunscreen or medication
- After using the toilet
- After contact with body fluids (runny noses, spit, vomit, blood)
- After cleaning tasks
- After removing gloves
- After handling garbage
- Whenever hands are visibly dirty

PREPARING SNACKS

- Staff will wear masks and gloves while preparing snacks for the children.

Respiratory Etiquette

Children and staff should:

- Cough or sneeze into their elbow sleeve or a tissue. Throw away used tissues and immediately perform hand hygiene (“Cover your coughs”).
- Not touch their eyes, nose or mouth with unwashed hands (“Hands below your shoulders”).
- It is not recommended that children wear cloth or homemade masks.

Other

- Children and staff should not share food, drinks, and other personal items.
- Label personal items with the child’s name to discourage accidental sharing.
- If meals or snacks are provided, ensure each child has their own individual meal or snack. Reusable utensils must be cleaned and sanitized after each use.
- Children should not be allowed to prepare or serve food.

Personal Protective Equipment

Personal protective equipment, such as masks will be used in the child care setting.

- Wear disposable gloves when cleaning blood or body fluids (e.g., runny nose, vomit, stool, urine). Remember to wash your hands before wearing, and after removing gloves.
- Staff will wear masks when unable to social distance and when in contact with the children.
- Children will wear masks at Bridge Kids while in the building. They will be able to choose not to wear a mask while playing outside. A guardian, may, at any time, request that their child wear a mask even outside that that request will be honoured.

COVID-19 health and safety

Cleaning and disinfecting

The virus that causes COVID-19 is easily destroyed by mild soap and water. This works well for handwashing, but cleaning surfaces effectively can be a challenge. That's why it's important to clean and disinfect surfaces, especially high-contact surfaces, which are surfaces that are contacted frequently and/or by many people.

How COVID-19 spreads

COVID-19 is an infectious disease that mainly spreads among humans through direct contact with an infected person and their respiratory droplets. Respiratory droplets are generated by breathing, speaking, coughing, and sneezing. Your exposure risk is greatest when you have prolonged close contact with an infected person.

The virus can also spread if you touch a contaminated surface and then touch your eyes, mouth, or nose. A surface can become contaminated if droplets land on it or if someone touches it with contaminated hands.

Cleaning and disinfecting

Effective cleaning and disinfection involves a two-stage process.

Cleaning: To disinfect a surface effectively, you must clean it first to remove surface dirt and debris. Any residue left on work surfaces and equipment may deactivate the disinfectant. Use soap or detergent as a cleaning agent.

Disinfection: After cleaning, apply a disinfectant to the surface. You need to leave the disinfectant on for a specified contact time to neutralize any remaining organisms. Look for recommended contact times on product instructions. (For water with bleach, it's 10 minutes).

What surfaces you should clean and disinfect

Start by cleaning and disinfecting all the common surfaces that staff and children touch. Examples include doorknobs, light switches, handles, countertops, tables, touch screens, toilets, faucets, toys, sports equipment and games.

Clean and disinfect common high-contact surfaces inside and outside to limit the chance of the virus spreading through touching contaminated surfaces.

What you can use to clean and disinfect

For cleaning, you can use regular soap and water or another cleaning solution. Depending on how many people are in the space and how it's used, you may need to clean some spaces more frequently.

For disinfection, we will be using water and bleach.

- You can make a 500 ppm bleach solution by adding 42 mL (3 tablespoons) of bleach to 4 L (1 gallon) of water
- For the red generic spray bottles in the janitorial cupboard it is 2 tsp of bleach per bottle of water.
- For other quantities, use an online bleach calculator.
- Never mix bleach with other disinfecting products. This can result in dangerous fumes

Always use all disinfectants with caution, as directed on the label, to avoid introducing other hazards into your workplace.

Some sanitizing solutions contain up to 70 percent alcohol and will release flammable vapours. When possible, only use 60 percent alcohol.

NOTE: there are a number of products you can use for disinfection. Health Canada has a list of disinfectants for use against COVID-19.

(<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html>)

They all have an assigned drug identification number. These are consumer products that don't require a safety data sheet, like some controlled products you may be familiar with. However, it's still important to follow whatever safety information is available for the product. Use these products with caution, as directed on the label, to avoid introducing other hazards into your workplace.

Cleaning Plan

Clean at least once a day for most surfaces and at least twice a day for high-contact surfaces.

A full cleaning plan with checklists: Bridge Kids Cleaning & Disinfecting Checklist