
Infection Prevention & Control Measures

In the child care setting, operators, staff and families each have an important role to play in protecting children and one another from infections and illness.

There are measures individuals can take to prevent infections and outbreaks, including immunization, hand hygiene, respiratory etiquette, and cleaning and disinfection practices. A comprehensive Infection Prevention and Control (IPAC) program, and ensuring that all staff receive training, can help to limit the spread of illness in child care centres.

1. Routine practices

It is recommended that IPAC measures should be made into routine practices at child care centres to stay safe and prevent the spread of illness.

In child care centres, staff may be exposed to infections through their everyday work. Routine practices are a set of strategies to prevent the spread of infection. Routine practices are based on the concept that all body fluids, secretions, excretions, mucous membranes, non-intact skin, blood, and soiled items are potentially infectious. Elements of routine practices include:

- Hand hygiene
- Respiratory etiquette
- Risk assessment
- Personal protective equipment (PPE)
- Cleaning and disinfection

2. Preventing Illness

What causes infection and how does it spread?

Germs

Microorganisms, too small to be seen with the naked eye, are everywhere around us, found in food, water, people, animals, air and soil. Many microorganisms are harmless and do not lead to infection, and some are even necessary for health.

Some microorganisms, however, can cause infection. We call these microorganisms pathogens, infectious agents or, more commonly, germs.

Germs cause a number of illnesses commonly seen in child care centres such as common colds, influenza (the flu), norovirus, strep throat and food-borne illness. For more information, see Toronto Public Health's [Guidelines for Common Communicable Diseases](#).

The Chain of Transmission

The Chain of Transmission model helps to understand how germs are spread from person-to-person, and how IPAC measures can “break the links” and prevent illness.

There are six links in the Chain of Transmission:

1. Infectious Agent (Germs)

Germs include any microorganism that is capable of causing an infection, including:

- Bacteria
- Viruses
- Fungi
- Parasites

Break the chain: IPAC measures such as hand hygiene, cleaning and disinfection, and cooking foods to safe temperatures can break this link in the chain of transmission.

2. Reservoir (Where Germs Live)

Reservoirs are places where germs live and grow, including people, animals, food, water and the environment.

Break the chain: IPAC measures, such as improving air filtration and ventilation, food safety measures, and staying home when sick can break this link in the chain of transmission.

3. Portal of Exit (How Germs Get Out)

The portal of exit is how the germs get out and leave the reservoir (e.g., sneezing and coughing).

Break the chain: IPAC measures, such as wearing Personal Protective Equipment (PPE), practicing respiratory etiquette and hand hygiene can break this link in the chain of transmission.

4. Mode of Transmission (How Germs Get Around)

The mode of transmission refers to how germs spread from person-to-person. The following are the three main modes of transmission:

Contact Transmission

Contact transmission includes:

- *Direct contact*, which occurs when germs are spread through direct physical contact, such as kissing, hugging or shaking hands.
- *Indirect contact*, which occurs when germs are spread through contact with a contaminated object, equipment or surfaces (e.g., shared toys).

Droplet Transmission

Droplet transmission occurs when an infected person coughs or sneezes into the air. Respiratory illnesses, including the common cold and the flu, can spread when droplets come in contact with the mucous membranes (e.g., the eyes, nose or mouth) of another person.

Droplets can be expelled up to 2 metres through the air. They can also land on surfaces, contaminating the environment. Many survive on surfaces for a long period of time.

Airborne Transmission

Airborne transmission occurs when an infected individual expels tiny droplets (or aerosols) into the air, either by coughing, sneezing, singing, laughing or otherwise exhaling in some way. These aerosols remain suspended in the air, and may travel along air currents. Transmission occurs when aerosols are inhaled by another individual. Examples include chicken pox, measles and tuberculosis.

Break the chain: IPAC measures, such as improving ventilation, hand hygiene, covering our coughs and sneezes, and using PPE can break this link in the chain of transmission.

5. Portal of Entry (How Germs Get In)

The portal of entry refers to how germs enter a new person. Portals of entry include the mucous membranes of our eyes, nose and mouth; the respiratory tract; the gastrointestinal track; and broken skin.

Break the chain: IPAC measures such as practicing hand hygiene, using PPE, and avoiding touching our eyes, nose or mouth with unwashed hands can break this link in the chain of transmission.

6. At Risk Individuals

Anyone can develop an infection, however some individuals may be at higher risk of getting very sick. This may include the very young, the very old, pregnant people, unvaccinated people, and those with weakened immune systems or chronic health conditions.

Break the chain: IPAC measures such as keeping up-to-date with immunizations and taking measures to protect those who are at higher risk can help break this link in the chain of transmission.

All children and staff in the centre must be updated in their immunization records. Children may be exempt from immunization if immunization conflicts with their religious or cultural values. Parents must provide written statement for the centre in this case upon enrollment. Children without proper immunization and medical records or a written statement cannot enter into the program.

3. Monitoring for illness (disease surveillance) and isolating sick children

Monitoring

Ensuring that all environmental conditions are constantly monitored is essential in prevention and reducing illness. Employees must monitor for an increase in above normal amount 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:

- Observe children for illness upon arrival
- Record symptoms of illness for each child
- Record attendances and absences
- Record any outings, special events, etc.

Daily Health Observations

- Teachers ensure that they do a daily observation is made of each child in attendance in each day nursery before the child begins to associate with the other children in order to detect possible symptoms of ill health.

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- If a child appears to be ill and they will not be able to participate in the program as they pose a risk to themselves and the spread of germs to other children.

Sick child at the centre

If the child develops any of the symptoms outlined above at the centre, the child is separated from the other children and the symptoms of the illness noted in the daily log book and a Sick Child form is made up.

If infants or toddler's have 2 episodes of diarrhea OR 2 episodes of vomiting parent(s) will be contacted and the child must be picked up. If preschoolers have 2 episodes of diarrheas AND/OR 2 vomiting parents will be called and child must be picked up. This policy is to ensure that Kinder College Early Learning Centre takes all measures to prevent any outbreak or spread of any communicable diseases. Any child who has been sent home because of diarrhea AND/OR vomiting must not return until they are free from ANY diarrhea AND/OR vomiting for 24 hours.

Parent(s) will also be called if any child (infant, toddler, preschool) has a fever of 38 degrees Celsius. Parent(s) will need to pick up their child immediately, and the child will not be able to return to the centre until the child has been fever free for at least 24 hours.

Procedures:

- The child is separated from the other children (into the designated sick child area – supervisor's office).
- Record incident into daily log book and make up Sick Child form.
- The child must be picked up if sick. The supervisor will make arrangements with parents for pick up.
- If an emergency, contact emergency department and parents.
- Make sure at least 1 staff member is always with child.
- Once the symptomatic individual leaves the building, the isolation area must be cleaned and disinfected

Reporting Diseases and Outbreaks

Licensed child care centres are required to report diseases of public health significance (DOPHS) or suspected outbreaks to Toronto Public

Health. Please refer to the most recent list from Toronto Public Health. At the time of this policy, *PublicHealthReportable_July2023.pdf*.

If you suspect or have laboratory confirmation of any of the specified diseases in the TPH Reportable Disease list or have identified an outbreak at the centre, please call:

Toronto Public Health – Communicable Disease Surveillance Unit

Phone: 416-392-7411

After hours: 311 or 416-392-2489

Child returning from exclusion due to illness

Please refer to the Management of “Communicable Diseases Information for Schools and Child Care Centres” when dealing with each individual case.

4. Hand Hygiene and Respiratory Etiquette

Hands carry and spread germs. Touching our eyes, noses or mouths without cleaning our hands, or sneezing or coughing into our hands, may provide an opportunity for germs to get into our bodies. Keeping hands clean through good hygiene is one of the most important steps to avoid getting sick and spreading germs. In child care centres, hand hygiene is one of the single most important measures to prevent the spread of infections.

Hand Hygiene

There are two ways to clean our hands:

1. Hand Washing

The purpose of handwashing is to physically remove soil, organic material and germs. The use of soap, warm running water, and friction is an effective way to remove germs from our hands.

When clean, running water is available, wash hands with soap and water and dry thoroughly. In child care centres, children and staff should use a sink that is dedicated for the purpose of hand hygiene.

Follow these steps when washing hands:

1. Wet hands.

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2. Apply soap. Child care centres require soap from a dispenser.
 3. Lather for 15 seconds. Rub between fingers, back of hands, fingertips, under nails.
 4. Rinse well under running water.
 5. Dry hands well with a paper towel or hot air blower.
 6. Turn taps off with paper towel, if available.

2. Hand Sanitizing

Alcohol-based hand sanitizers are very useful when soap and water are not available. When hands are not visibly dirty, then a 70-90% alcohol-based hand sanitizer can be used. People who are involved in food preparation should not use hand sanitizers but instead, wash their hands with soap and water.

Alcohol-based hand sanitizers can be harmful if swallowed. To reduce the risk of ingestion, it is important to always have child care staff help and supervise children when they use alcohol-based hand sanitizers. Keep alcohol-based hand sanitizers out of reach of children when not in use.

Follow these steps when using an alcohol-based hand sanitizer:

1. Apply sanitizer (minimum 70% alcohol-based).
2. Rub hands together.
3. Work sanitizer between fingers, back of hands, fingertips, under nails.
4. Rub hands until dry.

Note: Child care centres must ensure products are not expired, appropriate for use and follow manufacturer's instructions.

Everyone should practice hand hygiene:

- When they arrive at the child care centre, before or immediately after entry into any room, and before they go home
- After using the washroom or after a diaper change
- After coming in from outdoors
- Before and after eating, and before drinking
- Before and after handling animals, pet cages or other pet objects
- After covering a cough, sneeze or blowing their nose

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- Before and after sensory play activities
 - Before and after touching their eyes, nose or mouth
 - Whenever hands are visibly dirty
 - Whenever in doubt

In addition, child care staff should practice hand hygiene:

- Before and after preparing, handling or serving food or bottles
- Before and after giving medication or applying ointment or lotion
- After changing diapers, assisting children to use the toilet or using the washroom
- After contact with broken skin or body fluids (e.g., runny nose, spit, vomit, blood, cut or open sore), even if gloves were worn
- Before and after glove use
- After cleaning, handling garbage or contact with contaminated surfaces

Note: Artificial nails, chipped nail polish, and jewelry can harbour germs. For this reason, it is recommended that staff at child care centres keep their nails short and clean.

Respiratory Etiquette

Germs such as influenza and cold viruses, and even whooping cough, are spread by coughing or sneezing. When you cough or sneeze on your hands, your hands carry and spread these germs. When possible, keep your distance (more than two metres) from people who are coughing or sneezing.

Respiratory infections are spread easily in settings where people are in close contact, such as child care centres. To prevent the spread of germs that cause respiratory infections, proper respiratory etiquette should be taught and practiced regularly by children, staff and visitors.

Respiratory etiquette includes:

- Staying home when ill with a respiratory infection.
- Minimizing droplets and aerosols when coughing or sneezing, by:

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- Covering your mouth and nose when you cough, sneeze or blow your nose. If you don't have a tissue, cough or sneeze into your sleeve, not in your hands.
 - Putting used tissue in the garbage immediately after use.
 - Cleaning your hands with soap and water or an alcohol-based hand sanitizer (minimum 70% alcohol-based), after coughing, sneezing or blowing your nose and before touching your face.
 - Maintaining a two metre distance from others, when possible.
 - Practicing proper hand hygiene immediately after coughing or sneezing.

Education in Child Care Centres

To support hand hygiene in a child care centre, implement a hand hygiene and respiratory etiquette program that includes the following elements at a minimum:

- Educate staff and children on proper hand hygiene and respiratory etiquette
- Assist and supervise children while using alcohol-based hand sanitizer
- Ensure hand washing is carried out when hands are visibly soiled
- Ensure staff, visitors, and children practice hand hygiene upon arrival
- Remind staff and children to avoid touching their face, nose and mouth with unwashed hands
- Provide alcohol-based hand sanitizer (70-90%) stations (e.g. wall mounted hand sanitizer dispensers) near entrances, service counters and other high touch locations in supervised areas where children cannot access it independently. Monitor and refill as needed.
- Monitor supplies to ensure adequate amounts of liquid soap, paper towel (air dryer if paper towels are not available), hand sanitizer, tissues and waste receptacles with lined plastic bags.

5. Risk Assessment & Personal Protective Equipment

Risk Assessment

As part of routine practices, child care centre staff should continuously perform a risk assessment. During a risk assessment, staff assess and analyze whether there is a potential for exposure to body fluids or infectious diseases.

For child care centre program activities, apply IPAC measures based on assessment that considers:

- Contamination of skin or clothing by germs in the environment.
- Exposure to blood, body fluids, secretions, excretions and body tissues (including vomit, urine or stool).
- Exposure to non-intact (broken) skin.
- Exposure to mucous membranes (e.g., of the eyes, nose or mouth).
- Exposure to contaminated equipment or surfaces.
- Exposure to individuals exhibiting signs or symptoms of infection.

Based on this risk assessment, staff must then choose appropriate IPAC measures and Personal Protective Equipment (PPE). PPE refers to protective clothing that is used to prevent the transmission of illness, including gloves, gowns, masks and eye protection.

Child care centres must:

- Ensure there is an adequate, accessible supply of PPE at all times for staff to use when needed.
- Ensure that all child care staff receive training and education regarding performing a risk assessment and the proper use of PPE.

Single-Use Gloves

Proper glove use provides barrier protection. Wear gloves when it is anticipated that hands will be in contact with mucous membranes, broken skin, blood, body fluids, or contaminated surfaces or objects.

Some individuals may be allergic or sensitive to certain types of single-use gloves (e.g., latex). When selecting gloves, consider individual allergies and sensitivities.

To protect hands and reduce irritation, choose gloves that are comfortable, well-fitting, clean and dry. Clean and dry hands before and

after wearing gloves. Ensure that any cuts or abrasions on hands are covered with a waterproof bandage prior to applying gloves.

Key Points

- In child care centres, there are many tasks that require the use of single-use gloves for barrier protection, such as:
 - Diapering or toileting infants and children, and
 - It is anticipated that hands will be in contact with mucous membranes, broken skin, blood, body fluids, secretions or excretions (including vomit, urine or stool), or contaminated surfaces or objects.
- Hand hygiene must be practiced before putting on and after taking off gloves.
- Gloves must be single-use and changed between tasks. After performing a task requiring the use of gloves, child care centre staff must immediately remove the gloves, discard into a waste receptacle, and perform hand hygiene.
- Gloves should be appropriate for the type of activity.
- Refer to the Glove Use information sheet.

Masks

Masks help to protect individuals from germs that may enter the mucous membranes of their nose or mouth. Wear a mask if there is a risk of becoming exposed to a cough, sneeze, spray, or splash.

Eye Protection

Eye protection, including goggles or face shields, helps to protect the individual from germs that may enter through the mucous membranes of the eyes. Wear eye protection if there is a risk of becoming exposed to splashes or sprays of body fluids.

Gown

Wear gowns if there is a risk of clothing or uncovered skin becoming exposed to splashes or sprays of body fluids.

6. Diapering and Toileting Practices

Diapering Areas

To help prevent transmission of infection and reduce the risk of cross contamination during diapering and toileting, it is important to consider the location and set-up of the diaper change station:

- Keep separate from children's activity, feeding, food preparation and food storage areas.
- Maintain diaper areas in a sanitary condition. The floor around and underneath the diapering area must be non-absorbent, smooth and easy to clean and disinfect.
- Diapering supplies must be easily accessible to child care staff and out of children's reach. The area must be equipped with:
 - A designated hand washing station. This hand washing station must be located in the same area as the diaper change table and must be separate from an IPAC sink used in the program area. The sink must only be used for hand washing.
 - Single-use disposable gloves.
 - Appropriate cleaner and disinfectant, labelled and stored away from children's reach.
 - Foot activated garbage container equipped with a tight-fitting lid and a disposable leak-proof liner. This garbage container must be emptied, cleaned and disinfected as needed.
 - Toronto Public Health "Diapering Steps" posted in the area.

Diapering Surfaces and Diapering Change Pads

- Constructed of smooth, non-porous, non-absorbent material that is easy to clean and disinfect.
- Free of cracks, tears or rips.
- Cleaned and disinfected after each use, even if a paper liner is used.
- Used for diapering only.

Designated Hand Washing Sink in Diaper Change Areas and Washrooms

- Provided in all diaper changing areas and washrooms.
- Designated for hand-washing after diapering, toileting or using the washroom.
- Not to be used for food preparation, rinsing soiled clothing or toy cleaning.
- Equipped with running water, soap in a dispenser, paper towels and a hand washing information sheet posted.
- Cleaned and disinfected at least once daily, and if soiled.

Cloth Diapering and Soiled Personal Clothing

- When changing cloth diapers, staff must follow the same precautions as when changing other soiled clothing.
- Cloth diapers must be treated as any other soiled personal clothing. Soiled clothing and cloth diapers must never be rinsed or washed at the child care centre.
- Soiled clothing (including cloth diapers) must be rolled up and placed into a securely tied plastic bag or container. Soiled clothing must be stored away with child's belongings and sent home at the end of the day for laundering.
- If safety pins are used for cloth diapers, close each safety pin immediately and store out of children's reach.

Steps for Diapering

Please refer to the "Diaper Change Information Sheet" provided by Toronto Public Health for diapering steps.

Toileting Areas

- Toileting should take place in the washroom only.
- The washroom must have a hand washing sink, and children and staff must perform hand hygiene after using the toilet.

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- The handwashing sink must have running water, liquid soap in a dispenser, paper towels, and the handwashing information sheet posted.

Potty Chairs

The use of potty chairs is generally not recommended because of concerns related to waste disposal, storage of the chairs themselves and potential for cross contamination. However, there may be times where a child requires the use of a potty chair based on their individual needs. In these circumstances, policies and procedures for potty use must be created to support staff. Potty chairs must be:

- Considered a personal belonging, stored out of reach of children and in a manner that prevents cross-contamination.
- Labelled and assigned to one child only.
- Waste disposed of in a sanitary manner while wearing appropriate PPE.
- Cleaned and disinfected after use.
- Stored in a washroom area. Do not store a potty chair in any activity areas, feeding areas, or food preparation areas.

If used, potty chairs should be viewed as a transitional step. It is important for child care staff to partner with children and families, promoting toileting skills and helping children to become more comfortable and confident with the toileting process.

Steps for Toileting

Please refer to the Toilet Routine Information sheet provided by Toronto Public Health for toileting steps.

7. Ventilation

Strategies to improve ventilation can also help prevent infections in child care centres. Given the various types of settings that child care centres operate from, not all strategies may be applicable. Below are some strategies to consider:

- Open windows and doors in rooms and program areas to help increase airflow when it is safe to do so. Do not open windows or doors if doing so poses a safety or health risk.

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- Use portable air cleaners that use high efficiency particulate air (HEPA) filters. Especially in high occupancy areas and areas used for isolating children when they are sick. Follow the manufacturer's directions for operation and maintenance.
 - Keep areas near air intake and outlets clear. For example, arrange furniture away from air vents.
 - Rooms where ceiling fans are used should have an upward airflow rotation.
 - If portable fans are used, limit the blowing of air across people and surfaces by positioning them to provide an upward movement of air.
 - Move activities outdoors when it is safe to do so and when circumstances allow.
 - Schedule routine service and maintenance of heating ventilation and air conditioning (HVAC) systems. Review HVAC settings with the service person and if safe to do so, set the HVAC system to increase the amount of outdoor air brought in and to decrease air recirculation.

8. Environmental Cleaning & Disinfection and Laundry

Infections can spread when a person touches a contaminated surface or object and then touches their mouth, nose or eyes. Some germs can survive for long periods of time on surfaces, including doorknobs, faucet handles, toys, and diapering tables. Frequent cleaning and disinfection is an important measure to prevent the spread of infections in child care centres.

Child care centres must:

- Have a written policy in place outlining the frequency and method of cleaning and disinfection.
- Provide staff with health and safety training that includes the safe and proper use of cleaning and disinfection agents.

It is important to remember that cleaning and disinfection are two separate processes. To be effective, cleaning must be done before disinfection.

Cleaning

Cleaning describes the physical removal of debris and contaminants from a surface, and is accomplished using warm water, soap and friction (e.g., scrubbing). Cleaning reduces the number of germs on a surface, and removes dirt, dust, grease, body fluids and other organic materials. Organic material such as dirt and grease may coat and protect microorganisms. For this reason, cleaning is an important first step prior to disinfection:

- Cleaning must always be done prior to disinfection.
- Cleaning should start from the least soiled area to the heaviest soiled area, and from high surfaces to low ones.
- After cleaning a surface or object, it is important to rinse with clean water to ensure detergent film is removed.
- Clean when children are not present in the area. Cleaning solutions must be prepared and used according to the manufacturer's directions and must not be mixed with other chemicals.

Cleaning equipment may include multi-use gloves (e.g., rubber gloves), masks, eye protection (e.g., goggles), paper towels or cloths, and mops.

- Multi-use gloves (e.g., rubber gloves) help to protect the cleaner's hands. If multi-use gloves are used, they must be cleaned and disinfected after use.
- Additional PPE, such as masks and eye protection, may be worn to protect the cleaner's eyes, nose and mouth from chemical splashing or sprays.
 - If goggles are re-used, they must be properly cleaned and disinfected (as per the manufacturer's directions) after use.
- Mop heads should be detachable and machine-washable.
 - Cloths and mop heads must be laundered between uses.
- Mop buckets must be cleaned and disinfected after each use.

Disinfection

Disinfection describes the process of killing most germs on surfaces or objects (such as activity tables, diaper change tables or toys), using a chemical solution called a disinfectant. Apply disinfectants to a surface or object after it has first been cleaned.

When using a disinfectant:

- Allow adequate contact time (the specified period of time the disinfectant must be applied to the surface or object).
 - When choosing a disinfectant, choose a product that is appropriate for the surfaces and items that will be disinfected, and one with a shorter contact time (e.g., 1 – 2 minutes) to suit your centres' needs.
- Always follow the manufacturer's instructions when preparing and using a disinfectant solution.
 - Many disinfectants (including chlorine (bleach)) require different concentrations for “everyday use,” “blood / body fluid spills,” and “outbreak situations.”
 - Some disinfectants are available in a concentrated form, requiring dilution with water to achieve the required strength. Follow the directions provided by the manufacturer. Chemical products must never be mixed together.
 - If dilution is required, disinfectants must be mixed in a clean bottle that is labelled with the product name and/or active ingredient or a copy of the product label attached.
 - Use a proper measuring tool to measure the product consistently.
- Wear gloves and any additional PPE recommended by the manufacturer.
- Ensure the disinfectant is appropriate for use on specific surfaces.
- Label and store disinfectants in a safe, secure location that is inaccessible to children, and away from heat and light.
 - All chemicals in child care centres must be stored in a locked cupboard or in a location that ensures children cannot access them.
 - All chemicals must also be stored away from food preparation and food storage areas.
- Always check the expiry date. If the product is expired, do not use.
- Use disinfectants when children are not present in the area.

Using Chlorine (Bleach) as a Disinfectant

- Most household chlorine (bleach) comes as 5.25% (50,000 mg/L or parts per million (ppm)) sodium hypochlorite, and requires preparation prior to use.
- For instructions on how to prepare chlorine (bleach) solutions for child care centres, please see TPH's Chlorine (Bleach) Solutions for Disinfecting information sheet.
- For more information on how to dilute chlorine, see Public Health Ontario's Chlorine Dilution Calculator found on their website.
- Chlorine (bleach) is not a cleaning agent, and surfaces must first be cleaned in order for bleach to be an effective disinfectant.
- Chlorine (bleach) must be diluted using water only. Never mix chlorine with any other chemicals or cleaning products.
- Chlorine (bleach) solution must be prepared daily, as it loses efficacy within 24 hours.
- As with all chemicals, chlorine (bleach) must be labelled and must be stored in a safe, secure location that is inaccessible to children, and away from heat and light.

Safety Considerations

When using cleaning and disinfection products, there are several important safety considerations, including:

- Provide staff with health and safety training on the use of cleaning and disinfection agents.
- Read and follow the manufacturer's instructions to ensure safe and effective use of the product.
- Provide a Safety Data Sheet (SDS). The SDS includes important information, such as the active ingredients, health and safety requirements, PPE required, and first aid measures for the chemical.
- If diluting is indicated for use, use water at room temperature unless otherwise stated.
- Never mix chemical products.
- Wear the appropriate PPE as recommended by the manufacturer.
- PPE, such as gloves, gowns, eye protection and masks should be provided and used for cleaning and disinfection.

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- Staff must perform hand hygiene after cleaning, immediately after removing gloves.
 - Disinfectants must not contain phenols, as phenols may cause hyperbilirubinemia (jaundice) in infants and young children (PIDAC, 2018).
 - Cleaning and disinfecting products must be labelled and must be stored in a safe, secure location that is inaccessible to children, and away from heat and light. All chemicals in child care centres must be stored in a locked cupboard or in a location that ensures children cannot access them. Chemicals must also be stored away from food preparation and food storage areas.
 - Toys that are likely to be mouthed, pacifiers and teething rings must be rinsed thoroughly with clean water after disinfection.
 - Try to avoid cleaning activities that generate dust during hours of operation or when an area is occupied (e.g., sweeping, dusting). Dusting/sweeping should be performed using a damp cloth or dust mop, and should be performed first so that particles that fall on the floor will be captured when the floor is cleaned.
 - To minimize eye and respiratory irritation, minimize mist and optimize ventilation (e.g., open windows or doors). Clean and disinfect when children are not present in the area.
 - Special considerations should be considered for individuals with asthma, as some cleaning and disinfection products may trigger asthma attacks. Individuals should speak with their health care provider to learn more about reducing the risk of an asthma attack while disinfecting.

Steps for Environmental Cleaning and Disinfection

1. Gather equipment, perform hand hygiene and don appropriate PPE.
2. Clean the surface or object, using warm water, soap, and friction. Clean in a progression from infrequently touched to frequently touched surfaces and from top to bottom. Cleaning removes dirt and debris.
3. Rinse the surface or object, using clean, warm water. Rinsing removes soap residue.
4. Disinfect the surface or object.

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5. Rinse after disinfection, when required according to manufacturer's instructions.
 6. Allow to dry.
 7. Remove PPE and perform hand hygiene.
 8. Store newly cleaned and disinfected items in a manner that prevents contamination.

Carpets and Floor Mats

Carpets and floor mats can be more heavily contaminated for prolonged periods than non-carpeted floors and can be a potential source of microorganisms during outbreaks. Child care centres that use carpets and floor mats must ensure that:

- Floors should be vacuumed or wet-mopped daily.
- Carpets/floor mats must be cleaned as often as necessary and promptly if a spill occurs.
- If carpets do not appear to be adequately cleaned, re-cleaning is necessary or replacement must be considered.
- Floor mats that cannot be adequately cleaned and disinfected should be promptly removed and replaced.

Creating a Cleaning & Disinfection Schedule

Frequently-touched surfaces are those with frequent hand contact and include but are not limited to sinks, faucet taps, toilets, railings, floor mats, high chairs, feeding tables, plastic bibs, doorknobs, light switches and electronic devices that are touched frequently by hands. These surfaces require frequent cleaning and disinfection.

Create a cleaning and disinfection schedule for every classroom:

- Identify areas that are to be cleaned and the frequency of cleaning.
 - Split the schedule into four areas: after every use, daily, weekly and monthly.

- Identify frequently touched surfaces. Frequently-touched surfaces must be cleaned and disinfected daily and as necessary (e.g., when visibly dirty).
- Identify surfaces that are not touched frequently (e.g., ceilings, window sills). These must be cleaned and disinfected on a regular basis, and as needed, and maintained in a clean and sanitary manner.
- Floors, walls, and ceilings should be kept clean and in good repair. Floors and walls should be made of a material that is smooth, non-porous and easily cleanable.
- Surfaces should be cleaned and disinfected more frequently during outbreaks to decrease the spread of infections.

	Frequency	Method
Toys		
Mouthed toys	After each use	Clean & disinfect
Infants (< 18 months)	Daily	Clean & disinfect
Shared plastic toddler toys	Daily	Clean & disinfect
Toddlers (18 months to 30 months)	Weekly	Clean & disinfect
Pre-school (30 months to 5 years of age)	Weekly	Clean & disinfect
Kindergarten & school age	Monthly	Clean & disinfect
Plush toys and dress-up clothes	Weekly	Launder
Sensory Materials		
Water sensory play bins	After each session	Drain, clean & disinfect

	Frequency	Method
Used homemade playdough/slime	After each use	Discard
Sand play bins and toys	Weekly	Discard sand, clean & disinfect play bin and toys
Activity table	After each use	Clean & disinfect
Water play toys	After each session	Clean & disinfect
Play Areas & Surfaces		
Carpets – infant rooms	Every three months	Shampoo or steam clean
Carpets – all other rooms	Every six months	Shampoo or steam clean
Floors (including carpets)	Daily	Vacuum and/or wet mop

9. Toys and Disinfection

Toys and play-based learning are essential to each child's well-being, growth and development. However, toys may become contaminated from unwashed hands or saliva, and increase the risk of spreading infections. It is important that child care centres implement a toy cleaning and disinfection program.

Child care centres must:

- Have a written policy and procedure in place that clearly identifies the frequency and method for toy cleaning and disinfection, as well as the proper storage of toys when not in use.
- Help children practice hand hygiene before and after playing with toys.
- Provide children with toys that are age-appropriate and safe for use.
 - Toys must be made out of material that can be cleaned and disinfected or laundered, and should be able to withstand frequent cleaning and disinfection.

- Keep toys in good repair and inspect them for damage.
 - Toys that are damaged, broken or have missing parts must be discarded, as this will compromise the effectiveness of proper cleaning and disinfection.

When a toy is mouthed or becomes contaminated by a child's cough, sneeze or runny nose, or if the toy appears dirty, it must be removed from use and not handled by another child until it has been properly cleaned and disinfected. For mouthed toys, check products to confirm they are appropriate for use on food contact surfaces OR use a mechanical dishwasher. Mouthed toys must be thoroughly rinsed with water following disinfection.

The frequency of cleaning and disinfection varies depending on the age group and the amount of handling:

- Toys in infant rooms must be cleaned and disinfected daily, at a minimum, as they are frequently mouthed and therefore more likely to be contaminated.
- Toys in toddler and pre-school rooms must be cleaned and disinfected, at a minimum, on a weekly basis.
- Toys in kindergarten and school-age rooms must be cleaned and disinfected, at a minimum, on a monthly basis.
- During an outbreak, all toys must be cleaned and disinfected daily or more frequently when visibly soiled.

Designated cupboards and storage containers used to store toys must be emptied, cleaned and disinfected as necessary.

Indoor play structures (e.g., playhouses/climbers) must be cleaned and disinfected as often as necessary. A thorough cleaning of the entire play structure must be done according to schedule. Frequency of cleaning is determined by the age group using the play structure.

Toys	Frequency	Method
Mouthed toys	After each use	Clean & disinfect
Infants (< 18 months)	Daily	Clean & disinfect
Shared plastic toddler toys	Daily	Clean & disinfect
Toddlers (18 months to 30 months)	Weekly	Clean & disinfect

Toys	Frequency	Method
Pre-school (30 months to 5 years of age)	Weekly	Clean & disinfect
Kindergarten & school age	Monthly	Clean & disinfect
Plush toys and dress-up clothes	Weekly	Launder

To clean and disinfect toys, we will use our dishwasher (in compliance with Ontario Food Premises Regulation O. Reg. 493/17).

For toys which cannot be used in the dishwasher, the two-compartment sink method will be utilized. When using a two-compartment sink method, washing and rinsing must be done in the 1st sink. Disinfection must be done in the 2nd sink.

Mouthed toys must be rinsed thoroughly with water following disinfection.

10. Sensory, Art & Crafts and Outdoor Play Activities

Play is essential for every child's development. However, sensory play materials can become contaminated with germs. It is important that child care centres take measures to create a safe, healthy environment for children during play.

When engaging in sensory play activities:

- Staff and children must wash their hands before and after participating in sensory play or arts and crafts activities.
- Do not eat or drink while participating in sensory play or arts and crafts activities.
- Sensory play bins that contain dry materials must be cleaned and disinfected after they are dumped and before replenishing.
- During an outbreak in the child care centre, all group sensory play must be paused until the outbreak is over. Sensory play items that were in use prior to the outbreak (e.g., play dough) must be discarded.
- All sensory play materials must be age-appropriate and safe for use by children.

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- Sensory play materials such as water, dry pasta, purchased sand, playdough and slime, clean snow, pine cones, twigs and leaves may be used.
 - Sensory and craft play materials such as sand, gravel and other soiled materials obtained from outdoor locations; meat trays, soiled egg cartons or toilet paper rolls; manure or other products containing possible fecal matter; or chemicals must not be used.
 - When considering sensory play and arts & craft materials refer to *Health Canada's Use arts and crafts materials safely* webpage.

Water Play Tables

- Staff and children must wash their hands before and after using the water play table.
- Toys used for water play must not retain water, as they can provide an environment for bacterial and/or mould growth.
- Toys used for water play must be cleaned and disinfected after each session.
- Water play tables must be emptied, cleaned and disinfected after each session.
- Fresh, clean water must be used for each session. When not in use, water play tables should be kept covered.

Playdough

- Staff and children must wash their hands before and after handling playdough.
- Homemade playdough or slime, due to its high moisture content, is more likely than store-bought playdough or slime to harbour and allow for the growth of microorganisms.
 - Used homemade playdough and slime must be discarded daily.
 - Unused homemade playdough/slime may be stored in the refrigerator for up to one week.
 - Store-bought playdough must be discarded according to manufacturer's instructions.
- If playdough is mouthed or if an outbreak is declared, it must be discarded immediately.

Sand Play

- Use only sand that is pre-packaged, sealed, and labelled as play sand. Sand must not be brought in from outdoors. Purchased sand must be silica-free, as the presence of silica can cause respiratory problems.
- If sand becomes wet from water, air dry the wet sand thoroughly overnight, before covering the play table.
- Food and animals must be kept away from the sand. If the sand becomes wet or contaminated from a substance other than water, discard it immediately.
- Sand for indoor sand tables must be replaced weekly, at a minimum, or more often if required. When the sand is emptied, the play table must be properly cleaned and disinfected before being refilled.
- Consider sun safety and limit exposure to sun when children are playing outdoors. Position outdoor sandboxes in a well-shaded areas when in use or, if not possible, provide a protective shade cover over the sandbox.
- Child care centres must rake and visually inspect sandboxes for signs of contamination and safety hazards before each use.

Food Sensory Play

- Certain food products, including cereal, dry pasta, rice, and dry beans, are sometimes used for sensory play.
 - If food items are used for sensory play, only dried food products should be used. Raw food products (e.g., raw flour, eggs) must not be used.
- Dried food products must be labelled and stored in a sealed container with a tight-fitting lid. These food items should not be intended for consumption, and must not be stored with food intended for consumption.
- Dried food products used in group activities must be discarded weekly. If the dried food product becomes wet or contaminated, it must be discarded and replaced.
- After use, when a sensory play table is emptied, it must be properly cleaned and disinfected prior to being refilled.

Natural Products

- Natural products, such as pine cones, twigs or leaves are sometimes used for sensory play activities.
- If natural products such as these are used for sensory play, each item must be assessed before being placed into circulation.

Arts & Crafts

- When choosing materials for arts & crafts, child care centres must use materials that are safe for children.
 - Read product labels and warnings.
 - Choose age-appropriate, non-toxic, non-allergenic, and non-edible arts & crafts materials.
- To help ensure arts & crafts materials are safe for children, refer to Health Canada's *Information for Art Class Teachers on Chemical Safety*.
- Materials used for arts & crafts must be stored out of reach of children when not being used.

Gardening

Gardening can be a wonderful learning experience for young children, giving them an opportunity to care for something over time and to develop an appreciation for nature.

Child care centres must:

- Use gardening soil and plants that are safe for children and staff.
 - Soil must not contain manure, or other products containing fecal matter or chemicals. Avoid the use of chemical pesticides and/or herbicides.
 - For more information regarding soil quality, identifying potential sources of soil contamination, or collecting and interpreting soil samples, please see *Toronto Public Health's soil and gardening guidelines*.
- Supervise children during gardening activities.
 - Do not allow children to place their hands or objects into their mouth or eat soil or plants during gardening.

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- Outdoor gardens must be located in an area that is safe for children.
 - Use gardening tools appropriate for children.
 - Have staff and children wash their hands with soap and water after participating in gardening activities.

When planning a garden it is important to consider previous and current land use practices of neighbouring properties. Some actions to consider include:

- Build a raised bed garden (child-sized plots) or use planters or pots.
- Protect soil from animals (e.g., mesh, fencing).
- Wash produce thoroughly.
- Peel root vegetables before you eat them.
- Eliminate stagnant water to prevent mosquito breeding sites.
- Select plants that are not poisonous. Special care should be taken in selecting those that do not cause allergic reactions.

11. Personal Items

For safe use, handling and storage of personal items, all personal from home items must be:

- Label and separately store personal items such as toothbrushes, combs, creams, ointments, wipes, hats, pacifiers and teething rings to prevent accidental sharing and to avoid cross-contamination with other children's personal items.
- Sharing and borrowing of personal items must not be permitted.
- Toothpaste, creams, ointments, and lotions must be dispensed in a manner that prevents cross-contamination and does not contaminate the original batch (e.g., using a single use applicator or a clean paper towel). Double-dipping must not be permitted.

Cubbies

- Individual cubbies or storage units are often used in child care centres as a way of storing children's personal items.
- Label cubbies with child's name.

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- Keep cubbies and storage areas in a sanitary manner. Cubbies should be emptied routinely for cleaning and disinfection.

12. Nap Time & Sleep Equipment

Sleep is an essential part of children's physical, mental and emotional health, and many child care centres schedule nap or sleep time as part of their programming.

Sleep equipment includes cribs, crib mattresses, sleeping cots, mats and bedding/linens. To ensure these items are not a potential source of infection, it is important that child care centres take IPAC measures:

- Children must be placed in a sleeping arrangement that minimizes the spread of respiratory infections.
- Child care centres should arrange cots at least 46 cm (or 18 inches) apart, and children placed in an alternating head-to-toe or toe-to-toe arrangement.
- Sleep equipment and bedding/linens must be labelled and assigned to a single child.
- Sleep equipment must be made of material that can be cleaned and disinfected. Crib mattresses, cots and mats must be cleaned and disinfected weekly and when needed (e.g., when soiled).
- Launder bedding weekly or more frequently if required. Before being reassigned to another child, sleep equipment must be cleaned and disinfected.
- When not in use, sleeping equipment and bedding must be stored in a manner that prevents contamination. Cover cots when not in use. Crib mattresses, cots, mats and bedding should be stored in a designated area, away from children's play areas to prevent children from playing with or climbing on them.

13. Laundry

Dirty clothing, linen and bedding can be a potential source of infection in child care centres. It is important to take appropriate precautions.

If laundry is done on-site or if an off-site laundering service is used, child care centres must ensure that [policies and procedures](#) include directions for the collection, transport, handling, washing, and drying of linen, bedding and soiled items (e.g., clothing contaminated with body fluids).

Staff must always complete a risk assessment and wear appropriate PPE when handling contaminated items, including bedding, linen or soiled clothing.

Key Points

- Soiled clothing must be sent home for laundering. Do not rinse, soak or wash soiled clothing.
- Always minimize shaking of any soiled clothing or laundry to prevent contamination of the surrounding area.
- When changing soiled cloth diapers or clothing, solid stool may be carefully emptied into the toilet. Soiled clothing should then be rolled and placed into a waterproof, sealed plastic bag that is labelled with the child's name.
- Store sealed bags containing soiled clothes for pick-up by the child's parent or guardian in an area that is inaccessible to children and separate from the food preparation area.

Laundering on site

- The laundry area must be in a designated location that is separate from the kitchen or food preparation areas.
 - Existing child care centres that launder in a kitchen area must ensure laundry is done at alternate times to food preparation. Surfaces must be cleaned and disinfected prior to food preparation and after laundering.
 - For new or renovating premises, Toronto Public Health requires laundering facilities to be separate from any food preparation area. A handwashing sink should be installed in the laundry area to allow child care staff to immediately wash their hands after handling laundry.
- The laundry area must be inaccessible to children.
- The laundry area, including appliances, storage areas and working surfaces, must be kept in a sanitary condition and routinely cleaned and disinfected.
- Store dirty laundry and soiled items separate from clean items in a covered and properly labelled basket, container or bag that is designated for dirty laundry.
- Store clean laundry in a clean, dry location away from dirty laundry.

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- Assign bedding (sheets and blankets) to each child and launder weekly or when soiled or wet.
 - Launder bedding, linens, and dress-up clothes in separate cycles from items used for environmental cleaning (e.g., cloths, mop heads).

14. Food Safety

Proper food handling practices within child care centres reduce the risk of foodborne illness, which is caused by eating or drinking foods that have been contaminated by bacteria, viruses, moulds or parasites. The symptoms of food borne illness may vary, but the most common symptoms include fever, stomach cramps, nausea, vomiting and diarrhea. Usually, these symptoms begin within hours after eating contaminated food, although in some cases may take days or weeks to appear.

Children are considered a high risk population because they do not have a fully developed immune system, and therefore are at a higher risk of experiencing severe health complications if they experience food borne illness. Report food poisoning illness by calling the reporting line at 416-392-7411.

To help keep children safe and healthy, it is important that child care centres take measures to ensure that food is prepared, handled and stored safely. Child care centres must have written policies and procedures in place regarding food safety and safe food handling practices.

Food from an Inspected Source

All food products purchased or brought in to the centre must be from an approved source (e.g., restaurants, supermarkets, bakeries) that is inspected or graded. Inspection results in the City of Toronto can be viewed on the *Dine Safe* webpage.

Child care centres should maintain a record of:

- The source of food (e.g., restaurant, supermarket or bakery)
- A description of the food item
- The date the food was brought into the child care centre, and,
- A copy of the receipt or invoice.

Centres that are not catered should have recipes, menus and proof of purchase from an inspected facility for all food brought into the centre.

Parents can provide food for their own child, for example, expressed breast milk or food required for special dietary restrictions. Food containers sent in with a child must be clearly labelled with the child's name and date of delivery.

Catered Food

Child care centres that are catered must ensure that the caterer is an inspected premise and should obtain a copy of the inspection report from the catering company.

Upon receiving catered food, child care settings must record the temperatures of hazardous foods in a log book. This temperature must be checked again prior to serving. Below are some questions to consider when looking for a catering company for your child care centre:

Learning about a prospective food caterer

- Ask and confirm that the caterer is inspected by a local public health unit (PHU) and ask to see most recent food safety inspection report (most caterers will be inspected two or three times per year). Do not accept food from a source that is uninspected.
- Ask where the caterer sources their food items from (e.g., meats, eggs, fish, dairy, vegetables etc.).
- Ask for references and follow-up with them.
- Ask the caterer how they will meet individual dietary requirements (religious or allergies).
- Ask how food will be kept hot or cold during delivery and set clear expectations: Hot foods must be 60 degrees Celsius (140 degrees Fahrenheit) or higher. Cold foods must be four degrees Celsius (40 degrees Fahrenheit) or lower.
- Ask about hot and cold holding equipment that may be required at your centre.
- Visit the catering facility before committing to a contract.
- Contact the local public health unit for advice.

At your centre

- Visually inspect all food items at the time of delivery (e.g., packaging is intact so foods are covered and protected from sources of contamination).
- Record temperature of all hot and cold foods (including drinks, e.g., milk).
- Record the temperature of hot foods and cold foods before serving.
- Turn on hot and cold holding units (if used) prior to delivery.
- Maintain records of the temperatures taken on a log sheet.
- Hot foods must be 60 degrees Celsius (140 degrees Fahrenheit) or higher. Cold foods must be four degrees Celsius (40 degrees Fahrenheit) or lower.
- Have a plan to reheat or cool hazardous foods.
- Have a back-up meal plan for situations where food is not delivered (e.g., food not delivered, or a there is an issue with a delivery).

Temperature Control

The “Danger Zone” is a temperature range in which bacteria that cause foodborne illness can multiply at its quickest. This range is between 4°C (40°F) and 60°C (140°F). To prevent bacteria from growing to dangerous levels, every effort must be made to prevent food from being stored within this temperature range.

- When taking a temperature of food with a probe thermometer, ensure the thermometer is located in the centre of the food for an accurate reading. The probe thermometer must be washed, rinsed and sanitized between uses.
- Refrigeration equipment must be maintained in such a way that potentially hazardous foods are stored at 4°C (40°F) or lower at all times (O. Reg 493/17). Refrigeration equipment must provide adequate space, and each refrigerator must be equipped with an accurate and easily readable thermometer.
- Maintain hot holding equipment to keep hot foods above 60°C (140°F).

Utensils Sanitation

To effectively clean and disinfect utensils and dishes, use either the manual dishwashing method or a mechanical dishwasher.

The manual dishwashing method can be conducted in two ways:

- Two-compartment method: the wash and rinse steps are shared within the first sink. The second sink is used for immersing dishes and utensils fully in a sanitizing solution.
- Three-compartment method: dedicates one sink to each action. One for washing, the second for rinsing, and the third for sanitizing.

Centres equipped with a mechanical dishwasher must ensure that it is in compliance with *O. Reg 493/17 Food Premises*. Mechanical dishwashers must be equipped with accurate and easily readable thermometers to determine effective wash and rinse cycle temperatures:

- Wash temperature between 60°C to 71°C
- Rinse temperature of at least 82°C for at least 10 seconds (or a chemical rinse solution in compliance with the standards set out in the *O. Reg 493/17*)
- If the above cannot be confirmed, the dishwasher must be NSF certified as per *O. Reg 493/17*.
- If you have questions regarding mechanical dishwashers contact Toronto Public Health by calling 416-338-8410 or emailing publichealth@toronto.ca and ask to speak with a public health inspector.

Food Recalls

Operators must be aware of the foods that are being served to children within their child care centre. Toronto Public Health advises child care operators to subscribe for Health Canada's Recalls and Safety Alerts. Food recall warnings and allergy alerts can prevent food borne illnesses or a serious allergic reaction.

Food Allergies

Severe allergic reactions (e.g., anaphylactic reaction) occur when the body's immune system reacts strongly to a particular substance. These reactions may be caused by food, insect stings, latex and medications. Health Canada and the Canadian Food Inspection Agency (CFIA) have identified common food allergens including: eggs, milk, mustard, peanuts,

crustaceans and molluscs, fish, sesame seeds, soy, sulphites, tree nuts and wheat.

Anaphylaxis is a serious, potentially life-threatening medical emergency that must be recognized and responded to promptly. Work closely with the child and parent/legal guardian to gather as much detail as possible regarding the allergen(s), the child's reaction to the allergen(s), and the steps to take if an allergic reaction occurs. As per the *Ontario Regulation 137/15* made under the Child Care & Early Years Act (CCEYA), each child care centre must have an anaphylactic policy that includes the following:

- A strategy to reduce the risk of exposure to anaphylactic causative agents including rules for parents who send food with their child to the centre or premises.
- A communication plan for the dissemination of information on life-threatening allergies, including anaphylactic allergies.
- Development of an individualized plan for each child with an anaphylactic allergy.
- Training on procedures to be followed in the event of a child having an anaphylactic reaction.

For more information regarding the above information, contact the Ministry of Education by calling 416-325-2929 or visit the following webpages:

- Food Allergy Canada, Child Care Centres
- Ontario Ministry of Education, Supporting Students with Medical Conditions
- Toronto Public Health, Food Allergies

Key Points

- All licensed child care centres who serve food to children must be in compliance with the Ontario Food Premises Regulation (O.Reg 493/17) and the Health Protection and Promotion Act (HPPA).
- All food products served by the centre must be from an approved source (e.g., restaurants, supermarkets, bakeries) that is inspected. Recent inspection results in the City of Toronto can be viewed on Toronto Public Health's *DineSafe* webpage.
- Have at least one certified food handler present during hours of operation.

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- Store food in a manner to prevent contamination from hazardous materials, such as cleaning and disinfecting solutions, insecticides and other contaminants.
 - All individuals must wash their hands prior to handling food. Prevent physical handling of the food as much as possible by using utensils such as tongs.
 - Maintain a record of the source of food (e.g., restaurant, supermarket or bakery), a description of the food item, the date the food was brought into the child care centre, and a copy of the receipt or invoice.
 - All food contact surfaces, utensils and food preparation materials must be washed, rinsed and sanitized between uses and whenever contaminated. Use sanitizer in the food preparation areas that complies with the standards set out in O. Reg 493/17 Food Premises.
 - Centres that are not catered should have recipes, menus and proof of purchase from an inspected facility for all food brought into the centre.
 - Areas where food preparation occurs (e.g., kitchens) must be equipped with a designated hand washing sink.
 - Designated hand washing sinks must be equipped with:
 - Hot and cold running water under pressure
 - Liquid soap in a dispenser
 - Paper towels or a mechanical hand dryer
 - A hand washing information sheet

Four Steps for Food Safety

To prevent foodborne illness from occurring, child care centres can follow four simple steps for food safety:

1. Clean – hands, utensils, surfaces, fruits & vegetables

- Staff must always wash their hands before and after handling food.
- Child care staff should wear clean clothing. Hair must be tied back and fingernails cut short.
- Food surfaces must be non-absorbent and easily cleaned and sanitized. Cutting boards, knives and other cooking utensils must be washed, rinse and sanitized between uses. Other surfaces, such as

countertops, refrigeration equipment, hot holding equipment and microwaves must be washed and sanitized as often as necessary to prevent contamination.

- Raw fruits and vegetables must be washed and scrubbed under a stream of cold running water before being cut or handled. Raw meat and eggs must not be washed prior to handling, as this increases the risk of contamination of the food preparation area and surfaces. Food packaging, such as lids of cans and jars, should be washed prior to opening.

2. Separate – don't cross-contaminate

- This is to ensure harmful germs are not spread to or from other foods.
- Raw foods (meat, seafood and eggs) must be kept separate from ready-to-eat (RTE) foods such as cheese, fruits and vegetables.
- Different coloured cutting boards for meats and vegetables can be helpful in reducing the risk of contamination.
- Separate utensils and platters for raw and cooked food is required.

3. Cook – ensure food is cooked to the right temperature

- Food is safely cooked once the internal temperature has reached a temperature high enough to kill or inactivate pathogens than can cause foodborne illness.
- Child care centres should be equipped with a probe thermometer to measure hot holding temperatures and cooking temperatures of foods. This thermometer must be washed, rinsed and sanitized between uses.
- Child care centres are encouraged to document any food temperatures taken. A food temperature log should include:
 - The date
 - Type of food
 - Final cooking temperature (if applicable)
 - Time of food arrival (for catered centres) and,
 - Serving temperature.
- Visit Toronto Public Health's *Food Preparation* webpage for more information.

4. Chill – refrigerate promptly

- Food that is not going to be consumed immediately must be properly cooled, as bacteria multiply fastest in the “danger zone” – between 4°C (40°F) and 60°C (140°F). This includes both freshly cooked and raw foods. Keep the fridge at 4°C (40°F) or colder.
- To effectively and safely cool warm foods, they should be divided into several shallow containers to allow for quicker cooling. These foods must be refrigerated within 2 hours of cooking, but it is recommended to refrigerate as soon as possible. Ensure refrigeration equipment is not over crowded to allow for proper air circulation and more consistent cooling.
- Frozen food must be thawed either in the refrigerator or in cold running water for a short period of time. Foods must not be thawed on the counter or under hot running water.

15. Safe Water

Safe drinking water is essential to public health. Child care centre operators are responsible for providing safe and potable water to children and staff.

Under the Ontario Safe Drinking Water Act, child care centres are identified as being a designated facility. This means that drinking water within child care centres is regulated by the Ministry of the Environment, Conservation and Parks, and there are specific sampling, testing, treatment and reporting requirements that apply. For questions, contact the *Ministry of the Environment, Conservation and Parks*.

If a child care centre becomes aware of an adverse water quality incident, they must contact:

- The Ministry of the Environment, Conservation and Parks at 416-325-3000 or 1-800-268-6060
- Toronto Public Health Central Health Line at 416-338-7600

In the event of a Boil/Drinking Water Advisory or a water disruption/shortage, have a contingency plan. This plan should include:

- Identifying safe alternative sources of water, such as bottled water, and how much water will be needed for the setting, including water for drinking, hand washing, and cleaning

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- Identifying steps to take if the centre is closed due to a prolonged water disruption

In the event of a water interruption during hours of operation, child care centres should consider:

- Using safe, alternative sources of water, including water for drinking, handwashing, and cleaning
- Discontinuing any food preparation on site
- Having food prepared in advance or using a catering service
- Using single-use, disposable plates and utensils for any food consumption
- Suspending operations if the repair or interruption has compromised water quality or safety, or if the duration of interruption exceeds a day of operation
- If you have questions, contact Toronto Public Health by calling 416-338-8410 or by emailing publichealth@toronto.ca and ask to speak with a public health inspector
- Once the water interruption has concluded, child care centres should advise TPH

For more detailed information, refer to our *Safe Water Drinking Act Policy*.

16. Expressed Breast Milk

Breast milk supports the optimal growth and development of infants, and is a complementary addition to a young child's diet beyond one year.

Support parents/caregivers in their decision to provide expressed breastmilk for their infant or child. Develop policies for safely storing, thawing, warming and administering expressed breast milk (EBM). For more information, refer *Toronto Public Health's Breastfeeding* webpage.

Follow safe practices when handling EBM:

- EBM supplied for a child must be stored in a designated container that is clearly labeled with the child's name, date of expression and delivery.
- Store in a refrigerator or freezer when received, and keep separate from other foods. See *Toronto Public Health's Storing Expressed Breast Milk guidelines* for more information.

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- Supervise children drinking EBM from a cup to prevent unintended consumption by other children
 - Discard any leftover EBM not consumed by the intended child.
 - Practice hand hygiene before and after handling EBM.
 - Wear gloves while handling EBM (e.g., dispensing into a cup from a container).
 - Contact the Toronto Public Health Communicable Diseases Surveillance Unit at 416-392-7411 immediately if a child consumes EBM intended for someone else.

17. Pest control

Exposure to pests such as mice, flies, rats and cockroaches pose a potential health risk as they are known to carry disease, contaminate food supplies and trigger or worsen asthma symptoms in some individuals. In some cases, pests can also cause structural damage.

It is important that child care centres implement and follow an integrated pest management (IPM) system. An IPM system emphasizes pest prevention and recognizes that pests may only survive and thrive if access to food, water and shelter is available.

Implement an IPM system which includes the following practices:

- Use pest-proofing strategies to keep pests out of the building.
 - Inspect the exterior structure of the building. Eliminate pest's access into the building by addressing structural issues, repairing and replacing screens, and sealing holes, cracks or other openings.
 - Child care centres should have screened and tight-fitting doors and windows to protect against entry.
- Remove access to food, water and shelter through enhanced cleaning and disinfection practices.
 - Clean all rooms, closets, cupboards and storage areas regularly.
 - For all food preparation areas, ensure that a cleaning schedule is in place to eliminate food debris.
 - Clean under stoves, refrigerators and dry storage areas on a regular basis.

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- Ensure that clutter and accumulation is reduced both inside and outside of the facility, in order to eliminate places where rodents can live.
 - Ensure food and sensory play materials (e.g., dried pasta) are stored in labelled plastic containers with tight-fitting lids.
 - Store garbage in pest-proof containers with lids.
 - Always inspect dried food and food deliveries for the presence of pests or rodent droppings. If pests or rodent droppings are found in food products, throw out the entire product immediately. Ensure that all surfaces contaminated by pests are cleaned and disinfected.
 - Work with a licensed pest control company.
 - Continuously monitor for pest activity. Notify a licensed pest control operator if any pest activity is observed in the premises such as, live or dead rodents and/or their feces.
 - Schedule routine visits both for prevention and during instances when the child care centre is experiencing an infestation.
 - Pest control services that include the application of a pesticide or rodenticide must be arranged at a time when children are not present in the facility.
 - Operators should ensure that any contract with a pest control service includes an inspection system, treatment procedures, record keeping, and follow up.
 - Keep pest control records on-site.
 - When a public health inspector conducts an inspection in a child care centre, they will assess for any evidence of pests or an infestation. Record the dates and times that pest control services were provided and ensure that documentation is kept on the premise for at least one year.
 - Operators must ensure that all pest reports are made available to the public health inspector upon request.

18. Pets and animals

Interacting with animals can be a joyful and valuable learning experience for young children, but it is important child care centres take steps to ensure children stay safe and healthy during these interactions:

- If your child care centre chooses to have an animal on-site (resident or visitor), consult the Ministry of Health and Long-Term Care's Recommendations for the Management of Animals in Child Care Settings.
- Prior to an animal visiting or residing in the child care centre, all staff must be educated regarding care of the animal and IPAC measures related to animal contact.
- Operators must be aware of which animals are permitted in the child care centre.
- Staff and children must wash their hands before and after interacting with animals and/or their environment.
- Children must be supervised when interacting with animals. Do not allow children to kiss or put their face close to animals. Do not allow children to approach animals while they are eating, drinking, or sleeping.
- Animals visiting or residing in the child care centre must be healthy, show no signs of disease, and have appropriate clearance from a veterinarian. All animals must be up-to-date on their rabies vaccinations. A copy of the certificate of immunization must be readily available.
- Animals visiting or residing in the child care centre must be trained and have an appropriate temperament around children.
- Keep animal enclosures and equipment away from children's sleeping areas, food preparation and children's eating areas.
- Assign staff to maintain animal enclosures in a clean and sanitary manner at all times.
- Animal enclosures must be included in the child care centre's routine cleaning and disinfection schedule.

Animal Bites, Scratches or Other Exposures

- If a child or staff is bitten or scratched by an animal while attending the child care centre, seek medical attention. Always call 911 in an emergency, such as a severe or critical injury.

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- If a child has been bitten or scratched, contact the child's parent or guardian immediately and inform them that you will be reporting the incident to Toronto Public Health. Then the following steps:
 1. If possible, collect animal owner/custodian information (name, address and phone number).
 2. Immediately wash the bite or wound with soap and water for at least 15 minutes.
 3. Apply an antiseptic to the wound.
 4. Seek medical attention from a healthcare provider to assess your risk and discuss treatment options.
 5. If you would like to report an animal bite or scratch to Toronto Public Health, submit an Online Animal Exposure Report.
 - For more information, visit *Toronto Public Health's Rabies Prevention and Control* webpage.

19. Prevention of Mosquitos and Tick Bites

West Nile Virus

West Nile virus (WNV) is a potentially serious illness that is transmitted to humans through the bite of an infected mosquito. Although the risk of becoming infected with WNV in Toronto is low, protecting ourselves against mosquito bites can help reduce the risk even further. While anyone can be infected with WNV, the chances of having a severe illness are greater as you get older or if you have a weakened immune system. For more information, visit *Toronto Public Health's West Nile Virus* webpage.

Lyme Disease

Lyme disease is transmitted through the bite of an infected blacklegged tick. Tick populations are expanding in Canada, and blacklegged ticks have been found in Toronto, which suggests that these ticks are becoming established here. However, the risk of getting Lyme disease in Toronto is considered to be low. For more information, visit *Toronto Public Health's Lyme Disease* webpage.

Prevent Mosquito and Tick Bites

From spring to fall, when participating in outdoor activities, follow these simple steps to help protect children against WNV and Lyme disease:

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- Cover up and wear light-coloured clothing, long-sleeve shirts and pants outdoors, when weather permitting. Light coloured clothing makes ticks easier to spot.
 - Avoid wooded or bushy areas when spending time outdoors. Watch for signs posted at park entrances that have warnings for ticks in the park.
 - Move children's swing sets and sandboxes away from the woodland's edge and consider placing them on a woodchip or mulch foundation. Remove leaf litter, brush and weeds from the edge of the property. Keep tree branches and shrubs trimmed to let in more sunlight.
 - Drain any standing water. The most effective way to keep mosquitoes away is to drain or remove areas of standing or stagnant water, which is where mosquitoes like to breed. Drain or clean up any containers where water may collect, including toys, planters, storage bins, eaves troughs and roof gutters.
 - Ensure the centre has tight-fitting screens on windows and doors to prevent any entry of mosquitoes or other pests.
 - Child care centres are advised to obtain written permission from parents or legal guardians before applying insect repellents on children. If insect repellents are used on children, the product must not contain more than 10% DEET. Do not use on children under six months of age. Always follow instructions on insect repellent labels carefully. For more information regarding the use of insect repellents, visit *Toronto Public Health's Using Insect Repellent* webpage.

If a tick is found, prompt removal is essential to reduce the spread of Lyme disease. Contact the child's parents/guardians if a tick is found on a child to discuss removal of the tick and to pick up their child if necessary.

For information regarding tick removal, identification and follow up, visit *Toronto Public Health's Lyme Disease* webpage. Additional information is available from *Health Canada's Lyme Disease: How to Remove and Identify a Tick*.

20. Occupational health and safety

Occupational health and safety involves health and safety aspects in the workplace. The Ministry of Labour (MOL), Training and Skills Development directly oversees and enforces all matters relating to occupational health and safety in workplace settings.

Infection Control Practitioners employed by the MOL review requirements and provide consultation on IPAC issues in the workplace. Their work includes occasional audits of “Health Care Facilities,” and, although child care centres are not defined under *the Health Care and Residential Facilities Regulation*, the MOL has set precedent by applying this regulation to work settings where IPAC is a key component of that work setting. In order to comply with occupational health and safety legislation, activities in the child care centre may require the use of PPE, including gloves, masks, eye protection and gowns. Operators may also be required to report staff cases to the MOL.

Additionally, the *Health Protection and Promotion Act (HPPA)*, as well as sections of the *Ontario Public Health Standards*, require local public health units to investigate and alert the MOL with respect to occupational health hazards.

Under the *Occupational Health and Safety Act (OHSA)*, employers must take every precaution reasonable in the circumstances to protect the health and safety of workers. This includes precautions to protect workers from exposure to infectious diseases:

- Provide access to appropriate PPE for use when required
- Wear appropriate PPE for the type of activity (e.g., rubber gloves for cleaning and disinfection versus medical-type gloves for diaper changing)
- Provide training (e.g., routine practices, the correct use of PPE etc)
- Ensure proper donning (putting on) and doffing (taking off) techniques are practiced
- For more information, visit the Ministry of Labour, Training and Skills Development webpage.

21. Biting Information

Biting incidents can occur among young children in child care centres during play or if they become upset. Most bites do not break the skin and are unlikely to cause infection. In addition, the risk of Hepatitis B, Hepatitis C or HIV transmission in child care centres is extremely low. When bites do break the skin, both children involved in the incident need proper assessment and management.

Be Prepared Before a Bite Happens

- Ensure your facility has written policies for managing child and staff exposures to blood and body fluids, including bites.
- Ensure staff have received training for the proper care of bite wounds.
- Ensure first aid equipment is readily available.
- Ensure staff are immunized against Hepatitis B.

If the skin is not broken, clean the wound with soap and water, apply a cold compress and sooth the child who was bitten.

If the Skin is Broken

- Observe both children to see if there is any blood involved.
- Allow the wound to bleed gently without squeezing.
- Clean carefully with soap and water and apply first aid as per your policy.
- Inform the parents of both children as soon as possible (preferably within two hours of the incident).
- Advise both children's parents to contact their health care provider regarding post-exposure immunization and advice.
- If either child has Hepatitis B, C or HIV, report the incident to Toronto Public Health as soon as possible and ensure confidentiality of the children and parents is respected.

Tips to Reduce Biting Incidents

- Teach children not to bite. When children are old enough to understand, teach that biting hurts and can be dangerous to them and to the person they bite.

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- Do not pretend to bite children or let children bite you in play. Do not bite children back if they bite as this will teach them to bite.
 - Reinforce a “no biting” rule at all times.
 - Young children are still learning self-control. Show children how to express anger with words like “no” or “I don’t like that” instead of with biting.
 - Redirect or distract children if you see a problem developing with a playmate.