The Thunder Bay District Health Unit ensures that infection control programs are in place in all day nurseries that are licensed for more than 5 children. Staff from the Thunder Bay District Health Unit:

- Provide consultation on the development of infection control policies and procedures such as hand hygiene, respiratory etiquette, immunization, health evaluation of children and staff and communication with parents.
- Provide inspection of the premises at least once per year to include diaper and toilet routines, general housekeeping practices and to ensure the existence of safe drinking water, safe food and sanitary facilities.
- Provide annual in-service education/consultation opportunity for basic infection control.

INFECTION CONTROL

- Routine Practices
- Hand Hygiene
- Respiratory Etiquette
- Toys
  - Larger Toys
  - Plush Toys
  - Mouthed Toys
- Sleep Equipment
- Toothbrushing Program
- Children’s Personal Item Storage
- Dramatic Play Clothes and Accessories
- Sensory Play and Motor Skill Development Items/Activities
  - Sand boxes
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- Wading/Kiddie Pools
- Pets & Childcare Centres
- Potty Chair Use and Procedures
- Toileting Use and Procedure
- Diapering Procedure
- Safe Water Temperature for Hand Washing

CLEANING and SANITIZING/ DISINFECTION in CHILDCARE CENTRES

- Cleaning and Sanitizing/ Disinfection Checklist
- Chemical Sanitizers and Disinfectants
- Chemical Sanitizers and Disinfectants – Food Areas
- Occupational Health and Safety Concerns
Common Childhood Infections – A Guide for Principals, Teachers and Child Care Providers contains additional information on the following topic and can be found at TBDHU.COM:

- How Infection Spreads
- The Basics of Infection Control
- Guidelines for Exclusion
- Reportable Disease List
- Reporting Communicable Disease
- Common Childhood Infections Chart
- Hand washing Procedure
- Guidelines for Handling of Blood or Body Fluids

The Health Unit’s Enteric Outbreak Guideline resource contains additional information if you suspect an increase in the number of children presenting with enteric like symptoms. A copy is available from your public health inspector.

INFECTION CONTROL

Routine Practices
Routine practices must be incorporated into the daily practice of every childcare centre. An effective infection control program will include, but is not limited to, written policies and procedures for managing child and employee illness, hand hygiene, diaper changing, environmental sanitation, immunization, and communicable disease management.

Refer to the Guidelines for Handling Blood or Body Fluids fact sheet found on page 17.

Hand Hygiene
Hand Hygiene is a general term referring to any action of hand cleaning. Hand hygiene relates to the removal of visible soil and removal or killing of transient micro-organisms from the hands. Hand hygiene can be accomplished using an alcohol based hand rub or soap and running water.

Hand hygiene, when done correctly, is the single most effective way to prevent the spread of infectious diseases. Proper hand washing technique is easy to learn and can significantly reduce the spread of infectious diseases among both children and adults. It is important to encourage and help children to wash hands before eating, after playing outdoors or with pets, after using the bathroom and after blowing their noses.

Even though hands may appear to be clean, they can still carry germs. Don’t assume that children know how to wash their hands properly. Supervision, especially in a childcare setting, is essential in forming good hand washing habits.

Antibacterial soap is not necessary or recommended for hand washing. Regular liquid soap in a proper dispensing container should be used until they are empty and then cleaned before refilling. A separate garbage can must be located next to the hand washing sink to dispose of paper towel after use. This garbage can is to be designated for this purpose only and not used for the disposal of any other items.
A variety of hand sanitizers are available for purchase on the market. When purchasing products for your childcare centre, ensure they have a DIN number. The active ingredient must be alcohol at 60% to 90% for it to be effective. Non-alcohol based waterless antiseptic agents are not recommended for hand hygiene and are not to be used. Alcohol based hand rubs (hand sanitizers) are effective if your hands are not visibly dirty. If they are visibly dirty, then you need to use soap and water. Your hands are considered visibly dirty and must be washed with soap and water while working in the kitchen with food and after toileting.

Alcohol based hand rubs (hand sanitizers) are safe for children to use. The alcohol content of the product completely evaporates in 15 seconds. It is important to let children know that it should not be swallowed and supervision is important. It is also important to store it safely so children cannot access it without an adult. After the alcohol evaporates, it is safe for children to touch their mouth or eyes.

Some common mistakes that are to be avoided in childcare settings:

- DON’T use a single damp cloth to wash a group of children’s hands.
- DON’T use a standing basin of water to wash or rinse hands.
- DON’T use a common hand towel. Always use disposable towels in day care or food preparation settings.

Please see pages 18 and 19 for the hand washing and hand sanitizer fact sheets from the Ontario Ministry of Health for more information. Additional information is available at TBDHU.COM (type “hand washing” into the search bar).

**Respiratory (Cough) Etiquette**

**Stop the spread of germs that can make you and others sick!**

Influenza (flu) and other serious respiratory illnesses like respiratory syncytial virus (RSV), whooping cough, and severe acute respiratory syndrome (SARS) are spread by coughing, sneezing or unclean hands.

To help stop the spread of germs:

- Cough or sneeze into your upper sleeve or elbow not your hands.
- Cover your mouth and nose with a tissue when you cough or sneeze.
- Put your used tissue in the waste basket.
- Wash your hands often with soap and warm water for 15-20 seconds.
- If soap and water are not available, use an alcohol-based hand rub.

Please see page 20 for a cough etiquette fact sheet. Additional information is available at TBDHU.COM (type “hand washing” into the search bar).
Toys

Toys and play based learning are an integral part of childcare. Toys from an infection control perspective are an excellent vehicle for the spread of disease causing micro-organisms. Hand Hygiene is the single most important way to prevent the spread of infection therefore practicing and encouraging hand hygiene before and after playing with toys is critical.

In general, the material and design of a toy must be age appropriate. All toys and play materials must be durable, easy to clean and safe. Toys that are easily cleanable can be shared; otherwise they must be dedicated to a single child. To facilitate cleaning, toys should be smooth, nonporous, non-textured and able to withstand rigorous mechanical cleaning and repeated exposure to disinfectants. Toys that can withstand heat can be effectively cleaned and then sanitized (disinfected) by using a mechanical dishwasher.

Written procedures regarding the frequency and method for cleaning toys must be available for staff at all times. A cleaning schedule must be in writing indicating how cleaning and disinfecting should take place and posted within the designated program area. Staff, who clean and disinfect toys, should follow manufactures recommendations. Toys must be inspected for damage, cracked or broken parts, as these may compromise cleaning. Any toy that is found to be damaged, cracked or broken must be discarded or repaired where applicable.

It is beneficial to limit the amount of toys children have access to at one time in any given program for cleaning and disinfecting to be manageable. The amount of cleaning and disinfecting of toys depend on both frequency of use/handling and age of the child. The following outlines the cleaning and disinfecting requirements based on frequency of use and age:

**Infants and toddlers:** All commonly touched toys used in programming are cleaned and disinfected or laundered at the end of each day. This does not apply to toys that have been mouthed (see the section below “Mouthed Toys” for specific requirements).

**Pre-schoolers/School Aged:** All commonly touched toys used in programming are cleaned and disinfected or laundered minimally each week.

**Larger Toys**

Larger toys such as playhouse/climbers/activity centres must have their high touched surfaces cleaned and disinfected at the end of each day when in use. High touched surfaces (generally horizontal surfaces) are those that have frequent contact with hands. A thorough cleaning of the entire playhouse/climber/activity centre should be done weekly at a minimum.

**Plush Toys**

Commonly used plush toys (i.e. dolls/puppets) are not be used unless they can be properly cleaned and sanitized. To meet this requirement all plush toys must be laundered in a washer and hot dryer.

**Mouthed Toys**

Toys that have been mouthed by a child or otherwise contaminated by body fluids must be cleaned and disinfected after the play session with that child. Avoid small toys with the age group that frequently mouth objects.

When a toy is mouthed/contaminated with bodily fluids:

- Remove the toy from the child after the play session
- Place it in a bin set aside specifically for mouthed toys
- Ensure the bin is labelled to prevent the toy being given to another child
- Clean and disinfect or launder the mouthed/contaminated toy
Sleep Equipment
Sleep equipment must be assigned/designated to a single child and labelled or numbered to ensure they are used only by the child assigned. All mats/cots and bedding must be cleaned and disinfected minimally once per week and prior to reassignment. Sleeping mats/cots and bedding must be stored in a manner that will prevent contact with one another.

Toothbrushing Program
- Label each toothbrush with the child’s name; use tape on the handle or an indelible marker.
- Do not clean or disinfect toothbrushes.
- Dispose of and replace with a new toothbrush
  - on a regular basis.
  - if a toothbrush makes contact with another toothbrush
  - if the ownership of the toothbrush is in question.
- Dispose of and replace with a new toothbrush if a child has been ill to reduce the risk of re-infection.
- Store toothbrushes out of reach of children.
- Prevent cross-contamination by ensuring toothbrushes are NOT in contact with one another.
- Store toothbrushes in a freestanding manner. If necessary, they can be placed against surfaces that are non-porous and washable. Surfaces must be cleaned & disinfected daily.
- Allow toothbrushes to dry between brushings. If necessary, lay brushes on paper towelling to dry, before covering bristles with individual brush covers.
- Hang a toothbrush on a peg board to dry as long as the toothbrush is not dripping on another toothbrush below.
- Clean and disinfect any toothbrush holders on a regular basis.
- Ensure the tube of toothpaste does not come into contact with the head of the toothbrush, unless the child has their own tube. Instead, apply a pea-sized amount to a small piece of paper towel and then apply the toothpaste to the child’s brush.
- Ensure toothpaste is dispensed by staff, not a child.
- Do not apply more toothpaste to a child’s brush once the original amount is gone.

A poster outlining the information presented above is available for use in your centre. This poster can be downloaded from TBDHU.COM.

Children's Personal Item Storage
Each child must have a designated and labelled space for storage of their personal items. The storage space must be large enough to prevent touching of personal items within storage areas and can be achieved by baskets, cubbies or hooks.

Dramatic Play Clothes and Accessories
Dramatic play clothes and accessory items are allowed within a day care if they are made of a material that can be laundered; in a washer and hot dryer, or smooth and impervious so they can be cleaned and disinfected. Hair adornments that can be laundered must be designated to one child only and laundered after each use. All other items that can’t be laundered or disinfected must be designated to one child and/or sent home with the child i.e., foam hats, foam crowns, nylon wings, paper magic wands.

Examples:
- ITEMS ALLOWED: smooth plastic hats, material hats that can be laundered, lacquered wood wands, dresses, capes
- ITEMS NOT ALLOWED straw hats, wigs, feathered wings
- SINGLE USE CREATIVE ITEMS foam hats, nylon wings
Sensory Play and Motor Skill Development Items/Activities

Sensory play is a valuable part of early childhood programs. Children are provided with sensory materials used to enhance their sense of touch, sight, taste, smell and hearing. The use of sensory materials allows children the opportunity for hands-on and self-directed play to encourage the development of fine/ gross motor skills, creativity, self-esteem, social development and cognitive development. Regardless of the age of the child, closely monitor sensory activities.

Natural items such as, but not limited to, fall leaves, sticks, bark, wood shavings, confetti, rice, shredded paper, glass beads, feathers, buttons, sea shells and cotton balls are becoming more popular in daycare centres. Since they are ‘non-traditional’ items, some can be cleaned and disinfected or laundered while others cannot.

Items that can be cleaned and disinfected or laundered:
Items/activities that are smooth and impervious must be cleaned and disinfect or laundered daily if used within the infant toddler program or weekly if used within the pre-school/ school age program.
Examples of these items/activities may include: buttons, glass beads, sea shells.

Items that cannot be cleaned and disinfected or laundered:
Item/activities that are not smooth, impervious and are unable to be cleaned and disinfected or laundered may only be used if:
- children and staff practice hand hygiene immediately before and after play with the item/activity
- item/activity is discarded immediately if it becomes contaminated by bodily fluids (such as saliva or nose secretions) or is handled by a child/staff that became ill
- use is discontinued during enteric or respiratory outbreaks or if a child within the program is diagnosed with a communicable disease (i.e., hand-foot-and-mouth disease, slap-cheek).
- these items/activities are routinely replaced minimally twice per year.
Examples of these items/ activities may include: craft supplies (crayons, cotton balls, pipe cleaners), natural items (sticks, leaves, bark) and motor skill play (tissue paper, cardboard building blocks).

Sandboxes
The sand found outdoors is likely to contain harmful microorganisms. These harmful microorganisms may include: toxocariasis and toxoplasmosis. Toxocariasis is an infection due to a nematode (worm) frequently found in dogs and cats. Toxoplasmosis can originate from the feces of cats and dogs and is a protozoan infection. Infections are usually unapparent or mild, but may occasionally be significant.

Outdoor Sandboxes
- Outdoor sandboxes must be covered when not in use. This will prevent contamination from animals and persons.
- Check the box daily, before children play for the presence of animal feces and other undesirable materials.
- Remove the sand and replace regularly.
- The box itself should be cleaned and disinfected at the time the sand is being replaced.
- Children and staff must wash their hands before and after play.
Indoor Sandboxes
- Keep covered when not in use
- Only use sand that is purchased from an approved source. Other items such as dried beans, rice, noodles, paper, foam etc. can also be used. The size and shape of the item must be considered in terms of safety.
- Clean and sanitize regularly
- Children and staff must wash their hands before and after play
- Sand can be moistened for mud play provided:
  - Wet play sand is allowed to air dry before being used again. Keep table semi-covered to allow air flow for sand to dry. Mud/sand mixture may require mixing to decrease drying time. Wet sand can be a breeding ground for insects and can promote mould growth.
  - Sand used for mud play is replaced monthly at a minimum to ensure that introduced contaminants are removed.
Discontinue mud play during respiratory or enteric outbreaks, as the water and mud can promote the spread of disease. When sand or other items become contaminated with body fluids, discard, clean and sanitize before refilling the sandbox.

Water Play Safety
Water tables are at high risk for the potential spread of communicable diseases. Water tables can harbour harmful microorganisms that can be spread from person to person. Children must be constantly supervised during water play to avoid drinking the water and potential drowning occurrences.
- Stop all group water play during a suspected outbreak of illness, either gastrointestinal or respiratory.
- Exclude infants, toddlers and diapered children from group play at a water table. These children may use individual containers. These containers can be placed on the same table or on the floor to represent group play.
- Fill water table or individual containers with clean water before each use.
- Do not add bleach or other disinfectant to the water.
- Wash hands with soap and water before and after play; this applies to both children and staff.
- Do not use sponge toys.
- Discourage children from drinking the water or placing toys in their mouths.
- Exclude ill children with a cough, runny nose and skin or eye infections from group play
- Dump water after every use.
- Clean and disinfect the water table, all containers and all toys after each use.

A poster outlining the information presented above is available for use in your centre. This poster can be downloaded from TBDHU.COM.

Wading/Kiddie Pools
Wading/kiddie pools are small portable plastic pools that have the ability to retain water. These pools are not allowed in Thunder Bay District licensed childcare centres because childcare centres are unable to adequately control sanitation and the water may promote transmission of infectious diseases. The following points are of concern in terms of infection control and safety:
- Water is stagnant and warms in the sun. This increases the possibility of harbouring and promoting growth of harmful pathogens as the water is not re-circulated into a filtration system to properly disinfect and treat the water.
- Non diapered children may have accidents.
- Diapered children may not have adequate swimwear (plastic pants) and leakage can occur.
- Slipping, tripping and drowning hazards.
- Water may attract birds and mosquitoes if not emptied.
- Most incidents of drowning occur within a few meters of safety and with supervision. It only takes a few inches of water to drown.

It is recommended that sprinklers, hoses and individual buckets for cooling and interactive play are used under supervision.

**Pets and Childcare Centres**


**Potty Chair Use and Procedure**

The health unit strongly discourages the use of potty chairs in childcare centres. If a centre continues to use potty chairs, a utility sink must be installed within the washroom or in a location approved by the health unit. This location must be conveniently located to the washroom and used so appropriate cleaning and disinfecting can be achieved. Utility sinks must be cleaned at the end of each day as part of routine cleaning.

Potty chairs must be made of smooth, impervious, easy to clean material that has a removable waste container. Potty chairs must be kept in the washroom, not in playrooms or hallways. Potty chairs must be used in a location within the washroom where children cannot reach contaminated surfaces (e.g. toilets, etc.). Potty chair use procedures should be posted at each potty station to remind staff of the important steps to follow for each child in order to prevent the spread of communicable diseases. Glove use is not required for toileting if you can assist the child without direct hand contact with stool or urine.

The following is a sample procedure with minimal requirements that you must adapt to your centre and post at each potty station.

Glove use is not required for toileting if you can do it without direct hand contact with stool or urine. This procedure must be followed for each child to prevent the spread of communicable disease:

- Assist the child onto the potty if necessary.
- Clean your hands and put on gloves (optional) to assist the child with toileting.
- Remove gloves (if worn) and clean your hands.
- Help the child get dressed (or diapered).
- Wash the child’s hands with soap and water, then wash your hands using soap and water.
- Return the child to play within a supervised area.
- Put on gloves, empty content of the potty into toilet carefully to avoid splashing.
- Clean and disinfect potty at utility sink with an appropriate disinfectant following manufacturer’s recommendations.
- Remove gloves and wash your hand with soap and water.

A poster outlining the information presented above is available for use in your centre. This poster can be downloaded from TBDHU.COM.
Toileting Use and Procedure
Toileting use and procedures must be posted at each toilet to remind staff of the important steps to follow for each child in order to prevent the spread of communicable diseases. Glove use is not required for toileting if you can do it without direct hand contact with stool or urine. You must clean your hand and the child’s hands after each use.

The following is a sample procedure with minimal requirements that you must adapt to your centre and post at each toilet.

1. Assist the child onto the toilet if necessary.
2. Clean your hands. Put on gloves if you will be coming into contact with stool or urine.
3. Encourage child to wipe themselves from front to back and assist child if necessary.
4. Remove gloves (if worn) and clean your hands with soap and water.
5. Help the child get dressed (or diapered).
6. Wash the child’s hands with soap and water.
7. Return child to a supervised area.
8. If the toilet seat is soiled put on gloves, clean and disinfect toilet or toilet ring.
9. Remove gloves and wash your hands with soap and water.

A poster outlining the information presented above is available for use in your centre. This poster can be downloaded from TBDHU.COM.

Diapering Procedure
Diaper changing procedures must be posted in each changing area to remind staff of the important steps to follow for each child in order to prevent the spread of communicable diseases. Never leave a child unattended on the change table and ensure everything you need is within easy reach.

Glove use is not required for diapering or toileting if you can do it without direct hand contact with stool or urine. It is not a substitute for hand cleaning, you must wash your hands and the child’s hands after every diaper change. Do not rinse diapers, although a formed stool in a cloth diaper that is not stuck to the diaper or soiled clothing can be gently lowered into the toilet for flushing. Soiled clothes after a fecal accident or dirty cloth diapers must be placed in a sealed bag to be sent home at the end of the day to be laundered by the parent.

A separate plastic-lined receptacle/garbage can with a lid that can be removed in a manner that prevents contamination that is designated for soiled diapers only must be located next to the change table/diapering area.
The following is a sample procedure with minimal requirements that you must adapt for your centre and post at each change table:

1. Gather supplies before getting started.
2. Clean your hands.
3. Put on gloves (optional).
4. Remove the soiled diaper and fold inwards.
5. Clean child’s skin with a moist disposable cloth, wiping from front to back.
6. Remove gloves (if used).
7. Clean your hands.
8. Apply barrier product using a tissue to avoid contact with skin and product.
9. Diaper the child; wash the hands of the child and then your hands. Use soap and water.
10. Disinfect diaper change surface after each child, making sure that the entire surface remains wet for the required contact time. Follow manufacturer’s instructions for all solutions. Note: A visibly soiled surface must first be cleaned with soap and water, rinsed and then disinfected.
11. After discarding soiled diapers, dealing with soiled clothing/diapers or disinfecting diaper change surfaces, please clean your hands again at the sink using soap and water as they would be considered visibly soiled.

The above content has been adapted with permission from Durham Region Health Department.

A poster outlining the information presented above is available for use in your centre. This poster can be downloaded from TBDHU.COM.
Safe Water Temperature for Hand Washing
Hand hygiene—washing thoroughly with soap and water or cleaning with an alcohol-based hand rub—is the single most effective way to prevent illness. In childcare centres, staff and children must practice proper hand hygiene at all times and children should be monitored while washing their hands.

Hand washing is achieved using warm water, liquid soap and the action of rubbing or friction for a minimum of 15 seconds. In order for the soap to lather adequately, the temperature of the water must be warm. To prevent scalding, ensure that the water coming out of the tap at all children’s sinks is not any hotter than 49 °C or 120 °F. A temperature regulator may need to be installed on each hand sink in order to regulate the water or your hot water tank may need to be adjusted to ensure the water reaching the children’s hand sink is not exceeding 49 °C or 120 °F.

CLEANING AND SANITIZING/DISINFECTION IN CHILDCARE CENTRES
In any childcare centre, keeping work and play surfaces and objects as clean and free of germs as possible is an ongoing challenge. Proper cleaning requires regular, rigorous and enforceable routines.

Cleaning and Sanitizing/ Disinfection
Cleaning
Cleaning is the physical removal of visible dirt and organic matter from objects using detergent, warm water and friction. The rubbing action creates friction, which is required to remove any surface dirt/organic matter from the surface. Cleaning will physically remove some microorganisms (germs such as bacteria, viruses, parasites, molds), however; it does not kill those that may remain on the surface.

Cleaning is an important first step in removing disease-causing microorganisms from your childcare environment. If surfaces are not “clean”, persistent dirt and organic matter can coat and protect germs and may cause further heat or chemical disinfection processes to be ineffective.

Sanitizing/Disinfection
Sanitizing/disinfection is an important second step following cleaning. It greatly reduces the number of microorganisms from any surface. This process will destroy (kill) and reduce the number of microorganisms to an acceptable level. These processes do NOT sterilize items and all germs will never be removed. This process can be achieved by using either high temperature water (e.g. dishwashers at greater than 82°C/180°F) or chemical solutions.

What you clean and sanitize/ disinfect and how frequently often depends on the age and developmental stage of the children in your care. Generally, any object or area that is touched or used a great deal needs to be cleaned every day.

High Touch Surfaces (surfaces that have frequent contact with hands) require cleaning and disinfecting on a more routine basis. Examples include computer keyboards, doorknobs, light switches, most toys, cribs/ cots, wall areas around toilet and ledges/ surfaces within children’s reach. Low Touch Surfaces (surfaces that have minimal contact with hands) require cleaning and disinfecting on a less frequent basis. Examples include walls, ceilings, mirrors and floors.
The following checklist is included in the resource section, it indicates ‘minimal requirements’ that you may adapt to your centre and can be used as a guide.

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<th>Areas</th>
<th>After Each Use</th>
<th>Daily or more often if soiled</th>
<th>Weekly or more often if soiled</th>
<th>Monthly or more often if soiled</th>
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<td><strong>Eating</strong></td>
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<td>Table tops</td>
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Infectious Control Guidelines for Licensed Day Cares – page 12 of 20 – Thunder Bay District Health Unit – March
<table>
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Chemical Sanitizers and Disinfectants

Commercial Chemical Sanitizers/Disinfectants
Chemical solutions must be used in **STRICT accordance** with the manufacturer’s directions on product labels. Prior to purchasing or using a product check with your Public Health Inspector to ensure the product meets all requirements.

Information required on commercial chemical products by Federal legislation includes:

- Chemicals approved for use as “disinfectants” in Canada must either have a Drug Identification Number (DIN) or a Pest Control Product (PCP) number on their labels.
- Name of Product
- Name and Address of Manufacturer
- List of Active Ingredients
- Intended Use (e.g. floors, walls, sinks, toilets or **food contact surfaces** - see below)
- Directions for Use (examples):
  - Directions for proper dilution and application
  - Contact time required (e.g. time to achieve disinfection), generally 10 minutes
  - Requirements for cleaning prior to disinfection
  - Statement as to stability of product once diluted (e.g. prepare solution fresh daily)
  - Statement as to rinse requirements (e.g. for **food contact surfaces** “rinse with potable water”)
  - Directions for disposal of cleaning materials and waste
- Precautionary Statements (examples):
  - Keep out of reach of children
  - Use in ventilated area
  - Avoid contact with skin or eyes
  - Personal Protective equipment requirements

To ensure sufficient chemical strength prepare solutions fresh daily (UNLESS otherwise specified on the label).

Household bleach
- Solutions of household bleach must be prepared fresh daily.
- Store in a dark container, out of the light and away from children.
- Diapering Areas/ Restrooms
  - Mix 50mL of bleach to 5L of water (1/4 cup bleach in 1 gallon water).
  - For a smaller quantity mix 5mL of bleach in 500mL of water (1tsp bleach in 2 cups water)
  - This concentration is recommended in diapering areas and bathrooms.
- General Cleaning (not including diapering area/bathrooms)
  - Mix 1 Tbsp. in 1 gallon (approx. 15mL in 4L)
- Blood Spills
  - Refer to the Guidelines for Handling Blood or Body Fluids fact sheet found on page 17.

The above concentrations are recommended by the Canadian Pediatric Society.
Chemical Sanitizers and Disinfectants in the Food Areas

*Food Contact Surfaces*

The Ontario Food Premises Regulation 562 defines the following terms:

A “food contact surface” is any surface that food comes in contact with (e.g. kitchen surfaces, tables in day nursery used for eating, etc.).

A “utensil” means any article or equipment used in the manufacture, processing, preparation, storage, handling, display, distribution, sale or offer for sale of food except a single-service article.

Sanitizers/disinfectants in the food areas of your day nursery must meet specific chemical concentrations outlined in the above mentioned regulation. Your public health inspector is able to assist you in confirming if the product used in the food areas is compliant with the legislation.

In addition, test strips are also required to check that the concentration of your solution is correct. The type of test strip needed will be dependent on the type of chemical you choose to use in your day nursery.

Remember! No one chemical sanitizer/disinfectant may be ideal for every purpose - most have particular limitations and/or drawbacks.

Occupational Health and Safety Concerns

Ensure that all products are purchased/used/stored according to the Occupational Health and Safety Act.

Contact the Ministry of Labour with any questions or concerns specific to employee/employer requirements.

DID YOU KNOW?

Your public health inspector may be able to assist you in interpreting product labels and whether a new technology is effective and acceptable. However, if you require clarification regarding appropriate applications, dilutions, etc. contact the chemical manufacturer and request specific instructions in writing.

Please note: The above content has been adapted with permission from Durham Region Health Department.
SCHEDULED WATER SHUT-OFF OR WATER MAIN BREAK

If your childcare centre is notified of a scheduled water shut off or an unexpected water-main break you must immediately phone your public health inspector. At this time a risk assessment will be completed to ensure measures are in place to continue operation.

Each centre must be PREPARED and have a contingency plan with required supplies that can be implemented immediately. A public health inspector is available to assist and review your plan as needed. The following sections address food safety as well as infection control measures that must be implemented at this time.

If your centre can not meet all of the requirements of the contingency plan, or if your centre is currently in an Enteric OUTBREAK, it is CLOSED immediately and will not be opened until water is restored.

Food Safety
No food preparation is to take place at this time. Section 20 (1) (b&c) of the Ontario Food Premises Regulation 562 states that EVERY FOOD PREMISE SHALL BE PROVIDED WITH hot and cold water under pressure in areas where food is processed, prepared, or manufactured or utensils are washed. Therefore, the centre must cater in all food from an approved Food Premise (inspected restaurant, caterer etc.) which would include all meals, snacks and drinks if needed. If the shut off is scheduled, food can be prepared prior to the shut off and served.

It is recommended that all dishes used for meals, snack and drinks be single-use disposable or that your centre has an adequate supply of dishes on-site for all meals. Dishes that have been used and are soiled are to be put aside to be washed, rinsed and sanitized in the dishwasher or 3 compartment sink when the water is restored.

Potable drinking water must be provided for all children and staff. Adequate hand hygiene must also be available to ensure staff is able to wash hands before serving catered foods/snacks. This can be achieved by either providing potable water in a ‘blue jug’ with a spigot to be set up as a temporary hand washing sink or an adequate supply of moist towelettes and hand sanitizer. Alcohol based hand sanitizer with at least 60% alcohol content must be on-site for staff and children to use.

Potable water must also be provided for brushing children’s teeth if your centre has a TOOTH BRUSHING Program.

Infection Control
For infection control, adequate hand hygiene must be in place for staff and children within the childcare centre. This can be achieved by either providing potable water in a ‘blue jug’ with a spigot to be set up as a temporary hand washing sink or an adequate supply of moist towelettes and hand sanitizer. Alcohol based hand sanitizer with at least 60% alcohol content must be on-site for staff and children to use. An adequate supply of water must be available to flush toilets for children and staff. Staff must ensure that an adequate supply of disinfectant is pre-mixed with potable water to be used in your childcare setting.
Avoid direct contact with body fluids (e.g. urine, feces, vomit and blood), as they all have the potential to spread germs. Germs in vomit and diarrhea may travel through the air, so it is important to clean up quickly.

**Spill Kit**
A spill kit should be prepared ahead of time and should include the following items:

- Gloves (disposable)
- Paper towel
- Soap and detergent
- Plastic bags
- Disinfectant

**Procedure**
The following is recommended:

1. Wear disposable latex or vinyl gloves. Reusable rubber gloves are acceptable as long as they are cleaned and sanitized after each use.

2. Remove all visible material, working from the least to the most soiled areas, using paper towel or single-cloth. If you are cleaning up feces or vomit, be careful not to agitate the material so that virus particles do not become airborne. Put all material in a water-proof bag for disposal.

3. Clean the area using soap or detergent, again working from the least to the most soiled areas.

4. Disinfect the area using an approved broad-spectrum disinfectant following the manufacturer’s directions for procedures and length of time to leave on surface. If using bleach, a 1:10 ratio is recommended. Slowly add 1 cup (250 ml) of bleach to 9 cups (2250mls) of water; or ½ cup (125ml) of bleach to 4 ½ cups (1125ml) of water.

5. Discard gloves and other cleaning articles in a plastic bag.

6. Wash hands after removing the gloves. Use soap and water for at least 15 seconds.

7. Wash the non-disposable cleaning equipment (mops/buckets) thoroughly with soap and water and then rinse with an approved disinfectant.

**More information**
For further information on dealing with blood or bodily fluids, please contact the Infectious Disease program at 625-8318 or toll free 1-88-294-6630, ext. 8318.

Guidelines for Handling Spills, ID-FS-GEN-402
January 2017
How to use hand sanitizer

1. Apply 1 to 2 pumps of product to palms of dry hands.
2. Rub hands together, palm to palm.
3. Clean in between fingers and under nails. Rub hands until sanitizer is dry. Do not use paper towels.
4. Once dry, your hands are safe.

Ontario
How to wash your hands

1. Wet hands with warm water.
2. Apply soap.
3. Rub your hands together and sing the “ABC” song for 15 seconds.
4. Rinse thoroughly under running water.
5. Pat hands dry with paper towel.
6. Your hands are now safe.

Ontario
Cover your Coughs and Sneeze:

- Cover your mouth and nose with a tissue when you cough or sneeze.
- OR
  - Cough or sneeze into your upper sleeve, not your hands.
- Put your tissue in the garbage.

Clean your Hands after coughing or sneezing:

- Wash your hands with soap and warm water for 20 seconds.
- OR
  - Use an alcohol-based hand cleaner.

Stop the spread of germs!

Illustrations by: D. DePeuter