

Infection Control Guidelines for Licensed Child Care Centres

This resource was developed by the Thunder Bay District Health Unit (TBDHU) for use by Licensed Child Care Centres. Please direct any questions to the public health inspector assigned to your centre or to the program at 807-625-5900 or toll-free 1-888-294-6630 (use ext. 5930).

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- updated [Household bleach for Use Within Program Areas](#) (Outside of the Kitchen), page 14

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The Thunder Bay District Health Unit (TBDHU) ensures that infection prevention and control programs are in place in all child care centres that are licensed for more than 5 children. TBDHU staff:

- ✓ 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.

Gastrointestinal (Enteric) Outbreaks

Please refer to the TBDHU's **Gastrointestinal (Enteric) Outbreak Management Guidelines for Child Care Centres** poster for additional information if the child care centre suspects an increase in the number of children presenting with gastrointestinal-like symptoms. The poster, along with the line list referenced on this site, is available at TBDHU.com/health-topics/schools-daycares/child-care-operators.

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.

Routine practices are based on the premise that everyone is potentially infectious. Routine practices are recognized strategies to prevent and control infection. The same safe standards of practice should be used routinely with every child to prevent staff from being exposed to blood, bodily fluids, secretions, excretions, mucous membranes, non-intact skin or soiled items. Staff must assess the risk of exposure to these and identify strategies that will decrease the exposure risk and prevent the transmission of illness.

Handling Blood and Body Fluids

Avoid direct contact with body fluids (e.g. urine, feces, vomit and blood), due to the potential to spread germs. Germs in vomit and diarrhea may travel through the air, so it is important to clean up quickly. Please reference the fact sheet available at TBDHU.com/health-topics/schools-daycares/child-care-operators.

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 70% for effectiveness. 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 the child care facility or food preparation settings.

Additional information is available at TBDHU.COM (type "hand washing" into the search bar).

Glove use

Gloves are an excellent barrier for reducing the risk of communicable disease transmission. However, improper glove use can lead to the transmission of pathogens. Wearing gloves is NOT a substitute for proper hand hygiene.

- Gloves must be worn when it is anticipated that hands will be in contact with broken skin, blood, bodily fluids or other secretions or contaminated environmental surfaces.
- Gloves are single use only
- Hand hygiene must be performed before putting gloves on and after taking gloves off
- Gloves must be appropriate for the type of activity being performed

Respiratory (Cough) Etiquette

Influenza (flu) and other serious respiratory illnesses like respiratory syncytial virus (RSV), and whooping cough 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.

Additional information is available at TBDHU.COM (type “hand washing” into the search bar to locate resources).

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. This schedule must also identify the toys to be cleaned/disinfected, frequency (ie. daily, weekly, monthly) and the person responsible for completing the task. 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 regardless of the age of 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 disinfected. 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.

Tooth brushing Program

A poster outlining the information below is available for use in your centre. This poster can be downloaded from TBDHU.com/health-topics/schools-daycares/child-care-operators.

- 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.

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

Allowable items include those that 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. For example smooth plastic hats, material hats, dresses or capes that can be laundered and lacquered wood wands,

Hair adornments that can be laundered are allowed and must be designated to one child only and laundered after each use.

The following are examples that are not allowed as they cannot be laundered or cleaned/disinfected due to the type of material: straw hats, wigs, feathered wings.

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.

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 child care 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 disinfected 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 and is available at TBDHU.com/health-topics/schools-daycares/child-care-operators.

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 child cares because child care 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 Child Care Centres

If your centre is considering acquiring a pet for the facility, please consult with your public health inspector and review the Guidance Document for the Management of Animals in Child Care Centres (2018). The document is available to view and download: <https://bit.ly/3mJxT94>

Potty Chair Use and Procedure

The TBDHU 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.

Sample Procedure

The following is a sample procedure with minimal requirements that you must adapt to your centre and post at each potty station. A poster outlining the information presented below is available and is available at [TBDHU.com/health-topics/schools-daycares/child-care-operators](https://www.tbdhu.com/health-topics/schools-daycares/child-care-operators).

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:

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

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.

Sample Procedure

The following is a sample procedure with minimal requirements that you must adapt to your centre and post at each toilet. A poster outlining the information presented above is available for use in your centre at TBDHU.com/health-topics/schools-daycares/child-care-operators.

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.

NOTE: Toilet rings/seats must be smooth, impervious and cleanable. Replace/discard toilet rings that are worn or that have cracks/rips.

Accidents

Do not rinse soiled clothing or training pants after an accident. If a fecal accident, a formed stool that are not stuck to the training pants/soiled clothing can be gently lowered into the toilet for flushing. Soiled clothing must be placed in a sealed bag and sent home at the end of the day to be laundered by the parent. Do not rinse or launder on site.

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.

Sample Procedure

The following is a sample procedure with minimal requirements that you must adapt for your centre and post at each change table. This 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 at TBDHU.com/health-topics/schools-daycares/child-care-operators.

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.

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 Disinfection

In any child care centre, keeping work and play surfaces and objects as clean and free of germs as possible is an ongoing challenge. Proper cleaning and disinfection requires regular, rigorous and enforceable routines.

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, moulds), 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.

Disinfection

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 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, high chairs, electronic devices, 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.

Cleaning and Disinfection Checklist

Please see the checklist at the end of this document as it indicates ‘minimal requirements’ that can be adapted and used to guide your practices.

Chemical Disinfectants

Commercial Chemical 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). Also, ensure chemicals are being used before expiry dates and that test strips are available for use.

Fogging machines; no-touch disinfection systems

These systems use chemical disinfectants or physical agents to disinfect surfaces and do not require that an active agent be manually applied and removed from the surface. **Fogging machines are as a supplement to routine, manual cleaning and disinfection practices.** They are not a replacement. The disinfectants used must have a DIN, must have been approved by Health Canada and are intended to be used with a specific fogging machine.

Source: York Region Public Health (2021)

Household bleach for Use Within Program Areas (Outside of the Kitchen)

Solutions of household bleach must be prepared fresh daily AND stored out of the light and away from children.

Making a disinfectant using Household Bleach (Chlorine) (5.25% sodium hypochlorite)	Indications & When to Use	Contact Time
100ppm To make this concentration, mix 1mL (1/4 teaspoon) of bleach to 500mL (2 cups) water	Use this concentration on mouthed toys and tables that children eat food off of	A minimum of 2 minutes. Allow to air dry.
500ppm To make this concentration, mix 5 mL (1 teaspoon) of bleach to 500 mL (2 cups) water	“Everyday Use” Use this concentration on surfaces and items, such as toys, play mats, diaper change tables and activity tables	A minimum of 2 minutes. Allow to air dry.
1000 ppm To make this concentration, mix 20 mL (4 teaspoons) of bleach to 1000 mL (4 cups) water	“Outbreak Situation/Enhanced Cleaning and Disinfection” Use this concentration during an outbreak in childcare setting	A minimum of 2 minutes. Allow to air dry.
Blood and Bodily Fluid Spills	Refer to the Guidelines for Handling Blood or Body Fluids fact sheet	Refer to the Guidelines for Handling Blood or Body Fluids fact sheet

Chemical Sanitizers in the Food Areas

Food Contact Surfaces

The Ontario Food Premises Regulation 493/17 (<https://www.ontario.ca/laws/regulation/170493>) defines the following terms:

1. **Food contact surface** - is the surface of counters, equipment and utensils with which food may normally come into contact; any surface that food comes in contact with (e.g. kitchen surfaces, tables in day nursery used for eating, etc.).
2. **Utensil** - includes kitchenware, tableware, glasses, cutlery or other similar items used in the handling, preparing, processing, packaging, displaying, serving, dispensing, storing, container or consuming of food; 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.

Chemical Concentrations

Sanitizers in the food areas 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 follow what is allowed by the legislation.

In addition, **test strips are also required** to check that the concentration of your solution is correct. Consult your public health inspector with any questions.

Remember! No one chemical 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.

Source: Durham Region Health Department

Scheduled Water Shut-off or Water Main Break

If the child care 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 7 (3) (a&b) of Ontario Food Premises Regulation 493/17 states EVERY FOOD PREMISE SHALL BE PROVIDED WITH a supply of potable water adequate for the operation of the premises and hot and cold running water under pressure in areas where food is processed, prepared or manufactured or where utensils are cleaned> . 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 70% alcohol content must be on-site for staff and children to use.

Tooth Brushing

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.

Cleaning and Disinfection Checklist

Areas	After Each Use	Daily or more often if soiled	Weekly or more often if soiled	Monthly or more often if soiled	Other
Eating					
Table tops Clean and sanitize	✓				
High Chair Trays Clean and sanitize	✓				
Cloth bibs Laundry	✓				
Program Play Area					
Mouthed toys/ toys contaminated with bodily fluids Clean and disinfect	✓				
Infant/ Toddler toys Clean and disinfect		✓			
Pre-school/ School age toys Clean and disinfect			✓		
Cribs/cots Clean and disinfect			✓		
Linen/bedding Laundry			✓		
Carpets Vacuum			✓		
Carpets Steam clean					2x/ year or more often if soiled
Dress up clothes Laundry			✓		
Water play table Clean and disinfect areas	✓				
Sand table toys Clean and disinfect			✓		
Outdoor toys Clean and disinfect					2x/ year or more often
Washroom					
Toilets Clean and disinfect		✓			
Hand washing sinks Clean and disinfect		✓			
Floors Clean		✓			
Potty chairs Clean and disinfect	✓				
Change Tables Clean and disinfect	✓				
Countertops and fixtures Clean and disinfect		✓			
Shared combs and brushes Clean and disinfect	✓				
Re-usable towels/facecloths Laundry	✓				

Areas	After Each Use	Daily or more often if soiled	Weekly or more often if soiled	Monthly or more often if soiled	Other
All Areas					
Floor mats Clean and disinfect			✓		
Garbage containers Clean and disinfect			✓		
Table tops Clean		✓			
Sofas, chairs Vacuum or clean			✓		
Pillows and cushion covers used in activity areas Launder			✓		
Woodwork and cubbies Clean				✓	
Drapes and curtains Launder					yearly
Windows Clean inside and out					2 times / year
Door handles, doorknobs, light switches Clean and disinfect		✓			
Cleaning Items					
Cleaning using Cloth and bucket method Launder		✓			
Cleaning using Spray bottle method and Cloth Launder	✓				Single use paper towel
Mop heads Launder			✓		Hang side up to air dry