

Community Consultation with Children's Services and Niagara Region Public Health

September 8, 2021

The meeting consisted of a Q&A session with the following responses:

Question	Answer
<p>1. Do Resource and Behaviour consultant staff need to be fully vaccinated for their role consulting in child care settings across the Region? Are they required to provide some sort of proof of either vaccination or negative testing results?</p>	<p>Resource and Behaviour consultants must abide by the same rules as licensed child care centres with vaccination policies. Per FAQ document from Ministry on Sept 13, licensees are able to accept an attestation from the special needs resource consultant's employer. Licensees will be required to keep a copy of the attestation on file for record keeping purposes. Where the special needs resource consultant is not fully vaccinated, the licensee will need to comply with the rapid antigen testing requirements as set out in the licensee's vaccination disclosure policy.</p>
<p>To be determined Are centres to ask for proof of a negative test from RC or BC? Is there some sort of attestation that confirms they are safe for entry? What about after hours cleaning staff? Are we required to have evidence of their vaccination status or do they need to have rapid testing if they</p>	
<p>1. How would the antigen testing take place? Who is covering the costs of the antigen testing? To be determined 2. Who administers the rapid testing?</p>	<p>How the testing takes place and who administers it will be up to each employer as set in their Vaccination Disclosure Policy. The kits are to be ordered through your local Chamber of Commerce for pickup and the cost will be covered by the Ministry of Health. Please refer to the memo sent by</p>

Question	Answer
	MEDU on Sept 4 th and question 8 of the FAQ email from Sept 13 th for more details.
If a staff member has had their first dose and an appointment booked for their 2 nd dose, do they still need to test twice weekly?	Yes, until 14 days after their 2 nd dose has been received, that staff member would be required to comply with the testing requirements, however, they would not need to participate in the educational sessions.
In the past 90 days if a child/staff have tested positive and now is showing possible symptoms of COVID-19, which protocol do we follow from page 4 of the PH memo? We are aware that our health screening must be passed by anyone entering the centre. If someone testing positive in the last 90 days has recovered and is experiencing onset symptoms, do they need to isolate for the 10 days or are they good to return in the 24-48 hour window depending on what the symptom was?	If it's been more than a month then the last COVID-19 symptoms, the risk of a new infection is probable. While other viruses are circulating, it is best practice that anyone feeling ill does not attend the centre.
To confirm, if the illness is confirmed to not be COVID-19, do the time frames to return on page 4 allow for any flexibility? I.e. Fever in 24 hrs and vomit in 48 hrs?	Public Health highly encourages all centres to follow these timed guidelines for return to care.
There is new regulation about not being allowed to refuse a parent entry into the child care centre anymore. If parents are coming in every morning for drop off and every afternoon for pick up, is that considered a “regular visitor” who would have to comply with our proof of vaccination policy? Would we need to have proof of vaccination on site for them as well or just have them complete the screening tool and sign in and out?	For parents that are coming directly into the centres each day, a vaccination would be required along with the daily health screening. Parents who are not passing the screening table and not entering the centre would not be required to submit proof. Per the Sept 13 FAQ email, it is important to note that licensees are still required to prevent parental access if the local public health unit provides direction to do so. Please refer to question 8 of that email. For clarification on centres located within schools, please contact your ministry Program Advisor for further details regarding non-compliances.

Question	Answer
<p>To be determined</p> <p>What about centres located within schools that are not allowing parental access? Would this incur a non-compliance?</p>	
<p>Will Public Health be putting something together and then implementing the session along with proof that it's been completed by staff? Is it a 1 time session that staff can submit proof at different locations or will staff have to redo something at each location?</p>	<p>All Public Health units have been tasked to create their own resources. Niagara Region Public Health is in the early stages of them being created. They will get this information out as soon as they can. Also, see email from Jackie Galloway on Sept 10 with an approved video from the City of Kingston that may be used until one is ready.</p>
<p>On page 3 of the Consideration for Antigen Point-of-Care Testing (Min of Health doc) it says that rapid antigen testing is not recommended for fully vaccinated people. Does Niagara Public Health recommend ALL staff do rapid testing, regardless of vaccination status or just those that are unvaccinated?</p>	<p>The province and public health only require those staff that are not fully vaccinated to be rapid tested twice weekly. If a fully vaccinated person becomes symptomatic, or is identified as a high risk contact, they should be swabbed using a PCR test as opposed to a rapid antigen test, which would likely be done at the COVID-19 assessment centre.</p>
<p>If a staff/child is off ill with an illness not on the list of COVID symptoms, are they required to get a negative COVID test before returning, or is it just once they are symptom free? Does it matter if they are fully vaccinated or not?</p>	<p>While “runny/stuffy noses” have been removed, medical officers of health have said “if you have any symptoms, please stay home” (as heard during new broadcasts). So, what exactly are those symptoms that people (especially children) are to stay home with? And if children do have a runny nose, is there a point when it is too much?</p>
<p>Can carpets be returned to the classroom? If so, is there a protocol in place for cleaning and such?</p>	<p>Yes, carpets can be returned to the classroom. There are no specific protocols other than regular care and cleaning. Staff and students should be reminded to practice proper hand hygiene.</p>

Question	Answer
Where can we purchase air cleaners/purifiers and filters that are recommended at a reasonable price? Is there funding to pay for them?	Please visit Ontario.ca for a listing of PPE providers. Please continue to include any operational expenses on your monthly expense reporting.
Washrooms: Do the requirements regarding physical distancing, capacity signage, using every other stall and sink apply to child care? The washrooms in a child care centre are considerably smaller than in a school setting. Supervision requirements are different than in school and require supervision by an adult at all times.	While this requirement does apply to child care, there is the understanding that it can be more difficult. The more physical distancing that can be done, the better.
Cafeteria and lunch protocols: Does this apply to child care? Specifically are child care centres required to record seating locations within the same cohort?	Yes, this applies to child care as well. By documenting seating, it allows for public health to do more thorough contact tracing by knowing who were the closest contacts
Staff Meetings and Staff Rooms: Is the sign in log and seating location record required for child care? Signage is provided for max room capacity and where to sit to maintain physical distancing. Can PPE be removed when sitting is designated areas?	Yes, documented seating arrangements allow for identification of close contacts. PPE should only be removed when staff are eating and donned when not.
Can a staff member work in 2 groups (cohorts)? For example, in a before school program and then work in the preschool program?	Yes, a staff may work in more than one program, however, be aware that if the educator contracts COVID, it will result in the closure of both cohorts.
Memorandum references that is “anyone becomes ill at school/childcare, they must be provided with a medical mask”. Does this statement apply to every child over two? If so, is parental permission required for masking to align with the permission for children two years of age through	Yes, this would apply to all children that would tolerate it. A permission form would not be required as it would be only for a very short period of time, until pickup could occur. It is best practice to also separate the child in a separate room or area away from others as to help prevent spread. Any questions regarding non-compliance should be directed to your ministry Program Advisor.

Question	Answer
Senior Kindergarten wearing a face covering indoors when tolerated?	
Where a centre purchase child sized medical masks? Are they available? We have only found one supplier that provides child size masks (grade 2) please confirm if grade 2 is medical.	Child sized PPE can be found on the Ontario PPE portal. They can also be sourced on the MCCSS procurement portal. Grade 2 would be considered medical.