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## **Childcare Center COVID-19 Plan Re-Opening Application**

Please print and complete all fields. Failure to provide sufficient information could result in your application being returned for recompletion.

Childcare Centre Owner Last Name	Section 1: Business Information			
First Name):				
Childcare Centre Supervisor: Last				
Name, First Name				
Business Name (Legal Name):				
Business Operating as (Name)				
Phone Number:				
Email Address:				
Emergency Phone Number (availab	e			
24/7 for urgent matters e.g.				
Supervisor/Owner				
	Section 2: Facility Information			
Estimated number of staff				
Estillated lidiliber of staff				
Estimated number of children				
Estimated number of children				
Estimated number of children  Number of Rooms assigned for				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one location  Staff have their Certificate in First				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one location  Staff have their Certificate in First Aid Training, including Infant and				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one location  Staff have their Certificate in First Aid Training, including Infant and Child CPR	○ Yes ○ No			
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one location  Staff have their Certificate in First Aid Training, including Infant and				
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one location  Staff have their Certificate in First Aid Training, including Infant and Child CPR	○ Yes ○ No			
Estimated number of children  Number of Rooms assigned for each Cohort (Staff and children)  Max cohort size for each room is  10  Staff work at more than one location  Staff have their Certificate in First Aid Training, including Infant and Child CPR	○ Yes ○ No			

282 Argyle St. S.

T: 905.318.6623

Childcare center facility is shared	Yes	○ No	
with other programs (senior			
programs)			
More than one child care	○ Yes	○ No	
program or day camp is offered in	) ies		
the building?			
Do you have a diapering	Yes	○ No	
program?			
	Yes	○ No	
Do you have a tooth brush	) res	O NO	
program?			
	Do you have a screening protocol for	○ Yes ○ No	
	people entering the building?	If yes, please submit to the health unit	
	Do you have an exclusion policy for ill	○ Yes ○ No	
	staff and children?		
	Do you have written health and safety		
	policy and procedures?		
Infection Control	Do you have cleaning and disinfection	○ Yes ○ No	
	schedule (for surfaces toys and	0.11	
	equipment)?	Type of disinfectant:	
		**	
	Adequate hand washing supplies (liquid	○ Yes ○ No	
	soap, paper towel, hot and cold water)		
	Adequate hand hygiene supplies (		
	alcohol based rub with 60-70% alcohol)		
	Personal Protective Equipment (masks,	○ Yes ○ No	
	gloves, gowns) is available for staff	0.10	
	Add additional pages if needed		
	Section 3a: Child care room		
		Number of children and staff	
Room name or number	Size of the room	assigned to the room	
II .			

\*Please attach diagram with layout of the rooms

Section 3b: Isolation room for ill children Please note: Plans should consider separating ill children from well children				
		Iren can isolate until		
_	nts pick the			
		Add additional pa	ges if needed	
Recommend that the	re is an isola		<u> </u>	become ill at the childcare center.
		e dedicated staff assigned		
			• ***	
	<u> </u>	Section 3: Child care	•	
Water Supply	○ F	Private Well OP	rivate Cistern	○ Municipal
		f washrooms for children		
Washrooms		f washrooms for staff		
NA /		ns shared with other prog		
Washroom Amenities	Hand si	· /	Toilet(s)	O Diaper station
Kitchen	•	food preparation of prepared onsite -ready	to eat food deliver	ad
Utensils		vided- single service plat		
Otensiis	O NOT PIO	vided- siligle service plat	es, cups and utensi	is to be provided
		, Water and Other Suppl		
Proof of satisfactory			No	Not Applicable (e.g. municipal water)
sample results withi months:	n last 3	•	•	proof of satisfactory water sample
months:		re	esults with submissi	on or your plan.
Where will food be pu	ırchased			
from?	ai ciiasca			
Please note: All food	must be pu	irchased from an approv	ed source such as a	commercial grocery store or other
food premise inspecte	ed by public		•	es shall not come within 2 metres of
		other persons or childr	en at the childcare.	
			15:: 6 .:	
		Section 5: Cleaning		
		child care center sta	T	
How will the child care	center be	○ Third party (e.g. clea	ning company)	
cleaned?		Other (please explain):	ining company,	
○ Simcoe PO Box 5	70, 12 Gilbertson	Dr. • Caledonia   282	Argyle St. S.	O Dunnville   117 Forest St. E.

How will the child care center be cleaned after use if the center is shared with other programs?	<ul><li>On-site by workers</li><li>Third party (e.g. cleaning company)</li><li>Other (please explain):</li></ul>			
Additional actions in your plan to address cleaning (if applicable):				
	Section 6: Laundry			
How will laundry services be provided?	<ul> <li>On-site staff</li> <li>Parents</li> <li>Third party (e.g. laundry company)</li> <li>Other (please explain):</li> </ul>			
Do you have a schedule for doing laundry?	○ Yes ○ No If yes, how often?			
Have you made any plans to address laundry that may be unscheduled requests for laundry? For example, if linen becomes dirty with bodily fluids				
	Section 7: Illness Management			
Who will be conducting screening all staff and children entering the document?	I ( ) Inira narty			
Do you have thermometers to take the temperature of staff or childre onsite?	Nama			
If a child or staff becomes ill but do not require EMS, how will they be transported to receive medical car	e Cther (please explain):			
Please note: Where ill persons require medical treatment, the healthcare provider is to be notified of the incoming individual prior to their arrival at the healthcare facility.				

Should a develop symptoms, please isolate them from other staff and children and call the HNHU COVID-19 Hotline at 519-426-6170 ext. 9999. For urgent situations requiring immediate medical care, call 911.

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For Office Use Only:		
Section	PHI Notes/Additional Directions Given	
	PHI (please print):	
Signatur		
Date:		

Should you need to modify your plan, please submit the changes to <a href="mailto:ehthotline@hnhss.ca">ehthotline@hnhss.ca</a> as they will require approval.