Infection Prevention and Control in Child Care Centres, 2016

Population and Public Health Division, Ministry of Health and Long-Term Care

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Preamble

The Ontario Public Health Standards (OPHS) are published by the Minister of Health and Long-Term Care under the authority of the Health Protection and Promotion Act (HPPA) to specify the mandatory health programs and services provided by boards of health. Protocols are program and topic specific documents which provide direction on how boards of health must operationalize specific requirement(s) identified within the OPHS. They are an important mechanism by which greater standardization is achieved in the province-wide implementation of public health programs.

Protocols identify the minimum expectations for public health programs and services. Boards of health have the authority to develop programs and services in excess of minimum requirements where required to address local needs. Boards of health are accountable for implementing the standards including those protocols that are incorporated into the standards.

The Day Nurseries Act has been replaced with the Child Care and Early Years Act, 2014 as of August 31, 2015, the date of proclamation of the Child Care and Early Years Act, 2014. The terminology in this Protocol has been revised to reflect the terminology in the Child Care and Early Years Act, 2014.

Purpose

The purpose of this protocol is to provide direction to boards of health for the delivery of advice, consultation, education and inspection(s) with respect to infection prevention and control practices in child care centres.

Reference to the Standards

Table 1: identifies the OPHS standards and requirements to which this protocol relates.

<table>
<thead>
<tr>
<th>Standard</th>
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<tr>
<td>Infectious Diseases Prevention and Control</td>
<td>Requirement #14: The board of health shall inspect settings associated with risk of infectious diseases of public health importance in accordance with the Infection Prevention and Control in Child Care Centres, 2016 (or as current); the Infection Prevention and Control in Personal Services Settings Protocol, 2008 (or as current); and the Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).</td>
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Operational Roles and Responsibilities

1) General
   a) The board of health shall maintain a current list of child care centres (“child care centre” is defined under Section 2 of the *Child Care and Early Years Act, 2014*) in the health unit. ³

2) Detection, investigation, and identification
   a) Along with routine inspections and consultations, the board of health shall respond to requests from child care centres for consultation or inspections related to infection prevention and control policies and practices in child care centres in the health unit.
   b) The board of health shall investigate complaints related to infection prevention and control practices in accordance with the *Infection Prevention and Control Practices Complaint Protocol, 2008* (or as current).⁴
   c) The board of health shall conduct assessments in child care centres to:
      i) Ensure that policies with regard to infection prevention and control are developed in conjunction with the board of health and adhered to by the child care centre; and
      ii) Identify risks of infectious disease transmission, assist the child care centre in developing strategies and policies to mitigate these risks, and ensure the child care centre adheres to these strategies and policies.

3) Inspection
   a) The board of health shall routinely inspect all child care centres at least annually for adherence to infection prevention and control practices. Boards of health may also conduct inspections of child care centres for the purposes outlined in the *Food Safety Protocol, 2008* (or as current).⁵
   b) In addition to the annual inspection, the board of health shall use a risk-based approach to determine the priority and need for additional inspections in response to specific complaints by members of the public or risks which have been identified.
c) Inspections shall include particular attention to all identified risks using a risk-based approach to determine the adequacy of infection prevention and control measures in place and recommend such measures as required. This should include, at a minimum, the following factors that may increase risk in the child care centre environment.
   i) The age group(s) and developmental stage of the children, which include factors such as their immunization status, standard of hygiene, toileting/diapering practices and cognitive ability;
   ii) The environment which includes frequency and length of program (full day/half day), design features of the child care centre, toileting and diapering facilities, pest control, meal preparation and sanitation;
   iii) Activities such as water/sensory play tables, sandboxes, sleeping, tooth brushing, storage/use of personal items and access to animals;
   iv) The child care centre’s past history of adherence to infection prevention and control practices, including the management of sick children and staff; and
   v) The child care centre’s past history of outbreaks.

d) Inspections shall include assessment of compliance with statutory and regulatory requirements under the HPPA, including the following sections:\(^2\)
   i) The duty of a child care centre to comply with a written order issued by the medical officer of health with respect to health hazards (s.13);
   ii) The duty of a child care centre to comply with a written order issued by the medical officer of health with respect to a communicable disease (s. 22); and
   iii) The duty of a child care centre to report known or suspected cases of a reportable disease to the medical officer of health (s. 27). Reporting obligations are specified in Ontario Regulation 559/91, Specification of Reportable Diseases and Ontario Regulation 569, Reports under the HPPA.\(^6,7\)

e) Boards of health shall make themselves aware of the sections of the Child Care and Early Years Act, 2014 and its regulations that reference the medical officer of health or designate which are enforced by the Ministry of Education.\(^3\)

f) Boards of health shall respond to food safety and environmental health issues in child care centres in accordance with the requirements of the Food Safety Protocol, 2008 (or as current) and Risk Assessment and Inspection of Facilities Protocol, 2008 (or as current).\(^5,8\)

4) Management

a) The board of health shall provide education, including educational resources, to child care centre operators to assist them in implementing and maintaining appropriate infection prevention and control policies and practices, and preparing for outbreaks, including the detection of outbreaks.
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b) The board of health shall provide written information to child care centres to specify reporting requirements to the medical officer of health of cases and outbreaks of reportable infectious diseases.

c) The board of health shall assist child care centres in the management of infectious disease outbreaks of public health importance as per the Institutional/Facility Outbreak Prevention and Control Protocol, 2008 (or as current).  

d) The board of health shall assist child care centre operators in implementing infection prevention and control policies, programs and practices using a risk-based approach. Activities shall include, but are not limited to, consultation on the development of infection prevention and control policies and procedures as follows:

   i) Health evaluation of children for signs and symptoms of communicable disease;
   ii) General hygiene and disinfection practices;
   iii) Hand hygiene;
   iv) Appropriate diapering and toileting practices;
   v) Prevention of occupationally acquired infections, including surveillance and management; and
   vi) Communication with parents and staff with respect to infection prevention and control practices in the child care centre.

e) The board of health shall assist child care centres in developing and maintaining policies to address:

   i) Up-to-date immunization (or an appropriate exemption) for every child prior to being admitted to a child care centre and child care centre staff prior to commencing employment in accordance with s.35 and s.57, respectively, of Ontario Regulation 137/15 under the Child Care and Early Years Act;  
   ii) Maintenance of up-to-date immunizations and immunization records (or an appropriate exemption) for all enrolled children and for staff. For additional information, refer also to the Immunization Management Protocol, 2008 (or as current);  
   iii) Required reporting of cases and outbreaks of reportable diseases to the medical officer of health;
   iv) Management of response to infectious diseases in the child care centre. For additional information, refer also to the Infectious Diseases Protocol, 2008 (or as current);  
   v) Exclusion of sick children, staff, parents, and/or volunteers. For additional information, refer also to the appropriate disease-specific chapters under Appendix A of the Infectious Diseases Protocol, 2008 (or as current); and
   vi) Required communication with parents with regard to communicable diseases.
f) The board of health shall provide annual in-service education on appropriate current infection prevention and control practices to child care centre operators and staff. In-service education shall be relevant to the setting and the needs identified through inspection or consultation with the setting.

g) The board of health shall assist child care centre operators with preparing and establishing infection prevention and control policies with respect to exposure to resident and visiting animals. Activities shall include, but are not limited to, the provision of:

i) Educational resources and guidance on the proper housing and caring of any resident animals and animals visiting the child care centre, including the types of visiting and resident animals that should not be permitted;

ii) Educational resources on the risk of communicable diseases and other risks associated with visiting/resident animals in child care settings, including strategies to mitigate these risks. For more information refer to Guidance Document on the Management of Animals in Child Care Centres, 2016 (or as current);13 and

iii) Educational resources on infection prevention and control measures with respect to exposures to petting zoos, visiting zoos, animal exhibits, fairs and farms for children enrolled in a child care centre, including but not limited to Recommendations to Prevent Disease and Injury Associated with Petting Zoos MOHLTC, 2009 (or as current).14

h) For more information and best practices related to infection prevention and control in child care settings, refer to Well-Beings: A Guide to Health in Child Care.15

5) Enforcement

a) The board of health shall respond appropriately to findings of inspections, including issuing orders by the medical officer of health or public health inspector, as the case may be, under Sections 13 and 22 of the HPPA if indicated.2

6) Data collection, reporting, and information transfer

a) The board of health shall maintain a record of all inspections conducted.

b) The board of health shall report cases and outbreaks of infectious diseases in child care centres in accordance with their role under Part IV of the HPPA, through the integrated Public Health Information System (iPHIS) or any other method specified by the Ministry of Health and Long-Term Care.2
c) The board of health shall review findings of child care centre inspections to identify epidemiological/disease trends, inform future education and response activities and to develop corrective actions.

Glossary

**Child Care Centre**: A premises operated by a person licensed under the *Child Care and Early Years Act* to operate a child care centre at the premises.\(^3\)

**Health hazard**: A condition of a premise; a substance, thing, plant or animal other than man; or a solid, liquid, gas or combination of any of these, that has or that is likely to have an adverse effect on the health of any person.\(^1\)

**Risk**: The probability of an adverse health outcome resulting from exposure to a hazard.

**Risk Assessment**: Risk assessment is a quantitative and/or qualitative estimation of the likelihood that an outcome, such as an adverse effect, will result from exposure to a specified hazard or hazards, or from the absence of protective or beneficial factors.\(^16\)

**Risk-Based Approach**: The application of a *risk assessment(s)* to identify priorities for making decisions and taking action by directing proportionate resources to the hazard(s) with the greatest likelihood of adverse effect on the health of any person.
References


