Ministry of Education Early Years and Child Care Division Ministère de l'Éducation Division de la petite enfance et de la garde d'enfants



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- TO: Child Care Licensees
- FROM: Holly Moran Assistant Deputy Minister Early Years and Child Care Division
- **DATE:** March 9, 2022
- **SUBJECT:** Ministry of Education Update: Lifting of Health and Safety Measures in Child Care

Thank you once again for your ongoing dedication and commitment to keeping child care safe and accessible for children, families and staff working in the child care and early years sector. As we adapt our COVID-19 pandemic response to the evolving health environment, I would like to provide an update on key measures so that we can ensure the health and safety of children and staff/providers.

Based on advice from the Office of the Chief Medical Officer of Health (OCMOH), and in alignment with community measures, the province is returning child care programs to a more normal learning environment, while maintaining protective measures — like rapid tests, ventilation improvements, screening and continued access to free PPE for children and staff/providers.

#### Effective March 14, 2022

#### Vaccination Disclosure Policy

Effective March 14, 2022, the instructions issued by the OCMOH related to vaccination disclosure policies will be revoked across all sectors.

As of this date, licensees are no longer required to have a COVID-19 vaccine disclosure policy in place and provincial requirements below will be lifted:

- Collecting proof of COVID-19 vaccinations, medical exemptions, or completion of an education program.
- Asymptomatic screening requirements for individuals who do not provide proof of full vaccination.
- Reporting vaccination coverage to the Ministry of Education

Therefore, effective March 14<sup>th</sup>, unvaccinated individuals covered under licensee's vaccination policies will no longer be required to undertake rapid antigen screening three times per week. This change should be communicated to impacted individuals.

In addition, the Ministry of Health is removing reporting requirements for organizations including licensees that receive free rapid antigen tests from the government through the Provincial Antigen Screening Program for the purpose of vaccination disclosure policies. Licensees will no longer be required to report weekly rapid antigen test (RAT) usage to the Ministry of Health. MOH will continue to monitor program uptake using internal deployment data, which aligns with Health Canada's recent shift in reporting requirements.

The ministry has greatly appreciated your cooperation implementing this policy in your workplaces.

### Effective March 21, 2022:

#### Masking & Staff Personal Protective Equipment

In alignment with community masking requirements, masks will no longer be required for staff, providers or any other individual (including children) at the child care or on transportation. Eye protection for staff will also no longer be required. As some children, staff/providers may choose to continue to wear masks or eye protection, the government will continue to provide free masks and eye protection. Licensees will be able to continue to receive these items through the Ministry of Government and Consumer Services.

In addition, we know that many children and staff may choose to continue to wear masks at times, or consistently. We encourage child care licensees to promote respectful, welcoming and inclusive practices and communications within their communities.

A reminder that under <u>current federal travel requirements</u>, upon return from international travel, individuals must, wear a mask at all times when in public spaces (including schools and child care), maintain a list of all close contacts for your first 14 days in Canada, and monitor yourself for signs and symptoms of COVID-19.

#### Lifting of Cohorting and Distancing

Cohorting and distancing will no longer be required for indoor or outdoor activities. Licensees are required to ensure ratios, group sizes, reduced ratios and mixed age groupings meet the requirements under the *Child Care and Early Years Act* (CCEYA), as well as any conditions set out on their licence.

#### On-site Confirmation of Screening

Daily confirmation of screening for children and staff/provider will no longer be required by licensees. Individuals should continue to self-screen every day before attending child care using either the <u>COVID-19 school and child care screening tool</u>, or a screening tool designated by the local public health unit. The screening tool has been updated to align with the updated <u>COVID-19 Integrated Testing & Case</u>, <u>Contact and Outbreak</u> <u>Management Interim Guidance: Omicron Surge</u>

The ministry recognizes that these changes are significant. Moving toward normalcy is a welcome change for many. However, some staff/provider and families may find this transition challenging. Licensees are encouraged to support staff/providers and families with clear communication about these changes.

## Remaining Health and Safety Measures in Child Care

### Hand Hygiene, Respiratory Etiquette, Cleaning and Disinfecting

In accordance with local public health direction, appropriate hand hygiene, respiratory etiquette, cleaning and disinfecting should continue.

The following measures will continue to be in place until the end of June:

### Ventilation Measures

Licensees and home child care providers are encouraged to implement best practices and measures to optimize ventilation (see Public Health Ontario's guidance: <u>Heating</u>, <u>Ventilation and Air Conditioning (HVAC) Systems in Buildings and COVID-19</u>). Adequate ventilation should be provided by opening windows, moving activities outdoors when possible and through mechanical ventilation including HVAC systems. Heating, ventilation and air conditioning systems (HVACs) and their filters are designed to reduce airborne pollutants, including virus particles, when they circulate through the system.

- Ensure HVAC systems are in good working condition.
- Keep areas near HVAC inlets and outlets clear.
- Arrange furniture away from air vents and high airflow areas.
- Avoid re-circulating air.

### Absence Reporting

To continue ongoing monitoring of COVID-19 impacts, licensees will continue to be expected to report absenteeism rates to public health units should they rise to a defined level (approximately 30% above their baseline).

Under the CCEYA, licensees must ensure that a daily observation is made of each child receiving child care in each child care centre it operates before the child begins to associate with other children in order to detect possible symptoms of ill health.

Licensees are also required to ensure that where a child receiving child care at a child care centre it operates appears to be ill, the child is separated from other children and the symptoms of the illness noted in the child's records.

As a reminder, anyone who is sick or has any new or worsening symptoms of illness should stay home until their symptoms are improving for 24 hours (or 48 hours for nausea, vomiting, and/or diarrhea) and should seek assessment from their health care provider if needed.

# **COVID-19 Testing Strategy for Ontario Schools and Child Care**

### Rapid Antigen Tests

As you are aware, the ministry has made 3.6M rapid antigen tests (RATs) available to school boards and child care on a bi-weekly basis. This allocation was based on providing 2 tests per child/staff/provider at 30% of total enrolment/staff head count for schools and child care centres.

Bi-weekly shipments of RATs will continue to support **symptomatic testing** for staff, providers and children. Licensees are expected to continue distributing RATs to staff/providers and children who return from an unplanned absence.

The ministry is supportive of licensees distributing five tests for each staff/provider and child who receive RATs following an unplanned absence or where a child is sent home due to onset of symptoms. The total number of RATs to support this ongoing initiative will not increase. Licensees will need to manage their allocation to ensure that enough tests are available. Shipments will continue to include a mix of 5-25 tests packs. If tests received are larger than five test packs per box, licensees must continue to de-kit boxes in order to create kits with five tests.

As a reminder, staff/providers and families can also access RATs via participating community locations. Please see <u>https://covid-19.ontario.ca/rapid-test-locator</u> for specific locations.

### Vaccination

Vaccination remains the best defence against COVID-19, including the Omicron variant. We ask that you continue this work and promote vaccination efforts for children, families and staff/providers.

#### Updated Case and Contact Management Guidance

Further to the updates mentioned above, the Ministry of Health has revised the <u>COVID-19</u> <u>Integrated Testing & Case, Contact and Outbreak Management Interim Guidance:</u> <u>Omicron Surge</u>, with updated guidance for close contacts in the community and in households:

- Asymptomatic individuals who are close contacts of a case or a symptomatic individual in the community are no longer required to isolate but must self-monitor for 10 days following last exposure. During the self-monitoring period, close contacts must wear a well-fitted mask in all public settings and avoid activities where they need to take off their mask.
  - For children under 2 a well-fitted mask is not required. However, parents must monitor for symptoms for 10 days following last exposure.
- Asymptomatic household contacts of a case or a symptomatic individual are also not required to isolate if they are 17 or younger and <u>fully vaccinated</u>; 18 and older and have already received their COVID-19 booster; or tested positive for COVID-19 in the last 90 days and have completed their isolation period. Asymptomatic household contacts who are not required to isolate are also required to self-monitor

for 10 days following last exposure, as outlined above.

 Children under 5 who are asymptomatic household contacts are required to stay home for 5 days.

Note that the Ministry of Health has also consolidated guidance documents into the updated <u>COVID-19 Integrated Testing & Case</u>, <u>Contact and Outbreak Management</u>. <u>Interim Guidance: Omicron Surge</u> which includes information that is applicable to schools and child care. As a result, the Ministry of Health's school and child care-specific guidance documents, <u>COVID-19: Interim Guidance for Schools and Child Care: Omicron Surge</u> and <u>COVID-19 Guidance: School Case</u>, <u>Contact</u>, and <u>Outbreak Management</u>, have been discontinued.

Given these changes, the ministry intends to seek approval to amend related requirements set out in regulation.

As always, thank you for continued collaboration and partnership in keeping children and staff/providers safe.

Sincerely,

Holly Moran Assistant Deputy Minister Early Years and Child Care Division

c: Consolidated Municipal Service Managers and District Social Services Administration Boards (CMSMs and DSSABs)

First Nations with Child Care Programs