

General Sanitary Precautions and Physical Distancing Measures
to Prevent the Spread of COVID-19
(Revised December 1, 2021)

POLICY

ABC Montessori will be thoroughly cleaned prior to re-opening school and strictly maintain routine infection prevention and control practices as well as adhere to **additional** sanitary precautions and physical distancing measures in all aspects of care to prevent the spread of COVID-19 as described in this policy.

ABC Montessori will communicate the requirements under this policy to any third-party vendors contracted for cleaning services at the school (if applicable).

Only child care staff who are fully vaccinated will support the caregiving responsibilities of immunocompromised or medically fragile children.

PROCEDURES

Hand Hygiene and Respiratory Etiquette

Staff should wash their hands with soap and warm water frequently, and **must** wash their hands in the following situations:

- When they arrive at the centre and before they go home
- Before and after breaks
- After using the toilet
- Before handling food, preparing bottles, feeding children
- Before and after eating and drinking
- Before and after touching their own or someone else's face
- After sneezing or coughing into hands
- Before and after giving or applying medication or ointment to a child or self
- Before and after diaper check or changing diapers, assisting a child to use the toilet, and using the toilet
- Before and after contact with bodily fluids (i.e. runny noses, spit, vomit, blood)
- After cleaning and handling garbage

Children should wash their hands with soap and warm water frequently, and **must** wash their hands in the following situations:

- When they arrive at the school and before they go home – (Hand sanitizer may be used instead of handwashing in these situations)
- Before and after eating and drinking
- After a diaper change and using the toilet
- After playing outside
- After handling shared toys/items
- After sneezing or coughing into hands

Staff should follow and role model the following steps for proper hand washing:

- Wet hands
- Apply soap
- Lather for at least 15 seconds (or as long as the “Happy Birthday” song). Rub between fingers, back of hands, fingertips, under nails
- Rinse well under running water
- Dry hands well with paper towel or hot air blower
- Turn taps off with paper towel, if available

Staff will ensure all sinks in washrooms, kitchens, and classrooms are well stocked at all times.

Alcohol-based hand rub or hand sanitizer may also be used when hands are not visibly soiled.

Ensure hand sanitizer or alcohol-based hand rub (60% - 90% alcohol-based) is available at the designated areas. However, hand sanitizer dispensers should not be in locations that can be accessed by young children.

Staff should follow these steps for cleaning hands using hand sanitizer:

- Apply hand sanitizer (60% - 90% alcohol-based)
- Rub hands together for at least 15 seconds
- Work sanitizer between fingers, back of hands, fingertips, and under nails
- Rub hands until dry

Hand sanitizer must only be used on children who are over the age of two and must always be used under staff supervision. Staff must ensure that the product has completely evaporated from the child's hands before allowing the child to continue their activity.

Avoid touching your eyes, nose or mouth and avoiding high-touch areas, where possible.

Respiratory Etiquette

All individuals should cover coughs and sneezes with a tissue. If a tissue is not available, individuals should cough or sneeze into their upper sleeve or elbow, not their hands. Individuals should wash hands after coughing and sneezing.

Individuals should replace damp or contaminated masks and eye protection.

Students are taught about proper hand washing and respiratory etiquette, by using creative instructional videos.

Disposable Gloves, Masks and Eye Protection

All child care staff in the school building are required to wear medical masks while inside a child care setting, including in hallways and staff rooms (unless eating – but time with masks off should be limited and physical distance should be maintained). Eye protection (i.e. face shield) or goggles) is required for individuals working in close contact with children who are not wearing face protection.

All other adults (i.e. parents/guardians, and visitors) are required to wear a face covering or non-medical mask while inside the premises.

- all younger children (aged 2 to SK) are encouraged but not required to wear a non- medical mask or face covering while inside a child care setting, including in hallways.
- Staff are required to wear masks and eye protection outdoors if physical distancing (2 meters) cannot be maintained. Physical distancing is strongly encouraged between groups.

Masks should be replaced when they become damp or visibly soiled.

Face shields are a form of eye protection along with goggles or wrap-around safety glasses. They should be used in circumstances requiring eye protection as outlined above. Face shields can be worn with a mask but cannot be used as a substitute for a mask.

Prescription eye glasses are not a proper form of eye protection. The form of eye protection MUST protect the eyes from all angles including the front and sides, and also protect from the top when an individual's head is lowered (wrap around the eyes) to protect from direct splashes or sprays

Staff must also wear surgical/procedural masks, eye protection (face shield, goggles or wrap- around safety glasses) and disposable gloves when:

- Cleaning and disinfecting blood or bodily fluids spills if risk of splashing (gloves must be used as well)
- Caring for a sick child
- Cleaning and disinfecting contaminated areas and items used by an individual suspected of having COVID-19

Exceptions to the requirement to wear masks indoors are as follows:

- During staff meal breaks.
- Situations where a child cannot tolerate wearing a mask
- Reasonable exceptions for medical conditions, etc.

Masks should be worn by sick children (if tolerated) until their parent or guardian arrives to take them home. Masks should not be placed on children under age 2 or on anyone who has trouble breathing, is unconscious, or otherwise unable to remove the mask without assistance. Masks may not be tolerated by everyone based on underlying health issues, behavioural issues or beliefs. If the mask interferes with the ability to breathe or speak clearly, maintain a two-meter distance as much as possible.

Hands must be washed or sanitized before putting on and after taking off a mask.

Gloves must be worn as per routine practice such as when cleaning up vomit and diarrhea and disinfecting surfaces and must be disposed after use. Where possible, wear gloves when interacting with high-touch areas. Do not touch your face with gloved hands. Take care when removing gloves. Ensure you wash your hands after removing them. Disposable gloves do not replace hand washing.

Only single use disposable gloves must be used, particularly for diaper changing and cleaning blood or bodily fluids. Rubber gloves can only be used for dishwashing.

When to Wear Personal Protective Equipment (PPE):

Type	Description	Who	When to Wear	Other Considerations
Medical Mask (e.g., surgical/procedural mask) Peel Public Health does not recommend child care providers wear N95 masks. For these masks to provide sufficient protection, each wearer must be fit tested as there are different sized faces and N95 masks. N95 masks are only necessary when certain medical procedures are being performed.	Often blue coloured masks commonly seen in doctor and dentist clinics	Staff, LHCC providers, placement students, special needs resource staff	Always indoors (unless eating – but time with masks off should be limited and physical distance should be maintained). Outdoors if physical distancing cannot be maintained.	Discard mask when wet, visibly soiled, damaged, or contaminated. Wash or sanitize hands before putting on and after taking off a mask. Exemptions*: <ul style="list-style-type: none"> Those who have trouble breathing, unable to wear a mask due to medical conditions or unable to remove a mask without assistance. Proof of a mask exemption is not required. Children under the age of 2. If a child is unable to wear a mask, maintain a two-meter distance as much as possible.
		Children (in all EYCC settings) and Parent/Guardian/Caregiver (in EarlyON setting)	If children or parent/guardian/caregiver become ill while at the EYCC setting.	
		Household members of LHCC providers	When in a shared/common space indoors with the children attending care. Outdoors if physical distancing cannot be maintained.	
		Essential visitors/vendors	Always indoors, and also outdoors, if physical distancing cannot be maintained.	
		Parents/Guardians/Caregivers attending EarlyON centres	Always indoors (unless eating/drinking greater than or equal to 2 metres away from others). Outdoors if physical distancing cannot be maintained. Parent/guardians/caregivers are recommended to wear medical masks. Providers should offer medical masks to parents/guardians/caregivers.	

Type	Description	Who	When to Wear	Other Considerations
Eye Protection (face shield, goggles or wrap around safety glasses)	Should protect the eyes from all angles including the front and sides, and also protect from the top when an individual's head is lowered (wrap around the eyes) to protect from direct splashes or sprays	Staff, placement students, LHCC providers, special needs resource staff Household members of LHCC providers Essential visitors/vendors	If in the presence of unmasked individuals indoors (unless eating/drinking greater than or equal to 2 metres away from others). Outdoors if physical distancing cannot be maintained. If in the presence of unmasked individuals indoors (unless eating/drinking greater than or equal to 2 metres away from others). Outdoors if physical distancing cannot be maintained. If in the presence of unmasked individuals indoors (unless eating/drinking greater than or equal to 2 metres away from others). Outdoors if physical distancing cannot be maintained.	Clean and disinfect after each use or when contaminated. Wash or sanitize hands before putting on and taking off eye protection. A face shield is not a mask and cannot be used as a substitute for a mask. Prescription eye glasses are not a proper form of eye protection.
Non-Medical Masks/Face Coverings	Fully covering the nose, mouth, and chin with no gaps	Children in grades 1 and above Children in kindergarten Children aged 2 to kindergarten	Always indoors. Not required outdoors. Physical distancing should be maintained between different groups. Strongly recommended to be always indoors (Peel Public Health recommends that Service Providers consider making it mandatory OR in accordance with School Board policy if within a school setting) Encouraged but not required	Same considerations as medical masks. Parents/guardians are responsible for providing their child(ren) with a non-medical mask(s) or face covering each day, and should be reminded that if children are wearing masks, they will require a way to store their mask when not in use .

Type	Description	Who	When to Wear	Other Considerations
Gloves	Single-use gloves	Staff, LHCC providers and placement students	Cleaning and disinfecting blood and bodily fluids spills and toys/surfaces Caring for a sick child Diapering	Glove use does not replace hand washing. Do not touch your face with gloved hands. Wash your hands after removing gloves.
Gowns	Single-use or reusable gowns	Staff, LHCC providers and placement students	May be used when: <ul style="list-style-type: none"> Cleaning and disinfecting blood and bodily fluids spills Caring for a sick child 	Discard single-use gowns after use. Launder reusable gowns after use.

Physical Activity and Masking

- High contact physical activities should take place in outdoor settings only. Masking is not required outdoors for high contact physical activities.
- Low contact activities are permitted indoors. For children in kindergarten and up, masking is encouraged but not required if a minimum of two metres distance can be maintained between groups and as much as possible within a group.
- The [Warm weather guidance for COVID-19 prevention in early years and child care settings](#) includes recommendations for outdoor activities and use of PPE.

Cleaning and Disinfecting

ABC Montessori uses a bleach solution or other disinfectants with a Drug Identification Number (DIN) and labelled as a broad-spectrum viricide. Expiry dates are checked manufacturer's instructions are followed. Particular attention is paid to contact time, dilution, material compatibility, shelf-life, storage, first aid, and PPE.

Cleaning with soap and water removes dirt and grease that can hide and protect germs from disinfectants. Cleaning will substantially reduce the number of germs that may be on surfaces.

Disinfecting after cleaning will kill most of the germs that were left behind.

Note that vinegar is not a disinfectant and should not be used for disinfecting in EYCC settings. Vinegar does not kill germs!

The Supervisor will set up a schedule to ensure all cleaning and disinfecting duties are consistently completed and documented.

Staff must wear medical masks, eye protection (i.e. face shield) or goggles) and disposable gloves while cleaning and disinfecting.

The 6 steps for cleaning and disinfecting are:

1. Clean with soap and water.
2. Rinse with clean water.
3. Dry the surface or object thoroughly. Either air dry or use a clean lint-free cloth or soft absorbent towel.
4. Apply the disinfectant according to the manufacturer's instructions on the label. Allow the surface or object to soak in the disinfectant for the required contact time. Refer to the [Disinfection Chart for Child Care Settings \(using bleach\)](#) for the required contact times when using household bleach and water. A disinfectant with a Drug Identification Number (DIN) can also be used.
5. Rinse with clean water if required according to manufacturer's instruction on the label or according to the **Disinfection Chart** when using household bleach and water.
6. Let air dry.

In **Centre-Based Child Care**, continue to use sanitizer that contains chlorine, quaternary ammonium or iodine in the kitchen (according to the [Ontario Food Premises Regulation](#)).

Toys and Equipment

Staff will ensure that all toys and equipment are in good repair, clean and sanitary. The Supervisor must be advised of any concerns regarding toys and equipment.

- Teachers are encouraged to provide toys and equipment which are made of materials that can be cleaned and disinfected (e.g., avoid plush toys) as much as possible.
- Regular hand hygiene and respiratory etiquette should be practiced to reduce the risk of infection related to shared toys/equipment. Where toys and equipment are shared, cleaning and disinfecting shared toys/equipment between each group's use is recommended.
- If sensory materials (e.g., playdough, water, sand, etc.) are offered, children must sanitize hands before and after the use of materials and ideally provided for single use and labelled with child's name.
- Toys that cannot be easily cleaned and disinfected, such as plush toys, should be removed.
- Toys and equipment will be cleaned and disinfected at a minimum between cohorts.
- Mouthed toys must be removed immediately for cleaning and disinfecting after child is finished using it and must not be shared with other children.
- Staff are encouraged to have designated toys and equipment (e.g., balls, loose equipment) for each room or cohort. Where toys and equipment are shared, they will be cleaned and disinfected prior to being shared.
- Outdoor play is encouraged in small groups which facilitate physical distancing. Play structures can only be used by one cohort at a time. Ensure hands are washed or sanitized prior to and after use of play structures.

- Tables and chairs being used are cleaned and disinfected before and after use and as often as needed.
- Should any child present with symptoms of COVID-19, all toys and equipment accessed by the child will be removed from the room to be cleaned and disinfected as soon as possible.

With respect to playing with sand in playgrounds and sandboxes:

- There should be focused attention to reinforcing hand hygiene before and after play, children not touching their faces, maintaining physical distancing and proper mask wearing if physical distancing cannot be maintained.
- Sandboxes should not be used if physical distancing cannot be reasonably assured

Cots

- Children will have a cot assigned to them and labelled. Cots will be placed to support physical distancing practices (ideally 2 meters/6.5 feet spatial separation if feasible). If space is tight, place children head-to-toe or toe-to-toe.
- Cots are cleaned and disinfected daily or more frequently as needed.
- High touch surfaces on cots and cribs must be disinfected **twice a day** or as often as necessary.
- Once cleaned and disinfected, store cots/resting equipment in a sanitary manner.
- Store blankets in such a way that they do not come in contact with another child's cot in storage.
- Cot sheets and blankets are not shared between users.
- Sheets and blankets if used by same user must be cleaned weekly or more frequently as needed.
- Cot sheets and blankets belonging to different children are labelled with the child's name and stored separately in bags or bins in clean dry areas to prevent mold growth and kept out of the way of everyday activities.
- Families will be permitted to bring their own blankets for children. Ensure parents/guardians launder all items prior to bringing them to school, and store them separately in a clean bag. Items must be laundered weekly or more frequently as needed

Food Provision

- If food is being prepared, staff should follow regular food preparation guidelines.
- Family style meals are permitted to operate provided that food handlers use adequate food handling and safety practices.
- Ensure children/staff perform proper hand hygiene before and after eating. Ensure water bottles/disposable cups are filled from water fountains rather than drinking directly from the water fountain mouthpiece.
- Ensure children/households* are physically distanced while eating/drinking.
- Ensure there is no sharing of food at meal times.
- Staff should not eat together with children as staff would have to remove their mask to eat. Staff may remain seated with children at the table and model behaviours while personal protective equipment is kept on

Additional Infection Control Practices

- Regularly clean and disinfect high-touch surfaces including door knobs, light switches, faucet handles, hand rails, and electronic devices at **least twice daily (for 7 a.m. – 6 p.m. operations)** to prevent the transmission of viruses from contaminated objects and surfaces. Additional cleaning and disinfecting may be required based on daily need.
- High touch electronic devices (i.e. keyboards, tablets) may be disinfected with 70% alcohol (i.e. alcohol prep wipes) while ensuring the dilute solution makes contact with the surface for at least one minute.
- Ensure washroom facilities are frequently cleaned and disinfected. Washroom facilities must be cleaned in between each use when being used by different cohorts. Only one cohort may use a washroom facility at a time. Ensure children practice good hand hygiene after use of the washroom.
- Low-touch surfaces (any surfaces at the location that have minimal contact with hands), must be cleaned and disinfected daily (i.e. window ledges, doors, sides of furnishings, etc.).
- Carpets are to be vacuumed daily when the rooms are available, i.e., during outdoor play.
- Ensure garbage is kept in waterproof containers lined with plastic garbage bags. Staff must dispose of garbage daily. Any blood-soiled items must be discarded in sealed bags.
- Personal belongings (e.g., backpack, clothing, etc.) should be minimized. If brought, belongings should be labeled and kept in the child's cubby/designated area.
- Toothbrushes, bottles, sippy cups, and pacifiers must be individually labelled and stored separately (not touching each other), they must not be shared among children. The plastic handle of the toothbrush and the pacifier must be washed in soap and water upon arrival to the centre.
- Label individual hygiene items and store them separately.
- Singing outdoors is preferable to indoors as much as possible. Physical distancing should be maintained. If singing indoors, masks should be worn by children if able.
- For creams and lotions during diapering, staff must never put hands directly into lotion or cream bottles. They must use a tissue or single-use gloves. Upon arrival to the centre, wipe the cream/lotion container with a disinfecting wipe.
- Children must bring their own sunscreen and it should not be shared. Staff may provide assistance to apply sunscreen to any child requiring it and should exercise proper hand hygiene when doing so (for example washing hands before and after application).

- Reinforce messages with children to not share their food or drinks with others.
- Staff should change meal practices (if meals or snacks are provided) to ensure there is no self-serve or sharing of food at meal times.
 - Utensils should be used to serve food.
 - Meals should be served in individual portions to children
 - There should be no items shared (i.e., utensils)
- There should be no food provided by the family/outside of the regular meal provision of the program (except where required and special precautions for handling and serving the food must be put in place).
- Avoid getting close to faces of all children, where possible.
- Do not plan activities with exposure to animals or pets.

Physical Distancing Measures

Maintain physical distancing of at least 2 meters (6 feet) or more between persons, including staff, students, parents/guardians/caregivers and children/households* as much as possible including when consuming food and/or drinks. Each group of children should stay together throughout the day and should not mix with other groups, as much as possible.

Each cohort must have their own assigned indoor space and be separated by a physical barrier.

Where physical distancing may be difficult to maintain, additional steps will be taken to limit the number of people in close contact (i.e. within minimum 2- meters of each other).

If feasible, ABC Montessori will consider the following physical distancing measures:

- Staggering the children's arrival and departure times, spreading out the use of the outdoor play area to allow smaller numbers of children to play together and thus avoid large groups.
- Eliminate large group activities.
- Make sure that the children are distanced from each other during meal time, dressing time, table work, and nap time, as much as possible. Stagger these times if possible.
- During meal times/snack times, children should be spaced apart as much as possible (ideally at least 2 metres) such as seating them around a bigger table or separate tables. To limit the number of children around the tables, meal times/snack times can also be staggered if necessary.
- Avoid activities involving direct contact between the children as much as possible. Incorporate more individual activities or activities that

encourage more space between children.

- Limit the number of children who are in the communal areas at the same time. (e.g., entrances, hallways)
- Incorporate outside time in daily activities and open windows (weather permitting). Outdoor play is encouraged and should be offered in staggered shifts if possible. In shared outdoor space, cohorts must maintain a distance of at least 2 meters between groups and any other individuals outside the cohort.
- Shared bathrooms must only be used by one cohort at a time to prevent cohorts from mixing.
- The bathrooms need to be cleaned and disinfected before and after use between different groups
- increase the distance between cots/resting mats/playpens or place the children head to toe or toe to toe if the space is limited.
- when possible, move activities outside to allow for more space

Recognizing that physical distancing is difficult with small children and toddlers, ABC Montessori will support physical distancing by:

- planning activities that do not involve shared objects or toys; and,
- when possible, moving activities outside to allow for more space.
- Children must not share food, feeding utensils, soothers, bottles, sippy cups, etc. Mouthed toys must be removed immediately for cleaning and disinfecting and must not be shared with other children. Label these items with the child's name to discourage accidental sharing.

Ventilation

- Adequate ventilation should be provided by opening windows, moving activities outdoors when possible, and through mechanical ventilation including HVAC systems.
- 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.

Outdoor Play

- Ensure hands are washed or sanitized prior to and after outdoor play.
- Physical distancing should be maintained between different groups.
- If play structures are to be used by more than one cohort, the structures can only be used by one cohort at a time.
- We will, as much as possible have designated toys and equipment (e.g., balls, loose equipment) for each room or cohort. Where toys and equipment are shared, they should be cleaned and disinfected prior to being shared
- We will find alternate outdoor arrangements (e.g., community walk), where there are challenges securing outdoor play space.

Staffing Considerations

Staff schedules must be kept up-to-date and available to facilitate contact tracing. A record of staff positions and a record of staff interactions with groups of children (applicable to child care centres) should be maintained.

- Staff should be assigned to dedicated work areas as much as possible. Sharing phones, desks, offices and other tools and equipment are discouraged. Disinfect after each use.
- Supervisors and/or designates should limit their movement between rooms, doing so only when absolutely necessary.
- Supply/replacement staff should be assigned to specific cohorts.
- In situations where “floater” staff are required to move between rooms, such as providing coverage for staff breaks or lunches, they are permitted to do so. For example, floater staff could relieve a staff break in the infant room and then move to relieve a staff break in the preschool room. When doing so, they are required to:
 - o maintain physical distancing as best as possible
 - o when moving directly between different groups, change mask and eye protection if visibly soiled, damp, damaged or contaminated. Discard masks once removed.
 - o wash their hands frequently
- The floater staff should be consistently assigned to the same groups as much as possible. For contact tracing purposes, a record of floater

staff interactions with groups should be maintained.

- Classroom educators assigned to a group must remain consistently with the same group as much as possible and should limit their interaction with staff/children outside of their group.
- Interaction with multiple groups is permitted, but should be avoided as much as possible.
- Classroom educators within an assigned group may clean their own classroom.
- In situations where non-classroom staff are assigned to functions such as screening, escorting children to classrooms after screening, food preparation or cleaning, providers are encouraged to keep all staff positions consistent, where possible.
- Individuals who are assigned to cleaning/disinfection or food preparation duties can carry out cleaning duties while groups are not in their individual classrooms (i.e. cleaning during outdoor time) or drop-off items at the door to the classroom without entering (i.e. food service). Screening staff may also drop off and pick up children from various classrooms (i.e. “runners”).
- Screening and “runner” staff can be supply/replacement staff.
- For contact tracing purposes, a record of staff positions should be maintained.
- All individuals in positions where they are not within an assigned group are required to:
 - maintain physical distancing as best as possible
 - change mask and eye protection if visibly soiled, damp, damaged or contaminated. Discard masks once removed.
 - wash their hands frequently

- ABC Montessori will conduct virtual and/or telephone consultations when and where possible.
 - Non-essential face-to-face meetings will be postponed or converted to virtual appointments.
 - Staff should avoid instances where physical distancing cannot be maintained, especially during periods where PPE is removed during lunch and break times.
 - ABC Montessori strongly recommends that staff eat lunch alone if possible, preferably outdoors and/or lunch and break times are staggered to reduce the number of staff gathering in small, enclosed spaces such as a small break room.
 - ABC Montessori has implemented sign-in/out sheets for staff lunch/break rooms to assist with contact tracing in the event of an outbreak.
 - Lunch/break rooms must be arranged to follow physical distancing practices.
 - Keep lunch/break room doors and windows open (weather permitting).
 - ABC Montessori has implemented sign-in/out sheets for relief staff entering classrooms to assist with contact tracing in the event of an outbreak.

This policy and procedures will be reviewed by all employees prior to commencing employment at ABC Montessori, prior to the beginning of a new school year and any time changes are made.

Disinfection Chart for Child Care

Make disinfecting solutions using household bleach (5.25%)

	Kitchen 100 PPM*	Child Care Surfaces and Items 500 PPM*	Blood and Body Fluid Foulings 5000 PPM*
Definition	Sanitizer used for dishwashing	Intermediate level disinfectant used for toys, diapering stations, water play stations, pet cages, and high touch surfaces within the centre	High level disinfectant used for items and surfaces that become contaminated with blood, body fluids, feces, and vomit foulings
How to Make	2 ml (½ tsp) of bleach with 1 litre (4 cups) of water	10 ml (2 tsp) of bleach with 1 litre (4 cups) of water	125 ml (½ cup) of bleach with 1 litre (4 cups) of water
Contact Time	45 seconds	2 minutes	2 minutes
Drying Details	Air dry	Rinse and air dry	Rinse and air dry

* Concentration is approximate due to simplification of mixing recipe

Additional Notes:

- Clean all surfaces and items with soap and water before disinfecting.
- Make a new bleach solution daily.
- Prepare bleach solution with room temperature water to reduce odour.
- Label all disinfectant and cleaning product bottles.
- Use the stream setting on spray bottles to reduce inhalation hazards.
- Do not mix bleach solutions with any other cleaning products.
- Store all disinfectants and cleaning products in a location inaccessible to children.
- Avoid using disinfectants and cleaning products within close proximity to children.

Questions?

For more information call 905-799-7700 or e-mail:
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