Positive COVID-19 Incident and Closure Reporting Form for Family/Group Child Care Homes

Please use this form to notify the Early Learning and Child Care Program if people associated with your child care home test positive for COVID-19 and/or if you need to close your child care home for COVID-related reasons.

- 1) **Positive Tests:** Individuals may be considered positive for COVID-19 on a test taken at a lab or at a provincial testing site (a polymerase chain reaction/PCR test or rapid test) or on a self-administered rapid test.
- 2) Closure: Refers to a complete closure of your child care home for a short or longer period of time. There are a number of COVID-related situations where your child care home may need to close. For more information review: <u>https://www.gov.mb.ca/fs/pubs/2022-03-self-isolation-quarantine.pdf</u>.

Please remind the parents/guardians of children attending your child care home to tell you if their child tests positive for COVID-19, as individuals in the child care home may be close contacts. Families should also tell you if their child will not be attending child care because they are symptomatic, or a close contact to an individual who has tested positive for COVID-19.

As with all Manitobans, home child care providers are responsible for notifying their own close contacts. If the provider or a resident in their home has tested positive and/or required to self-isolate, parents/guardians of children attending the facility must be notified. For information on self-isolation and notifying close contacts see: <u>https://www.gov.mb.ca/covid19/fundamentals/self-isolation.html</u> and <u>https://manitoba.ca/covid19/testing/monitoring/index.html</u>.

Health Links – Info Santé (204-788-8200 or toll-free at 1-888-315-9257) and <u>local public health</u> <u>offices</u> continue to be available as resources, to provide guidance and answer questions.

Date Submitted:	Child Care Coordinator:
Name of Licensee(s):	Facility ID Number:
Regional Health Authority:	
Interlake-Eastern Regional Health	Southern Health-Santé Sud
Northern Health Region	Winnipeg Regional Health Authority
Prairie Mountain Health	
1) Positive COVID-19 Test Information	
a) Positive COVID-19 test results for	
Child attending child care h	ome
Family/group child care hon	ne provider
Resident in family/group ch	ild care home
Parent/guardian who drops	off/picks up child at facility
Staff member (when applica	able)

lf n	nore than one positive case, please describe (e.g., 2 children, 4 residents, etc.):
	b) When were you informed about the positive COVID-19 test?
	c) When applicable, when can children return to your child care home?
2)	Closure Information (when applicable) a) When did your child care home close?
	b) When do you think your home will reopen?
	 c) How many children are currently enrolled in your child care home and affected by the closure?
3)	Additional Information
	Please provide any important information about the situation that is not included above:

Instructions

- Please complete this form electronically and send as an email attachment to <u>cdcinfo@gov.mb.ca</u> with the subject line: COVID-19 Incident and Closure Report: Facility Name and Facility Number.
 - Please do <u>not</u> scan or take photos of a typed or hand-written form.
 - Please do <u>not</u> send a link to the document on cloud storage available in applications such as Adobecloud and Google Docs as the ELCC Program is unable to access these types of documents due to government firewall security.
- 2) After submission of this report, please provide follow-up information by email to your Child Care Coordinator. This may include information such as additional positive COVID-19 cases confirmed in your child care home or an extension of the closure.

Alternate formats available upon request