A CHILD'S SECRET GARDEN DAYCARE INC.

EDUCATION - NUTRITION - INTERVENTION

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AChild'sSecretGardenDaycare

Helping Children Grow

PARENT HANDBOOK:

A Guide For Parents and Guardians

Working with the child, family and community, A Child's Secret Garden Daycare Inc. provides the opportunity to build foundations that will last a lifetime.

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Welcome

All of us at A Child's Secret Garden Daycare Inc. are pleased to welcome you to our family of staff, parents and students who make ACSGD a fun place for children – and a special place for parents too.

A Child's Secret Garden Daycare Inc. is a non –profit, non-denominational advanced learning preschool which for the past 20+ years has dedicated itself to the care, development and nourishment of young children, including those with special needs.

The center receives funding from parent fees, fundraising and donations to cover operating and program costs.

We hope you will find this Guide for Parents and Guardians helpful. If you have any questions or concerns regarding your child, please do not hesitate to ask.

Ages of Children & Services Offered

At A Child's Secret Garden Daycare Inc., we are committed to providing you and your children with reliable, flexible and high-quality early years programming.

The center provides programs for children ages 6 weeks to 13years.

Infant: 6 weeks up to 18 months
Toddlers: 18 months up to 30 months
Preschool: 30 months up to 6 years

School-age: 68 months – 13 years
A summer program is available for kindergarten and school age children

Operating hours

The hours of operation are 7:00 am – 5pm

Early Closing

- In the event of a **weather warning**, the center may need to close early. Parents (and emergency contacts, if necessary) will be called to pick up their child earlier than normal. This would be approved by the Director and would only occur in extreme cases.
  → *Parents will be charged their regular daily fee for the day of care, even if the center must close early.*

- In the case that the **centre experiences a power outage** or other emergency making it unsafe to remain open, parents (and emergency contacts, if necessary) will be contacted to pick up their child.
  → *Parents will be charged for the full day of care.*

- During **severe weather**, staffing ratios may be temporarily affected. Staff may ask families to wait until further staff

arrives. We appreciate your co-operation and understanding should this occur.

- On **voting days**, staff are entitled to a mandatory three-hour timeframe to vote. The center may need to close earlier than the regular closing time.
  → *Parents will be charged their regular fee for the day.*

- In any situation where the **daycare must close unexpectedly**, parents are required to pick up their child promptly.
  → *All early closures, regardless of reason, will be charged as a full day of care.*

Holidays
The daycare will be closed for the following statutory holidays:
New Year's Day Family
Day Good Friday Easter
Monday Victoria Day
Canada Day Civic
Holiday Labour Day
Thanksgiving Christmas
Day Boxing Day
****THERE WILL BE NO REDUCTION OF FEES FOR HOLIDAYS OR FOR MISSED DAYS.**

Emergency management
Our center has written policies and procedures for emergency management, including, but not limited to; the roles and responsibilities of staff during an emergency, a safe meeting place, and recovery after an emergency. Parents can be provided a copy of this policy upon request.
In the event that an emergency happens, parents will be contacted by telephone, as soon as possible. If the parent is unreachable, the emergency contacts (listed on the registration form) will be called.

Admission Fees
We are participating in the Canada-Wide Early Learning in Child Care (CWELCC) Funding.

	Infants*	**Toddler***	**Preschool*** *(Under 6 years)*	**School Age / Summer** *(6 years and over)*
Reduced Weekly Base Fee CWELCC	$99.23	$82.69	$68.51	$140.00
Full Weekly Base Fee	$210.00	$175.00	$145.00	$280.00

Payment Policies and Non-Base Fees

Base Fee	None-Base fee
Play materials, equipment and furnishings (cot, crib, bedding, play materials)	Late pick-up fees for child-care provided beyond operational hours
Supervision by adult during operational hours	Late payment fee
Development & implementation of individualized plans (medical, special needs, anaphylaxis)	Field trips (if optional)
Registration fee, deposits, administration fees (if mandatory for parent to pay to receive care)	Diapers/ wipes
Food (where required by regulation for children under 44 months AND where mandatory for parents)	Sunscreen/ diaper cream
Number of staff required to meet ratio requirements and other regulatory items that are provided as part of care	Personal support toys
Mandatory registration or enrolment fees when care is confirmed	Withdrawal Without Notice Fee
	Bank processing fees (e.g., NSF)
	Program Enhancement or Special Activity Fees

Payment method

Payment must be made by 10 am on the Friday for the following week of care.

Payment must be made by e-transfer to ACSGDINC@gmail.com or cheque **(no cash)**

There will be a $50 charge (non-base fee) for the first cheque return for insufficient funds (N.S.F), and a charge of $100. (non-base fee) for the second N.S.F cheque. No further cheque will be accepted after this.

- If a child is withdrawn from daycare it is required to give 2 weeks written notice prior to the withdrawal. If notice is not given, 2 weeks' worth of payment is still required.
- When you sign your child up and pay the fee (that goes towards weekly payments), if you withdraw at the last minute it will not be refunded.

- If a child cannot adjust to daycare and is causing harm to others (ex. biting,), after every effort has been exhausted, the child will be discharged from our center. In such cases, any unused prepaid days (after the discharge date) will be refunded to the parent/ guardian. Refunds apply only to full unused days that were paid for in advance.

- If a payment for the week has not been received by the Friday before, your child will not be

permitted to attend childcare until the payment is received for the week. If your bill is past due by 2 weeks (or your payment has been outstanding more than once) your child's spot will be terminated and your bill will be put into collections. All past due accounts will have an additional late payment (non-base fee)

- We are closed on holidays, one week at the end of the summer, and 2 PD days. You can expect a closure calendar in January of each year. For all holidays and closure dates, payments are still required for any day/week that we are closed.

- There will be **no** reduction of fees if daycare is closed due to any emergencies (such as, but not limited to : storms, no power, no water, forced daycare closure)

- There will be **no** deduction of fees if your child is sent home / is out sick or absent.

- Late pickup: If a child is picked up after 5:00pm (our closing time), and you are still in the building, your account will be billed a $20 late fee (non-base fee). If your child is still in care after 5:10pm and/or you are still in the building an additional $5 (non-base fee) per minute (plus the $20 late fee) will be billed to your account.

- The daycare may organize **special events, activities, or field trips**.
• **Participation is optional**, and parents/guardians will receive **advance notice** of the event details, including date, activity, and cost.
• The **fee amount (non-base fee) will be determined based on the event** and communicated prior to participation. No charges will be applied without prior consent.

*The government provides funding for children **under the age of 6 years,** through the Canada- Wide Early Learning and Child Care system, making these fees lower for these age groups only, the future of these rates is dependent on the government, if the funding that we receive changes, it will be reflected in our prices.

Admission policy

Upon admission, the following is required;

1) All parents must fill out and complete all of the application form, if something is non applicable to you, please indicate so.
2) A current and up-to-date immunization or exemption form
3) If applicable, any custodial agreement should be given to the center

Discharge Policy

a) If a child is withdrawn from daycare it is required to give 2 weeks written notice prior to withdrawal. If notice is not given, 2 weeks' worth of payment is still required.
b) If a child cannot adjust to daycare and is causing harm to others (ex. Biting), after every effort has been exhausted, the child will be discharged from our center.
c) If a parent does not adhere to the contracts signed or is in arrears of payment, and no solution is agreed upon, the child will be discharged, and the account will be put into collections.
d) All children must have up-to-date immunizations or an exemption form. If this is not provided when the child requires the vaccines, and no appointment card is given, the child will be discharged.
e) Our "Challenging Behaviour policy" also includes other instances where dismissal would be required, parents can see this policy upon request
f) If a parent is in violation of our zero tolerance policy (see page 40), the child will be discharged
g) If your child is picked up past operating hours, you will be subject to a $20 fee, plus $5/minute after the first 10 minutes. You will get a termination warning after being late 3 times, after the 3rd incident you risk losing your spot at the daycare.

If your child is terminated, all payments that you have prepaid for future weeks will be refunded

Nutrition

The daycare will supply a hot nutritious lunch and two snacks daily. Snacks provided to the children are in accordance with Canada's Food Guide and are peanut-free. Menus are posted on a 4-week rotation

Nut Free Centre

Some children have severe allergies to nuts and will get very sick if they eat or are exposed to food containing even small amounts of nuts. To ensure the safety of these children, **we have adopted a "nut free" policy**. Parents are not allowed to bring their child to daycare with any type of food, juice, gum, etc. to protect the child with severe allergies. You will be requested to remove the food item or will not be allowed into the center. ***If your child has consumed nuts before coming to the daycare, please ensure hands are washed thoroughly and teeth are brushed***

Snacks from home
Under some circumstances the director will approve food from home, if the director approves for the child to bring in his/her lunch/snacks, parents or guardians are required to list ingredients in the snack. This is to ensure that children with food allergies are not accidentally given something they shouldn't eat. All food from home must be labelled with the child's name and must follow Canada's Food Guide. All parents bringing in food must sign a form stating the reason that they are supplying the food.

Treats for the class
Check with your child's educator before bringing any type of snack.

Allergies or Health issues
Tell the teacher if your child has any health issues or allergies. If your child takes medication during the school day, you will have to fill out a Medication permission form. **In the case of an Anaphylaxis, you will need to fill out a form, with your child's picture, that is posted in the classroom that your child will be in.**

For parents of children Requiring additional support or individualized support

Inclusion services

Some children need short term help and others have complex learning and health needs. Children may need help because of physical, intellectual, emotional, behavioral, speech, language, vision, social or hearing difficulties
We are proud to partner with the City of Cornwall – Children's Services. As part of this collaboration, a Child Care Advisor from the City regularly visits our programs to provide consultations, observations, training, and recommendations to our Educators. The Advisor's role is to support Educators and enhance the overall program, ensuring the inclusion of all children, regardless of ability. Through observations and feedback, they offer professional insight and strategies that promote inclusive, high-quality care and learning environments. Additionally, the City of Cornwall provides Enhanced Support funding to childcare operators. This funding is intended to help increase the capacity of Educators by offering additional program-level support during times of need. Please note that this funding is not intended for one-on-one support, but rather to assist the program as a whole on a short-term, as-needed basis.

Inclusion policy:
Children with exceptionalities will have an individual support plan. We will
provide materials to include all children with special needs.
The center works with the City of Cornwall to ensure the best care of all children with exceptionalities

Activities Off Premises

a) Planned Outings
When possible, staff will inform parents and guardians two days in advance before a planned outing will take place so that parents and guardians can make sure their children arrive on time.

For off-site outings that involve transportation, parents or guardians will be required to give their permission by signing the Field Trip Form, which will be made available by the classroom staff prior to the field trip.

b) Spontaneous Outings

Quite often, staff and children take advantage of good weather and go for a walk, or to a nearby playground or park. If your child will be arriving later than half an hour after the start of the program, please inform staff so that arrangements may be made. Otherwise, staff and children will leave the Center and you will not be able to leave your child in another room or join the outing unless you have advised the staff in advance and arrangements have been agreed upon.

Arrival

To allow your child to settle into the program and to maintain smooth operation of planned activities, please bring your child in before 9:30 a.m. If your child is sick, late, or will not be coming in that day, the center should be notified before 9:30a.m. **Children brought in later than 9:30 a.m. will not be accepted in the program and will be turned away.** To reduce disruption in our programs, even with advance notice of a child being late, we will not accept any child after 11am. If your child has an appointment and you pick them up, they will not be permitted to return to daycare after 11am.

Departure

-Children should be picked up within the hours that have been stipulated in the contract, unless arranged in advance with the director. Please notify the staff if your child is to be picked up later or earlier than usual. No child is to be released to a person not authorized by a parent to pick up the child. We must meet the designated pick-up person in addition to having verbal consent for changes with this respect.

-If you know in advance that you or your designated alternate (that you have indicated in the Intake Package) will be unable to pick up your child, please inform the Center of who will be picking him/her up.

-If something comes up at the last minute, and you or your alternate will not be able to pick up your child, phone the Center, advising us of the name of the person who will be picking up your child.

*** If you approve a person to pick up your child that is not known to the centre, they will need to provide photo identification and in some instances, we will contact you for confirmation. ***

-If your child is picked up past operating hours, you will be subject to a $20 fee, plus $5/minute after the first 10 minutes, your child's spot may be terminated

Preventing Unauthorized Access

A Child's Secret Garden Daycare uses locked entrance doors and a buzzer system to control entry during operating hours. Parents, guardians and visitors must buzz and wait for staff to authorize entry.

Security cameras around the building and viewing screens in each classroom allow staff to check who is at the entrance before unlocking the door. Staff will verify unfamiliar individuals' identities and reasons for visiting before allowing access.

When more than one person is waiting at the entrance, staff will check each person individually. Permission for one

person to enter does not authorize anyone accompanying or following them to enter.

Signs at the entrance remind families not to let other people into the centre, including other parents. Each person must be acknowledged and admitted by staff. Families must ensure that doors and gates close securely behind them and must not prop them open.

Visitors must identify themselves to staff and receive authorization before entering program areas. Staff will notify the supervisor or designate of any unauthorized entry or concern and follow emergency procedures if an individual presents a threat.

Camera screens support entry checks and do not replace direct supervision of children. Children will only be released to authorized individuals in accordance with the centre's Safe Arrival and Dismissal Policy.

Keeping Contact Information Up to Date

When you registered your child for childcare, you listed your home and work phone numbers as well as the name and numbers of a friend or family member. Educators use these numbers to call you in case your child becomes ill or in case of an emergency

It is a requirement that parents keep the Center informed of any changes in: address, telephone numbers, place of work, family physicians, immunization updates and medication changes (both medication taken at home as well as at the Center). Please inform the Center of any changes immediately in case we need to contact you in the event of an emergency or illness.

Duty to Report

It is the duty of every child care operator to report to Children's Aid, any suspicion of:

- any child who is at risk of harm
- any child who has been reported to be at risk of harm
- any child who has been harmed
-

Immunizations

The Eastern Ontario Health Unit requires all children in Ontario to be immunized against childhood diseases in order to attend a childcare facility. The center maintains an immunization record for each child. If your child has not received all his or her immunizations, you will be asked for your child to receive updated ones. Your child will not be permitted to attend the childcare Center if you do not comply. Your doctor will give you a yellow card listing your child's immunizations. Take it to the Centre to make sure the records are up to date, you may also provide a notarized 'Statement of conscience or Religious Belief' form, this form or the immunization record is mandatory prior to admission.

Challenging Behaviour (including Bite Management) Policy

Examples of Challenging Behaviour	****This list is not a complete list of Challenging behaviour and other behaviours may constitute dismissal**** Risking the Safety of other Children or staff, for example; ● Biting ● Hitting ● Slapping ● Kicking ● Spitting Risking the Mental Health of other children, for example; ● Making fun of them ● rude comments ● continuously bothering a child or children Risking their own safety, for example; ● Running away (this also risks the safety of other children) ● Climbing in a dangerous way ● Head banging

Prevention	When a challenging behaviour is presented, Educators will try to prevent said behaviour by; ● providing stimulating programming for children, and engage them, using distraction techniques and use smaller groups where possible ● Educators will observe the child and try to see if certain circumstances are causing the challenging behaviour, to limit the instances of reoccurrence.
Prevention Cont'd	● Positive reinforcement for positive behaviour ● For children who are known to be having a hard time, staff will stay closer to the child to be able to react quickly to help the child regulate, this may include bringing the child with the staff member during bathroom routine, sitting the child beside the staff member during mealtimes etc.
Communication with parents	● Parents will be informed regarding their child's challenging behaviour and what is being done at the centre to try to prevent it ● If the child continues with the challenging behaviour, parents will be informed as to what the next steps will include *(see below).*
Steps in Suspension	1. If a child engages in challenging behaviour 2 times in a 5-day period, parents will be asked for a meeting with the child's Educator (in person or by phone) 2. If the Child continues to engage in challenging behaviour 2 times in another 5-day period, they will be suspended for one week. 3. If the child returns and continues the challenging behaviour another 2 times in a 5-day period, The child will be expelled ● If the Child stops the challenging behaviour after step(s) 1 or 2, for a period of 15 days after returning, the steps will start back at 1.
Sent home for the day	If a child engaged in challenging behaviour 2 times in 1 hour, they will be sent home for the rest of the day and depending on previous challenging behaviour may be required to follow one of the suspension steps, this will be communicated to the parent during the phone call, or at pick up when the child leaves that day.

Exclusion	**After all other Prevention and steps have been exhausted; Children who have not been able to adjust to the program and are risking the safety of themselves and/or others, or harming the mental health of other children, may be terminated from the centre at the discretion of the director/assistant director.**

Communication with health unit	If a child is bitten and the bite breaks skin, the centre will inform the health unit of the incident
Steps in event Bite breaks the skin	If a child gets bit, and the bite breaks skin staff will ● Wash the bite with soap and water (no alcohol wipes – parents can apply at home; we do not use them at the centre) ● Contact parents to let them know about the bite mark ● Let parents know to expect a call from the health unit so they can follow up with the situation.

Illnesses

Illnesses

We know how worrisome a child's illness can be to parents and how disruptive it can be for working parents. However, to help prevent illness and to control the spread of infectious disease, the Center together with the public health officials have developed an illness policy which conforms to all regulatory guidelines.

We realize that sending a child home may cause some short-term difficulties for you, but we hope that by decreasing the overall level of illness at the centre, your child will be ill less often and will be able to spend more time here. It is the policy of the daycare (guided by the Eastern Ontario Health Unit, some daycare exclusion policies differ from the minimum EOHU guidelines.) that once a child has been sent home ill, the child **must** stay home for 48 hours or more *(see our exclusion policy and policy for communicable disease, available upon request).* In the case of pink eye, or a rash a doctor's note (approved by the director) is mandatory before being able to return to the centre, Failure to do so will result in your child being turned away.

Fees

There is no reduction of fees. When a child misses a day of childcare, parents are still required to pay the full amount for childcare.

When a child is unwell

A child who is unable to fully participate in the program because of an illness, or who poses a risk to other children and staff because of an infectious disease, shall be sent home as soon as is reasonably possible and is not allowed to attend childcare until they are completely recovered.

If your child is on medication, and you need to have it administered to your child while he/she is in care, you must sign a medication permission form, and the medication must be delivered to the centre in the original container with the child's name, date, description of medication, dosage, and end date. We are not allowed to put on creams, Vaseline, etc. without a signed permission form. If you have given your child any other medication prior to his/her arrival at the centre, e.g; Tylenol, Tempra, Cold/Cough Syrup, you must inform the teacher of the medication, dosage and time given. If children are well enough to attend daycare, they are well enough to play outdoor.

If Your Child Becomes Sick at Daycare

If your child becomes sick or has an accident while at school, someone will call you at the phone numbers you provided. You or the emergency contact person must pick up your child as soon as possible. All staff have First Aid and CPR training. If the accident or illness is serious, we will call 911.

ACSGD Program Statement

The program statement of A Child's Secret Garden is designed to follow the how does learning happen(HDLH) pedagogy to help foster the sense of belonging, well being, engagement and expression of all children. HDLH is the document used for the purpose of guiding licensed child care programs. We agree with the philosophy that children are competent, capable, and rich with potential. This program statement is reviewed annually.

*





a) To promote the health, safety, nutrition, and well-being of children

Educators will promote self-care, nutrition experiences through opportunities to play (cooking, dress up, etc.) and by serving healthy meals and snacks as outlined in the Canada Food Guide. Menus are inspected by the health unit on a yearly basis. Menus are revised at the change of each season: spring, summer, fall and winter. Any changes to the daily menus are noted on the menu. While under the care of ACSGD, the children are supervised, and ratios are maintained to ensure the safety of children. One of the ways educators will promote physical and emotional well- being of children is by offering risky-play and engaging outdoor environments

b) To support positive and responsive interactions among children, parents and educators

This includes involving parents about their child's learning and by maintaining on-going communication. Educators will promote positive and responsive interactions by respecting equity, inclusion and diversity of all families while providing a safe, non-judgement environment (As described in the *College of ECE's 'Pedagogical Practice')*. Staff will get to know more about the children's families through parent engagement (example; questionnaires, and special events).

c) Encourage the children to interact and communicate in a positive way and support their ability to self-regulate

This includes the experience and expression of feelings, the demonstration of independence and their development. Educators will encourage the children to interact and communicate in a positive way and foster building relationships with their peers by providing opportunities to share, modelling social skills and through praise. Allow for and create opportunities to self- regulate, quiet areas are set up throughout the room that allows the child a place to retreat to when he/she feels they need time away from the group: for example, book area, puzzle area, painting area. The child can choose which area he/she wishes. Educators will create positive relationships with children and support them in developing coping skills which will help the child with self-regulation. Staff will recognize the capabilities of children and create learning opportunities to allow for self-exploration and awareness.

d) Foster the children's exploration, play and inquiry

This includes the experience and natural drive for discovery and the wonder of learning through play-based activities. Learning centers are designed in such a way as to allow the child to discover and explore the materials based on individual needs. Educators document the children's interests, through observation, webbing, and conversations, and set up the environment based on what the children are looking to explore. Materials are added to pique the children's interest and allows the child to investigate, through play and inquiry.

e) Provide child-initiated and adult-supported experiences

This includes the experience of child-initiated and adult supported experiences. Here the children participate in circle activities, play games, and develop a sense of accomplishment and self- worth while learning the basics in reading, writing and social interaction. ACSGD educators use the following mediums: learning stories, webbing, photos, videos, photo albums, and recognizing children's milestones. The educators follow the child's lead through observations and webbing by providing materials they are interested in, including loose parts.

f) Positive learning environments and experiences for all children

As the environment is recognized as the third teacher, educators will plan accordingly, while gearing learning environments to the children's interest through webbing and observing.

Children are rich with potential and guide the educators in many ways as to which experiences and programming to implement. Learning environments will include a mixture of materials, including risky play and loose parts for the children to explore, and learn through play.

Educators will plan their daily routines in a way that allows for the least transitions possible as to

allow the children to engage in uninterrupted play and inquiry. Educators will review individualized plan and amend programming where needed to ensure that all children of all needs can be included.

g) Incorporate indoor and outdoor play, as well as active play, rest and quiet time, into the day

Educators will use indoor and outdoor environments as the third teacher to support the safety and well-being of children with the materials and equipment offered to them. Educators will provide engaging play-based activities for indoor and outdoor programming, based on the children's interest, including gross motor, fine motor, cognitive, literacy, etc. ACSGD offers a nap/rest time after lunch for children who require one. Quiet activities are provided for the children who do not require a nap. Educators will review individual plans and make changes in programming where needed to ensure that all children can be included.

h) To foster parent engagement and ongoing communication with parents about the program and their children

This includes involving parents about their child's learning and by maintaining on-going communication, through daily reports, newsletters and the daycare Facebook page. To help foster a sense of belonging, parents are invited to join their children for special events (for example, a special snack for Mother's Day, Father's Day, and a special event at Christmas). Parents are also asked to be involved in programming throughout the year (example; provide family pictures, favourite recipes, questionnaires, etc.).

i) To incorporate local community partners and allow those partners to support the children, their families and staff

ACSGD works with many community partners, including, the City of Cornwall Inclusion Services, one of the ways this partner supports children, families and staff is though observation and communicating thoughts, ideas and advice for children with specialized needs. ACSGD works closely with high schools and colleges to allow students to complete their cooperative education and/or field placements at our centre. Students take in knowledge and experience to further their education, which will benefit future children and families. Local pedagogical leaders are invited to host workshops at the centre or virtually to support educators in ensuring up to date knowledge on pedagogical practices, which in turn helps support children and families. The Children's Aid Society holds workshops at our centre for our staff, we also work closely with them to ensure safety of children. We collaborate with Inspire – Community Support services, who assists our centre with resources for children, families, and staff, we also work with them to offer care to children who are accessing their services.

j) To support continuous learning for educators

This includes the opportunity for educators to attend workshops and conferences (from CAS, local pedagogical leaders, and other experts), in order to remain current in the childcare field. All ACSGD educators are required to take at least two workshops a year. Links to online webinars are provided to the educators where they can participate at a convenient time. In addition, they will undergo CPR and First Aid training every three years. Educators create a professional learning portfolio that holds certificates from workshops, trainings, webinars, and conferences.

k) The impact of strategies

Through documentation from observations learning stories, pictures and more, educators will review how strategies set out in this program statement impact children and their families. Staff also engage in collaborative inquiry at staff meetings and have the opportunity to discuss and reflect their assessment of impact of strategies with coworkers. Educators will use their reflection of the impact of strategies of this program statement by guiding them in future planning for their classroom

**Images copied from How Does Learning Happen – Ministry of Education, 2014*

Program Statement Implementation Policy

Policy Statement

Every staff is required to follow the requirements of the program statement in order to provide quality programs for children that lead to positive outcomes for children's learning. This policy statement is made under such authority and named "How Does Learning Happen? Ontario's Pedagogy for the Early Years (2014)" as the document to be used for the purpose of guiding licensed child care programs.

Intent

This policy statement, together with the regulations that guide program development, pedagogy and practice in licensed child care settings, is intended to strengthen the quality of programs and ensure high quality experiences that lead to positive outcomes in relation to children's learning, development, health and well-being.

Implementation by staff

*Educators will promote self-care, nutrition experiences through opportunities to play (cooking, dress up, etc.) and by serving healthy meals and snacks as outlined in the Canada Food Guide. Menus are inspected by the health unit on a yearly basis. Educators will maintain ratios and will offer risky-play and engaging outdoor environments.

*Educators will promote positive and responsive interactions by respecting equity, inclusion and diversity of all families while providing a safe, non-judgement environment (As described in the *College of ECE's 'Pedagogical Practice')*. Staff will get to know more about the children's families through parent engagement (example; questionnaires, and special events).

*Educators will provide opportunities to share, model social skills and praise children, allow for and create opportunities to self-regulate, set up quiet areas throughout the room. Educators will create positive relationships with children and support them in developing coping skills which will help the child with self-regulation. Staff will recognize the capabilities of children and create learning opportunities to allow for self-exploration and awareness.

* Educators will design learning centers in such a way as to allow the child to discover and explore the materials based on individual needs. Educators document the children's interests,

through observation, webbing, and conversations, and set up the environment based on what the children are looking to explore. Add materials to pique the children's interest and allows the child to investigate, through play and inquiry.

*Educators will offer the children; circle activities, games, activities based on their interest. educators will use the following mediums: learning stories, webbing, photos, videos, photo albums, and recognizing children's milestones. The educators follow the child's lead through observations and webbing by providing materials they are interested in, including loose parts.

* Educators will gear learning environments to the children's interest through webbing and observing. Educators will provide learning environments that include a mixture of materials, including risky play and loose parts for the children to explore, and learn through play. Educators will plan their daily routines in a way that allows for the least transitions possible. Educators will review individualized plan and amend programming where needed to ensure that all children of all needs can be included.

*Educators will use indoor and outdoor environments as the third teacher to support the safety and well-being of children with the materials and equipment offered to them. Educators will provide engaging play-based activities for indoor and outdoor programming, based on the children's interest, including gross motor, fine motor, cognitive, literacy, etc. Educators offer a nap/rest time after lunch for children who require one. Provide quiet activities for the children who do not require a nap. Educators will review individual plans and make changes in programming where needed to ensure that all children can be included.

*Educators will provide daily reports, for those that wish to have one, and provide updates through pictures on the daycare Facebook page. Educators will invite parents to special events (for example, a special snack for Mother's Day, Father's Day, and a special event at Christmas)., and involve parents in programming throughout the year (example; provide family pictures, favourite recipes, questionnaires, etc.).

*When needed, Educators will work with many community partners, including, the City of Cornwall Inclusion Services, Students, The Children's Aid Society, Inspire – Community Support services, as well as others. Educators will also be required to participate in workshops help be local pedagogical leaders at the centre or virtually

*Educators will attend workshops and conferences (from CAS, local pedagogical leaders, and other experts), in order to remain current in the childcare field. Educators are required to take at least two workshops a year. In addition, they will undergo CPR and First Aid training every three years. Educators create a professional learning portfolio that holds certificates from workshops, trainings, webinars, and conferences.

*Through documentation from observations learning stories, pictures and more, educators will review how strategies set out in this program statement impact children and their families. Staff also engage in collaborative inquiry at staff meetings and have the opportunity to discuss and reflect their assessment of impact of strategies with coworkers. Educators will use their

reflection of the impact of strategies of this program statement by guiding them in future planning for their classroom

Other Staff Requirements

- Staff will use HDLH document for the purpose of guiding the program
- Program related requirements from O. Ref. 137/15 is used to put the pedagogical framework into practice
- The approaches outlined in the program statement are observed in the program
- All staff shall review and sign off on the program implementation policy.
- Additional help will be made available to assist educators in implanting the program statement (ex. Team meetings, peer coaching and mentoring)

Documents

- Staff will refer to HDLH, Think, Feel, Act and ELECT documents when planning, observing and documenting children's learning.

- Use of HDLH? document ensures high quality experiences and positive outcomes for each age group

Prohibited Practices

The following practices are not observed in the program: theme based programming; non-communication with parents; not attending workshops or conferences throughout the year

(1) No licensee shall permit, with respect to a child receiving child care at a child care centre it operates or at a premises where it oversees the provision of child care,
(a) corporal punishment of the child;
(b) physical restraint of the child, such as confining the child to a high chair, car seat, stroller or other device for the purposes of discipline or in lieu of supervision, unless the physical restraint is for the purpose of preventing a child from hurting himself, herself or someone else, and is used only as a last resort and only until the risk of injury is no longer imminent;
(c) locking the exits of the child care centre or home child care premises for the purpose of confining the child, or confining the child in an area or room without adult supervision, unless such confinement occurs during an emergency and is required as part of the licensee's emergency management policies and procedures;
(d) use of harsh or degrading measures or threats or use of derogatory language directed at or used in the presence of a child that would humiliate, shame or frighten the child or undermine his or her self-respect, dignity or self-worth;
(e) depriving the child of basic needs including food, drink, shelter, sleep, toilet use, clothing or bedding; or

(f) inflicting any bodily harm on children including making children eat or drink against their will.

(g) sexual abuse, sexual misconduct or engaging in a prescribed sexual act, as those terms are defined in the Early Childhood Educators Act, 2007.

(2) No employee or volunteer of the licensee, or student who is on an educational placement with the licensee, and no person who provides home child care or in-home services at a premises overseen by a home child care agency shall engage in any of the prohibited practices set out in subsection(1) with respect to a child receiving child care

Students and Volunteers

- Students and volunteers have reviewed the program statement prior to working with children and whenever it has been modified.

- All students and volunteers shall sign off on the program statement after reviewing it.

Contraventions

The director, assistant director or program manager will monitor, record and address compliance in relation to the program statement, including any contraventions of the program statement.
When needed, additional mentoring and training will be available to the staff/volunteers. Failure to comply with the program statement, **and/or** use of prohibited practices will result in disciplinary action up to and including discharge.
Disciplinary action is as follows (may skip steps depending on severity)

- 1ST offence: written warning
- 2nd offence: written warning and a one week suspension
- 3rd offense: dismissal

Additional policies

- Program statement is reviewed annually and whenever changes to the program statement is made.

- This policy statement shall be in effect until rescinded or replaced

Parent Issues and Concerns Policy and Procedures

Purpose

The purpose of this policy is to provide a transparent process for parents/guardians, the childcare licensee and staff to use when parents/guardians bring forward issues/concerns.

Parents/guardians are encouraged to take an active role in our childcare centre and regularly discuss what their child(ren) are experiencing with our program. As supported by our program statement, we support positive and responsive interactions among the children, parents/guardians, childcare providers and staff, and foster the engagement of and ongoing communication with parents/guardians about the program and their children. Our staff are available to engage parents/guardians in conversations and support a positive experience during every interaction.

All issues and concerns raised by parents/guardians are taken seriously by the Director and will be addressed. Every effort will be made to address and resolve issues and concerns to the satisfaction of all parties and as quickly as possible.

Issues/concerns may be brought forward verbally or in writing. Responses and outcomes will be provided verbally, or in writing upon request. The level of detail provided to the parent/guardian will respect and maintain the confidentiality of all parties involved.

An initial response to an issue or concern will be provided to parents/guardians within 2 business day(s). The person who raised the issue/concern will be kept informed throughout the resolution process.

Investigations of issues and concerns will be fair, impartial, and respectful to parties involved.

Concerns about the Suspected Abuse or Neglect of a Child

Everyone, including members of the public and professionals who work closely with children, is required by law to report suspected cases of child abuse or neglect.

If a parent/guardian expresses concerns that a child is being abused or neglected, the parent is advised to contact the local Children's Aid Society (CAS) directly, as well as the child care centre, for concerns of this nature, the centre will respond and initiate investigation within 24 hours.

Persons who become aware of such concerns are also responsible for reporting this information to CAS as per the "Duty to Report" requirement under the *Child and Family Services Act*.

Confidentiality

Every issue and concern will be treated confidentially and every effort will be made to protect the privacy of parents/guardians, children, staff, students and volunteers, except when information must be disclosed for legal reasons (e.g. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities or a Children's Aid Society).

Conduct

Our centre maintains high standards for positive interaction, communication and role-modeling for children. Harassment and discrimination will therefore not be tolerated from any party.

If at any point a parent/guardian, provider or staff feels uncomfortable, threatened, abused or belittled, they may immediately end the conversation and report the situation to the supervisor and/or license

Procedures

Nature of Issue or Concern	Steps for Parent and/or Guardian to Report Issue/Concern:	Steps for Staff and/or Licensee in responding to issue/concern:
Program Room-Related E.g: schedule, sleep arrangements, toilet training, indoor/outdoor program activities, feeding arrangements, etc.	Raise the issue or concern to - the classroom staff directly or - the director	- Address the issue/concern at the time it is raised or - arrange for a meeting with the parent/guardian within 2 business days. Document the issues/concerns in detail. Documentation should include: - the date and time the issue/concern was received; - the name of the person who received the issue/concern; - the name of the person reporting the issue/concern; - the details of the issue/concern; and - any steps taken to resolve the issue/concern and/or information given to the parent/guardian regarding next steps or referral. Provide contact information for the appropriate person if the person being notified is unable to address the matter. Ensure the investigation of the issue/concern is initiated by the appropriate party within 2 business days or as soon as reasonably possible thereafter. Document reasons for delays in writing. Provide a resolution or outcome to the parent(s)/guardian(s) who raised the issue/concern.
General, Centre- or Operations-Related E.g: child care fees, hours of operation, staffing, waiting lists, menus, etc.	Raise the issue or concern to - the director	
Staff-, Duty parent-, Supervisor-, and/or Licensee-Related	Raise the issue or concern to - the individual directly or - the director All issues or concerns about the conduct of staff, duty parents, etc. that puts a child's health, safety and well-being at risk should be reported to the director as soon as parents/guardians become aware of the situation.	
Student- / Volunteer-Related	Raise the issue or concern to - the staff responsible for supervising the volunteer or student or - the director. - All issues or concerns about the conduct of students and/or volunteers that puts a child's health, safety and well-being at risk should be reported to the director as soon as parents/guardians become aware of the situation.	

Parent to Parent Conflict: If one family at the center has an issue with another family in the center, management should address the issue individually with each party. A written account of the parent's specific complaints will be made, the matter will be investigated and the findings will be followed up with the parents. Corrective measures being taken to rectify the problem will be documented and explained to the parents.

Escalation of Issues or Concerns: Where parents/guardians are not satisfied with the response or outcome of an issue or concern, they may escalate the issue or concern verbally or in writing to The board of Directors.

Issues/concerns related to compliance with requirements set out in the *Child Care and Early Years Act., 2014* and Ontario Regulation 137/15 should be reported to the Ministry of Education's Child Care Quality Assurance and Licensing Branch.

Issues/concerns may also be reported to other relevant regulatory bodies (e.g. local public health department, police department, Ministry of Environment, Ministry of Labour, fire department, College of Early Childhood Educators, Ontario College of Teachers, College of Social Workers etc.) where appropriate.

Contacts:

Stephanie Garfield, Director; 613-936-6730 or **stephaniegarfield@hotmail.com**

Board of Directors Head; Samantha Williston 613-363-4526 or **blueeyes01011980@hotmail.com**

Ministry of Education, Licensed Child Care Help Desk: 1-877-510-5333 or **childcare_ontario@ontario.ca**

Supervision Policy for Volunteers and Students

A Child's Secret Garden Daycare welcomes both placement students and volunteers into the various programs offered in our childcare program. We believe it is a valuable part in gaining experience in a childcare environment. Volunteers and students also play an important role in supporting staff in the daily operation of childcare programs.

This policy will provide supervising staff, students, and volunteers with a clear understanding of their roles and responsibilities.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for policies and procedures regarding volunteers and students for childcare centres.

Note: definitions for terms used throughout this policy are provided in a Glossary at the end of the document.

General

- Students and volunteers will always be supervised by an employee and never permitted to be alone with any child or group of children who receive childcare.

- Students and volunteers will not be counted in staff to child ratios.

Roles and Responsibilities	
Director	● Ensure that all applicable policies, procedures and individual plans are reviewed with students and/or volunteers before they start their educational placement or begin volunteering, annually thereafter and when changes occur to the policies, procedures and individualized plans to support appropriate implementation. ● Ensure that all students and/or volunteers have been trained on each child's individualized plan. ● Ensure that all students and/or volunteers have an immunization as directed by the local medical officer of health. ● Ensure that a vulnerable sector check (VSC) and annual offence declarations are on file for all students and/or volunteers in accordance with the childcare centre's criminal reference check policy and procedures ● Ensure that expectations are reviewed with students and/or volunteers including, but not limited to ○ how to report their absence; ○ how to report concerns about the program; ● Inform students and/or volunteers that they are never to be included in staff to child ratios or left alone with children.

	● Appoint supervising staff to the students and/or volunteers, and inform them of their supervisory responsibilities. ● Inform students and/or volunteers of their duty to report suspected child abuse or neglect under the Child and Family Services Act.
Supervisor	● Ensure that students/volunteers are never included in staff to child ratios. ● Ensure that students/volunteers are supervised at all times and never left alone with children. ● Introduce students and/or volunteers to parents/guardians. ● Provide an environment that facilitates and supports students' and/or volunteers' learning and professional development. ● Provide students and/or volunteers with clear expectations of the program in accordance with the established program statement and program statement implementation policy. ● Provide students and/or volunteers with feedback on their performance. ● Work collaboratively with the student's practicum supervising teacher. ● Monitor and notify the centre supervisor/director of any student and or volunteer misconduct or contraventions with the centre's policies, procedures, prohibited practices or individual plans (where applicable) in accordance with the childcare centre's written process for monitoring compliance and contraventions.
Student/ Volunteer	● Maintain professionalism and confidentiality at all times, unless otherwise required to implement a policy, procedure or individualized plan. ● Notify the supervisor or designate if they have been left alone with children or have any other concerns about the childcare program (e.g. regarding staff conduct, program statement implementation, the safety and well-being of children, etc.). ● Submit all required information and documentation to the licensee, supervisor or designate prior to commencing placement or volunteering, such as a valid VSC(if applicable), and immunization. ● Review and implement all required policies, procedures and individualized plans, and sign and date a record of review, where required. ● Review allergy lists and dietary restrictions and ensure they are implemented. ● Respond and act on the feedback and recommendations of supervising staff, as appropriate. ● Report any allegations/concerns as per the "Duty to Report" under the Child and Family Services Act ● Complete offence declarations annually, no later than 15 days after the anniversary date of the last VSC or offence declaration (whichever

	is most recent) in accordance with the childcare centre's criminal reference check policy. ● Provide an offence declaration to the supervisor/designate as soon as possible any time they have been convicted of a Criminal Code (Canada) offence.
Exceptions	● "61(2) Despite section 60, no person is required to provide or obtain a vulnerable sector check or offence declaration in respect of a person who is under 18 years old. ● If a person turns 18 years old while in a position where he or she interacts with children receiving child care at a child care centre operated by a licensee or home child care premises where the licensee oversees the provision of home child care, the licensee shall obtain from the person, within one month after the person turns 18 years old, a statement that discloses every previous finding of guilt of the person under the Youth Criminal Justice Act (Canada), if the person received an adult sentence. ● If a person turns 19 years old while in a position where he or she interacts with children receiving childcare at a child care centre operated by a licensee or home child care premises where the licensee oversees the provision of home child care, the licensee shall require the person to apply to obtain a vulnerable sector check within one month after the person turns 19 years old." *referenced from the Child Care Manual

Glossary

Licensee: The individual or corporation named on the licence issued by the Ministry of Education responsible for the operation and management of the child care centre.

Staff (Employee): Individual employed by the licensee (e.g. program room staff).

Student: Individual who is enrolled in an education program/school and is completing a placement.

Volunteer: An individual who participates in the child care program and interacts with children in care but is not paid by the licensee (e.g. parents assisting on an occasional or recurring basis with child care programming, such as excursions, field trips, etc.).

Waitlist Policy

Purpose

This policy and the procedures within provide for waiting lists to be administered in a transparent manner. It supports the availability of information about the waiting list for prospective parents in a way that maintains the privacy and confidentiality of children.

The procedures provide steps that will be followed to place children on the waiting list, offer admission, and provide parents with information about their child's position on the waiting list.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for a child care centre that maintains a waiting list to have related policies and procedures.

Note: definitions for terms used throughout this plan are provided in a Glossary at the end of the document.

Policy

General

- A Child's Secret Garden Daycare will strive to accommodate all requests for the registration of a child at the child care centre.
- Where the maximum capacity of a program has been reached and spaces are unavailable for new children to be enrolled, the waiting list procedures set out below will be followed.
- No fee will be charged to parents for placing a child on the waiting list.

It is possible for the waitlist will be full, in which case the parents will need to try back at a later time.

Additional Policy Statements

Procedures

Receiving a Request to Place a Child on the Waiting List

1. The licensee or designate will receive parental requests to place children on a waiting list via the parent calling the daycare

Placing a child on the Waiting List

1. The licensee or designate will place a child on the waiting list in chronological order, based on the date and time that the request was received.

2. Once a child has been placed on the waiting list, the licensee or designate will inform parents of their child's position on the list when requested by the parent.

Determining Placement Priority when a Space Becomes Available

1. When space becomes available in the program, priority will be given to children who are currently enrolled and need to move to the next age grouping, siblings of children currently enrolled, children of staff.

2. Once these children have been placed, other children on the waiting list will be prioritized based on program room availability and the chronology in which the child was placed on the waiting list.

Offering an Available Space

1. Parents of children on the waiting list will be notified via Phone Call or email that a space has become available in their requested program.

2. Parents will be provided a timeframe of 48 hours, in which a response is required before the next child on the waiting list will be offered the space.

3. Where a parent has not responded within the given timeframe, the licensee or designate will contact the parent of the next child on the waiting list to offer them the space.

Responding to Parents who inquire about their Child's Placement on the Waiting List

1. The director or who the director appoints to assist in managing the waitlist, will be the contact person for parents who wish to inquire about the status of their child's place on the waiting list.

Maintaining Privacy and Confidentiality

1. The waiting list will be maintained in a manner that protects the privacy and confidentiality of the children and families on the list and therefore only the child's position on the waiting list will be provided to parents.

2. Names of other children or families and/or their placement on the waiting list will not be shared with other individuals.

Additional Procedures.

Once removed from the waitlist, (due to failure to respond in the timeline provided, or from withdrawing from the list), the family must call the centre and they will be added to the bottom of the list, provided there is waitlist availability at the time of calling.

Sleep Room Supervision Policy

Purpose

- Children's sleep and rest play an integral part in a child's well-being and development. The purpose of this policy and procedures described within is to provide staff, students and volunteers with rules and procedures to follow to safeguard children from harm, injury or death while sleeping.
- The procedures provided for placing children under 12 months of age on their own backs for sleep align with the requirement to meet the recommendations set out in Health Canada's document entitled "Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada".
- Procedures for monitoring sleeping children reduce the risk of harm or injury so that caregivers can look for and identify signs of distress and implement immediate responses to protect the health and safety of children.
- This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for sleep policies for child care centres.

Note: definitions for terms used throughout this policy are provided in a Glossary at the end of the document.

Policy General

- All children will be provided with the opportunity to sleep or engage in quiet activities based on their needs.
- Children under 12 months of age will be provided time to sleep based on their individual schedules, and will be assigned to a crib/cradle. Children between 12-18 months of age, will be assigned to a crib/cradle or cot in accordance with written instructions from a child's parent.
- Only light, breathable blankets will be used for infants.
- If a sleep sack is used it is to be sized properly to prevent infant slipping inside the sack
- Children 24 months or older but younger than 5 years, who receive child care for six hours or more, will be provided time rest for a period of no more than two hours each day, and will be assigned to a cot
- Children 24 months or older but younger than six years old, who receive child care for six hours or more, will be provided with a cot unless otherwise approved by a director
- Where children are sleeping in a separate sleep room or area, their names will be listed on the 'sleep chart' posted in sleep rooms or white board (in infant room), so that staff can immediately identify which children are present in the room/area.
- Bottles are not to be used in cribs, or propped up against something to feed the child, this is not safe and the child could choke
- The environment for sleep should be calming, low light (maintain enough light for visual checks), soft music or sound.

Placement of Children for Sleep

- Children under 12 months of age will be placed in their assigned cribs/cradles for sleep.
- All children who are younger than 12 months of age will be placed on their backs to sleep in accordance with the recommendations set out in Health Canada's document entitled "Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada", unless other instructions are provided in writing by the child's physician. Parents of these children will be

advised of the centre's obligation to place their child(ren) to sleep on their backs, and be required to provide a doctors note.

- Children between 12 and 18 months of age will be placed in their assigned cribs, cradles or cots for sleep.
- Children over 18 months of age who sleep will be placed on individual cots for sleep.

Consultation with Parents

- All parents of children who regularly sleep at the child care centre will be advised of the centre's policies and procedures regarding sleep at the time of their child's enrolment and/or any time the policies and procedures are revised, as applicable. This information will be available to parents on the website for A Child's Secret Garden.
- Staff will consult with parents about their child's sleeping arrangements at the time of enrolment and at any other appropriate time (e.g. when a child transitions to a new program or room, crib to cot, or at the parent's request).
- Parents will fill out a detailed sleep preference form, found in their intake form, before their child starts. The form consists of many details of the childs sleep preference, which the parent will indicate, for example:
  - Children older than 12 months, parents will indicate how they are placed to sleep (ex. On back. Tummy, etc.)
  - Parents will indicate if the child sleeps with anything specific (ex. Teddy, special blanket, soother etc..)
- Written documentation will be kept in each child's file to reflect the sleep patterns identified by their parent, and updates to the documentation will be made whenever changes are communicated to the child care centre.
- All sleep arrangements will be communicated to program staff by the director/assistant director after meeting with the parent/guardian, a copy of the sleep preference will be provided to staff working with the child.
- Staff will document their observations of changes in a child's sleep behaviours in the sleep log book
- Any changes in sleep behaviours will result in adjustments being made to the child's supervision during sleep time, where appropriate, based on consultation with the child's parent.
- Nap times are recorded in the child's daily log
- The director will check each registration to ensure the sleep preference form is filled out before the child starts.
- Any changes in sleep behaviour or patterns are to be recorded by staff and will be discussed with the parent(s) of the child. This allows for any adjustments to their sleep schedule that the parents feel necessary, parents will fill out a new sleep preference form when changes occur, and staff will implement these changes.
- Staff will review each childs' sleep preference form, the form is then posted in the sleep room (infants) or placed in a staff binder (toddlers and preschool) staff will communicate sleep preferences with students and volunteers and implement the sleep preferences, students and volunteers will be informed that they must inform childcare staff and staff will document and communicate any significant change in a childs' sleep pattern or behaviour with the parents.
- The parents of children under 12 months, will be advised upon intake (at minimum by reading this policy, if not communicated directly) that the daycare is under an obligation to follow the guidelines described **in "Joint Statement on Safe Sleep; Reducing Sudden Infant Deaths in Canada"** a copy will be made available via the daycares website.

- During intake all parents are shown the crib/cot their child will be sleeping on.

Direct Visual Checks

- Direct visual checks of each sleeping child who is in a licensed infant or toddler age group or is in a licensed family age group will be conducted to look for indicators of distress or unusual behaviours. Direct visual checks will be documented by staff by indicating the times the check was completed in the 'sleep log' book
- Direct visual checks are not required for children engaging in quiet activities, but these children will be supervised at all times.
- For infants (children under 18 months of age), direct visual checks will be completed at a frequency of every 10 minutes and may be increased based on the observed sleeping patterns and/or medical needs of each infant.
- The frequency of direct visual checks and the steps to complete them will depend on the typical sleep patterns of each child and their age, as identified in the sleep supervision procedures provided in this policy.
- Staff will ensure that all sleep areas have adequate lighting available to conduct the direct visual checks of sleeping children.

Procedures

Age Group	**Frequency of Direct Visual Checks***
Infant	According to each infant's needs as identified by their parent, or at least every **10 minutes**
Toddler	Every 15 minutes
Preschool	Every 15 minutes

* **This is the minimum frequency of direct visual checks**. Should a child have symptoms of illness (e.g. a cold) or if there are other issues or concerns related to the child's health, safety and well-being during sleep, the frequency of direct visual checks must be increased. The individual needs of each child during sleep as identified by the parent and/or the child's physician must be followed at all times.

Procedures for Completing Direct Visual Checks

1. Staff must:
   - be physically present beside the child;
   - check each child's general well-being by looking for signs of distress or discomfort including, at a minimum:
     - laboured breathing;
     - changes in skin temperature;
     - changes in lip and/or skin colour;
     - whimpering or crying; and
     - lack of response to touch or voice.
2. Where signs of distress or discomfort are observed, the staff who conducted the direct visual check must attempt to wake the child up. Where no signs of distress or discomfort are observed, proceed to step 3.

a) Where the child wakes up, staff must:

i. attend to the child's needs;
ii. separate the child from other children if the child appears to be ill;
iii. document the incident in the sleep log book, and in the child's symptoms of ill health record, where applicable.

b) Where the child does not wake up, staff must immediately:

i. perform appropriate first aid and CPR, if required;

ii. inform other staff, students and volunteers in the room of the situation;

iii. contact emergency services or, where possible, direct another individual to contact emergency services;

iv. separate the child from other children or vice versa if the child appears to be ill;

v. inform the supervisor/designate of the situation; and

vi. contact the child's parent;

c) Where the child must be taken home or to the hospital, the supervisor or designate must immediately:

i. contact the child's parent to inform them of the situation and next steps.

d) Where the child's condition has stabilized, and/or after the child has been taken home and/or to the hospital, the staff who conducted the direct visual check and any staff who assisted with responding to the incident must:

i. follow the serious occurrence policies and procedures, where applicable;

ii. document the incident in the daily written record; and

iii. document the child's symptoms of illness in the child's records.

3. Staff must:

i. adjust blankets as needed;

ii. ensure the child's head is not covered;

iii. ensure there are no other risks of suffocation present;

iv. document the date, time and initial each direct visual check on the room's sleep log book; and

v. verbally inform other staff in the room that the check has been completed, where applicable and possible.

Use of Electronic Devices

- Where electronic devices are used to monitor children's sleep, staff will:
  - **not use electronic sleep monitoring devices to replace direct visual checks;**
  - check the monitor daily to verify that it is functioning properly (i.e. it is able to detect and monitor the sounds and, if applicable, video images of every sleeping child); and
  - actively monitor each electronic device at all times.

Additional Policy Statements

- Children who do not sleep will be monitored by the staff. If staffing allows, the children who do not sleep will go to a different room with an educator, if the children who do not sleep are required to stay in the same room as the children who are sleeping, they will be provided with activities that they can do.
- Cribs/cots are required to be 18" apart. A system is in place to quickly identify who is in the sleep room, a white board or sheet is posted in each sleep room. Staff use the white board/sheet to indicate which children are in the sleep room at each sleep time
- Each crib/cot is labelled with the childs names, this crib/cot is exclusive to this child unless the sheets are laundered and the crib/cot is sanitized.

Glossary

Adequate lighting*:* Where the light is bright enough to be able to complete the direct visual check with ease, and see the child clearly

***Direct Visual Check**:* A mechanism for monitoring sleeping children whereby an individual is physically present beside a child to look for signs of distress, discomfort or unusual behaviours (e.g. change in skin colour, change in breathing, signs of overheating) and react as required.
***Electronic Monitoring Device**:* A device used to observe a sleeping child from a distance. Such devices may capture images, video, and/or sound to keep track of a child's sleeping patterns, but cannot be used in place of direct visual checks.
***Licensee**:* The individual or corporation named on the licence issued by the Ministry of Education responsible for the operation and management of the child care centre.
Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal guardians, but will be referred to as "parent" in the policy).
***Staff (Employee)*:** An individual employed by the licensee (e.g. program room staff)

Anaphylaxis Policy

Policy Statement

A Child's Secret Garden Daycare staff will attempt to create an environment that minimizes the risk of exposure to allergens for children with life threatening allergies. This policy recognizes that the risk of accidental exposure can be reduced but not eliminated. Included in this policy are ways to reduce risks of allergic reactions and anaphylactic emergencies.

The intent of this policy is to provide information to staff so they may work in co-operation with parents in managing life threatening allergies. The intent of this policy is also to provide guidelines and procedures for creating a safe and healthy environment for anaphylactic children.

Foods to be avoided will depend on allergies/anaphylaxis of the children who are currently enrolled at the time. Allergens that could cause and anaphylactic allergy (known to the centre) will not be purchased unless for a room where that child would not be present. It is also important to not those allergens in cases where children with anaphylaxis are present; sensory and crafts must also avoid use of these products.

The strategies and information in this policy will be revised as necessary depending on the life-threatening allergies of the children enrolled.

Communication Plan	● Anaphylaxis is a severe, potentially life-threatening allergic reaction that can occur within seconds or minutes after exposure to certain allergens, such as foods, medicines, insect bites and stings as well as other substances that trigger the body's immune response. ● The parents are required to fill out the registration form, prior to starting, on the form they are to answer if their child has any known allergies and/or medical conditions ● Prior to the first day a child with life threatening allergies starts attending the childcare centre the staff will review and sign the individual anaphylactic plan. Casual staff, students and volunteers will be informed of the situation during orientation to their participation in the program. ● A sign will be posted at the entrance of the daycare to inform parents, childcare staff, students and volunteers that there are children attending the centre who are at risk for potential life-threatening allergies and the foods and/or causative agents to be avoided ● Staff will review strategies intended to reduce the risk of exposure to life threatening allergies by reviewing the policy annually ● An allergy list will be posted in rooms children eat and/or play ● The cook will review the allergy list and individual anaphylaxis plans each time one is updated or added and will communicate with the director to decide on an appropriate substitute.

	● Parents will collaborate on individual anaphylactic plans and communicate any allergies or other concerns
Staff training	● The staff will learn the times to use an auto-injector, and how to administer one, and also signs and symptoms of an anaphylaxis reaction, and procedures to be followed for anaphylaxis events through their CPR and first aid certification. ● All staff will be trained in avoidance strategies and emergency protocol and will be provided with information regarding anaphylaxis, by reviewing this policy ● Staff must review individual anaphylaxis plans when updated or new ones added. ● All cooks and staff who prepare foods will be review individual anaphylaxis plans when updated or new ones added, these will be posted in the kitchen (as well as rooms where children eat/play) ● **Any supply/casual staff that do not hold their First Aid/CPR may not administer any auto-injector.**
Individual anaphylactic plan	● An 'Individualized plan and Emergency Procedures for a Child with an Anaphylactic Allergy' will be completed for each child who has an anaphylaxis allergy. This plan will be posted in the child's classroom, as well as the kitchen. ● This plan will be developed in consultation with parent of the child and with the regulated health professional who is involved in the child's health care and who, in the parents opinion, should be included in the consultation ● This plan must also include a description of the procedures to be followed in the event of an allergic reaction or other medical emergency. ● Parents will be encouraged to advise the childcare centre as soon as possible if their child develops an allergy and requires medication, if there are any changes to the child's individual plan, if the child has outgrown an allergy or no longer requires medication Individual plans will include ● A description of the child's allergy ● Steps to reduce the risk of exposure to causative agent/allergy ● Signs and symptoms of an anaphylactic reaction ● Action to be taken by childcare centre staff in the event the child has an anaphylactic reaction ● Whether parent/guardian consent for the child to self-administer allergy medication has been granted ● Whether parent/guardian consent for the childcare staff to administer the allergy medication has been granted ● Emergency contact information (parent/ alternate emergency contact/ emergency services
Reducing the risk of exposure	● If the allergy is life threatening then all steps will be taken to eliminate the allergen as much as possible from menus, and as much as possible in lunches brought from home. The following are suggestions, actual implementation would depend on what children (who are currently enrolled) are known to be allergic to; ● Discourage the sharing of food, utensils and containers.

	● Encourage the anaphylactic child to place food on wax paper or a paper napkin rather than directly on the desk or table and taking only one item at a time from the lunch bag to prevent other children from touching the food. ● Establish a hand washing routine before and after eating. ● Disinfect tables before and after eating. ● Avoid allergens in activities and materials such as play dough, stuffed toys, and art. ● Avoid art projects that require food, or empty milk or egg cartons. ● The allergic child should not clean up other children's food, nor should they participate in cleanup of the outdoor playground. ● Keep a box of safe snacks for unplanned special occasions. ● Go through the refrigerator, cupboards and pantry and identify and separate out all the foods that are safe for the child. ● Children with an allergy to insect venom should be immediately removed from the room if a bee or wasp enters the room. ● Staff should refrain from eating foods containing allergens, but if they do, proper steps should be taken to wash hands, brush teeth, etc ● Staff will be aware that nuts can be buried in the play yard by squirrels, etc., and will look for evidence of such when doing the daily yard check. ● Every effort will be made to eliminate the allergen in the daycare menus.
Special Occasion	● Avoid always using food for special occasions focusing instead on games, crafts, singing and other non-food related activities. ● Let parents of anaphylactic children know about special events in advance so they can send safe foods for their child. Do not allow any parent to bring in unexpected treats for the children
Field Trips	Review emergency plans with staff members/volunteers before a field trip. ● Designate one staff member who has training using the auto-injector to be responsible for the anaphylactic child on field trips. ● This staff member will carry all available auto-injectors for the child and will have a cell phone if at all possible. ● School-age children will carry their own auto-injector. During active recreational activities one designated staff member will become responsible for the auto-injector. ● For outdoor field trips in the winter, the designated staff member should keep the auto-injector inside their coat and close to their body to ensure that the medication stays warm. ● The staff member will call 9-1-1 stay with the child at all times and will accompany the child to the hospital, if possible, should a reaction occur. ● Permission slips for field trips should include information about severe food or other allergies.
Medication and records	Medication storage and emergency access (2026 update) ● Medication is stored in accordance with its labelled storage instructions, in a locked container and inaccessible to children, except where permitted under Ontario Regulation 137/15, subsection 40(2). The centre may permit a staff member or a child to carry medication for asthma, emergency allergies, diabetes or epilepsy in accordance with the centre's medication administration procedures and the child's individualized plan. ● Other medication may also be carried where the centre has documentation from the prescribing medical professional confirming that it must be readily available to prevent a significant risk to the child's health.

	● The child's individualized plan will identify who may carry the medication. Written parental authorization and medication instructions will be kept on file. Permission to carry medication does not, by itself, authorize a child to self-administer it. ● Staff will ensure that medication carried under these arrangements is readily accessible when needed and protected from access by other children. ● Procedures for keeping appropriate medication administration records can be found in the 'medication policy' ● Before outings, transitions and departures from the centre, staff will confirm that medication required to accompany the child is with the person identified in the child's individualized plan. Staff will maintain ready access to the medication while preventing access by other children and following the medication's storage instructions.
compliance	See 'childcare centre policy for monitoring compliance and contraventions'

Signs and Symptoms of an Anaphylaxis event

An anaphylactic reaction can begin within seconds of exposure or after several hours. Anyone or combination of the following symptoms may signal the onset of a reaction.

- hives
- itching (on any part of the body)
- swelling (on any body parts, especially eyes, lips, face, tongue)
- itching or tingling in the tongue, mouth or throat.
- red, watery eyes
- runny nose
- vomiting, upset stomach
- diarrhea
- stomach cramps
- wheezing
- panic
- difficulty swallowing
- difficulty breathing
- sense of doom, fear, apprehension
- dizziness, unsteadiness
- fainting, or loss of consciousness
- coughing
- change of colour
- flushed face, body
- change of voice (clearing, choking)
- tightness in throat (closing) or in mouth or chest
- coma and death

Symptoms do not always occur in the same order, even in the same individuals. Time from onset of first symptoms to death can be as little as a few minutes, if the reaction is not treated. Even when symptoms have subsided after treatment, they can return 10 minutes later or as much as eight hours after exposure.

Facts to Consider

- Strict avoidance of the food allergen is the only way to prevent a potentially fatal allergic reaction.
- Fatal reactions can be induced by as little as a milligram of the allergen.

- Peanut residue can remain on surfaces for up to six months, without proper cleaning.
- Death can occur within minutes.
- Anaphylactic reactions can be caused by cross contamination from allergic food to a non-allergic food during food processing or preparation.
- For some children, allergic reactions can be triggered not only by eating foods but also by their touch and smell. This has implications for the whole childcare centre, not just a particular area or room.
- Emotional stress is a factor of living with life threatening allergies. Children constantly deal with always being different; knowing they can die, peer pressure to conform, and bearing a constantly high level of responsibility.

Procedure

In order to enroll a child with life threatening allergies, all precautions must be taken in order to ensure the child's safety in the program.

Emergency Procedure - Anaphylaxis

In case of Emergency!

1. Administer the auto-injector

Don't hesitate. The child should rest quietly. To inject:

- Remove auto-injector from case.
- Pull off grey safety cap.
- Jab into OUTER MID-THIGH of child's leg with the black tip end of the needle. (This may be done through the child's clothing, if necessary.)
- Wait for fluid to enter body (10 seconds - an accurate way to count: one-one thousand, two-one thousand, etc.)
- The child should be rushed to the hospital after administration of an auto injector; any additional auto- injector should accompany the child in case a second injection (a maximum of three to be administered) is required if symptoms persist or recur.
- The time of the first injection should be noted so that the second auto-injector can be administered in 10/15 minutes, if symptoms persist or recur.

2. Have someone call 9-1-1.

Tell them that a child has had an anaphylactic reaction. Give the name and address of the centre

3. Help the child to remain calm.

4. Call the parent/guardians/emergency contact.

5. Observe and monitor the child until the ambulance arrives.

6. Administer a second auto-injector - only if needed and available.

Administer 10/15 minutes after the first, (a maximum of 3 doses to be administered).

7. Send any additional auto-injector with child in the ambulance (maximum of 3 doses).

Safe Arrival and Dismissal Policy and Procedures

Name of Child Care Centre: **A Child's Secret Garden Daycare** Date Policy and Procedures Established: January 1, 2024 Date Policy and Procedures Updated: January 8, 2024

Purpose

This policy and the procedures within help support the safe arrival and dismissal of children receiving care.

This policy will provide staff, students and volunteers with a clear understanding of their roles and responsibilities for ensuring the safe arrival and dismissal of children receiving care, including what steps are to be taken when a child does not arrive at the child care centre as expected, as well as steps to follow to ensure the safe dismissal of children.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for policies and procedures regarding the safe arrival and dismissal of children in care.

Note: definitions for terms used throughout this policy are provided in a Glossary at the end of the document.

Policy

General

- A Child's Secret Garden Daycare (ACSGD) will ensure that any child receiving child care at the child care centre is only released to the child's parent/guardian or an individual that the parent/guardian has provided written authorization the child care centre may release the child to.

> ACSGD will only dismiss children into the care of their parent/guardian or another authorized individual. The centre will not release any children from care without supervision.

Where a child does not arrive in care as expected or is not picked up as expected, staff must follow the safe arrival and dismissal procedures set out below.

Additional Policies

- Parents/Guardians must call prior to 9:30am if their child will be late that day, the child will not be accepted after 9:30am, if the centre was not notified.
- Everyone must be out of the building by 5:00pm, if a parent/Gaudian is late picking up their child there is a late fee, and the child's spot will be terminated after the second occurrence.
- The late fee is 1-10 min late - $20 + $1/min thereafter.
- *See "Late drop off/Pick up policy*"

Procedures

Accepting a child into care

1. When accepting a child into care at the time of drop-off, program staff in the room must:

- greet the parent/guardian and child.
- ask the parent/guardian how the child's evening/morning has been and if there are any changes to the child's pick-up procedure (i.e., someone other than the parent/guardian picking up). Where the parent/guardian has indicated that someone other than the child's parent/guardians will be picking up, the staff must confirm that the person is listed on The Front page of their registration form or where the individual is not listed, ask the parent/guardian to provide authorization for pick-up in writing (e.g., note or email).
- document the change in pick-up procedure in the daily written record.
- sign the child in on the classroom attendance record.

Where a child has not arrived in care as expected

1. Where a child does not arrive at the child care centre and the parent/guardian has not communicated a change in drop-off (e.g., left a voice message or advised the closing staff at pick-up), the staff in the classroom must:

- inform the Director and they must commence contacting the child's parent/guardian no later than 9:30am or 15 min after scheduled drop off (if later than 9:30am). Staff shall Call the parent to confirm absence, if there is no answer, the staff will leave a voice mail requesting a call back to confirm.
- On the fifth day of no call/no show and the staff are not able to contact the family, staff will notify CAS and/or the police. The spot at the centre will also be terminated at this point.

2. Once the child's absence has been confirmed, program staff shall document the child's absence on the attendance record and any additional information about the child's absence in the daily written record.

Releasing a child from care

1. The staff who is supervising the child at the time of pick-up shall only release the child to the child's parent/guardian or individual that the parent/guardian has provided written authorization that the child care may release the child to. Where the staff does not know the individual picking up the child (i.e., parent/guardian or authorized individual),

- confirm with another staff member that the individual picking up is the child's parent/guardian/authorized individual.
- where the above is not possible, ask the parent/guardian/authorized individual for photo identification and confirm the individual's information against the parent/guardian/authorized individual's name on the child's file or written authorization.

Where a child has not been picked up as expected (before centre closes)

1. Where a parent/guardian has previously communicated with the staff a specific time or timeframe that their child is to be picked up from care and the child has not been picked up[by 4:45pm (unless pick up arrangements are after that), the Program staff shall contact the parent/guardian by phone and advise that the child is still in care and has not been picked up.

o Where the staff is unable to reach the parent/guardian, staff must call again and leave a message for the parent/guardian Where the individual picking up the child is an authorized individual and their contact information is available, the staff shall proceed with contacting the individual to confirm pick-up as per the parent/guardian's instructions or leave a voice message to contact the centre.

o Where the staff has not heard back from the parent/guardian or authorized individual who was to pick up the child the staff shall Wait until program closes and then refer to procedures under "where a child has not been picked up and program is closed".

Where a child has not been picked up and the centre is closed

1. Where a parent/guardian or authorized individual who was supposed to pick up a child from care and has not arrived by 5:00pm staff shall ensure that the child is given a snack and activity, while they await their pick-up.

2. Staff will proceed with calling the parent/guardian to advise that the child is still in care and inquire their pick-up time. In the case where the person picking up the child is an authorized individual, the staff shall contact the parent/guardian first and then proceed to contact the authorized individual responsible for pick-up if unable to reach the parent/guardian.

3. If the staff is unable to reach the parent/guardian or authorized individual who was responsible for picking up the child, the staff shall Call the emergency contacts listed on the child's registration form.

4. Where the staff is unable to reach the parent/guardian or any other authorized individual listed on the child's file (e.g., the emergency contacts) by 5:15pm], the staff shall proceed with contacting the local Children's Aid Society (CAS) . 613-933-2292, 1-866- 939-9915. Staff shall follow the CAS's direction with respect to next steps.

5. If CAS is closed or ACSGD staff cannot reach a CAS staff member, ACSGD staff will then call the police to inform them of the situation.

Dismissing a child from care without supervision procedures

Staff will only release children from care to the parent/guardian or other authorized adult. Under no circumstances will children be released from care to walk home alone.

Glossary

Individual authorized to pick-up/authorized individual: a person that the parent/guardian has advised the child care program staff in writing can pick-up their child from care.

Licensee: The individual or corporation named on the licence issued by the Ministry of Education responsible for the operation and management of the child care centre and home child agency.

Parent/guardian: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family.

Regulatory Requirements: Ontario Regulation

137/15 Safe arrival and dismissal policy

Every licensee shall ensure that each child care centre it operates and each premises where it oversees the provision of home child care has a policy respecting the safe arrival and dismissal of children that,

provides that a child may only be released from the child care centre or home child care premises,

to individuals indicated by a child's parent, or

in accordance with written permission from a child's parent to release the child from the program at a specified time without supervision; and

sets out the steps that must be taken if,

a child does not arrive as expected at the centre or home child care premises, or

(ii) a child is not picked up as expected from the centre or home child care premise

Zero Tolerance

We will not tolerate the following behaviors at the centre. It will result in an instant dismissal.

Inappropriate Actions/Inactions:

- **Violence (physical attacks or threats of harm)**
- **Intimidation**
- **Throwing, damaging property, or breaking things**
- **Unwelcomed physical contact**
- **Failure to observe ACSGD policies and/or contracts**
- **Refusing to leave the property**
- **Failure to pick up sick child**
- **Reckless driving**
- **Rude behaviour**
- **Failure to show Identification at pick up when asked**
- **Failure to remove boots/shoes while inside the centre**
- **Failure to follow policies**

Inappropriate Words (in person, by phone, or any means of communication):

- **Abusive language and yelling**
- **Disrespectful or demeaning language/comments**
- **Remarks, jokes, or innuendos that degrade, ridicule, or offend**
- **Discriminatory remarks**
- **Threats or threatening behaviour**
- **Bullying**
- **Sexual Harassment**
- **Raising Voice**
- **Disrespecting the Educators/Staff**
- **Arguing with staff regarding policies**

It is your responsibility to ensure that the above is followed. The staff at the daycare are taking care of your children and management will not allow them to be treated poorly.

Thank you

We at A Child's Secret Garden Daycare Inc. are pleased to be able to provide quality programming for your children that exceeds your expectations. Thank you for the trust you have placed in us by choosing A Child's Secret Garden Daycare