



Goderich Municipal Child Care Centre Policies & Procedures

Table of Contents

Program Implementation Statement	1
Program Statement	3
Alcohol Policy/ Drug Impairment Policy.....	6
Anaphylactic Policy.....	8
Child Abuse and Neglect Policy	20
Vulnerable Sector Check Policy and Procedure	24
Child Care Centre Drug and Medication Administration Policy and Procedures.....	28
Emergency Management Policy and Procedures	43
Environment Protection Policy and Procedures	55
Fire Drills and Evacuation Policy and Procedure	57
Goderich Child Care Centre Intruder Practice	60
Child Care Centre Policy for Monitoring Compliance and Contraventions.....	62
Parent Issues and Concerns	68
Child Care Centre Outdoor and Playground Safety Policy and Procedures	70
Child Care Safety Policy	78
Sanitary Policies and Procedures.....	80
Child Care Centre Serious Occurrence Policy and Procedures.....	82
Child Care Centre Sleep Supervision Policy and Procedures	95
Staff Training and Development Policy	100
Child Care Centre Supervision of Students and Volunteers Policy	101
Wait List Policy.....	104
Safe Arrival and Dismissal Policy and Procedures.....	105



Date of Policy		Program Implementation Statement
		Child Care & Early Years Act, 2014 (CCEYA)

Program Implementation Statement

Child care staff, students and volunteers will use the Program statement goals and approaches to guide them in their daily interactions with our children and families. Encouraging children in a positive environment where they feel welcome and comfortable.

As outlined in the Program statement, the staff will welcome parents into the Centre, update them in regard to their child's day via the Lillio App. Providing documentation through this app with examples that reflect the learning and are examples of children being resourceful, competent, and capable of complex learning.

Children will be supported in a positive manner and provide activities that encourage learning and experiences in all areas of the day.

Using the Circle of Security model, staff will support children in all areas of development and inquire, share, observe, and document interests and self-reflect within their learning.

Reflecting at staff meetings and training expanding their learning, staff will share goals of the CPL and reflect upon the How Does Learning Happen.

As per the Program statement, we strive to create a home-like atmosphere for children and families.

Where a staff, student, or volunteer is observed to be non-compliant with the program statement or prohibited practice, the licensee, supervisor, or designate will take one or more of the following actions:

- Inform the individual that a non-compliance was observed, including the review of any pertinent records or documentation that provide evidence of the non-compliance.
- Inform the relevant parties (e.g., College of Early Childhood Educators, College of Teachers, College of Social Work and Social Services, the contact person for the program from which a student has been placed, CAS, police, etc.)
- Where an observed non-compliance meets the criteria for a reportable serious occurrence (e.g., an allegation of abuse or neglect), the serious occurrence policy and procedures will be followed.
- Where appropriate, the supervisor or designate will follow up with the family of a child in accordance with our policies and procedures on parent issues or concerns.

Progressive discipline may be used to address observed non-compliance with policies, procedures, and individualized plans, taking into consideration the nature and severity of the incident, and the

individual's history of previous non-compliances. The director/supervisor will keep a written record of the discussion and any subsequent actions.

- Issue a verbal warning;
- Issue a written warning.
- Temporarily suspend the individual from their position at the childcare centre.
- Terminate the individual from their position.

PROHIBITED ACTIONS

Under no circumstances is the following permitted:

- (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 childcare centre or home childcare 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.

O. Reg. 137/15, s. 48; O. Reg. 126/16, s. 34.



Date of Policy	Revised January 2024	Policy Program Statement
		Child Care & Early Years Act, 2014 (CCEYA)

Program Statement

This program statement was developed to be consistent with the recommendations from the Minister's statement and to be based on programming and pedagogy. Staff will reflect on this statement, and it will be reviewed by staff annually. To ensure that this statement meets the ongoing needs of staff, children, and families within Goderich Municipal Childcare Centre, it will be reviewed annually to ensure it is relevant and current.

As such, this program statement is a living document that continually evolves with the ongoing engagement of the staff and families in our program. Annual and ongoing review of the program statement with staff, students, volunteers, and families ensures its continued relevance. Ensuring that the strategies set in place provide a positive impact and are reflective as a whole.

Staff are supported to make meaningful contributions to the ongoing development and evolution of the program through professional learning provided in the form of onsite pedagogical leadership, attendance in training, workshops and conferences, and support with education.

To support positive and responsive interactions among children, families, and childcare staff.

We value the family as a whole and invite parents/caregivers to be active participants and contributors throughout all areas of the program. Open communication enables us to share valuable information regarding all aspects of the child's development. Being respectful of family values and beliefs allows us to learn and grow together and therefore, create a caring family centered environment. Staff communicate daily with families and families have access to the Lillio App. This app allows staff to stay in contact with families, upload documentation and provide information throughout the day. As well as an easy way to send messages or questions. We are genuinely interested in the children's lives and encourage families to share experiences and ideas.

Allowing all children to participate in all areas of programming will allow a positive learning environment and encourage diversity. Each child will be supported in a positive way which encourages learning and experiences, which is inclusive of all children including children with individual plans. All areas of learning and development will be supported in a positive manner.

Children are viewed as resourceful, competent, capable of complex thinking, and rich in potential.

Educators are co-learners and will collaborate with the children to gain an understanding of the children's current interests. We value their thoughts about the world around them and encourage children to be active contributors to our classroom learning. We offer open-ended activities that

encourage thinking by providing invitations to provocations within the classroom and in our outdoor environment.

To incorporate indoor and outdoor play, as well as active play, rest, quiet time into the day and consider the individual needs of children receiving childcare.

Educators provide indoor and outdoor environments and experiences that invite children to investigate, imagine, think, and create. Open ended materials, sensory, loose parts and activities that permit reasonable risk taking allow children to engage in meaningful play through active exploration and inquiry. The educator will allow the children the freedom to seek out areas of play, rest, or engage in quiet activities.

Supporting families while providing a creative experience, supporting the children throughout various parts of the day, and supporting nap time while being mindful of parent request and children's needs.

Children interact and communicate in a positive way to support their ability to self-regulate.

To support the development of individual self-regulation skills the educator will help model, guide and support the child in expressing their emotions in a calm, relaxed, and positive way. Guidance can include setting expectations, limits, and rules but also by providing techniques that will help the children develop confidence in themselves and their abilities. Providers will support the children's development through positive and consistent interactions designed to promote problem solving skills and self-regulation. The programs will allow children the opportunity to rest or engage in quiet activities to meet their individual needs for self-regulation. Encouraging all children to identify and acknowledge feelings and how to regulate them.

Fostering the children's exploration, play and inquiry.

By providing a vast array of learning materials we will encourage the children's exploration play and inquiry, adding learning materials as their interests evolve. These items may include but are not limited to nature items, items from home or the community. Offering various areas for the children to engage in, such as creative, literacy, and cognitive. We will inquire, share, observe, and document the interests of the children while providing materials that challenge and inspire. The documentation process will assist us in reflecting on ourselves and the effectiveness of our programs.

Providing child-initiated and adult-supervised experiences.

By observing and documenting experiences, we will further extend the learning by providing various opportunities to expand ideas and thoughts. By providing materials that foster learning. Educators support all children in the programs and allow all children to participate. Being flexible in programming and following the children's lead by providing choices and expanding on learning opportunities. By creating a positive learning environment all children's learning and development will be supported.

Children have a strong sense of self-health, safety, and well-being

Our kitchen staff and some staff are trained in Safe Food Handling. Healthy food choices for our menu are reflective of Canada's Food Guide recommendations. All staff and parents work together to ensure any dietary concerns or restrictions are addressed and monitored. An Allergy and/or Parental Food preference list is posted on the wall of each classroom and in the kitchen. Any

allergies or food intolerances are highlighted on a menu so staff, students, and volunteers are aware of the lunches that contain dietary restrictions. Daily food consumption for infants and toddlers will be documented in the Lillio App and parents will receive the information nightly. Mealtimes parallel a home environment in which the children engage in conversations with their friends at the table during lunch and snack times. Educators sit with the children at the table to demonstrate table manners and promote self-help skills. Children are allowed to make choices about the food being offered and the amount of food they wish to eat. Once children are developmentally ready, they are encouraged to serve themselves and participate in part of our clean up routine. It is our belief that regular daily routines foster strong, secure, capable, and competent children.

Children have the opportunity for outdoor play and to expand their gross motor skills and staff will expand their learning to encourage thinking in all areas of the programs.

The safety of the children, staff, and families is important to us, educators ensure all equipment and materials are in good repair, and all staff are trained and current in First Aid and CPR. As well, educators complete visual health and emotional checks of each child upon arrival, and communicate daily with the parents and caregivers to ensure the health and well-being of the children as well as daily sleep, and playground checks as well as monthly fire drills are all a part of our commitment to a safe environment.

To support child care educators in relation to continuous professional learning

To support each staff in their professional development, Educators participate in a variety of scheduled and voluntary learning opportunities throughout the year. Staff are encouraged to share their learning journey with other staff and families but also reflect upon their personal growth and the direction they wish to take next. Several times yearly, staff work together to share program observations and ideas that strengthen our learning community.

To involve local community partners and allow those partners to support children, families, and staff

We will work alongside our community partners and agencies to better support our children and families. If a child care educator or parent has a question or concern with regards to child development, they will consult with our Growing Together Early Learning Resource Consultant Program. Other referrals may be required based on the needs of the child and family.

In-Centre supports from the following Service Agencies are also available in centre to help with specialized programming: Small Talk (Speech and Language), Thames Valley Children's Centre (Physiotherapy and Occupational Therapy).

At Goderich Municipal Child Care Centre, we strive to create a home-like atmosphere for children and families. Being reflective of the "How Does Learning Happen" Document, we view the children as competent, capable, and rich in potential.



Date of Policy	Revised January 31/24	Alcohol Policy/ Drug Impairment Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Alcohol Policy/ Drug Impairment Policy

If a parent arrives to pick up a child and shows signs of alcohol or drug impairment and you are concerned for the child's safety, you are requested to follow the following procedure.

Talk to the parent/ guardian to assess his/her level of impairment.

Symptoms may include:

- The smell of alcohol on the person's breath. The face, particularly the nose, cheeks and forehead may be flushed.
- Eyes may be bloodshot, watery, or droopy. Balance may be unsteady when standing or walking.
- Speech may be slurred.
- The person may have difficulty completing simple tasks.

Express to the parent/ guardian your concern about the child's safety.

Offer to keep the child in care until another adult arrives or to call a friend of the parent, or a taxi to drive the parent/guardian and child home. Indicate to the parent that you must follow both the policy of the Program and the law. The parent may be directed to call to speak with the Program Director or designate, or you may call the Program Designate or designate for the parent.

If the parent leaves with the child, refusing your offer to keep the child until another adult arrives, record the parent's license plate number, vehicle make, and colour. Phone the police immediately, informing them of the direction that the parent is heading and of your concern for the child's safety as a result of the parent's impairment.

If the parent becomes physically or verbally aggressive, do not further aggravate the situation. Once the parent leaves with the child, the police should be called.

7.5 Call the Program Director or designate to inform the Director or designate of the incident.

7.6 All details regarding the incident must be **documented** and forwarded to the Program Director or designate the day following the incident.

Note: Program staff should have reasonable grounds to believe that the parent is impaired prior to following this procedure. One symptom alone, such as the smell of alcohol on the person's breath, may not indicate impairment. Please exercise common sense and good judgement.

When in doubt, contact the Program Director or designate or request assistance from the other staff. When making a phone call, all children must be supervised by a staff member of the Program. If an adult other than the parent arrives impaired, call the parent first then follow the steps above if the parent is unavailable.



Date of Policy	Revised January 31/24	Anaphylactic Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Anaphylactic Policy

The Goderich Municipal Child Care Centre has set forth a strategic plan in the event that one of the children attending the child care program has a known anaphylactic allergy. A communication plan has been set in place to accommodate this life-threatening allergy, and a plan has been set forth to educate the staff/students and volunteers on each individual child's case. Also, an emergency plan has been developed with complete input from the child's parents on procedures to follow in the event of an anaphylactic reaction. Anaphylaxis is a serious allergic reaction that can be life-threatening. It requires avoidance strategies and immediate response in the event of an emergency. These policies and procedures are intended to help meet the needs and save the lives of children with severe allergies and provide relevant and important information on anaphylaxis to parents, staff, students, and volunteers, and visitors at the child care centre.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for an anaphylactic policy for child care centres. The requirements set out in this policy align with Sabrina's Law, 2005.

Before attending the child care centre, the supervisor/designate will meet with the parents of a child to obtain information about any medical conditions, including whether the child is at risk of having or has anaphylaxis.

All individualized plans and emergency procedures will include a description of symptoms of an anaphylactic reaction that are specific to the child and the procedures to be followed in the event of an allergic reaction or other medical emergency based on the severity of the child's symptoms.

The individualized plan and emergency procedures for each child will include information for those who are in direct contact with the child on a regular basis about the type of allergy, monitoring, and avoidance strategies and appropriate treatment.

All individualized plans and emergency procedures will be made readily accessible at all times to all staff, students, and volunteers at the child care centre and will be kept in the director's office.

All individualized plans and emergency procedures will be reviewed with the parent of the child yearly or anytime a change happens to ensure the information is current and up to date.

Strategies to Reduce the Risk of Exposure to Anaphylactic Allergens

The following strategies to reduce the risk of exposure to anaphylactic causative agents must be followed at all times by employees, students, and volunteers at the child care centre.

- Do not serve foods where its ingredients are not known.
- Do not serve items with 'may contain' warnings on the label in a room where there is a child who has an individualized plan and emergency procedures specifying those allergens.
- Reviewing the known ingredients for all food provided. The ingredients will be reviewed before food is served to children to verify that causative agents are not served to children with anaphylactic allergies.
- In cases where a child has food allergies and the meals and snacks provided by the child care centre cannot meet the child's needs, ask the child's parent to supply snacks/meals for their child. All written instructions for diet provided by a parent will be implemented.
- Ensure that parents label food brought to the child care centre with the child's full name and the date the food arrives at the child care centre, and that the parents advise of all the ingredients.
- Where food is provided from home for children, ensure that appropriate supervision of children is maintained so that food is not shared or exchanged.
- Encourage parents who serve foods containing allergens at home to ensure their child has been rid of the allergens prior to attending the child care centre (e.g. By thoroughly washing hands, brushing teeth, etc.).
- Do not use craft/ sensory materials and toys that have known allergens on the labels.
- Share information about anaphylaxis, strategies to reduce the risk of exposure to known allergens and treatment with all families enrolled in the child care centre.
- Make sure each child's individual plan and emergency procedure are kept up-to-date and that all staff, students, and volunteers are trained on the plans.
- Refer to the allergy list and ensure that it is up-to-date and implemented.
- Update staff, students, and volunteers when changes to a child's allergies, signs and symptoms, and treatment occur and review all the updates to individualized plans and emergency procedures.
- Update families when changes to allergies occur while maintaining the confidentiality of children

- Update or revise and implement the strategies in this policy depending on the allergies of children enrolled at the child care centre.

Strategy to Avoid Exposure

Parents and staff will be advised and asked not to bring in foods from home to the childcare program that are a known reactant of an individual anaphylactic child at Goderich Municipal Child Care Centre. Allergy lists will be posted in the kitchen and food serving areas, office, and in each classroom. If anaphylactic medication is needed, the location will be posted so that each staff will have knowledge of its location. Each parent will be notified of a child that is attending Goderich Municipal Child Care Centre that has a known anaphylactic allergy. Staff will avoid using craft and sensory material if it is a known allergy to a child attending. The strategy will be revised as per child attending with anaphylactic allergy. Dietary staff will be prudent about food preparation, how to read and interpret food labels, and how to wash and store dishes.

Communication Plan

The Goderich Municipal Child Care Centre will provide general information on life-threatening allergies, including anaphylactic allergies, to staff/volunteers and students.

The following is our communication plan for sharing information on life-threatening and anaphylactic allergies with staff, students, volunteers, parents, and families.

Parents will be encouraged not to bring food from home that contains ingredients to which children may be allergic.

Parents and families will be informed about anaphylactic allergies and all known allergens at the child care centre through postings on the centre entrance doors.

A list of all children's allergies, including food and other causative agents will be posted in all cooking and serving areas, in each play activity room, and made available in any other area where children may be present.

Each child with an anaphylactic allergy will have an individualized plan and emergency procedures that detail signs and symptoms specific to the child describing how to identify that they are having an allergic reaction and what to do if they experience a reaction.

Each child's individualized plan and emergency procedures will be made available and accessible wherever the child may be present while receiving child care.

The caterer, cook, and individuals who collect groceries on behalf of the child care centre, and/or other food handling staff, where applicable, will be informed of all the allergies at the child care centre, including those of children, staff, students, and volunteers. An updated list of allergies will be provided to the caterer or cook as soon as new allergies are identified. The Supervisor or Designate will communicate with the caterer/cook about

which foods are not to be used in food prepared for the child care centre and will work together on food substitutions to be provided.

The child care centre will communicate with the Ministry of Education by reporting serious occurrences where an anaphylactic reaction occurs in accordance with the established serious occurrence policy and procedures.

This communication plan will be continually reviewed to ensure it meets the needs of the child care centre and that it is effectively achieving its intended result.

The Goderich Municipal Child Care Centre will avoid, to the best of our ability, exposure to known allergens to your child. Allergy lists will be posted in kitchen and food serving areas, office, and all classrooms. The dietary staff and classroom staff will monitor foods provided to the children to ensure that no known allergens are served to children with anaphylactic allergies.

Child's Individualized Plan and Emergency Plan

Each child at Goderich Municipal Child Care Centre that has a known anaphylactic allergy will have their own individual emergency plan set forth for their individual needs as identified by the parents of the child attending. All staff, including casual call-in and volunteers, will be trained in the procedures and are required to read each plan before they begin employment or providing guidance at the Centre and at least annually afterwards.

The individual plan will include a description of the child's allergy, monitoring, and avoidance strategies, and signs and symptoms of an anaphylactic reaction. It will also include the parent's consent for the staff to administer the allergy medication in the event the child has an anaphylactic reaction. Emergency information will also be on the individual plan.

Parents will advise the Goderich Municipal Child Care Centre staff if an anaphylactic allergy develops or if the child is no longer requiring the medication.

Every child's epinephrine auto-injector must be carried everywhere that the child goes.

Drug Medication Requirements

Where drugs or medications will need to be administered to a child in response to anaphylactic reaction, the drug administration policy will be followed.

Emergency allergy medication (e.g. Oral allergy medications, puffers, and epinephrine auto-injectors) will be allowed to remain unlocked or carried by children with parental authorization so that they can be administered quickly when needed.

Training

The director will ensure that the supervisor/designate and/or all staff, students, and volunteers receive training from a parent of a child with anaphylaxis on the procedures to

follow in the event of a child having an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer emergency allergy medication.

Where only the supervisor/designate has been trained by a parent, the supervisor/designate will ensure training is provided to all other staff, students, and volunteers at the childcare centre.

Training will be repeated annually, and at any time there are changes to any child's individualized plan and emergency procedures.

A written record of training for staff, students, and volunteers on procedures to be followed for each child who has an anaphylactic allergy will be kept, including the names of individuals who have not yet been trained. This will ensure that training is tracked, and follow-up is completed where an individual has missed or not received training. The form in Appendix B may be used for this purpose.

Confidentiality

Information about a child's allergies and medical needs will be treated confidentially and every effort will be made to protect the privacy of the child, except when information must be disclosed for the purpose of implementing the procedures in this policy and for legal reasons (e.g. To the Ministry of Education, College of Early Childhood Educators, law enforcement authorities, or a Children's Aid Society).

Procedures to be followed in the circumstances described below:

Circumstance	Roles & Responsibilities
<p>A) A child exhibits an anaphylactic reaction to an allergen</p>	<ol style="list-style-type: none"> 1. The person who becomes aware of the child's anaphylactic reaction must immediately: <ul style="list-style-type: none"> - Implement the child's individualized plan and emergency procedures. - Contact emergency services and a parent/guardian of the child, or have another person do so where possible, and - Ensure that where an epinephrine auto-injector has been used, it is properly discarded (i.e. given to emergency services, or in accordance with the drug and medication administration policy) 2. Once the child's condition has stabilized or the child has been taken to the hospital, staff must: <ul style="list-style-type: none"> - Follow the child care Centre's serious occurrence policies and procedures. - Document the incident in the daily written record; and - Document the child's symptoms of ill health in the child's records
<p>B) A child is authorized to carry his/her own emergency allergy medication</p>	<ol style="list-style-type: none"> 1. Staff must: <ul style="list-style-type: none"> - Ensure that written parental authorization is obtained to allow the child to carry their own emergency allergy medication. - Ensure that the medication remains on the child (e.g. Fanny pack, holster) and is not kept or left unattended (e.g. In the child's cubby or backpack); - Ensure that appropriate supervision is maintained of the child while carrying medication and of children in their close proximity so that other children do not have access to the medication; and - Where there are safety concerns relating to the child carrying his/her own medications (e.g. Exposure to other children), notify the centre supervisor/designate and the child's parent of these concerns, and discuss and implement mitigating strategies. Document the concerns and resulting actions in the daily written record.

Glossary

Anaphylaxis: A severe systemic allergic reaction which can be fatal, resulting in circulatory collapse or shock. Symptoms can vary for different people, and can be different from one reaction to the next, including:

- Skin: hives, swelling, itching, warmth, redness, rash
- Breathing (respiratory): coughing, wheezing, shortness of breath, chest pain/ tightness, throat tightness/swelling, hoarse voice, nasal congestion or hay fever-like symptoms (runny nose and watery eyes, sneezing), trouble swallowing
- Stomach (gastrointestinal): nausea, pain/cramps, vomiting, diarrhea
- Heart (cardiovascular): pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock
- Other: anxiety, feeling of 'impending doom', headache, uterine cramps, metallic taste in mouth

(Source: <http://foodallergy canada.ca/about-allergies/anaphylaxis/>)

Causative Agent (allergen/ trigger): a substance that causes an allergic reaction. Common allergens include, but are not limited to:

- Eggs
- Milk
- Mustard
- Peanuts
- Seafood including fish, shellfish, and crustaceans
- Sesame
- Soy
- Sulphites which are food additives
- Tree nuts
- Wheat
- Latex
- Insect Stings

Goderich Municipal Child Care Centre Individual Plan

Anaphylactic Procedure

Date: _____ Child's Name: _____

Description of Allergy: _____

The Goderich Municipal Child Care Centre will avoid, to the best of our ability, exposure to the known allergens of your child. Allergy lists will be posted in kitchen and food serving areas, office, and all classrooms. Parents will be made aware that there is an anaphylactic child in the centre and no food from home will be allowed unless labelled with the child's name and due to special dietary needs. The dietary staff and classroom staff will monitor foods provided to the children to ensure that no known allergens are served.

Please list signs and symptoms of your child's anaphylactic reaction:

The designated staff will administer the medication while another staff quickly calls 911 and the parents. The child care staff will safely move the other children to a safe location in the other room and stay with them. The designated staff will keep the child safe and monitor all symptoms and reactions.

Please list emergency procedures to follow if _____ has an anaphylactic reaction:

Allergy Medication(s): _____

Expiry Date Medication(s): _____

Consent has been given to grant permission to allow the staff to administer the allergy medication listed above in the event that my child suffers an anaphylactic reaction.

Parent Signature: _____ Date: _____

Emergency Information

Parent's Name: _____

Parent's Address: _____ Phone #: _____

Cell Phone #: _____

Emergency Contact: _____ Phone #: _____

Doctor's Name: _____ Phone #: _____

Doctor's Address: _____

This document confirms that training has taken place on the emergency procedures to be followed in the event that my child has an allergic/ anaphylactic reaction.

Parent Signature: _____

Date: _____

Appendix A: INDIVIDUALIZED PLAN AND EMERGENCY PROCEDURES FOR A CHILD WITH ANAPHYLACTIC ALLERGY

Child's Name: _____

Child's Date of Birth (dd/mm/yyyy): _____

List of allergen(s)/ causative agent(s):

Asthma: Yes (higher risk of severe reaction) No

Location of medication storage:

Epinephrine auto-injector brand name:

Epinephrine auto-injector expiry date (dd/mm/yyyy):

Other emergency medication(s)*:

Emergency Services Contact Number:

Photo of Child
(recommended)

<p>CHILD'S SPECIFIC SIGNS AND SYMPTOMS OF A NON-LIFE-THREATENING ANAPHYLACTIC REACTION: (specific to the child, e.g.: wheezing and itchy skin)</p>	<p>CHILD'S SPECIFIC SIGNS AND SYMPTOMS OF A LIFE-THREATENING ANAPHYLACTIC REACTION: (specific to the child, e.g. inability to breathe, sweating)</p>
<p>DESCRIPTION OF PROCEDURE TO FOLLOW IF CHILD HAS A NON-LIFE-THREATENING ANAPHYLACTIC REACTION:</p>	<p>DESCRIPTION OF PROCEDURE TO FOLLOW IF CHILD HAS A LIFE-THREATENING ANAPHYLACTIC REACTION:</p>
<p>STEPS TO REDUCE RISK OF EXPOSURE TO CAUSATIVE AGENT/ ALLERGEN: (e.g.: nut-free environment)</p>	
<p>ADDITIONAL NOTES (if applicable): (e.g. use of other emergency allergy medication(s) to implement the emergency procedures)</p>	

Parental Statement

I _____ (parent/guardian) hereby give consent for my child
 _____ (child's name) to (check all that apply):

____ Carry their emergency allergy medication in the following location (e.g.: blue fanny pack around their waist):

____ self-administer their own medication in the event of an anaphylactic reaction

AND/OR

I _____ (parent/guardian) hereby give consent to any person with training on this plan at the home child care premises to administer my child's epinephrine auto-injector and/or asthma medication and to follow the procedures set out in my child's individualized Anaphylaxis Plan and Emergency Procedures.

Parent/ Guardian Initials: _____

EMERGENCY CONTACT INFORMATION

Contact Name	Relationship to Child	Primary Phone Number	Additional Phone Number

HEALTHCARE PROFESSIONAL CONTACT INFORMATION: (optional)

Contact Name	Primary Contact Number

SIGNATURE OF HEALTHCARE PROFESSIONAL (optional):

X	Date:
---	-------

SIGNATURE OF PARENT/ GUARDIAN (required):

Print Name:	Relationship to Child:
X	Date:

Appendix B: TRAINING AND CONSENT

Individualized Plan and Emergency Procedures for a Child with an Anaphylactic Allergy

I _____ (parent/guardian) hereby confirm that:

- (a) I have trained the person(s) named in the Trainee Confirmation below (Table 1) on my child's Individualized Plan and Emergency Procedures on _____ (date), and
- (b) I give consent to the person(s) named in the Trainee Confirmation (Table 1) below to train any other staff, students and volunteers (Table 2) who may be interacting with my child to perform the procedures detailed in my child's Individualized Plan and Emergency Procedures.

Parent/ Guardian Full Name: _____

Parent/ Guardian Signature: _____

Date (dd/mm/yyyy): _____

Table 1: Trainee Confirmation

Name of Trainee	Position	Signature of Trainee	Date Training Received (dd/mm/yyyy)	Date Signed (dd/mm/yyyy)

Table 2: Training Log for Staff, Students, and Volunteers

Name of Individual	Position	Signature of Individual	Date Training Received (dd/mm/yyyy)	Date Signed (dd/mm/yyyy)



Date of Policy	Revised February 14/24	Child Abuse and Neglect Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Child Abuse and Neglect Policy

Procedure for Reporting Child Abuse

Definition:

Child abuse happens when somebody or some situation threatens the development, security, and survival of a child. Situations in which abuse and neglect may happen are: physical abuse, emotional maltreatment, sexual abuse, physical neglect, and passive abuse. (See appendix)

Mandated Persons: The Child and Family Services Act CFSA defines the term, *Child In Need of Protection* under section 24 (2a) legally requires an employee of a daycare facility to report to the **Children’s Aid Society (CAS) Director/Designate** when an employee has formed a reasonable suspicion that a child or young person has suffered or is suffering abuse.

Reporting Abuse and Neglect

If you suspect or a child reveals to you that he or she is a victim of abuse or neglect, **the employee must** immediately report their concerns to the C.A.S.

You do not need proof, and it is **NOT** your role to look for evidence or interview the child.

Do not inform the parents.

Contacting the Children’s Aid Society

Call the Children’s Aid Society (CAS) at 519-524-7356 and when prompted, press “0” for operator. Ask for Intake/Screening. You will then be asked to share the information/ scenario (disclosure, without names), to the Intake worker.

You will then receive direction from C.A.S.

Following a Disclosure to the C.A.S.

The employee reporting the incident should make a detailed written account of the entire incident and how they handled it.

What the Report Should Contain

- The full name and address of the child/ren to whom the entry refers.
- The name and address of the individual(s) suspected of abuse.
- The name of the suspected abuse. i.e All physical and behavioral indicators leading to the conclusion of suspicion, including remarks made by the child.
- A description of the observed injury, including size, shape, colour, and location on the body

- Any drastic changes or chronic problems with the child's health or behaviour
- Direct quotations related to the child abuse from the child and/or staff member
- Dramatization or direct quotations by the child during fantasy play when they relate to suspected injury, neglect, or emotional maltreatment.
- Any contacts made with the relevant agencies or individuals.
- The date, time, name, and title of the C.A.S. person receiving the report should be noted for the written report and for follow-up with the agency
- The name, address, phone number, and professional title and duties of the employee making the report
- The date and time of the entry
- The signature of the employee making the entry.

This report must be made in duplicate with one copy remaining in the Child Care Centre and the other submitted to the Children's Aid Society.

Then

- Report to the Child Care Centre Director/ designate that you have made the call to the C.A.S.
- Respond professionally to the action deemed by the C.A.S.
- In situations where the parent or caretaker states that Children's Aid Society has already been made aware of and/or has investigated the allegations or reported abuse, the C.A.S. Director or Designate will inform the client that Goderich Municipal Child Care Centre is obligated to contact Children's Aid Society to verify in the presence of the parent or caretaker.

Failure to Report

Any professional who fails to report his/her suspicion gained during the course of his/her professional duties is liable, upon conviction, to a fine of not more than \$1000 under the Child and Family Services Agency (C.F.S.A. s. 72(6.2)).

This penalty emphasizes that the child's safety must take precedence over all other concerns, including confidentiality of information and all other provincial statutes.

Protection from Liability

Should civil action be brought against a person who made a report(s), she/he will be protected unless she/he acted maliciously or without reasonable grounds for her/his belief or suspicion.

Appendix – Types of Possible Abuse

Physical Abuse – The use of unreasonable force against a child. What is considered reasonable will depend on the age of the child, the severity of the actions, and its lack of healthy corrective purpose regarding child's behaviour. This might include, for example, hitting, slapping, shaking, choking, kicking, or burning a child. It also includes any conduct by a caregiver that might put the child's life, health, or well-being at risk.

Emotional Maltreatment – Refers to both emotional abuse and emotional neglect. This might include repeated attacks on a child's sense of self-worth, insults, isolation, rejection, unrealistic

expectations, or constant criticism. It might also involve terrorizing a child such as threatening to kill the family pet. The law considers children at risk or emotional abuse if they live in situations of family violence.

Sexual Abuse – Any sexual act involving a child and an adult or another older child. This might include fondling, touching, intercourse, or exploiting the child sexually such as taking pornographic pictures or putting the child at risk of exploitation. This can also include non-physical forms of abuse such as exhibitionism, or exposure to pornography.

Physical Neglect – When parents or caregivers fail to provide a child's basic needs. Physical neglect might include failing to provide children with proper food, clothing, or shelter. It may also involve lack of attention to, or refusal to provide, proper healthcare treatment. Neglect also happens when a person caring for a child does not, or cannot, control and supervise the child. This includes stopping the child from harming himself or others.

Passive Abuse – When an individual recognizes a child as being abused and/or neglected and fails to report the abuse to the proper authorities. This may include an individual who takes no action when he or she suspects that a child is being sexually molested, thereby allowing the abuse to continue.

Children's Aid Society Report

Name of Child: _____

Name of Suspected Abuser: _____

Address of Suspected Abuser: _____

Nature of the Suspected Abuse:

Employee Reporting:

Name: _____

Address: _____

Professional Title: _____

Person from CAS report is being made to:

Name: _____

Title of Person: _____

Date of Report: _____

Time of Report: _____

Extension Number: _____



Date of Policy	Revised October 16, 2025	Vulnerable Sector Check Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Vulnerable Sector Check Policy and Procedure

Policy

In compliance with the directive from the Ministry of Education, in combination with the Town of Goderich, all volunteers and staff having direct contact with students at the Goderich Municipal Child Care Centre will require a completed Vulnerable Sector Check (VSC) before a staff member is approved for employment or a volunteer is granted accredited volunteer status. At the current time, student placements are exempt from this policy unless the student is over the age of 19 years old. All staff that are employed at the Goderich Municipal Child Care Centre must have a current VSC on file and must be updated every five years. In between the five years, staff must sign a yearly Offence Declaration to say that they have no allegations or convictions. Only the original copy of a VSC, either electronic or print original, will be accepted by staff.

All staff that are employed at the Goderich Municipal Child Care Centre must have a current VSC on file and must be updated every five years. Between the five years, staff must sign a yearly Offence Declaration to ensure that they have no allegations or convictions.

No individual will provide child care if they have committed an offense under the following sections of the Criminal Code:

- Section 151: Sexual Interference
- Section 163: 1 Child Pornography
- Section 215: Duty of persons to provide necessaries.
- Section 229: Murder
- Section 233: Infanticide

VSC and the Offence Declarations will be seen only by the Child Care Services Manager/ Designate and will be kept in the staff personal file at the Child Care Centre. The information will be kept in a locked filing cabinet.

Any person from whom a licensee is required to obtain a vulnerable sector check is required to provide the licensee with an offence declaration, as soon as reasonably possible, any time he or she is convicted of an offence under the Criminal Code (Canada).

Every licensee of a child care centre shall obtain, in respect of any person who provides child care or other services to a child who receives child care at the child care centre,

- (a) an offence declaration from the person; or
- (b) an attestation from the person's employer or from the person or entity who retained the person's services that,
 - (i) the employer, person or entity has obtained and reviewed a vulnerable sector check from that person,)

If a licensee's relationship with a person in respect of whom it has previously obtained a vulnerable sector check terminates and then subsequently resumes, the licensee shall obtain a new vulnerable sector check or offence declaration as follows:

1. If the relationship was terminated for six or more months, the licensee shall obtain a new vulnerable sector check from the person before the relationship resumes.
2. If the relationship was terminated for less than six months and, but for the termination, the person would have provided a vulnerable sector check or offence declaration during the period of termination, the licensee shall obtain from the person such vulnerable sector check or offence declaration before the relationship resumes.

(2) If a person in respect of whom a licensee has obtained a vulnerable sector check takes a leave of absence from their position and then subsequently returns to their position, and if the person would have provided a vulnerable sector check or offence declaration during the period of their leave, the licensee shall obtain a new vulnerable sector check or offence declaration upon the person's return.

If the staff member is required to provide a new VSC and it is not received before their return in break of employment, the staff will be required to provide evidence of their application to the Child Care Services Manager/ Designate, and additional safety measures will be put in place including but not limited to

- obtain an Offence Declaration from the individual until the VSC is obtained
- not left alone with children or groups of children at any time; and
- additional monitoring by Child Care Services Manager, Supervisor/Designate, or lead RECE in the program room in which the individual works, where appropriate.

The following exceptions apply to volunteers and students only:

- VSCs for volunteers and students that are performed more than six months before the day they are provided to the child care centre will be accepted as long as the VSC is less than 5 years old from the date it was performed. In these cases, the volunteer/ student will also be required to provide the child care centre with an Offence Declaration addressing the period since the day the VSC was performed.

- The child care centre will accept a photocopy of a VSC from a volunteer or student as long as it is less than 5 years old from the date it was performed.

A Criminal Record Check (CRC) will only be accepted in place of a VSC where:

- Any statute of Ontario or Canada prohibits the disclosure of information contained in a VSC in respect of a person (e.g. information about persons under 18 years of age, pardoned offences, etc);
- A police service will only issue a CRC, not a VSC, for an individual; and/or
- A licensee is a corporation and the Child Care Services Manager or officer does not interact with children at the child care centre.

A Criminal Record and Judicial Matters Check will be accepted in place of a CRC but will not be accepted in place of a VSC.

Any person who turns 18 while in a position where they interact with children at the child care centre will be asked by the Child Care Services Manager to provide a statement disclosing every previous finding of guilt under the Youth Criminal Justice Act (YCJA) if they received an adult sentence. Where the individual confirms that there are no such findings, the Child Care Services Manager will document the request and the individual's confirmation in their file.

Any person who turns 19 while in a position where they interact with children at the child care centre will be asked by the Child Care Services Manager to apply for a VSC within one month of their 19th birthday. That person must provide the child care centre with evidence that they have submitted a VSC application.

All VSCs provided to the child care centre must be intended for the position that the individual will hold (i.e. employee and volunteer positions). Where the VSC has not been provided for the correct position, it will not be accepted.

There will be no exceptions made for individuals to obtain a police record check (e.g. for medical reasons).

Offence Declaration Instruction

This form is intended for use by child care programs licensed under the *Child Care and Early Years Act, 2014*, to meet the following requirements:

- Licensees must obtain Offence Declarations from all individuals from whom they have previously obtained a VSC. The Offence Declaration must be obtained in every calendar year, except a year in which the VSC is obtained, and dated to 15 days after the anniversary date of the previous Offence Declaration or VSC, whichever is most recent.

- Licensees must obtain a statement from any person who turns 18 years old while in a position where he or she interacts with children receiving care, within one month after the person turns 18 years old. The statement must disclose every previous finding of guilt of the person under the *Youth Criminal Justice Act (Canada)*, if the person received an adult sentence.
- Where a licensee has accepted a copy of a VSC from a volunteer or student, instead of the original documents, the volunteer or student must provide an Offence Declaration that addresses the period since day the VSC was performed if more than six months, but less than five years have passed since the day the VSC was performed.
- Any person from whom a licensee is required to obtain a VSC is required to provide the licensee with an Offence Declaration, as soon as reasonable possible, any time he or she is convicted of an offence under the *Criminal Code (Canada)*.
- This form must be completed and signed by the licensee or designate to confirm receipt. This form must be retained for Ministry review.

Procedure

- The VSC is completed to assist in ensuring the safety and well-being of the children at the Goderich Municipal Child Care Centre.
- The VSC is only one component of good human resource management practice. A “positive” VSC will not necessarily preclude hiring the candidate. The Goderich Municipal Child Care Centre will consider context and the nature of the offence(s), including the circumstances surrounding the charges and convictions, and specific duties of the potential employee or volunteer. Other considerations include references from past employers or rehabilitative efforts made by the applicant.
- A conditional offer of employment may be made to an applicant while waiting for the results of the VSC. Until the VSC is obtained, additional measures will be put in place to protect the children who interact with a person who has not yet provided their VSC.
- The cost of obtaining a VSC is determined by the local police.
- All staff will sign an Offence Declaration that verifies that the staff have no allegations or criminal charges pending for the current year in between VSC on or before the date issued.



Date of Policy	Revised February 14/24	Drug and Medication Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Centre Drug and Medication Administration Policy and Procedures

Purpose

The purpose of this policy and the procedures outlined within is to provide clear direction for staff, students, and volunteers at the Goderich Municipal Child Care Centre to follow for administering drugs or medication to children at the child care centre and for appropriate record-keeping.

Where the term drugs and/or medications is used in this policy, the term refers to any product with a drug identification number (DIN), with the exception of sunscreen, lotion, lip balm, bug spray, hand sanitizer, and diaper cream that is not used for acute, symptomatic treatment. For the purpose of this policy, drugs and medications fall into the following two categories, unless otherwise specified:

- Prescription, intended for acute, symptomatic treatment, and
- Over the counter, intended for acute, symptomatic treatment

The policy and procedures support children's health, safety, and well-being by setting out measures to:

- Ensure children received only those drugs or medications deemed necessary and appropriate by their parents.
- Reduce the potential for errors.
- Ensure medications do not spoil due to improper storage.
- Prevent accidental ingestion.
- Administer emergency allergy and asthma drugs or medications quickly when needed; and
- Safely administer drugs and medications according to established routines

Policy

Parental Authorization to Administer Medication:

- Whenever possible, parents will be encouraged to administer drugs or medications to their children at home if this can be done without affecting the child's treatment schedule.
- Prescription and over-the-counter medications for acute, symptomatic treatment will only be administered to a child where a parent of the child has given written authorization to do so by completing the Child Care Centre's Authorization for Medication Administration (the form in Appendix A may be used). The Authorization for Medication Administration form must be accompanied by a doctor's note for over-the-counter medications.
- The authorization must include a schedule that sets out the times the drug or medication is to be given and the amounts to be administered.
- Where a drug or medication is to be administered to a child on an "as needed" basis (i.e. there is no specific schedule or time of the day for administration), the drug or medication must be accompanied with a doctor's note for outlining signs and symptoms for administering the drug or medication and the appropriate dosage. In addition, the Authorization for Medication Administration Form must clearly indicate the situation under which the medication is to be given as outlined in the doctor's note, including observable symptoms. Examples may include:
 - "When the child has a fever of 39.5 degrees Celsius"
 - "When the child has a persistent cough and/or difficulty breathing"; and
 - "When red hives appear on the skin", etc.
- Prescriptions/ over-the-counter skin products (with a DIN) that need to be administered for the acute or symptomatic treatment will only be administered to the child where a parent of the child has given written authorization to do so by completing the Child Care Centre's Authorization for Medication Administration
- Authorization for Medication Administration forms will be reviewed with parents yearly or upon updates to prescription or medication changes, to ensure the dosage continues to be accurate (e.g. based on the child's age or weight).
- As long as sunscreen lotion, lip balm, bug spray, hand sanitizer, and diaper cream are non-prescription and/or are not for acute (symptomatic) treatment, and due to their longer-term daily usage, these products:
 - Must have a blanket authorization from a parent on the enrolment form.
 - Can be administered without an Authorization for Medication Administration form; and
 - Do not require record-keeping

Drug and Medication Requirements

All drugs and medications to be administered to children must meet the following requirements:

- All drugs and medications must be stored in their original containers as supplied by a pharmacist, or their original packages. Medications that have been removed from their original package or transferred into a different container will not be accepted or administered to children.
- All drug or medication containers must be clearly labelled with:
 - The child's full name.
 - The name of the drug or medication.
 - The dosage of the drug or medication.
 - Instructions for storage.
 - Instructions for administration.
 - The date of purchase of the medication for prescription medications; and
 - The expiry date of the medication, if applicable
- The information provided on the written parental authorization must match all the requirements listed above.
- Where information is missing on a drug or medication label and/or the written parental authorization does not match the label on the labelled container, the child care centre will not accept or administer the medication until the label and/or written parental authorization accurately contains all the required information
- Over-the-counter epinephrine purchased for a specific child can be administered to a child with an individualized plan and emergency procedures for an anaphylactic allergy as long as it is accompanied by a doctor's note and is clearly labeled with the child's name, the name of the drug or medication, the dosage, the date of expiration, and the instructions for storage and administration.
- Drugs or medications purchased by staff, students, or volunteers for their own use will be kept inaccessible (e.g. stored in locker vs left in a purse in the classroom) to children and will not be administered to children at any time, except where written parental authorization to administer has been obtained (e.g. hand sanitizer)

Drug and Medication Handling and Storage:

- All drugs and medications will be kept inaccessible to children at all times in a locked container or area (e.g. in a refrigerator, cabinet, cupboard, or drawer). There are exceptions for emergency medications as outlined below:
 - Emergency medications will never be locked up and will be made easily accessible to all staff while being kept out of the reach of children, including during outdoor play periods and off-premises activities
 - Where a child has written permission to carry their emergency allergy or asthma medication, precautions will be taken to ensure that these

medications are not accessible to other children (e.g. in cubbies or backpacks that are unattended).

- In case of an emergency, all staff, students, and volunteers will always be made aware of the location of children's emergency medications.
- Emergency medications will be brought on all field trips, evacuations, and off-site activities
- Any topical products or drugs/medications in the first aid kit will not be used on children to clean or treat wounds. Children's cuts and wounds will be disinfected in accordance with local public health recommendations.
- All drugs and medications for children will be stored in accordance with the instructions for storage on the label. Medication requiring refrigeration will be stored in the refrigerator in a locked container.
- Where drugs or medications are past their expiry date, they will be returned to the parent of the child, where possible, and this will be documented on the Authorization for Medication Administration form.
- Where attempts have been made to return a drug or medication to a parent and the parent has not taken the medication home, the person in charge of drugs and medications will ensure that the efforts are made to return the drug or medication have been documented in the appropriate staff communication book (e.g daily written record), and the drug or medication will be returned to a pharmacist for proper disposal.

Drug and Medication Administration:

- Drugs or medications will be administered according to the instructions on the label and only with written parental authorization
- Designated person(s) in charge of medications will deal with all drugs and medications to reduce the potential for errors, whether on or off the premises. Where the person(s) is absent, they will delegate this responsibility to another individual. The name of the individual who has been delegated and the duration of the delegation will be documented in the appropriate staff communication book (e.g. daily written record).
- A drug or medication will only be administered from its original container as supplied by a pharmacist or its original package, and where the container is clearly labelled as outlined under the Drug and Medication Requirements section of this policy.
- A drug or medication will only be administered using the appropriate dispenser (e.g. syringe, measuring spoon/cup, etc.).
- To support the prompt administration of emergency medication:
 - Emergency medications may be administered to a child by any person trained on the child's individualized plan at the child care centre, and

- Children will be allowed to carry their own asthma or emergency medication in accordance with this policy, the drug and medication administration procedures, and the child's individualized plan, where applicable.
- Drugs or medications that are expired (including epinephrine) will not be administered at any time.

Record-Keeping:

- Records of medication administration will be completed using the Records of Medication Administration (the form in Appendix B may be used) every time drugs or medications are administered. Completed records will be kept in the child's file.
- Where a child's medication administration form includes a schedule setting out specific times to administer the medication and the child is absent on a day medication would have been administered, the child's absence will be documented on the medication administration record to account for all days during the treatment period (excluding weekends, holidays, and planned closures).
- If a dose is missed or given late, reasons will be documented on the record of medication administration and a parent will be notified as soon as possible as it may impact the treatment schedule or the child's health.
- Where a drug or medication is administered "as needed" to treat specific symptoms outlined in a child's medication administration form or individualized plan and emergency procedures for an anaphylactic allergy (e.g. asthma, fever, allergic reaction), the administration and the reason for administering will be documented in the appropriate staff communication book (e.g. daily written record) and in the child's symptoms of illness record. The parent of the child will be notified.
- Information about a child's medical needs will be treated confidentially and every effort will be made to protect the privacy of the child, except when information must be disclosed for the purpose of implementing the procedures in this policy and for legal reasons (e.g. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities, or a Children's Aid Society).

Drug and Medication Administration Procedures

Scenarios	Roles and Responsibilities
<p>A) A parent requests that a drug or medication (prescription or over the counter) be administered to their child and provides the drug or medication</p>	<ol style="list-style-type: none"> 1. Staff must <ol style="list-style-type: none"> i) Provide the parent with the appropriate form to complete to obtain written authorization to administer the medication from Appendix A as applicable. ii) Verify that the drug or medication: <ul style="list-style-type: none"> • Is accompanied by a doctor’s note (for over-the-counter medications) • Is in its original container as prescribed by the pharmacist or in the case of over-the-counter medications is in its original package; and • Is not expired iii) Obtain the appropriate dispenser, where applicable. iv) Review the medication administration form and (and doctor’s note, where applicable), the label to verify that all sections are complete and accurate, and that the information in the authorization matches the medication label <ul style="list-style-type: none"> • Where errors are found on the form or the label is incomplete, the form/medication must be returned to the parent to make and initial corrections v) Sign the form once it’s complete and accurate. vi) Take the drug or medication and dispenser and store it in the designated locked storage space in accordance with the instructions for storage on the label; and vii) Log the receipt of the authorization form and the drug or medication for the child in the appropriate staff communication book (e.g. daily written record)
<p>B) A child is authorized to carry their own emergency allergy medication</p>	<ol style="list-style-type: none"> 1. Staff must: <ol style="list-style-type: none"> i) Ensure that parental authorization is obtained to allow the child to carry their own emergency medication.

	<ul style="list-style-type: none"> ii) Ensure that the medication remains on the child (e.g. Fanny pack, holster) and is not kept or left unattended anywhere at the child care centre (e.g. In the child's cubby or backpack) iii) Ensure that appropriate supervision is maintained of the child while they are carrying their medication and children in their proximity so that other children do not have access to the medication; and <p>2. Where there are safety concerns relating to the child carrying his/her own medication (e.g. exposure to other children), notify the centre supervisor/designate and the child's parent of these concerns and discuss and implement mitigating strategies. Document the concerns and resulting actions in the appropriate staff communication book (e.g. daily written record)</p>
<p>C) A prescription or over-the-counter drug or medication must be administered to a child</p>	<p>1. Where a non-emergency medication must be administered, the person in charge must:</p> <ul style="list-style-type: none"> i. Prepare the medication dosage in a well-lit area in the appropriate measuring device, where applicable (e.g. do not use a household spoon for liquid medications). ii. Where possible, remove the child from the activity area to a quiet area with the least possible interruption. iii. Administer the medication to the child in accordance with the instructions on the label and the written parental authorization. iv. Document the administration of the drug or medication and any comments/ observations on the medication administration record after it has been administered (see Appendix B). v. Store the medication in the designated storage space in accordance with the instructions on the label and the parental authorization received on the medication administration form; and

	<ul style="list-style-type: none"> vi. Where applicable, document any symptoms of ill health in the child's record. vii. Where a medication is administered on an 'as needed' basis, notify a parent of the child. viii. Where a child is absent, document the absence on the Record of Drug/Medication Administration form (Appendix B) <p>2. Where an emergency allergy medication must be administered due to a severe allergic reaction, the staff who becomes aware of the emergency situation must immediately:</p> <ul style="list-style-type: none"> i. Administer the emergency medication to the child in accordance with the emergency procedures on the child's individualized plan. ii. Administer first aid to the child, where appropriate. iii. Contact, or have another person contact emergency services, where appropriate; and iv. Contact, or have the supervisor/designate contact a parent of the child. <p>After the emergency situation has ended:</p> <ul style="list-style-type: none"> i. Document the administration of the drug or medication on the medication administration record (see Appendix B). ii. Document the incident in the appropriate staff communication book (e.g. daily written record).; and iii. Document the symptoms of ill health in the child's records, where applicable. <p>3. Where a child is authorized to self-administer their own drug or medication, the person in charge must:</p> <ul style="list-style-type: none"> i. Supervise and observe the child self-administer the drug or medication to ensure that the proper dosage and procedure for administration is being followed.
--	--

	<ul style="list-style-type: none"> ii. Where the child asks for help, assist the child in accordance with the parent's written authorization. iii. Document the administration of the drug or medication and any comments/ observations on the medication administration record after it has been administered (see Appendix B). iv. Store the medication in the designated storage space in accordance with the instructions on the label and the parental authorization received on the medication administration form, unless the child is authorized to carry his/her own allergy medication (in such cases, follow the steps outlined in Scenario C [a child is authorized to carry their own emergency allergy medication]). v. Where there are safety concerns relating to the child's self-administered of drugs or medications, notify the centre supervisor/ designate and the child's parent of these concerns, and discuss and implement mitigating strategies. Document the concerns and resulting actions in the appropriate staff communication book (e.g. daily written record).
<p>D) A child has a reaction to an administered drug or medication.</p>	<ul style="list-style-type: none"> 1. Where adverse symptoms appear upon medication administration, the person in charge must immediately: <ul style="list-style-type: none"> i. Administer first aid to the child, where appropriate. ii. Contact emergency services, where appropriate, and send the drug/medication and administration information with the child if they are leaving the premises to seek medical attention. iii. Notify the parent of the child. iv. Notify the supervisor/ designate.

	<ul style="list-style-type: none"> v. Document the incident in the appropriate staff communication book (e.g. daily written record); and vi. Document any symptoms of ill health in the child's records, where applicable. <p>Where the reaction results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.</p>
<p>E) A drug or medication is administered incorrectly (e.g. at the wrong time, wrong dosage given)</p>	<ul style="list-style-type: none"> 1. The person in charge must immediately: <ul style="list-style-type: none"> i. Where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication); and ii. Contact the parent of the child to report the error. iii. Report the error to the supervisor/ designate iv. Document the actual administration of the drug or medication on the medication administration record (see Appendix B); and v. Document the incident in the appropriate staff communication book (e.g. daily written record) <p>Where any reaction to a drug or medication results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.</p>
<p>F) A drug or medication is administered to the wrong child</p>	<ul style="list-style-type: none"> 1. The person in charge must immediately: <ul style="list-style-type: none"> i. Where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication); and ii. Contact the parents of the children affected to report the error. iii. Report the error to the Supervisor/ designate. iv. Document the incident in the appropriate staff communication book (e.g. daily written record) v. Administer the medication to the correct child per Scenario B (a drug or medication must be administered to a child).

	Where any reaction to a drug or medication results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.
G) Surplus or expired medication is on site	<ol style="list-style-type: none">1. Where possible, the surplus or expired medication must be returned to the parent of the child.2. Where attempts have been made to return a drug or medication to a parent and the parent has not taken the medication home, the person in charge of drugs and medications will attempt to return unused drugs or medications to a local pharmacist for proper disposal. <p>Do not flush any drugs or medications down the toilet or sink or throw them in the garbage.</p>

Glossary

Drug Identification Number (DIN): An eight-digit number assigned by Health Canada to a drug product prior to being marketed in Canada. It uniquely identifies all drug products sold in a dosage form in Canada and is located on the label of prescription and over-the-counter drug products that have been evaluated and authorized for sale in Canada.

Drug or Medication: Any product with a drug identification number (DIN), with the exception of sunscreen, lotion, lip balm, bug spray, hand sanitizer, and diaper cream that is not used for acute, symptomatic treatment. Drugs and medications fall into the following two categories, unless otherwise specified in this policy:

- Prescription, intended for acute, symptomatic treatment; and
- Over the counter, intended for acute, symptomatic treatment.

Emergency Medication: Prescription drugs or medications that are used in case of an urgent medical reaction that requires immediate treatment. Emergency medications include medications used to treat asthma (e.g. puffers) and anaphylactic allergies (e.g. epinephrine).

Licensee: The individual or corporation named on the license 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).

Person who is in Charge of All Drugs and Medications (a.k.a. the ‘person in charge’): The individual at the child care centre who is responsible for administering medication to children. The person in charge may be one designated person per program room or age group. In the absence of the person in charge, they may temporarily delegate this responsibility to another person.

Staff (employee): Individual employed by the licensee (e.g. program room staff, cook).

Regulatory Requirements: Ontario Regulation 137/15

Administration of drugs or medications

40.

(1) Where a licensee agrees to the administration of drugs or medications, the licensee shall ensure that,

(a) a written procedure is established for,

GODERICH MUNICIPAL CHILD CARE CENTRE

ADMINISTRATION OF PRESCRIBED MEDICATION

This form must be completed by the parent of a child who is requesting that a drug or medication be administered during the hours that the child receives child care, in accordance with the child care center's medication administration policy and procedures.

PARENTS CONSENT AND INSTRUCTION

Full Name of the Child: _____

Name of Drug or Medication (as per the original container label): _____

Expiry Date: _____

Authorization Start Date: _____

Authorization End Date: _____

Reason for administering medication:

Medication Administration Schedule: The drug/ medication needs to be administered according to the following schedule:

Time(s) of the Day or As Needed: _____

Amount/ Dosage: _____

"AS NEEDED" MEDICATION to be used when the following physical symptoms occur:

Additional Information (where applicable):

Parent/Guardian Authorization Statement:

I hereby authorize the staff in charge of drugs or medications at Goderich Municipal Child Care Centre to administer the above-named drug or medication to my child in accordance with the procedures I have provided on this form. I understand that staff are not medically trained to administer drugs and medication.

Medications must be provided in the original container with the child's name and correct dosage.

Medications must be handed directly to a staff. Do not leave medications in a child's bag.

I understand that expired drugs or medications will not be administered to my child at any time in accordance with the child care center's medication administration policy.

SIGNATURE OF PARENT

DATE

For Child Care Use Only

Received by: _____

Date Drugs/ Medication Returned to Parent/Pharmacy: _____

Children's personal health information should be kept confidential

Appendix A: AUTHORIZATION FOR DRUG/MEDICATION ADMINISTRATION

Name of Child Care Centre: Goderich Municipal Child Care Centre

This form must be completed by the parent of a child who is requesting that a drug or medication be administered during hours that the child receives child care, in accordance with the child care center's medication administration policy and procedures.

Child's Full Name:

Child's Date of Birth (dd/mm/yyyy):

Date Authorization Form Completed(dd/mm/yyyy):

Date Authorization Form Updated(dd/m/yyyy):

Name of Drug or Medication (as per the original container label):	
Date of Purchase or Date Dispensed: (dd/mm/yyyy)	
Expiry Date: (dd/mm/yyyy)	
Authorization Start Date: (dd/mm/yyyy)	
Authorization End Date: (dd/mm/yyyy)	

Method of Medication Administration (initial below)

Child care centre staff are to administer the drug or medication to my child. _____

Authorization for Child to Carry Emergency Allergy Medication

I authorize my child to carry their own asthma medication

Not applicable (this authorization is not for asthma medication).

Medication Administration Schedule

The drug or medication needs to be administered according to the following schedule:

Day(s) of the Week	Time(s) of the Day/ Intervals	Amount/ Dosage	Additional Information (where applicable)

Parent Signature _____ **Date** _____

Director Signature _____ **Date** _____



Date of Policy	Revised February 21/24	Emergency Management Policy & Procedures
		Child Care & Early Years Act, 2014 (CCEYA)

Emergency Management Policy and Procedures

Name of Child Care Centre: Goderich Municipal Child Care Centre

Date Policy and Procedures Established: December 15, 2017

Date Policy and Procedures Updated:

Purpose

The purpose of this policy is to provide clear direction for staff and licensees to follow to deal with emergency situations. The procedures set out steps for staff to follow to support the safety and well-being of everyone involved.

Clear policies and procedures will support all individuals to manage responses and responsibilities during an emergency, resulting in the safest outcomes possible.

Definitions

All-Clear: A notification from an authority that a threat and/or disaster no longer pose a danger, and it is deemed safe to return to the child care premises and/or resume normal operations.

Authority: A person or entity responsible for providing direction during an emergency situation (e.g. emergency services personnel, the licensee.)

Emergency: An urgent or pressing situation where immediate action is required to ensure the safety of the children and adults in attendance. These include situations that may not affect the whole child care centre (e.g. child-specific incidents) and where 911 is called.

Emergency Services Personnel: persons responsible for ensuring public safety and mitigating activities in an emergency (e.g. law enforcement, fire departments, emergency medical services, rescue services)

Evacuation Site: the designated off-site location where shelter is obtained during an emergency. The evacuation site is used when it is deemed unsafe to be at or return to the child care centre.

Licensee: The individual or agency licensed by the Ministry of Education responsible for the operation and management of each child care centre it operates (i.e. the operator).

Meeting Place: the designated safe place near the child care centre where everyone is to initially gather before proceeding to the evacuation site or returning to the child care centre if evacuation is not necessary.

Staff: Individual employed by the licensee (e.g. program staff, supervisor)

Unsafe to Return: A notification from an authority that a threat and/or disaster continue to pose a danger, and it is unsafe to return to the child care premises.

Policy

Staff will follow the emergency response procedures outlined in this document by following these three phrases:

1. Immediate Emergency Response.
2. Next Steps during an Emergency; and
3. Recovery.

Staff will ensure that children are kept safe, are accounted for, and are supervised at all times during an emergency situation.

For situations that require evacuation of the child care centre, the **meeting place** to gather immediately will be located at: The grass boulevard area at the front of the Child Care Centre.

If it is deemed “unsafe to return” to the child care centre, the **evacuation site** to proceed to is located: Across the street at the **Public Works Building, 361 Cambridge Street, 519-524-7222**. **Parents/ Guardians may be asked to pick up their child/children from this location if we cannot return to the Child Care Centre.**

Note: all directions given by the emergency services personnel will be followed under all circumstances, including directions to evacuate to locations different than those listed above.

For any emergency situations involving a child with an individualized plan, the procedures in the child’s individualized plan will be followed.

If any emergency situations happen that are not described in this document, the Director or Supervisor will provide directions to staff for the immediate response and next steps. Staff will follow the directions given.

If any emergency situations result in a serious occurrence, the serious occurrence policy and procedures will also be followed.

All emergency situations will be documented in detail by the Director/ Supervisor or designate in the daily written record, and in the supervisor’s written records.

Additional Policy Statements

The children and staff will participate in emergency preparedness training and drills throughout the school year. Classroom Emergency Bags will contain children’s emergency information and a list of allergies/medications for all children in the centre. All Emergency information is also available on the Lillio App.

**Procedures Phase 1: Immediate
Emergency Response
Emergency Situation**

Roles and Responsibilities

<p>Lockdown When a threat is on, very near, or inside the child care centre. E.g. a suspicious individual in the building who is posing a threat.</p>	<ol style="list-style-type: none"> 1. The staff member who becomes aware of the threat must inform all the other staff of the threat as quickly and safely as possible by announcing “Mr. Dunlop” to other staff and/or over the page system if possible and immediately call 911. 2. Staff members who are outdoors must ensure everyone proceeds to a safe location. If possible, children and staff will enter the back entrance to the Infant Room and proceed to the Infant Sleep Room. 3. Staff inside the child care centre must: <ul style="list-style-type: none"> - Remain calm. - Gather all children and move them away from door and windows. - Take children’s attendance to confirm all children are accounted for. - Take shelter in closets and/or under furniture with the children, if appropriate; - Keep children calm. - Ensure children remain in sheltered space. - Turn off/mute all cellular phones; and - Wait for further instructions. 4. If possible, staff inside the program room(s) should also: <ul style="list-style-type: none"> - Close all window coverings and doors. - barricade the room door. - gather emergency medication; and - join the rest of the group for shelter. 5. The Director/Supervisor or closest staff will immediately: <ul style="list-style-type: none"> - Close and lock all child care centre entrance/exit doors, if possible; and - Take shelter. <p>Note: only emergency service personnel are allowed to enter or exit the child care centre during a lockdown.</p>
<p>Hold and Secure When a threat is in the general vicinity of the child care centre, but not on or inside the child care premises. E.g. a shooting at a nearby building.</p>	<ol style="list-style-type: none"> 1. The staff member who becomes aware of the external threat must inform all other staff of the threat as quickly and safely as possible. 2. Staff members who are outdoors must ensure everyone returns to their program room(s) immediately.

	<ol style="list-style-type: none"> 3. Staff in the program room must immediately: <ul style="list-style-type: none"> - Remain calm. - Take children's attendance to confirm all children are accounted for. - Close all window coverings and windows in the program room. - Continue normal operations of the program; and - Wait for further instructions. 4. The Director/ Supervisor or closest staff must immediately: <ul style="list-style-type: none"> - Close and lock all entrance/exits of the child care centre. - Close all blinds and windows outside of the program rooms; and - Place a note on the external doors with instructions that no one may enter or exit the child care centre. <p>Note: only emergency service personnel are allowed to enter or exit the centre during a hold and secure.</p>
<p>Bomb Threat A threat to detonate an explosive device to cause property damage, death, or injuries. E.g. phone call bomb threat, receipt of a suspicious package</p>	<ol style="list-style-type: none"> 1. The staff member who becomes aware of the threat must inform the Director/ Supervisor or Designate and: <ul style="list-style-type: none"> - Remain calm. - Call 911 if emergency services are not yet aware of the situation. - Follow the directions of emergency service personnel; and vacate the building to the designated evacuation site at the Public Works Department at 361 Cambridge Street. - Take the children's attendance to confirm all children are accounted for. A) Where the threat is received by telephone, the person on the phone should try to keep the suspect on the line as long as possible while another individual calls 911 and communicates with emergency service personnel. B) Where the threat is received in the form of a suspicious package, staff must ensure that no one approaches or touches the package at any time and evacuate the building using the nearest safe exit.
<p>Disaster Requiring Evacuation A serious incident that affects the physical building and requires</p>	<ol style="list-style-type: none"> 1. The staff member who becomes aware of the disaster must inform all other staff of the incident and that the centre must be evacuated as quickly and safely as possible. If the disaster is a fire, the

<p>everyone to leave the premises. (e.g. fire, flood, power failure)</p>	<p>fire alarm pull station must be used and staff must follow the center's fire evacuation procedures.</p> <ol style="list-style-type: none"> 2. Staff must immediately: <ul style="list-style-type: none"> - Remain calm. - Gather all children, the attendance record, children's emergency contact information, and emergency medication. - Exit the building with the children using the nearest safe exit, bringing children's outdoor clothing (if possible) according to weather conditions. - Escort the children to the meeting place; and - Take children's attendance to confirm all children are accounted for. - Keep children calm; and - Wait for further instructions. 3. If possible, staff should also: <ul style="list-style-type: none"> - Take a first aid kit; and - Gather all non-emergency medications 4. Resource staff and the Director/ Supervisor or designate will: <ul style="list-style-type: none"> - Help any individuals with medical and/or special needs who need assistance to go to the meeting place (in accordance with the procedure in a child's individualized plan, if the individual is a child); and - In doing so, follow the instructions posted on special needs equipment or assistive devices during the evacuation. - If individuals cannot be safely assisted to exit the building, the designated staff will assist them to the safest area in the Child Care Centre and ensure their required medication is accessible, if applicable; and - Wait for further instructions. 5. If possible, the site Designate must conduct a walkthrough of the child care centre to verify that everyone has exited the building and secure any windows or doors, unless otherwise directed by emergency services personnel.
<p>Disaster – External Environmental Threat An incident outside of the building that may have adverse effects on persons in the child care centre. E.g.: gas leak, oil spill, chemical</p>	<ol style="list-style-type: none"> 1. The staff member who becomes aware of the external environmental threat must inform all other staff of the threat as quickly and safely as possible and, according to directions from emergency services personnel, advise whether to return on

<p>release, forest fire, nuclear emergency.</p>	<p>site or evacuate the premises.</p> <p>If remaining on site:</p> <ol style="list-style-type: none"> 1. Staff members who are outdoors with children must ensure everyone who is outdoors returns to their program room immediately. 2. Staff must immediately: <ul style="list-style-type: none"> - remain calm. - Take children's attendance to confirm all children are accounted for. - Close all program room windows and all doors that lead outside (where applicable). - Seal off external air entryways located in the program rooms (where applicable). - Continue with normal operations of the program; and - Wait for further instructions. 3. The Director/ Supervisor or Designate staff must: <ul style="list-style-type: none"> - Seal off external air entryways not located in program rooms (where applicable). - Place a note on all external doors with instructions that no one may enter or exit the child care centre until further notice; and - Turn off all air handling equipment (i.e. heating, ventilation, and/or air conditioning, where applicable). <p>If emergency services personnel otherwise direct the child care centre to evacuate, follow the procedures outlined in the "Disaster Requiring Evacuation" section of this policy.</p>
<p>Natural Disaster: Tornado/ Tornado Warning</p>	<ol style="list-style-type: none"> 1. The Town's CEMC (Community Emergency Management Coordinator) will call the Child Care Centre immediately after receiving the Environment Canada Tornado Watch ALERT. The staff member who becomes aware of the tornado watch and/or warning must inform all other staff as quickly and safely as possible. 2. Staff members who are outdoors with children must ensure everyone who is outdoors returns to the <i>designated safe area</i> located in the Gross Motor Room. During a Tornado WARNING the Director/Supervisor will post a sign on the front door of the Centre explaining to the parents where their children can be located. 3. Staff must immediately:

	<ul style="list-style-type: none"> - Remain calm. - Gather all children, the attendance record, children’s emergency contact information, and any emergency medication. - Go to the designated safe area located in the gross motor room. - Take children’s attendance to confirm all children are accounted for. - Remain and keep children away from windows, doors, and exterior walls. - Keep children calm. - Conduct ongoing visual checks of the children; and - Wait for further instructions. <p>4. A designated staff member shall begin to notify parents upon the Director request. Parents may come and pick up their children, when safe to do so.</p>
<p>Natural Disaster: Major Earthquake</p>	<ol style="list-style-type: none"> 1. Staff in the program room must immediately: <ul style="list-style-type: none"> - Remain calm. - Instruct children to find shelter under a sturdy desk or table and away from unstable structures. - Ensure that everyone is away from windows and outer walls. - Help children who require assistance to find shelter. - For individuals in wheelchairs, lock the wheels and instruct the individual to duck as low as possible, and use a strong article (e.g. shelf, hard book, etc.) to protect their head and neck. - Find safe shelter for themselves. - Visually assess the safety of all children; and - Wait for the shaking to stop. 2. Staff members who are outdoors with children must immediately ensure that everyone outdoors stays away from buildings, power lines, trees, and other tall structures that may collapse, and wait for the shaking to stop. 3. Once the shaking stops, staff must: <ul style="list-style-type: none"> - Gather the children, their emergency cards and emergency medication; and - Exit the building through the nearest safe exit, where possible, in case of aftershock or damage to the building.

	<ol style="list-style-type: none"> 4. If possible, before exiting the building, staff should also: <ul style="list-style-type: none"> - Take a first aid kit; and - Gather all non-emergency medications. 5. Individuals who have exited the building must gather at the meeting place and wait for further instructions. Resource Staff and the Director/Supervisor or designate staff will: <ul style="list-style-type: none"> - Help any individuals with medical and/or special needs who need assistance to go to the meeting place (in accordance with the procedure in a child's individualized plan, if the individual is a child); and - In doing so, follow the instructions posted on special needs equipment or assistive devices during the evacuation. - If individuals cannot be safely assisted to exit the building, the designated staff will assist them to the safest area in the Centre and ensure their required medication is accessible, if applicable; and - Wait for further instructions. 6. The Director/ Supervisor or Designate staff must conduct a walkthrough of the child care centre to ensure all individuals have evacuated, where possible.
--	--

Additional Procedures for Immediate Emergency Response

Remember, when it comes time to use the response plan, there will not be a lot of time to read it. Effective planning and response is achieved by coordination, cooperation, and the participation of staff and children in an Emergency Response Drill. The Drill will be rehearsed semi-annually and recorded using Appendix B. The drill results (Appendix B) will be posted on the Health and Safety Board and a copy provided to the Joint Health and Safety Committee.

Phase 2: Next Steps During the Emergency

1. Where emergency services personnel are not already aware of the situation, the Director/ Supervisor or Designate staff must notify the emergency services personnel (911) of the emergency as soon as possible.

2. Where the child care centre has been evacuated, emergency services must be notified of individuals remaining inside the building, where applicable.

3. If the licensee is not already on site, the site Designate must contact the licensee to inform them of the emergency situation and the current status, once it is possible and safe to do so.

List of Emergency Contact Persons:

Local Police Department:	911
Ambulance:	911
Local Fire Services:	911
Child Care Director/ Supervisor:	Bonnie Hastings/ Cindy Austin 519-525-0650/ 519-524-7441
Town of Goderich:	519-524-8344
Licensee Contact(s):	Danielle Holland -Ministry of Education 226-268-7872
Management Safety Representative:	Michaela Johnston 519-524-8344 ext. 212
Building Maintenance:	John Dobie 519-525-2363

4. Where any staff, students, or volunteers are not on site, the Director/Supervisor or designate must notify these individuals of the situation and instruct them to proceed directly to the evacuation site if it is not safe or practical for them to return to the child care centre.
5. The Director/ Supervisor or designate must wait for further instructions from emergency services personnel. Once instructions are received, they must communicate the instructions to staff and ensure that they are followed.
6. Throughout the emergency, staff will:
 - Help keep children calm.
 - Take attendance to ensure that all children are accounted for.
 - Conduct ongoing visual checks and head counts of the children.
 - Maintain constant supervision of the children; and
 - Engage children in activities, where possible.
7. In situations where injuries have been sustained, staff with first aid training will assist with administering first aid. Staff must inform emergency personnel of severe injuries requiring immediate attention and assistance.

8a) Procedures to Follow when “All Clear” Notification is Given	
Procedures	
Communication with parents/ guardians	1. As soon as possible, the Director/ Supervisor or Administrative Staff will update the Lillio App and instruct staff members to notify parents/ guardians by phone of the emergency situation

	<p>and that the all-clear has been given.</p> <ol style="list-style-type: none"> 2. Where disasters have occurred that did not require evacuation of the child care centre, the Director/ Supervisor will provide notice of the incident to the parents/ guardians by notification on the Lillio App and information will be posted on the front door. 3. If normal operations do not resume the same day that an emergency situation has taken place, Administrative Staff will update the Lillio App and instruct staff members to notify parents/ guardians by phone with information on when and how normal operations will resume. If a parent does not have the app, they will be called.
8b) Procedures to Follow when “Unsafe to Return” Notification is Given	
Procedures	<ol style="list-style-type: none"> 1. The individual who receives the “unsafe to return” notification from an authority must inform all staff of this direction and instruct them to proceed from the meeting place to the evacuation site, or the site determined by emergency services personnel. 2. Program Staff must take attendance to confirm that all children are accounted for, and escort children to the evacuation site. 3. Resource staff and the Director/Supervisor or designate who have assisted individuals with medical and/or special needs with exiting the building will assist and accompany these individuals to the evacuation site. 4. The Director/ Supervisor or Designate staff will post a note for parents/ guardians on the child care centre entrance with information on the evacuation site, where it is possible and safe to do so. 5. Upon arrival at the evacuation site, staff must: <ul style="list-style-type: none"> - Remain calm. - Take attendance to ensure all children are accounted for. - Help keep children calm. - Engage children in activities, where possible. - Conduct ongoing visual checks and head counts of children. - Maintain constant supervision of the children. - Keep attendance as children are picked up by their parents, guardians, or authorized pick up persons. - Remain at the evacuation site until all children have been picked up.
Communication with Parents/ Guardians	<ol style="list-style-type: none"> 1. Upon arrival at the emergency evacuation site, the Director/ Supervisor or Designate Staff or Administrative Staff will update

	<p>the Lillio App (if possible) and instruct Program staff to notify parents/ guardians of the emergency situation, evacuation, and the location to pick up their children by phone.</p> <p>2. Where possible, the Director/ Supervisor or designate staff will update the child care center’s voicemail box as soon as possible to inform parents/ guardians that the child care centre has been evacuated and include the details of the evacuation site location and contact information in the message. This info will also be updated on the Lillio App.</p>
--	---

Additional Procedures for Next Steps During an Emergency

If required, the Director/ Supervisor will meet with the Municipal Emergency Operations Control Group to determine next steps to support our staff, children, and families.

Phase 3: Recovery (After an Emergency Situation has Ended)

<p>Procedures for Resuming Normal Operations E.g. where applicable, reopening the child care centre, contacting the Ministry of Education Program Advisor, responding to media and community inquiries, contacting the insurance company, informing the caterer, temporarily relocating, etc.</p>	<p>The below procedures are subject to discussion and approval with the Municipal Emergency Operations Control Group and/or Council.</p> <ul style="list-style-type: none"> - Once emergency period has resided and staff numbers are confirmed, consideration will be given to reopening the childcare centre, if applicable. - Prepare and provide report for Municipal Council, staff file, and Ministry. - Refer media and community inquiries to designated municipal Emergency Information Officer - Confer with insurance and legal in conjunction with the Municipal Emergency Operations Control Group and/or Council, as required. - If necessary, request site inspection from the Ministry, Public Health Unit, Health and Safety Department, and/or Building Inspector - Temporary relocation of facilities is at the discretion of Council.
<p>Procedures for Providing Support to Children and Staff who experience distress</p>	<p>The below procedures are subject to discussion and approval with the Municipal Emergency Operations Control Group and/or Council.</p> <ul style="list-style-type: none"> - Prepare and provide information sheet on signs and symptoms of critical incident stress - Provide information on organizations that assist in critical incident stress response (i.e. Victim Services, private companies, health care, or religious officials, etc).
<p>Procedures for Debriefing Staff,</p>	<p>The below procedures are subject to discussion and approval with the Municipal Emergency Operations Control Group and/or Council.</p>

<p>Children, and Parents/ Guardians Include, where applicable, details about when and how the debrief(s) will take place, etc.</p>	<ul style="list-style-type: none">- Prepare memo and information sheet to be distributed to parents/ guardians in conjunction with designated Emergency Information Officer.- Prepare information memo and hold debrief meeting post emergency response with staff.
---	--



Date of Policy	Revised February 21/24	Environment Protection Policy & Procedures
		Child Care & Early Years Act, 2014 (CCEYA)

Environmental Protection Policy and Procedures

Policy

It is the policy of the Goderich Municipal Child Care Centre that children be protected from the environment at all times, during outside activities, all year round.

Procedure

Summer: Sunscreen provided by the parents is to be applied evenly to all exposed areas at least 20 minutes prior to going outside from May to September. If the UV factor is high and parents request sunscreen before May and after September, the sunscreen will be applied. Sunscreen will be applied after a parent has signed the sunscreen permission form. Using generous amounts of sunscreen on ears, nose, feet, and back of knees. After children have been outside for longer than one and one half hours, sunscreen will be reapplied. Hats provided by parent will be worn at all times.

Winter: Children playing outside in winter will always wear a snowsuit, hats, and mitts. No scarves will be accepted at the Child Care Centre.

Children will not go outside when a high wind chill factor has been reported. As noted under Windchill Policy.

Humidex Policy

It is the policy of the Goderich Municipal Child Care Centre that if the temperature exceeds 28 degrees C to 30 degrees C outside, that outside time will be shortened. If the temperature exceeds 30 degrees C, outside play will be cancelled and other activities implemented.

If there is an air quality warning in effect, outside play will be significantly reduced.

If the humidex rating exceeds 35 degrees C, outside play will be cancelled and other activities will be implemented.

Wind Chill Policy

It is the policy of the Goderich Municipal Child Care Centre that if the temperature outside exceeds -13 degrees C (with windchill), outside play will be shortened. If the temperature exceeds -17 degrees C (with windchill), outside play will be cancelled and other activities implemented.

Clothing

Clothes, which are comfortable, easy to get on and off, and are washable, are most suitable for the children to wear. Running shoes or rubber-soled shoes should be worn. Boots should be large enough to slide on and off easily. **TWO PAIRS** of warm mitts should accompany your child each day during the winter months along with snow pants, hat, safety scarf, and snow boots. **No gloves please. Scarves will not be allowed at the Centre.** Please send a neck warmer or safety scarf. No flip flops or Crocs for inside and outside gross motor play.

All clothing and personal belongings should be clearly labeled with your child's full name. Please be sure to send an extra complete change of clothing in a bag with your child's name clearly marked on it.



Date of Policy	Revised March 2024	Fire Drills & Evacuation
		Child Care & Early Years Act, 2014 (CCEYA)

Fire Drills and Evacuation Policy and Procedure

Policy

Ensure that all students and staff are safely evacuated from the Centre, in case of fire/ emergency. The procedures are set out to support the specific groups and/or classrooms with clear direction. This policy outlines the procedures for evacuation in the event of a Fire or Evacuation. Clear details are outlined in the Emergency Management Policy and Procedures for other emergency situations.

Procedure

E.C.E Teachers

INFANT

- When the alarm sounds, one infant teacher gets the fold-up wagons from the infant classroom. Infants are placed in the emergency wagon, when required, the evacuation crib will also be used.
- Ensure all students are accounted for by doing a head count.
- Take the Emergency Information cards for all children in attendance, any emergency medication, and the tablet.
- Second teacher, check to ensure classroom, bathrooms are vacated, turn off the lights, check windows and close door.
- All teachers take students to designated emergency area.
- Recount attendance at arrival at emergency location.

TODDLER AND PRE-SCHOOL

- When the alarm sounds, the children line up at the exit door and hang on to the fire rope at the exit door.
- Ensure all students are accounted for and are standing in line.
- Take the Emergency Information cards for all children in attendance, any emergency medication, and the tablet.
- Second teacher, check to ensure classroom and bathroom are vacated, turn off lights, check windows and close door.
- Teachers take students to designated emergency area.

- Upon arrival at the emergency location, re-confirm attendance.

DIRECTOR OR DESIGNATE

- Ensure all rooms are vacated and doors closed.
- Collect master attendance clipboard.
- Close office doors.
- Check with teachers to ensure all students and staff are accounted for.
- Help supervise the children to the designated emergency area.
- Call 911

KITCHEN STAFF

- When the alarm sounds, turn off all appliances if safe to do so.
- Ensure doors and windows are closed.
- Help aid with evacuating the children out of the building.

For drills, the staff and children will gather upon the grass boulevard if safe to do so and wait for direction from the supervisor. In the event of a FIRE, everyone then goes across the street to the Public Works Building

DESIGNATED SPOT

TOWN OF GODERICH WORKS DEPARTMENT

361 CAMBRIDGE STREET

GODERICH ON

N7A 2Z1

519-524-7222

RECORD OF FIRE DRILLS							
MONTH	DATE/TIME OF DAY	# OF CHILDREN	# OF STAFF	EVACUATED TO	EVACUATED FROM	LENGTH OF TIME	SUPERVISOR INITIALS
JAN							
FEB							
MAR							
APR							
MAY							
JUN							
JUL							
AUG							
SEP							
OCT							
NOV							
DEC							



Date of Policy	Revised March 2024	Fire Drills & Evacuation
		Child Care & Early Years Act, 2014 (CCEYA)

Goderich Child Care Centre Intruder Practice

Definition of Intruder

- Has no legitimate business in the Child Care Centre or on the property.
- Appears to be under the influence of alcohol or drugs.
- Behaves in a discourteous or aggressive manner.
- Violating a Court Order or a “No Access” order; or
- Prohibited on the premises by a Trespass Order

Intruder is in the Child Care Centre

- 1) When “Mr. Dunlop” is said over the page system, Child Care staff will immediately and calmly lock all doors, close windows and curtains to every room, including the kitchen. If possible, barricade the doors.
- 2) Staff should keep paper, marker, and tape handy in each classroom, in case they need to write a message.
- 3) Remain calm.
- 4) Staff should gather all the children to a classroom corner in the room they are in. Toddler Room #2 – children and staff will move to the washroom and close the door. Infant Room – children and staff will move to the sleep room and close the door.
- 5) Staff should take attendance of their classroom children and identify any missing children.
- 6) Staff and children should stand or sit close together, away from doors and windows.
- 7) Staff members will read a story or do circle with the children.
- 8) Staff and children will remain at the book corner/washroom/sleep room until an all-clear announcement is made from the Child Care Director and/or Supervisor or Police.

Intruder is on the Child Care Centre Playground/ Parking Lot

- 1) The staff member will announce to the children and staff that “Mr. Dunlop’s here and we need to go back inside now”. This should prompt all Child Care staff to immediately and calmly move the children into their own classrooms. Staff will lock all doors, close windows and curtains to every room, including the kitchen. If possible, barricade the doors.

- 2) Staff should keep paper, markers, and tape handy in case they need to write a message.
- 3) Remain calm.
- 4) The first staff member available will call 911.
- 5) Staff shall gather all the children to a classroom corner in the room they are in.
Toddler Room #2 – children and staff will move to washroom and close door.
Infant Room – children and staff will move to sleep room and close door.
- 6) Staff shall take attendance of their classroom children and identify any missing children.
- 7) Staff and children should stand or sit close together, away from doors and windows.
- 8) Staff member(s) will read a story or do circle with the children.
- 9) Staff and children will remain at the book corner/washroom/ sleep room until an all-clear announcement is made from the Child Care Director and/or Supervisor or Police.



Date of Policy	Revised March 2024	Policy for Monitoring Compliance and Contraventions
		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Centre Policy for Monitoring Compliance and Contraventions

Purpose

This policy sets out the process that will be followed to monitor the implementation of our policies, procedures, and individualized plans on an ongoing basis.

The policy sets out how compliance and contraventions (non-compliance) with the policies, procedures, and individualized plans listed below will be monitored, recorded, and addressed.

This document is intended to fulfill the obligations set out under Ontario Regulation 137/15 for written policies and procedures for monitoring, recording, and addressing compliance and non-compliance with policies and procedures, and individualized plans for child care centres.

Policy and procedures required under the *Child Care and Early Years Act, 2014*.

- Playground Safety
- Anaphylactic policy
- Sanitary practices
- Sleep supervision
- Serious Occurrences
- Drug and Medication Administration
- Supervision of Volunteers and Students
- Program statement implementation
- Staff Training and Development
- Police Record Check
- Fire Safety and Evacuation
- Waiting List
- Parent issues and Concerns
- Emergency Management

Individualized plans required under the *Child Care and Early Years Act, 2014*:

- Anaphylaxis
- Special Needs
- Medical Needs

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

Policy and Procedures for Monitoring Compliance and Non-Compliance

1. Monitoring and Observations

- Goderich Municipal Child Care Centre will monitor each staff, student, and volunteer to assess whether policies, procedures, and individualized plans are being implemented, as follows:
 - The Director will observe and monitor the Supervisor of the Child Care Centre.
 - The Supervisor will observe and monitor the Director, with any non-compliance reports being directed to the Chief Administrative Officer.
 - The Director/ Supervisor will observe and monitor the qualified staff in each program room (i.e. RECE or otherwise approved staff).
 - The Director/ Supervisor will observe and monitor other program staff (i.e. assistants)
 - The classroom educators will observe and monitor placement students; and
 - The Director/ Supervisor and classroom educator will observe and monitor volunteers
- Monitoring and observations will be conducted on an ongoing basis through various means including, but not limited to:
 - Participating regularly and informally in the program.
 - Collecting feedback provided from parents and families; and
 - Reviewing written documentation (e.g. medication administration forms, daily written records, attendance records, etc.)
 - Providing the staff with opportunities for self-reflection

Monitoring will be conducted at different times of the day (e.g. morning, afternoon, periods of arrival/departure, rest periods, meal times, outdoor play periods, transitions, etc.) to observe that policies, procedures, and individualized plans are being implemented as required for different parts of the program and daily routines.

2. Documentation and Records

- Monitoring of Policies and Procedures within the Centre is done through a combination of policy review, continuous informal observation, and periodic

formal observation practices.

- Monitoring and observations will be recorded. Records of monitoring and observations may be documented using the template found in Appendix A.
- Documentation of observations will be completed at the time the observations are made or at least two times a year and will include concrete examples of observed compliance and non-compliance.
- A minimum of 4 varying policies and procedures will be observed and documented by the Director or Supervisor each year for each staff member.
- All records will be stored in a secure locked cabinet for at least three years from the date they are created.

Follow Up

- Any areas of concern with an individual's ability to comply with policies, procedures, and individualized plans will be brought forward to the director or supervisor. The director/ supervisor will determine if any follow up action is required.
- All regular employees participate in an Employee Performance Review at least once a year. The director/ supervisor will complete 2 observations throughout the year and will seek to or provide them with appropriate supports to achieve and maintain compliance (e.g. additional training) through written or verbal discussions.

3. Dealing with Contraventions of Policies, Procedures, and Individualized Plans:

- Goderich Child Care Centre will make every effort to clarify expectations and encourage staff, students, and volunteers to raise their questions and concerns about implementing policies, procedures, and individualized plans on an ongoing basis to support clarity, learning, development, and ongoing compliance.
- Progressive discipline may be used to address observed non-compliance with policies, procedures, and individualized plans, taking into consideration the nature and severity of the incident, and the individual's history of previous non-compliance.
- Where a staff, student, or volunteer is observed to be non-compliant, the licensee, supervisor or designate, will take one or more of the following actions:

- i. Inform the individual that a non-compliance was observed, including the review of any pertinent records or documentation, that provide evidence of the non-compliance.
 - ii. Re-review the relevant policies, procedures, and/or individualized plans with the individual.
 - iii. The director/ supervisor will keep a written record of the discussion and any subsequent action.
 - iv. Issue a verbal warning;
 - v. Issue a written warning.
 - vi. Temporarily suspend the individual from their position at the Child Care Centre for one to five days, without pay, based on severity.
 - vii. Terminate the individual from their position.
 - viii. Inform any relevant parties (e.g. College of Early Childhood Educators, College of Teachers, College of Social Work and Social Services, the contact person for the program from which a student has been placed, CAS, police, etc.); and/or
 - ix. Report violations with the College of Early Childhood Educators' Code of Ethics to the College
- Where an observed non-compliance meets the criteria for a reportable serious occurrence (e.g. an allegation of abuse or neglect), the serious occurrence policy and procedures will be followed.
 - Where appropriate, the supervisor or designate will follow up with the family of a child in accordance with our policies and procedures on parent issues and concerns.

Additional Policies and Procedures

- All staff will review Child Care Centre policies, procedures, and individualized plans and anaphylactic plans yearly, or as required when updates/ changes are made to the existing Centre policy. This review may be provided individually, during a staff meeting, or by providing staff with adequate time to read the information. Once completed, a sign-off sheet will be maintained indicating the date and signature of each review.
- The Centre Director or Designate will ensure that all new employees, students, and volunteers who will be providing care and guidance to the children must review and sign off indicating their understanding and agreement to follow all Policies, Individualized Plans, and any Anaphylactic plans before they will be permitted in any classroom with children. A sign-off sheet will be maintained indicating the date and signature of each for review.

- All employees of the organization share the responsibility for monitoring and ensuring that all policies are followed. In addition to ensuring that they are adhering to the policies themselves, all employees are also expected to constantly monitor the practices of their co-workers. An employee can inquire about the practices of any other employee at any time, without fear of reprisal. Any concerns can be discussed with another staff in a professional manner. Following a discussion with a staff member, if required, a staff may bring any concerns to the director/ supervisor for further conversation and assistance.
- If an employee raises a concern about the behaviour management practices or contravention of any other policy of another employee, the Centre Director will discuss the concerns with all persons involved and will keep a written record of the discussion and any subsequent action.
- All regular employees participate in an Employee Performance Review at least once a year or as deemed by the Town of Goderich. Any concerns or comments will be noted at that time, and a plan will be developed to assist the employee in understanding and following the Policies.
- It is the responsibility of all employees to ensure that the rights of each child and family are protected in the Child Care Centre at all times. Any concerns will be reported to the Director immediately. Contravention of any of these policies may result in disciplinary action.
- Staff are expected to comply with the program's stated policies and procedures. Failure to report concerns about the behaviour management practices or other contravention of policies by another employee within an appropriate time frame will be considered a contravention of the Policy. Failure to model appropriate behaviour management practices in interactions with fellow employees, parents, or other adult visitors to the Centre may result in disciplinary action.
- All staff are required to immediately report to the supervisor if any unusual discipline problems arise with a student attending the Child Care Centre.
- Any unusual discipline problems that may occur while a student is attending the Goderich Municipal Child Care Centre will be recorded in the Daily Record Book.
- Behaviour Management will be included in monthly staff meetings, during Professional Development days, and workshops. Minutes of all staff meetings and staff development are recorded and filed.

Glossary

Licensee: The individual or corporation named on the license 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 enrolled in an education program/ school and is completing a placement

Volunteer: Any individual who is engaged in the child care program and interacts with the children in care but is not paid by the licensee.

Regulatory Requirement – Ontario Regulation 137/15:

6.1

(7) Every licensee of a child care centre or home child care agency shall have written policies and procedures that are set out,

(a) how compliance with the policies, procedures, and individualized plans will be monitored on an ongoing basis, recorded, and addressed; and

(b) how contraventions of the policies, procedures, and individualized plans will be monitored on an ongoing basis, recorded, and addressed.



Date of Policy	Revised March 2024	Parent Issues and Concerns
		Child Care & Early Years Act, 2014 (CCEYA)

Parent Issues and Concerns

We value the individual needs of our children and families at our Centre. We respect this partnership and foster on-going communication with parents, school personnel, and community partners to meet these needs. Open communication daily with parents, children, and staff is essential for a quality child care experience. Our staff will discuss your child's day with you and will ask for your feedback to ensure your child has a positive experience in our program.

All issues and concerns will be addressed in a timely manner and every effort will be made to resolve these concerns. If the program Director or Supervisor are contacted, they will follow-up and make contact within 2 business days. In concerns regarding an allegation of abuse, the response to the concern will happen within 24 hours of the concern being reported.

- If there is a concern regarding Program Activities/ Room (i.e. programming, schedules, toileting, or nutritional concerns), please address the concern directly with the program staff. If the issue cannot be resolved, contact the Director or Supervisor.
- If there is a concern with day-to-day operations (i.e. wait list, fees, menus), contact the Director or Supervisor.
- Any concerns surrounding students on placement (Co-Operative education/ College placements), address the concerns with the program staff. If needed, they will discuss the issue with the Director and the Director may follow up with the Field Placement Supervisors if required.
- All issues or concerns regarding individual staff conduct that put a child's health, safety, and well-being at risk should be reported to the Director immediately.
- Concerns regarding the Director should be directed to the Town of Goderich.

Every discussion will be treated as confidential, except when information must be disclosed for legal reasons (i.e. CAS, Ministry of Education, College of Early Childhood Educators). The duty to report is an ongoing obligation. If there are reasonable grounds to suspect that a child may need protection, by law, a report must be made to the Children's Aid Society. The duty to report overrides the provision of any other provincial statute.

Should parents express an issue or concern directly with a staff member, the staff member will:

- Listen attentively to gain a full understanding of the issue or concern.
- Problem solve together.
- Document the situation, which will include the issue/concern and the steps taken to resolve it.
- Follow up with the parents to ensure that the plan/ supports are being met and manageable.
- Contact their Program Director for support if a resolution cannot be found.



Date of Policy	Revised March 2024	Outdoor Playground & Safety Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Centre Outdoor and Playground Safety Policy and Procedures

Purpose

At Goderich Municipal Child Care Centre, outdoor play is an integral part of the daily schedule and plays an important role in the development of children’s overall well-being. In order for children to thrive in outdoor play, it is crucial that there be sufficient toys and equipment for children to engage in active play and that educators engage as active participants in the play.

The “*How Does Learning Happen? Ontario’s Pedagogy for the Early Years*” document describes how children thrive in programs where they can engage in vigorous physical play in natural outdoor spaces and playgrounds that present manageable levels of challenge. In addition to providing physical benefits, active play outdoors strengthens functioning in cognitive areas such as perception, attention, creative problem solving, and complex thinking.

While these environments need to be safe, it is also important for them to provide children with interesting opportunities for a reasonable degree of risk-taking.

The purpose of this policy is to set out the responsibilities of the licensee, staff, students, and volunteers in ensuring that the outdoor and playground spaces provide safe and well-supervised environment for children’s play and meet Canadian Standards Association (CSA) standards.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for a playground safety policy 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

- The child care centre will ensure that there are enough play materials available that are appropriate for the children's age and learning and developmental needs during outdoor play.
- The maximum capacity of the playground will not be exceeded at any time.
- When traveling from one playground to another, or outdoors at any time, the staff will confirm the number of children in attendance with their group before exiting and confirm that number again upon arrival to the desired area.
- When groups are separated, confirmation of children in attendance will happen again when both groups are in attendance.
- Staff will record children's attendance in the app when arriving or departing. Frequently checking the number of children in care.
- Any waterplay activities that are offered shall be closely supervised and standing waterplay shall be only offered in a sensory table form and disposed of after each use.

Playground Inspections/ Checks

- Outdoor play space, fixed play structures and surfacing checks will be conducted on a daily, monthly, and annual basis.
- All playground inspections will be documented. All documentation and reports will be filed by the director or designate in the office.
- The licensee will ensure that where the playground has fixed equipment, the certified playground inspection is conducted by a third-party inspector who:
 - has declared non-conflict of interest including declaration of non-affiliation with playground equipment and protective surface manufacturers, suppliers, and/or other contractors involved in the retrofit, upgrade or repair of the playground equipment and protective surfaces.
 - has proof of current Professional Errors and Omissions insurance coverage; and/or
 - has proof of playground inspector certification.

Repairs and Maintenance

- All items identified in the checklists as requiring repair will be documented in the repair log and repaired or addressed in a timely manner (Note: the amount of time required will depend on the scope of the work and who is required to conduct the repairs).
- Documentation on the repair log will also include:
 - The date the issue was identified.

- Documentation of what steps and efforts have been taken to address any identified items which cannot be repaired immediately due to circumstances out of the child care center's control; and
- The date the related repairs were completed.
- Where outdoor space or playground repairs cannot be completed immediately, the area or space requiring repairs will be sectioned off to prevent children from using that area in order to protect their safety and reduce the risk of injury. Children will be supervised at all times during outdoor play to ensure that they do not approach or use spaces that are sectioned off pending repairs.
- Any repairs requiring alterations or renovations to the playground premises will not begin until site or playground plans are approved by the Ministry of Education Director.

Compliance with the CSA Standards

- Any outdoor play space, fixed play structure or surfacing under those structures that is constructed or renovated will meet the requirements set out in the Canadian Standards Association (CSA) standard CAN/CSA-Z614-14, "Children's Play spaces and Equipment".
- Written confirmation of compliance with the CSA standard will be obtained from a Certified Playground Safety Inspector, upon completion of any repairs or renovations which have resulted in a non-compliance with the CSA standard as outlined in a playground inspection report.

Supervision

- Children will be supervised at all times during outdoor play.
- Staff will position themselves throughout the playground and rotate their positions where required to ensure children can be visually supervised while engaging in play.
- Staff to child ratios will be maintained on the playground at all times.
- Reduced ratios will never be used on the playground.
- Infant and toddler children will be separated from other children during outdoor activities.
- Staff will ensure that all gates are securely closed at all times.

Documentation and Report Retention

- All documentation and reports relating to the outdoor space or playground will be:
 - Kept for three years from the date they were created and/or updated (whichever date is most recent); and
 - Made available for Ministry of Education staff to review at all times.

Additional Policy Statements

The daily playground check shall be completed in the am, before children enter the areas, so that items, if arise, may be addressed. Any additional concerns or hazards that may arise during playground inspections or at any time, must be reported directly to the Director or Supervisor. At that time, the Town of Goderich staff may be contacted to assist in the removal or address the concern.

Playground Safety Procedures

Timeline	Steps to Follow
<p>Daily: before using the outdoor play space/ playground</p>	<ol style="list-style-type: none"> 1. Designated staff must: <ol style="list-style-type: none"> i. Walk around the entire outdoor play space or playground to look for and identify hazards and defects as indicated in the daily playground inspection checklist (the form in Appendix A may be used for this purpose). ii. Remove any garbage, hazards or defects using gloves. iii. Complete the playground inspection checklist, sign and date it; and iv. File the playground inspection checklist in the Childcare office. <p>Where hazards or defects cannot be immediately removed or repaired, designated staff must:</p> <ol style="list-style-type: none"> i. Report the hazards or defects to the director or designate who will log and maintain the information in the repair log and take appropriate action to initiate any repairs. ii. Section off the area with the hazard/defect if it poses a hazard to children. <ol style="list-style-type: none"> 2. In preparation to exit the child care centre to use the outdoor play space or playground, the childcare staff must: <ol style="list-style-type: none"> i. Ensure all emergency medication accompanies children, where applicable. ii. Ensure all emergency contact information is readily available for children. iii. Ensure the attendance record is readily available. iv. Ensure that the allergy and dietary restriction lists are readily available. v. Ensure appropriate steps related to environmental factors have been implemented (e.g. children are appropriately dressed for the weather, there are no entanglement risks, bug nets are in place, etc.); and vi. Conduct head counts prior to leaving the indoor play activity area, and while transitioning them to the outdoor play space or playground.
<p>Daily: while using the outdoor play space/ playground</p>	<ol style="list-style-type: none"> 1. Staff must: <ol style="list-style-type: none"> i. Position themselves in areas that ensure that all children and areas of the playground can be properly supervised at all times. ii. Ensure that there is access to drinking water at all times. iii. Complete head counts of children every 15 minutes.

	<ul style="list-style-type: none"> iv. Implement the goals and approaches of the program statement, such as engaging with the children in play; and v. Refrain from using personal cellular phones (except in emergency situations) or using outdoor time to socialize with other staff, students and volunteers during outdoor play. <p>Where a child is injured on the playground, staff must:</p> <ul style="list-style-type: none"> i. Administer first aid, where appropriate. ii. Contact emergency services, where appropriate. iii. Notify the parent of the child. iv. Complete an accident report and provide a copy to the child's parent; and v. Follow the serious occurrence policy and procedures, where appropriate.
Daily: when returning from the outdoor play space/ playground	<ul style="list-style-type: none"> 1. Staff must: <ul style="list-style-type: none"> i. Conduct head counts prior to returning from the outdoor play space or playground, while transitioning indoors, and upon returning to the indoor play activity space. ii. Ensure that attendance records, emergency medication, and children's emergency contact information is brought indoors with the group.
Monthly	<ul style="list-style-type: none"> 1. The Director or Designate must: <ul style="list-style-type: none"> i. Walk around the entire outdoor play space or playground to look for and identify hazards and defects as indicated in the monthly playground inspection checklist (the form in Appendix B may be used for this purpose). ii. Remove any hazards or defects, where possible. iii. Complete the monthly inspection checklist (including verification of seasonal issues), sign and date it; and iv. File the playground inspection checklist in the childcare office. <p>Where hazards or defects cannot be immediately removed or repaired, the Director or Designate must:</p> <ul style="list-style-type: none"> i. Report the hazards or defects to the Director or Designate who will log and maintain the information in the repair log and take appropriate action to initiate any repairs. ii. Section off the area with the hazards or defects if it poses a hazard to the children. 2. The Director or Designate must: <ul style="list-style-type: none"> i. Review the outdoor injuries and accidents that have occurred to look for trends.

	<ul style="list-style-type: none"> ii. Take appropriate action to prevent similar injuries and accidents from happening in the future. <p>3. The Director or Designate must:</p> <ul style="list-style-type: none"> i. Review the repair logs and follow up on any outstanding identified issues still requiring repair.
Annually	<ul style="list-style-type: none"> 1. Where the playground has fixed equipment, the designated staff must: <ul style="list-style-type: none"> i. Ensure a certified playground inspector conducts an annual playground inspection. ii. Discuss the findings of the playground inspection with the certified playground inspector, including items that need to be repaired or replaced; and iii. Obtain a copy of the playground inspection report. 2. Where the playground does not have fixed equipment, the designated staff must: <ul style="list-style-type: none"> i. Walk around the entire outdoor play space or playground to look for and identify hazards and defects as indicated in the annual playground inspection checklist. ii. Remove any hazards or defects, where possible. iii. Complete the annual inspection checklist, sign and date it; and iv. Develop a written plan to address any hazards and/or defects, including a timeline to address the issues identified during the inspection. 3. Where hazards or defects cannot be immediately removed or repaired, the director or designate must: <ul style="list-style-type: none"> i. Report the hazards or defects to the Town of Goderich who will log and maintain the information in the repair log and take appropriate action to initiate any repairs. ii. Section off the area with the hazard or defect if it poses a hazard to children.

Additional Procedures

Any additional concerns or hazards that may arise during playground inspections or at any time must be reported directly to the Director or Supervisor. At that time the Town of Goderich staff may be contacted to assist in the removal or address the concern.

Glossary

Canadian Standards Association (CSA): a non-profit, voluntary association engaged in standards development and certification activities. The current standard in Ontario for licensed child care centre playgrounds is CAN/CSA Z614-14 – Children’s Playspaces and Equipment. This standard specifies design and maintenance criteria to reduce the risk of injury.

Certified Playground Inspector: An individual who holds a current certification with the Canadian Playground Safety Institute.

Fixed Play Structure: a structure anchored to the ground that is designed for children to climb on (e.g. a climber).

Licensee: The individual or corporation named on the license 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).

Regulatory Requirements: Ontario Regulations 137/15

Outdoor Play Space

Playground Safety Policy

24(4) Every licensee shall ensure that, at each child care centre it operates, any outdoor play space, fixed play structure or surfacing under those structures that is constructed or renovated on or after August 29, 2016, meets the requirements set out in the Canadian Standards Association standard CAN/CSA-Z614-14, “Children’s playspaces and equipment”, as amended from time to time. O. Reg. 126/26, s. 18(2).

(5) Every licensee shall ensure that each child care centre it operates,

(a) a playground safety policy is developed that reflects the Canadian Standards Association standard mentioned in subsection (4) and indicates the roles and responsibilities of employees regarding safety on playgrounds.

(b) daily, monthly, and annual inspections of the outdoor play space, fixed play structure and surfacing are conducted in accordance with the requirements set out in the Canadian Standards Association standard mentioned in subsection (4).

(c) a plan is developed on how issues or problems identified in a playground inspection will be addressed; and

(d) a playground repair log is maintained.



Date of Policy	Revised March 2024	Child Care Safety Policy – Child Pickup/ Custody Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Safety Policy

To ensure the safety of all children who are under the care of the staff of the Child Care Centre.

Child Care

All children must be given to staff upon arrival. Children are not allowed to be dropped off at the front door.

All children are signed in by the staff upon arrival and departure. The attendance sheet/ Lillio App will have the time of entrance and departure from the classroom. Staff must do a visual check of the child upon arrival; any notes will be recorded in the daily journal.

Currently, the following are legislated child to staff ratios:

- ❖ Preschool – 8 children to 1 staff member
- ❖ Toddlers – 5 toddlers to 1 staff member
- ❖ Infants – 3 infants to 1 staff member

It is mandatory to maintain these ratios at all times. Ratios may change from 7:30 - 9:00am, 12:30pm – 2:30pm, and 4:30pm – 5:30pm. Infant ratio may never change.

When a parent has a change in pick up, the parent is required to give written notice via the Lillio App and the staff is required to write down the information in the appropriate communication book. When someone other than the parent is picking up the child and authorization has not been given to the staff, and the person is on the pickup list, staff are required to deny access and a phone call is made to the parent to receive verbal authorization.

When someone is picking up a child that the parent has authorized and the staff does not know the person, identification is required before the child can be released. Identification will be in the form of photo identification. People who can pick up at any time will be on the emergency cards and classroom app.

Child Pick Up/ Custody Policy

It is the policy of the Goderich Municipal Child Care Centre that any person who arrives to take custody of a child from any program offered by the Goderich Municipal Child Care Centre must be 14 years of age or older. No siblings or caregivers under this age will be allowed to obtain any child. No child who is registered and attends any of the programs offered by the Goderich Municipal Child Care Centre will be allowed to leave the program on their own. Staff will use photo identification when necessary.



Date of Policy	Revised March 2024	Sanitary Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Sanitary Policies and Procedures

It is the Goderich Municipal Child Care Centre policy that the premises be cleaned in such a manner as to provide a safe and healthy environment.

Procedure

The floors are kept clean, damp mopped daily, and carpets vacuumed daily. Toys and play equipment are washed with bleach as they become soiled or on a bi-weekly basis. All doll centre dishes must be washed through the dishwasher as often as possible, as suggested by the Huron County Health Unit. Single service disposable paper towels are used. Liquid dispensers are available.

More frequently used equipment such as infant seats and eating surfaces should be cleaned daily after each use. Tables are disinfected before and after snacks as well as at lunch time. Infant toys and equipment will be cleaned daily. Any mouthed toys will also be disinfected immediately.

Children have to wash their hands before snacks, lunch, and after using the toilet. Hand washing should also occur when the children come in from playing outside and after playing with the play dough.

Diapering Procedure

- Wash hands.
- Dispose of the soiled diaper or training pants in the diaper pail or if a disposable diaper, in a plastic bag. Be sure that pins are out of child's reach.
- Wash the child's diapered area with a baby wipe.
- A supply of each child's diapering supplies such as creams should be kept in individual compartments.
- Wash the child's hands and take the child back to the playroom.
- The change table will be disinfected after each use.
- Wash hands thoroughly with anti-bacterial soap.
- It is the policy of the Goderich Municipal child Care Centre that if a parent chooses to use pull-ups, that they purchase the pull ups that have detachable sides not sides that are not detachable.

Bed Changing Procedure

- Full time student's beds are changed and disinfected with bleach weekly.
- Part time student's beds are changed and disinfected with bleach daily.

Water Tables

- Water tables will be filled with fresh water and bleach daily and emptied at the end of the day. Children with sores or cuts will not be permitted to use the water play.



Date of Policy	Revised March 2024	Serious Occurrence Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Centre Serious Occurrence Policy and Procedures

Purpose

The purpose of this policy and the procedures within is to provide clear instructions for staff, students, and volunteers to follow for how to identify, respond to, and report a serious occurrence. It ensures that there is a plan to deal with any serious incidents that may affect the health, safety, and well-being of children and those working directly with children, and that these serious incidents are reported, tracked, and followed up on.

This policy requires that an annual review be conducted of serious occurrences that took place over the last calendar year for an opportunity to reflect on the incidents that took place and consider approaches that will be implemented to minimize the chance that the incidents will occur again in the future.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for policies and procedures with respect to serious occurrences for child care centres.

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

Policy

Identifying a Serious Occurrence

Under the *Child Care and Early Years Act, 2014*, serious occurrences are defined as:

1. The death of a child who received child care at a child care centre.
2. Abuse, neglect, or an allegation of abuse or neglect of a child while receiving child care at a child care centre.
3. A life-threatening injury to or a life-threatening illness of a child who receives child care at a child care centre.
4. An incident where a child who is receiving child care at a child care centre goes missing or is temporarily unsupervised; or

5. An unplanned disruption of the normal operations of a child care centre that poses a risk to the health, safety, or well-being of children receiving child care at the child care centre.

Note: Appendix A provides examples and scenarios of reportable and non-reportable incidents.

Reporting a Serious Occurrence

- Staff will notify the licensee, supervisor or designate of a serious occurrence as soon as they become aware of the incident.
- All serious occurrences will be reported to the Ministry of Education in the Child Care Licensing System (CCLS) within 24 hours of the licensee, supervisor or designate becoming aware of the occurrence.
- Identifying information such as children or staff names will not be included in the serious occurrence reports.
- If CCLS cannot be accessed (e.g. Where CCLS or an internet connection is unavailable), the licensee, supervisor or designate will notify the program advisor (PA) assigned to the licensee by email or by telephone within 24 hours of becoming aware of the occurrence. A serious occurrence report will be submitted as soon as the system can be accessed.
- Where a Ministry of Education PA cannot be reached by telephone, a voicemail message will be left to notify the PA of the incident.
- All updates to serious occurrences will be reported in CCLS through update reports until the serious occurrence has been closed by the Ministry of Education.
- Where the Ministry of Education requests updates to a serious occurrence in CCLS, these will be provided as soon as possible through update reports.
- Serious occurrences reported to the Ministry of Education will be documented in the daily written record.

Posting a Serious Occurrence Summary (Notification Form)

- Within 24 hours of becoming aware of a serious occurrence, the director/ supervisor/ designate will complete a Serious Occurrence Notification Form in either CCLS or using the form available in Appendix B.
- The form will provide a summary of the serious occurrence and of any action taken by the Child Care Centre.
- The summary will not include identifying information (e.g. names and ages of children, staff, or program rooms) and will contain gender-neutral language.
- The summary will be posted at the Child Care Centre in a place that is visible and accessible to parents for a minimum of 10 business days, regardless of the serious occurrence type and the status of any related investigation.

- All updates to the serious occurrence will be added to the posted summary, and the summary will remain posted for an additional 10 business days each time any updates are added.
- All serious occurrences summaries will be retained for 3 years from the date they are created or last updated (whichever date is most recent).

Annual Analysis of Serious Occurrences

- An annual analysis of all serious occurrences that occurred in the previous calendar year will be completed by the director/supervisor
- The annual analysis will be used to identify issues, trends, and actions taken.
- The analysis and record of actions in response to the analysis will be kept on file for Ministry of Education review and retained for 3 years from the date the analysis and record of actions were created.

Concerns about the Suspected Abuse or Neglect of a Child

- If any person, including a person who performs professional duties with respect to children, has reasonable grounds to suspect that a child has suffered, or is at risk to suffer physical or emotional harm or sexual exploitation or molestation inflicted by the person having charge of a child, the person will report the suspicion directly to a children's aid society (CAS).
- Suspected abuse or neglect that will be reported will include physical, emotional, and sexual abuse and/or neglect.
- Where a parent expresses concerns that a child is being abused or neglected, the parent will be advised to contact their local CAS directly. The person who becomes aware of these concerns is also required to report the concerns to the local CAS.
- See Steps attached for follow-up

Additional Policy Statements

- It is required that each child has an emergency number and Health Card Number on file. All emergency information is also available on the Lillio App.
- In the case of a serious occurrence that is a medical emergency, call 911 and a director/ supervisor or designate will contact the parent/guardian.
- If it is not a medical emergency, the parent/ guardian will be contacted first by the director/ supervisor or designate.
- Contact the Chief Administrative Officer, the County of Huron Manager, and the Ministry of Education to make them aware of the situation.
- All staff or persons having knowledge of the occurrence must remain at the Child Care Centre until the Director/ Supervisor or designate dismisses them. A debrief will be done verbally before persons leave the building.
- Prepare and complete all the necessary reports for the Ministry of Education, Municipal Council, and College of Early Childhood Educators if required.
- A written debrief and follow-up meeting will be done with all staff.

Procedures to Respond to a Serious Occurrence

Steps to Follow for All Serious Occurrences

Steps for Staff, Students, and Volunteers to Follow:	Steps for the Licensee/ Supervisor/ Designate to Follow:
<ol style="list-style-type: none"> 1. Immediately, <ul style="list-style-type: none"> • Ask for assistance from other staff, students, and volunteers.\ • Provide immediate medical assistance, if applicable, according to Standard First Aid and CPR training, where applicable. • Call emergency services and follow direction from emergency services personnel, where applicable. • Ensure that other children are removed from the scene and do not have access to the area, where applicable. • Address any risks to the health or safety of the children present to prevent the risk of further harm. • Notify the supervisor/ designate. 2. Ongoing and after the incident: <ul style="list-style-type: none"> • Follow any direction provided by third-party authorities (e.g. police, CAS, public health, etc.) • Ensure that children are supervised at all times. 3. Within 24 hours: <ul style="list-style-type: none"> • Document the incident in: <ol style="list-style-type: none"> A) A daily written record, B) The child’s record of symptoms of illness, if applicable, and/or C) In an accident report, if applicable. • Where an accident report is created, provide a signed copy to a parent of the child. 	<ol style="list-style-type: none"> 1. Immediately: <ul style="list-style-type: none"> • Provide assistance to children, staff, students, volunteers and families. • Provide immediate medical assistance, if applicable, according to Standard First Aid and CPR training. • Call emergency services and follow direction from emergency services personnel, where applicable. 2. Within 24 hours of becoming aware of the incident: <ul style="list-style-type: none"> • Collect all pertinent information to report the incident to the Ministry of Education as a serious occurrence, including: <ul style="list-style-type: none"> ○ A description of the incident; ○ The date, time, place where it occurred; actions taken and outcome. ○ The current status of the incident and child/parties involved; and ○ All other parties notified (e.g. emergency services, CAS, parents) 3. Report the serious occurrence in CCLS, or notify the Ministry of Education program advisor by telephone or email where CCLS is not available. Note: where CCLS is not available, a serious occurrence report will be submitted in CCLS as soon as it becomes available. 4. Post a summary of the serious occurrence and of any action taken by the Child Care Centre in a place that is visible and accessible to parents. 5. Ongoing and after the incident:

	<ul style="list-style-type: none"> • Follow any direction provided by third-party authorities (e.g. police, CAS, public health, etc.) • Maintain confidentiality at all times. • Update the serious occurrence report in CCLS, as required. • Conduct an internal review of the serious occurrence with staff, students, and volunteers to establish next steps and reduce the probability of repeat occurrences. • Provide children, parents, staff, students and/or volunteers with supports, if needed. • Review with staff, students, and volunteers the Child Care Centre’s program statement policies and procedures that set out prohibited practices and expectations of promoting the health, safety, nutrition, and well-being of all children.
--	---

Steps to Follow According to Specific Serious Occurrence Categories

Serious Occurrence Category	Steps for Staff, Students, and Volunteers to Follow:	Steps for the Licensee/ Supervisor/ Designate to Follow:
Death of a Child	<p>Death occurs while a child is receiving child care:</p> <p>See “Steps to Follow for All Serious Occurrences” for staff, students, and volunteers.</p>	<p>See “Steps to Follow for All Serious Occurrences” for the Licensee/ Supervisor/ Designate, and</p> <p>a) Death occurs while a child is receiving child care:</p> <p>1. Immediately, upon becoming aware of the incident:</p> <p>Contact a parent of the child, or where a parent cannot be reached, contact the child’s emergency contact.</p>

		<p>b) Death occurs while a child is not receiving child care: Within 24 hours of becoming aware of the incident: Contact local Children’s Aid Society (CAS) or police services to find out if there is an investigation. If an investigation is ongoing, conduct an internal investigation after CAS or police services have completed their investigation, if applicable. Contact the parent (where appropriate) and inform staff members.</p>
<p>Allegation of Abuse and/or Neglect</p>	<p>“Steps to follow for All Serious Occurrences” for staff, students and volunteers, and Where there is a concern about the abuse or neglect of a child by any person, 1. Immediately:</p> <ul style="list-style-type: none"> - Report concerns to the local Children’s Aid Society (CAS) as per the duty to report obligations under the <i>Child and Family Services Act</i> (CFSA). - Document the conversation with CAS and follow their recommendations. <p>Notify the Supervisor/ Designate of the incident and the report made to CAS, where appropriate.</p>	<p>See ‘Steps to Follow for All Serious Occurrences’ for the Licensee/ Supervisor/ Designate, and Where there is a concern about the abuse or neglect of a child by a staff, student or volunteer, or where a person has otherwise reported alleged abuse/ neglect concerns to the supervisor/ designate: 1. Immediately:</p> <ul style="list-style-type: none"> - Notify the person who reported concerns about their duty to report obligations under the <i>Child and Family Services Act</i> (CFSA). - Report the concerns to the local

	<p>Refrain from discussing the allegation with others.</p> <p>Maintain confidentiality at all times.</p>	<p>Children’s Aid Society (CAS) as per the duty to report obligations under the CFSA, unless it is confirmed that a report has already been made to CAS.</p> <ul style="list-style-type: none"> - Document the concerns. - Contact and notify the parent of the child, where appropriate. - Based on the nature of the allegation and/or the direction of CAS and/or internal policies, determine next steps such as disciplinary measures and additional actions, such as an internal investigation to protect children in care. - Determine whether the individual alleged to have abused/ neglected a child is registered with a professional regulatory body (e.g. College of Early Childhood Educators, Ontario College of Teachers, etc.) If so: <ul style="list-style-type: none"> o Report the allegation of abuse to the appropriate
--	--	---

		<p>regulatory body.</p> <ul style="list-style-type: none">○ Report to the College of Early Childhood Educators when the employment of a registered early childhood educator (RECE) is suspended or terminated or if the RECE resigns. <ul style="list-style-type: none">- Refrain from discussing the allegation with others.- Maintain confidentiality at all times. <p>2. Once all external investigations are complete (e.g. by police and/or CAS), if applicable:</p> <ul style="list-style-type: none">- Update the serious occurrence report in CCLS, as required.- Update all other authorities to whom the allegation was reported (e.g. College of Early Childhood Educators, Ontario College of Teachers, CAS, etc.)
--	--	---

<p>Life-threatening Injury or Illness a. Injury b. Illness</p>	<p>See ‘Steps to Follow for All Serious Occurrences’ for staff, students, and volunteers</p>	<p>See ‘Steps to Follow for All Serious Occurrences’ for the Licensee/ Supervisor/ Designate</p>
<p>Missing or Unsupervised Child(ren) a. Child was found. b. Child is still missing</p>	<p>‘Steps to Follow for All Serious Occurrences’ for staff, students, and volunteers; and</p> <p>1. Immediately, upon becoming aware that a child or children are missing:</p> <ul style="list-style-type: none"> • Alert the supervisor/ designate, and all staff, students, and volunteers. • Search the child care premises, including outdoor areas (e.g. hallways, washrooms, playground, outdoor classrooms, etc.) • Ensure that remaining children are supervised at all times <p>a) Where the child or children are <u>not found</u> after being deemed missing:</p> <ul style="list-style-type: none"> • Continue to search the premises. • Update the supervisor/ designate <p>b) Where the child or children <u>are found</u> after being deemed missing:</p>	<p>See ‘Steps to Follow for All Serious Occurrences’ for the Licensee/ Supervisor/ Designate, and</p> <p>1. Immediately, upon becoming aware that a child is missing:</p> <ul style="list-style-type: none"> • Assist with searching for the missing child(ren) <p>a) Where the child or children are <u>not found</u> after being deemed missing:</p> <ul style="list-style-type: none"> • Call emergency services and follow direction from emergency services personnel • Contact the child(ren)’s parent(s), or where a parent cannot be reached, contact the child’s emergency contact. <p>a) Where the child or children <u>are found</u> after being deemed missing:</p> <ul style="list-style-type: none"> • Update the child(ren)’s parent(s), or where a parent cannot be reached the

	<ul style="list-style-type: none"> Update the supervisor/ designate. <p>2. After the child or children have been found, after being deemed missing:</p> <ul style="list-style-type: none"> Document the incident in the daily written record. 	<p>child(ren)'s emergency contact.</p>
<p>Unplanned Disruption of Normal Operations</p> <ol style="list-style-type: none"> Fire Flood Gas Leak Detection of Carbon Monoxide Outbreak Lockdown Other Emergency Relocation or Temporary Closure 	<p>'Steps to Follow for All Serious Occurrences' for staff, students, and volunteers, and</p> <p>a) Where the incident is suspected to be an <u>outbreak</u>:</p> <ol style="list-style-type: none"> Immediately: <ul style="list-style-type: none"> Notify the supervisor/ designate on site of concerns. Separate children who are showing symptoms of illness from other children. Follow the child care center's sanitary practices and procedures. Within 24 hours: <ul style="list-style-type: none"> Record all symptoms of ill health in the affected child(ren)'s records. Document the incident in the daily written record. 	<p>See 'Steps to Follow for All Serious Occurrences' for the Licensee/ Supervisor/ Designate, and</p> <p>a) Where the incident is suspected to be an <u>outbreak</u>:</p> <ol style="list-style-type: none"> Immediately: <ul style="list-style-type: none"> Contact the local public health department. Where the incident is deemed an outbreak by public health: <ol style="list-style-type: none"> Immediately: <ul style="list-style-type: none"> Follow instructions from the local public health department. Contact the parent(s) of the affected child(ren) and ensure the affected child(ren) are picked up by their parent(s) and/or taken to hospital. Obtain an outbreak posting from the

	<p>b) Where the incident is not an outbreak (<u>all other disruptions of normal operations</u>):</p> <p>1. Immediately:</p> <ul style="list-style-type: none"> Follow the child care center's fire safety and evacuation plan and/or the emergency management policies and procedures, as applicable. <p>2. Within 24 hours:</p> <ul style="list-style-type: none"> Document the incident in the daily written record. 	<p>local Medical Office of Health and post in an area easily accessible for parents.</p> <p>Note: Outbreaks must be reported as a serious occurrence only if deemed an outbreak by public health.</p> <p>2. Within 24 hours:</p> <ul style="list-style-type: none"> Notify all parents of children enrolled at the child care centre of the outbreak. <p>a) Where the incident is not deemed an outbreak, follow sanitary practices policy.</p> <p>b) Where the incident is not an outbreak (<u>all other disruptions of normal operations</u>):</p> <p>1. Immediately:</p> <ul style="list-style-type: none"> Follow the child care center's fire safety and evacuation plan and/or the emergency management policies and procedures, as applicable.
--	---	---

		Note: a hold and secure (an external threat in the area) is not a reportable serious occurrence.
--	--	---



Date of Policy	Revised March 2024	Sleep Supervision Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Centre Sleep Supervision Policy and Procedures

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 of Goderich Municipal Childcare Centre 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 requirements to meet the recommendations set out in Health Canada’s document entitled “Joint Statement on Safe Sleep: Preventing Sudden Infant Death in Canada”.

Procedures of 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 135/15 for sleep policies for child care centres.

General

- All children will be provided with the opportunity to sleep or engage in quiet activities based on their needs.
- Children under 18 months of age will be provided time to sleep based on their individual schedules and will be assigned to a crib and/or cot as per written instructions. If no written instructions are provided, they will be assigned to a crib.
- Only light, breathable blankets will be used for infants.
- All children 18 months and older will be provided time to sleep for a period of no more than two hours each day and will be assigned to a cot.

- Where children are sleeping in a separate sleep room or area, their names will be listed on the display boards, so that staff can immediately identify which children are present in the room/ area.

Placement of Children for Sleep

- Children under 18 months of age will be placed in their assigned cribs for sleep.
- Children over 18 months of age who sleep will be placed on individual cots 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.

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 in the parent handbook and available in the front entrance and via the website.
- Program 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, or at the parent's request).
- 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 Program staff or designate after meeting with the parent/guardian.
- Parents will be advised by the supervising staff of any significant changes in their child's behaviour during sleep and/or sleeping patterns.
- Staff will document their observations of changes in a child's sleep behaviours in the daily written record and Lillio App.
- 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.

Direct Visual Checks

- Direct visual checks of **each** sleeping child (i.e. every child placed for sleep in a crib or cot) will be conducted to look for indicators of distress or unusual behaviours. Direct visual checks will be documented by staff by sleep check forms.
- 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 based on consultation with each parent and may be increased based on the observed sleeping patterns and/or medical needs of each infant. These checks will be recorded as stated in this policy.
- 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.

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.
 - Record the status of the Electronic Monitoring Device checklist daily.

Procedures

Age Group	Frequency of Direct Visual Checks*
Infant	According to each infant’s needs as identified by their parent, or at least every 15 minutes, or more frequently if symptoms of illness
Toddler	Every 60 minutes, or more frequently, if symptoms of illness
Preschool and/or Kindergarten (where applicable)	Every 60 minutes, or more frequently, if symptoms of illness

***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:
 - i. Be physically present beside the child.
 - ii. 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 the other children if the child appears to be ill.
 - iii. Document the incident in the Lillio App 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, or 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 parents 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 and time, and initial each direct visual check on the room's Lillio app or recording log; and
- v. Verbally inform other staff in the room that the check has been completed, where applicable and possible.

Glossary

Adequate lighting: Lighting that allows an adequate visual check of the child that allows breathing to be observed.

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 license 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).



Date of Policy		Staff Training and Development Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Staff Training and Development Policy

All educators will engage in continuous learning and development opportunities to help foster personal and professional growth.

Staff will review the Health and Safety Manual provided by the Town of Goderich upon orientation.

Ongoing Professional Learning

- Educators will participate in mandatory College of ECE workshops and provide a certificate of completion to be added to their personnel files.
- Staff will be required to complete their requirements within the CPL
- The Director/ Supervisor will post any learning opportunities provided to them.
- Educators will be encouraged to participate in all training provided to them by the County. If space is available, the director may make the training mandatory, in which the staff will be paid for their time in attendance.
- The director/ supervisor will provide up to date information on child development and other relevant information as received or included in monthly staff meetings to provide additional training. The minutes of the staff meetings will be emailed to all staff, for self-reflection and review.
- Educators will be encouraged to express their ongoing interest in professional training throughout the year and/or during the annual policy review. This will help identify the learning supports required and plans for future training opportunities. Staff will also be encouraged to participate in ongoing self-reflection strategies to help identify individual learning goals.



Date of Policy		Supervision of Students and Volunteers Policy
Sept 8 2018		Child Care & Early Years Act, 2014 (CCEYA)

Child Care Centre Supervision of Students and Volunteers Policy

Purpose

The Goderich Municipal Child Care Centre welcomes both placement students and volunteers into the various programs offered in our child care program. We believe it is a valuable part in gaining experience in a child care environment. Volunteers and students also play an important role in supporting staff in the daily operation of child care programs. Student placement opportunities are provided at our Centre for High School Cooperative Education, College and University Programs.

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

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

Policy

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 child care.

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

Additional Policy Statements

Only employees of the Town of Goderich will have direct unsupervised access to the children unless the child is registered in Growing Together, Small Talk, or receive therapy from Thames Valley Children's Centre or another Registered Agency offering direct therapy with the child. No child will be supervised by someone under 18 years of age. Cooperative Education students will only require a VSC if they are 19 years old. Outside agencies providing services within the Goderich Municipal Child Care Centre will be required to complete Offense Declarations for Other Persons providing Childcare or Services to a child

in a Childcare Centre Form as required in the Ministry of Education requirements for Childcare Centres.

Student and Volunteer Supervision Procedures: Roles and Responsibilities

The Licensee/designate must:

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 a vulnerable sector check (VSC) and annual offense declarations are on file for all students and/or volunteers in accordance with the child care center's criminal reference check policy and procedures and Ontario Regulation 137/15.

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.

The Supervising staff must:

Ensure that students and/or volunteers are never included in staff to child ratios.

Ensure that students and/or 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 center's policies, procedures, prohibited practices or individual plans (where applicable) in accordance with the child care center's written process for monitoring compliance and contraventions.

Students and/or volunteers must:

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 child care 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.

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 child care center’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.

Additional Procedures

Students will have an ongoing discussion regarding their program responsibilities and any program expectations for activities with the classroom teacher supervising the practicum. Any weekly practicum activity requirements will be discussed one week prior to carrying out the activities. If a child observation is required, the student will submit a request to the classroom teacher, to obtain permission from the parent prior to the observation.



Date of Policy		Wait List Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Wait List Policy

It is the policy of the Goderich Municipal Child Care Centre that the wait list is maintained in a positive and efficient manner. Huron County has a centralized online Child Care wait list available (OneHSN-Huron). Registration for the GMCCC waitlist is done through this application webpage <https://onehsn.com/huron>. There will be no cost associated with placing a child on this wait list or having them removed.

Once parents have completed the online waitlist, families are contacted in order of application registration date to discuss requested care requirements and eligibility of space/availability for Child Care. All parents will be informed at the time of the Director reviewing their application form: the registration process, the status of admission and the estimated wait times.

Once admission has been established, the parent/ guardian will be required to fill out a Centre Registration Package and return it to the Centre. Parents will be contacted one month prior to confirm a start date and to arrange a Centre visit.

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.

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

If there are no spaces available, the Director will ask the family to fill out a Centre Registration Package and will be placed in order of the wait list priority once a space becomes available. Parents will be encouraged to call in periodically to check availability if they are waiting for space.

When registering, please note that priority is given in the following order to our families:

- Families with siblings currently enrolled at the Centre.
- Full time care.
- Part time care. (same days weekly)
- Flex care (varied days weekly) – will be based on space availability.



Date of Policy		Safe Arrival and Dismissal Policy
		Child Care & Early Years Act, 2014 (CCEYA)

Goderich Municipal Childcare Centre

Safe Arrival and Dismissal Policy and Procedures

Name of childcare Centre: Goderich Municipal Child Care Centre

Date Policy and Procedures Established: January 4, 2023

Date Policy and Procedures Updated:

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 childcare 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

- Goderich Municipal Childcare Centre will ensure that any child receiving care at the childcare centre is only released to the child's parent/ guardian or an individual that the parent/ guardian has provided written authorization the childcare centre may release the child to.
- Goderich Municipal Childcare Centre Staff 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.

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 pickup 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 registration forms 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 childcare centre and the parent/guardian has not communicated a change in drop-off (e.g. left a voice message/ message, or advised the closing staff at pick-up), the staff in the classroom must:
 - Inform the Childcare Manager/ Administrative Assistant or Childcare Supervisor of the absence. They will commence contacting the child's parent/ guardian no later than 10:30am. They shall send a message or email via Lillio App, and if there is no response then call the parent, continuing to attempt to contact the parent/ guardian. If no response is received via the App and through calling the parent via telephone, next steps would include contacting the other parent/ guardian or emergency contacts.
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 childcare 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 within 1 hour, the staff shall proceed with contacting the parent/ guardian, the program staff

shall contact the parent/ guardian via phone call and advise that the child is still in care and has not been picked up.

- 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/ guardians instructions or leave a voice message to contact the centre.
- Where the staff has not heard back from the parent/ guardian or authorized individual who was to pick up the child, the staff shall contact the child's emergency contact. If no contact is made and the program closes, refer to procedures under "Where a child has not been picked up and the 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 closing, staff shall ensure that the child is given a snack and activity while they await their pickup.
2. One staff shall stay with the child, while a second staff proceeds 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 contact authorized individuals listed on the child's file.
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 6pm, the staff shall proceed with contacting the local Children's Aid Society (CAS) at 519-524-7356. Staff shall follow the CAS's direction with respect to next steps.

Dismissing a child from care without supervision Procedures

Staff will only release children from care to the parent/ guardian or other authorized adults. 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 childcare program staff in writing can pick-up their child from care.

Licensee: The individual or corporation named on the license issued by the Ministry of Education responsible for the operation and management of the childcare 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.

Safe Arrival and Dismissal Policy

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

- a) provides that a child may only be released from the childcare centre or home childcare premises,
 - i) to individuals indicated by a child's parent, or
 - ii) in accordance with written permission from a child's parent to release the child from the program at a specified time without supervision; and
- b) sets out the steps that must be taken if,
 - i) a child does not arrive as expected at the centre or home childcare premises, or
 - ii) a child is not picked up as expected from the centre or home childcare premises.

Disclaimer: This document is a sample of a policy and procedure that has been prepared to assist licensees in understanding their obligations under the *Child Care and Early Years Act, 2014* (CCEYA) and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the circumstances and needs of each childcare centre it operates and each premises where the licensee oversees the provision of home childcare.

Please be advised that this document does not constitute legal advice and should not be relied on as such. The information provided in this document does not impact the Ministry's authority to enforce the CCEYA and its' regulations. Ministry staff will continue to enforce such legislation based on the facts as they may find them at the time of any inspection or investigation.

It is the responsibility of the licensee to ensure compliance with all applicable legislation. If the licensee requires assistance with respect to the interpretation of the legislation and its application, the licensee may wish to consult legal counsel.