

The Parent Handbook

Cornerstone Preschool (Binbrook)



~Inspiring your child's

Love for learning~

Mission Statement

At Cornerstone Preschool, our mission is to provide a nurturing, inclusive, and stimulating environment where every child is empowered to explore, learn, and grow. Through play-based learning, we foster independence, curiosity, and a love for knowledge, while supporting the development of social, emotional, and cognitive skills. We collaborate with families to create a strong foundation for each child's future, ensuring they are prepared for success in school and beyond.

Vision Statement

Our vision at Cornerstone Preschool is to be a leading early childhood education provider known for creating compassionate, respectful, and inspiring learning environments. We aspire to cultivate confident, capable, and resilient children who thrive academically, socially, and emotionally. We envision a community where children, educators, and families work together to foster lifelong learning and well-being.

Program Statement

At Cornerstone Preschool, we create carefully designed environments that nurture children's natural curiosity and desire to learn. Our classrooms are filled with beautiful, sensory-rich materials that encourage exploration, fostering essential skills in math, language, and daily life. The environment and teachers support the development of independence, self-discipline, problem-solving, and community.

Aligned with *How Does Learning Happen?* Ontario's Pedagogy for the Early Years, our programs aim to help children reach their full potential. Our educators primarily observe and guide children's growth, respecting their innate drive to learn through exploration. We believe every child can become an exceptional learner, and we guide them to develop a lifelong love for learning.

We offer stimulating learning experiences that promote children's social, intellectual, physical, and emotional development, balanced with play, rest, and quiet time. Our approach is inclusive of all children, ensuring individualized support when needed. Play-based learning is at the core of our philosophy, allowing children to lead their learning with adult support and guidance.

Children thrive in environments where they feel safe, cared for, and valued. At Cornerstone Preschool, we prioritize health, safety, and well-being while fostering strong, responsive relationships between educators and families. We collaborate with parents to share information on their child's development, interests, and needs, enriching the learning experience both at home and at school.

We provide ongoing communication with parents through daily updates and feedback sessions, ensuring they are actively involved in their child's learning journey. Educators observe, document, and reflect on children's play, sharing these insights with families to support continuous growth.

Our program fosters each child's sense of self, emotional regulation, and social skills, creating an environment where they can reach their full potential.

This program statement is reviewed by staff, students, and volunteers before interacting with children and whenever modifications are made, in alignment with the Ministry of Education's *How Does Learning Happen?*.

The Four Foundations of How Does Learning Happen?

"How Does Learning Happen?" is organized around four foundational conditions essential for children to grow and flourish: **Belonging, Well-Being, Engagement, and Expression**. These foundations provide a vision for all children's future potential and are applicable regardless of age, ability, culture, language, geography, or setting. They are aligned with the Kindergarten Program and are conditions that children naturally seek for themselves.



- **Belonging** refers to a sense of connectedness to others and being valued as part of a group, a community, and the natural world.
- **Well-being** focuses on physical and mental health, incorporating self-care, sense of self, and self-regulation skills.
- **Engagement** describes the state of being involved and focused. When children are able to explore the world around them with curiosity, they develop skills like problem-solving, creative thinking, and innovation.
- **Expression** (communication) takes many forms and involves children using their bodies, words, and materials to communicate. Language-rich environments support the development of communication skills foundational to literacy.

PS Implementation Policy

- **Staff Sign-Offs:** All staff members, including placement students and volunteers, must read the Program Statement and sign off on it:
 - Prior to employment
 - Before interacting with children
 - Whenever the statement is modified
 - Annually thereafter
- **Review Process:** The Director and/or Supervisor will review all sign-offs and confirm completion by signing the review sheet. They will ensure that staff, students, and volunteers fully understand the Program Statement and its implementation.
- **Classroom Documentation:** Each classroom will maintain a binder containing observations, plans, and documentation that supports understanding and implementation of the Program Statement.
- **Sharing with Parents:** Copies of relevant documentation related to a child will be shared with the child's parents or guardians.

- **Ongoing Support & Reflection:** The Director and/or Supervisor will meet regularly with staff to ensure a clear understanding of the Program Statement, provide support, and facilitate self-reflection. These meetings will be documented and added to the classroom binder.
- **Staff Development:** The Director and/or Supervisor will ensure staff are heard, respected, and given time for self-reflection. Staff performance will be monitored through observations and conversations.
- **Reflection on "How Does Learning Happen?":** Staff will engage in self-reflection by:
 - Completing reflection exercises
 - Reviewing observations
 - Engaging children in meaningful activities
 - Communicating with parents and building trust-based relationships
 - Collaborating with co-workers to maintain a safe environment
 - Regularly reflecting on their own practices
- **Monitoring Compliance:** The Director and/or Supervisor will observe staff interactions to ensure no prohibited practices are being followed. Any violations will be addressed as per the Disciplinary Policy in the Operations Manual.
- **Professional Standards:** All educators will adhere to the College of Early Childhood Educators' Code of Ethics and Standards of Practice, holding themselves accountable and using these guidelines, along with the CCEYA, to inform their decisions and practices.
- **Documentation Retention:** All documentation related to the Program Statement implementation and monitoring will be retained for three year.

Monitoring of Prohibited Practices and Disciplinary Action

The following practices are prohibited and may result in immediate termination of employment:

No staff member shall:

- Use corporal punishment on a child.
- Physically restrain a 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 to prevent harm to the child or others. This should only be used as a last resort and until the risk of injury is no longer imminent.
- Lock the exits of the childcare centre or home childcare premises to confine a child, or confine a child to a room or area without adult supervision, unless it is part of emergency management procedures.
- Use harsh, degrading, or derogatory language, threats, or actions that humiliate, shame, frighten, or undermine the child's self-respect or dignity.
- Deprive a child of basic needs, including food, drink, shelter, sleep, toilet use, clothing, or bedding.
- Inflict bodily harm on children, including forcing children to eat or drink against their will.

Procedures and Practices for Child Guidance

- **Mealtimes & Outdoor Activities:** No child shall be excluded from mealtimes or outdoor activities. If a child is misbehaving, they should be given ample opportunity to follow classroom rules and routines. Staff should focus on reinforcing positive behavior rather than solely pointing out incorrect behavior and allow the child to correct their own actions when appropriate.

Example 1: Shelly is running in the classroom.

- Staff should approach Shelly and ask her, "Shelly, when we are in the classroom, how should we move around?"
- If Shelly doesn't know, the staff member should guide her with the correct behavior: "Shelly, let's remember that we need to walk in the classroom and use our running feet for outside."
- If a child is causing injury to another, staff must intervene to protect the children. The child causing harm should still be treated with respect, and discipline should be implemented in a loving and positive manner.

Example 2: Timmy is hitting another child during circle time.

- Staff should approach Timmy and stop any further hitting gently. They should ask, "Timmy, you're hitting Sally. That hurts Sally, and she looks sad. Do we hit others?"
- Timmy may respond, "No, but she took my spot!"
- Staff should suggest a solution: "If someone takes your spot, try using your words to ask for it back. If that doesn't work, ask a teacher for help. What can you do now to make Sally feel better?"
- If a child continues to ignore the rules, the staff member will ask the child to remove themselves from the situation: "Timmy, we've asked you many times not to hit Sally. If you can't keep your hands to yourself, you will need to leave circle time. We don't want that to happen."
- If the child refuses, staff should escort them, if necessary, and allow them to return when they are able to follow the rules. The child can sit and observe the circle or take time to calm down.
- The behavior may be discussed later if appropriate: "Class, how should we treat our friends? If someone does something we don't like, what should we do? Should we ever hit anyone?"
- If staff feel unable to handle the situation, they should reassess their approach, seek advice from the Director, and report the issue for further support.

Disciplinary Action

Policy: If a staff member of Cornerstone Preschool is found to have violated policies, or if a complaint is reported, the Director will follow strict guidelines regarding the staff member's alleged behavior.

Procedure: If the complaint is for an inappropriate verbal reprimand (e.g., raised voice towards a child), the following steps will be taken:

1. The Director/Supervisor will complete a written report outlining the concern.
2. A meeting will be held with the staff member to discuss the allegations.
3. A written reprimand will be issued, and the staff member will review the Program Statement, implementation policy, and child guidance procedures.
4. The staff member will be placed on probation for three months, with a review at the end of that period.
5. A verbal apology will be made to the child and their family.

If a second complaint regarding the same behavior is filed, it will result in immediate dismissal, and a report will be filed with the appropriate governing bodies.

If the complaint involves more serious issues (e.g., exclusion from meals, outdoor play, or harming a child's self-image), the Director/Supervisor will:

1. Complete a written report outlining concerns.
2. Meet with the staff member and reporting parties.
3. If the issue is serious, the staff member may be suspended while an investigation is carried out.
4. If the investigation determines the staff member is not guilty, they will be reinstated, and the report will remain on file.
5. If the staff member is found guilty, they will be relieved of their duties.
6. A report will be filed with the relevant governing bodies.

If the complaint involves mistreatment, physical or sexual abuse, the staff member will be immediately suspended without pay, and the incident will be reported to the appropriate authorities (CAS, Police). All steps outlined for more serious matters will be followed.

Confidentiality and Investigation

If an investigation is carried out, any confidentiality agreements will be waived in relation to the matter being investigated. The Preschool will provide full access to the appropriate authorities, including staff, parents, and governing bodies, and will comply with all legal requirements.

Child Care Centre Policy for Monitoring Compliance and Contraventions

Name of Child Care Centre: Cornerstone Preschool

Date Policy and Procedures Established: October 2023

Date Policy and Procedures Updated: Feb 8, 2024

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, procedures and individualized plans for child care centres.

Policies and procedures required under the *Child Care and Early Years Act, 2014*:

- Playground Safety
- Anaphylactic policy
- Safe Arrival and Dismissal Policy
- Sleep Supervision
- Serious Occurrence
- 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

Other policies and procedures developed by the child care centre:

Staff at Cornerstone Preschool is expected to comply with all the policies set out by Cornerstone Preschool and The Ministry of Education and CCEYA as per Ontario Regulation 137/15. The intent of this Policy is that all employees, volunteers, and students review policies and procedures that support the delivery of the program, so that they are more aware of their roles and responsibilities and are better equipped to provide for the health, safety, and well-being of

children receiving care.

At Cornerstone Preschool we promote the health, safety, nutrition, and well-being of the children always. We support positive and responsive interactions among the children, parents, teachers, and all staff working at Cornerstone Preschool. To maintain the Health, Safety and Well-being of all the students and staff Cornerstone Preschool has put Policies and Procedures in place. Some of the most Important Policies are listed below but the policies are not limited to the below list.

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 Contraventions

1. Monitoring and Observations

- Cornerstone Preschool will monitor each staff, student and volunteer to assess whether policies, procedures and individualized plans are being implemented, as follows:
 - Director will observe and monitor the supervisor of the child care centre;
 - Supervisor will observe and monitor the qualified staff in each program room (i.e. RECE or otherwise approved staff);
 - Supervisor will observe and monitor other program staff (i.e. assistants);
 - Supervisor will observe and monitor placement students; and
 - Supervisor 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 record, attendance records, etc.).
- 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 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.
- All records will be stored in secured cabinet for at least three years from the date they are created.

3. 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 supervisor or designate.
- Supervisor will address their observations through a review and discussion with the individuals observed every six months and will seek to or provide them with appropriate supports to achieve and maintain compliance (e.g. additional training).

4. Dealing with Contraventions of Policies, Procedures or Individualized Plans:

- Cornerstone Preschool will make every effort to clarify expectations and encourages staff, students and volunteers to raise their questions and concerns about implementing policies, procedures and individual plans on an ongoing basis to support clarity, learning, development and ongoing compliance.
- Progressive discipline may be used to address observed non-compliances 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.
- 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:
 - 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;
 - Re-review the relevant policies, procedures, and/or individualized plans with the individual;
 - Issue a verbal warning;
 - Issue a written warning;
 - Temporarily suspend the individual from their position at the child care Centre for at least one day, based on severity;
 - Terminate the individual from their position;

- 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
- 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.

Monitoring will be done as follows:

- Observing staff, student, and volunteers when necessary and recording Behavior Management practices
- Regularly reviewing of Behavior Management through discussions of good practices
- Policies and Procedures will be reviewed annually to ensure all staff, students and volunteers are complying.

Glossary

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

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

Student: Individual 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 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.
- (8) Every licensee shall ensure that records of compliance or contraventions are kept in accordance with section 82.

Disclaimer: This document is a sample of a policy and procedures that have been prepared to assist licensees in understanding their obligations under the CCEYA and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates.

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.

Parent Issues and Concerns Policy and Procedures

Name of Childcare Centre: Cornerstone Preschool

Date Policy and Procedures Established: August 2017,

Date Policy and Procedures Updated: October 2023

Purpose

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

Definitions

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).

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

Policy

General

Parents/guardians are encouraged to take an active role in our child care centre and regularly discuss what their child(ren) are experiencing with our program. As

supported by our program statement, we support positive and responsive interactions among the children, parents/guardians, child care providers and staff, and foster the engagement of and ongoing communication with parents/guardians about the program and their children. Our staff are available to engage parents/guardians in conversations and support a positive experience during every interaction.

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

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

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

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

Confidentiality

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

Conduct

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

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

Concerns about the Suspected Abuse or Neglect of a child

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

If a parent/guardian expresses concerns that a child is being abused or neglected, the parent will be advised to contact the [local Children's Aid Society](#) (CAS) directly.

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

Procedures

Nature of Issue or Concern	Steps for Parent and/or Guardian to Report Issue/Concern:	Steps for Staff and/or Licensee in responding to issue/concern:
Program Room-Related E.g: schedule, sleep arrangements, toilet training, indoor/outdoor program activities, feeding arrangements, etc.	Raise the issue or concern to - the classroom staff directly or - the supervisor or licensee.	- Address the issue/concern at the time it is raised or - arrange for a meeting with the parent/guardian within 2 business days. Document the issues/concerns in detail. Documentation should include: <ul style="list-style-type: none"> - the date and time the issue/concern was received; - the name of the person who received the issue/concern; - the name of the person reporting the issue/concern; - the details of the issue/concern; and - any steps taken to resolve the issue/concern and/or information given to the parent/guardian regarding next steps or referral.
General, Centre- or Operations-Related E.g: child care fees, hours of operation, staffing, waiting lists, menus, etc.	Raise the issue or concern to - the supervisor or licensee.	
Staff-, Duty parent-, Supervisor-, and/or Licensee-Related	Raise the issue or concern to - the individual directly or - the supervisor or licensee. All issues or concerns about the conduct of staff, duty parents, etc. that puts a child's health, safety and well-being at risk should be reported to the supervisor as soon as parents/guardians become aware of the situation.	Provide contact information for the appropriate person if the person being notified is unable to address the matter. Ensure the investigation of the issue/concern is initiated by the appropriate party within 2 business days or as soon as reasonably possible thereafter. Document reasons for delays in writing. Provide a resolution or outcome to the
Student- / Volunteer-Related	Raise the issue or concern to - the staff responsible for supervising the volunteer or student or - the supervisor and/or licensee. - All issues or concerns about the conduct of students and/or volunteers that puts a child's health, safety and well-being at risk should be reported to the supervisor as soon as parents/guardians become aware of the situation.	parent(s)/guardian(s) who raised the issue/concern.

Escalation of Issues or Concerns: Where parents/guardians are not satisfied with the response or outcome of an issue or concern, they may escalate the issue or concern verbally or in writing to the Director, Cornerstone Preschool, at info@cornerstonepreschool.ca

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

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

Contacts: [insert information, e.g. agency/organization contacts, supervisor and/or individual who oversees the programs, ministries and local authorities, professional membership bodies]

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

Director – info@cornerstonepreschool.ca

Supervisor - 905-692-7444

Safe Arrival and Dismissal Policy and Procedures

Name of Childcare Centre: Cornerstone Preschool

Date Policy and Procedures Established: Nov 17th 2023

Date Policy and Procedures Updated: Nov 17th 2023

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

- Cornerstone Preschool will ensure that any child receiving childcare 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.

Please select which of the below policy statements apply to your program with respect to the dismissal of children from care without supervision. Please delete or edit those bullet points as you see fit.

- Cornerstone Preschool 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.
 - Our cut off time for 10:00 am stays the same, however, when a child does not arrive by 10:30 am, the supervisor or the child's educator will communicate with the parent/guardian through HI Mama to get an update. If they have not heard back by lunch time, they will then call the parent/ guardian to get an update and leave a voicemail if there's no answer. In an event, where we cannot get in touch with the family at all, we will then try to contact the emergency contacts on file.

Additional Policy Statements

Consider including additional policy statements, as applicable. (e.g., children may only be released to an adult, etc.)

Under no circumstance will Cornerstone Preschool ever release a child without adult supervision. Children will only be released to an adult who is on file as an emergency contact, or if received written instruction from the parent/guardian.

Procedures

Accepting a child into care

1. When accepting a child into care at the time of drop-off, program staff in the room must:
 - Greet the parent/guardian and child.
 - Ask the parent/guardian how the child's evening/morning has been and if there are any changes to the child's pick-up procedure (i.e., someone other than the parent/guardian picking up). Where the parent/guardian has indicated that someone other than the child's parent/guardians will be picking up, the staff must confirm that the person is listed on the enrollment form or where the individual is not listed, ask the parent/guardian to provide authorization for pick-up in writing (e.g., note or email).
 - Document the change in pick-up procedure in the daily written record. – For the Supervisor only
 - 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 or advised the closing staff at pick-up), the staff in the classroom must:
 - Our cut off time for 10:00 am stays the same, however, when a child does not arrive by 10:30 am, the supervisor or the child's educator will communicate with the parent/guardian through HI Mama to get an update. If they have not heard back by lunch time, they will then call the parent/ guardian to get an update and leave a voicemail if there's no answer. In an event, where we cannot get in touch with the family at all, we will then try to contact the emergency contacts on file.
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 30 mins of the usual or specified time, the program staff or the Supervisor shall contact the parent/guardian through HiMama or a 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/guardian's 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 emergency contact, wait until program closes and then refer to procedures under "where a child has not been picked up and program is closed").]

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

1. Where a parent/guardian or authorized individual who was supposed to pick up a child from care and has not arrived by **5:45 PM**, staff shall ensure that the child is given a snack and activity, while they await their pick-up.
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/emergency contacts listed on the child's file, etc.].
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 6:45 pm, the staff shall proceed

with contacting the local Children's Aid Society (CAS) 905-522-1121. Staff shall follow the CAS's direction with respect to next steps.

Dismissing a child from care without supervision procedures

Note: Please select from the below which option fits your program and delete all other options.

Option 1: Staff will only release children from care to the parent/guardian or other authorized adult. Under no circumstances will children be released from care to walk home alone.

Glossary

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

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

Regulatory Requirements: Ontario Regulation 137/15

Safe arrival and dismissal policy

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

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

(ii) a child is not picked up as expected from the centre or home child care 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 information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates and each premises where the licensee oversees the provision of home child care.

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.

Parent Involvement

At Cornerstone Preschool, we focus on establishing strong relationships with our families. We encourage families to be an active part of their child's experience in the programs we offer, ensuring they feel they belong and are valuable contributors to their children's learning.

By recognizing and building on the strengths of families and the love they have for their children, everyone benefits. Cornerstone Preschool is committed to working collaboratively with all our families to achieve the mutual goal of providing the best possible childcare service to both families and children.

Educators & Staff

At Cornerstone Preschool, all of our Early Childhood Educators are registered with the College of Early Childhood Educators. Our educators and staff have completed a vulnerable sector check, hold valid standard first aid and CPR certifications (including infant and child), and have up-to-date immunizations and TB tests.

"Every Educator should feel he or she belongs, is a valuable contributor, and deserves the opportunity to engage in meaningful work."

Days and Hours of Operation

Cornerstone Preschool operates five days per week. Our hours are **Monday to Friday from 7:15 a.m. to 5:45 p.m.**, with a **drop-off cutoff time of 10:00 a.m.**

The Centre is closed on the following statutory holidays:

- Labour Day
- Thanksgiving Day
- Christmas Day
- Boxing Day
- New Year's Day
- Family Day
- Good Friday
- Victoria Day
- Canada Day
- Civic Holiday

Additionally, **Cornerstone Preschool will also be closed on the following dates in December: 22, 23, 24, 29, 30, and 31.**

Regular fees apply regardless of closure dates. Cornerstone Preschool may also close due to inclement weather and hazardous conditions. We follow the **Hamilton-Wentworth District School Board** on bad weather days and will remain closed if the school board is closed. Any additional closure days will be communicated with sufficient notice to parents.

Cornerstone Preschool Facility Accommodations

Cornerstone Preschool – Binbrook is located at 2665 Binbrook Rd and has facilities to accommodate the following children:

- **TODDLER ROOM:** 15 toddlers, ages 18 months to 30 months
- **PRESCHOOL ROOM 1:** 24 preschoolers, ages 2.5 years to 6 years
- **PRESCHOOL ROOM 2:** 22 preschoolers, ages 2.5 years to 6 years

Programs Available

Full-Time

- 5 days per week (full day)

Part-Time

- 3 days/week – Mon, Wed, Fri
- 2 days/week – Tuesday, Thursday

Child Registration

As per the **updated policy**, Cornerstone Preschool no longer charges a registration fee.

Additionally, a **void cheque for the first month's fees** must be provided for processing. Fees are calculated and invoiced prior to the automatic withdrawal dates, which occur on the **1st business day of every month**.

If your child does not begin care on the scheduled start date for any reason, **charges will apply from the original start date to the new start date, unless alternative arrangements have been made with the supervisor.**

Child Registration Package

Cornerstone Preschool requires the completion of your child's registration package in full prior to enrollment. It is the parent's responsibility to ensure that all information remains up to date in our records. This information is essential for Ministry requirements and emergency purposes. Any data collected is protected under our PIPEDA policy, treated confidentially, and remains the property of Cornerstone Preschool.

Orientation

It is recommended that one to two weeks prior to your child's official start date, you set up an orientation visit day with the supervisor.

This will help and encourage your child with a smooth transition into the room and environment.

Emergency Management policies & procedures

Name of Child Care Centre: Cornerstone Preschool Date

Policy and Procedures Established: August 18th, 2017 Date Policy

and Procedures Updated: Oct, 2024

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 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 phases:

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: *We will all at the northeast corner of the building. It is a fenced area, where all the teachers with their group of children will meet.*

If it is deemed 'unsafe to return' to the child care centre, the **evacuation site** to proceed to is located at: Binbrook pizza - 2668 Binbrook Rd #102, across the street from the Childcare Center

Note: all directions given by 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 in place, the procedures in the child's individualized plan will be followed.

If any emergency situations happen that are not described in this document, Supervisor, will provide direction to staff for the immediate response and next steps. Staff will follow the direction 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 supervisor in the daily written record.

Additional Policy Statements

1. Fire Drills will be done every month
2. Staff practice lining up with children and all other evacuation procedures
3. Emergency Bag is always prepared

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 other staff of the threat as quickly and safely as possible. 2) Staff members who are outdoors must ensure everyone who is outdoors proceeds to a safe location. 3) Staff inside the child care centre must: <ul style="list-style-type: none"> • remain calm; • gather all children and move them away from doors 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 the 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) Supervisor 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 & 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. 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) Supervisor / Assistant Supervisor must immediately: <ul style="list-style-type: none"> • close and lock all entrances/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 services 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 or the Supervisor must: <ul style="list-style-type: none"> • remain calm; • call 911 if emergency services is not yet aware of the situation; • follow the directions of emergency services personnel; and • take 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 services 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.

<p>Disaster Requiring Evacuation</p> <p>A serious incident that affects the physical building and requires everyone to leave the premises. E.g. fire, flood, power failure.</p>	<p>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 fire alarm pull station must be used and staff must follow the centre's fire evacuation procedures.</p> <p>2) Staff must immediately:</p> <ul style="list-style-type: none"> • remain calm; • gather all children, the attendance record, children's emergency contact information any 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 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. <p>3) If possible, staff should also:</p> <ul style="list-style-type: none"> • take a first aid kit; and • gather all non-emergency medications. <p>4) Designated staff will:</p> <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 closest emergency exit, depending on which room they are in, and ensure their required medication is accessible, if applicable; and • wait for further instructions. <p>5) If possible, the site designate must conduct a walk-through 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>
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<p>Disaster – External Environmental Threat</p> <p>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 release, forest fire, nuclear emergency.</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 remain on site or evacuate the premises. <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) Supervisor / Site designate 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 staff member who becomes aware of the tornado or tornado 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 their program room(s) immediately. 3) Staff must immediately: <ul style="list-style-type: none"> • remain calm; • gather all children; • go to the basement or take shelter in small interior ground floor rooms such as washrooms, closets or hallways; • 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.

Natural Disaster: Major Earthquake	<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. 4) If possible, prior to 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. 6) Designated 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 place of safety and ensure their required medication is accessible, if applicable; and • wait for further instructions. 7) The site designate must conduct a walkthrough of the child care centre to ensure all individuals have evacuated, where possible.
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Immediate Emergency Response Procedures for Other Emergencies

EMERGENCY EVACUATION

In the event of a fire emergency, **Cornerstone Preschool Binbrook**:

1. Occupants (including staff, children, volunteers, etc.) shall adhere to the approved **Cornerstone Preschool Binbrook** (hereinafter **CPB**) Fire Safety Plan.
2. Staff shall execute their assigned fire safety duties.
3. Occupants shall evacuate the building using the nearest safe Exit, and proceed directly to the on-site exterior assembly point.
4. **Director - / Current Supervisor – (or designate)** shall dial 9- 1-1 from a safe location.
5. Staff will take attendance at the on-site exterior assembly point.
6. **Director - / Supervisor – (or designate)** shall meet with responding Hamilton Fire Department emergency personnel, provide a status update and keys (as required).
7. Occupants shall re-enter the building only upon approval from the Hamilton Fire Department or proceed to the off-site emergency evacuation location (as required).

ON-SITE EXTERIOR ASSEMBLY POINT

We will all at the northeast corner of the building. It is a fenced area, where all the teachers with their group of children will meet.

Please see picture below



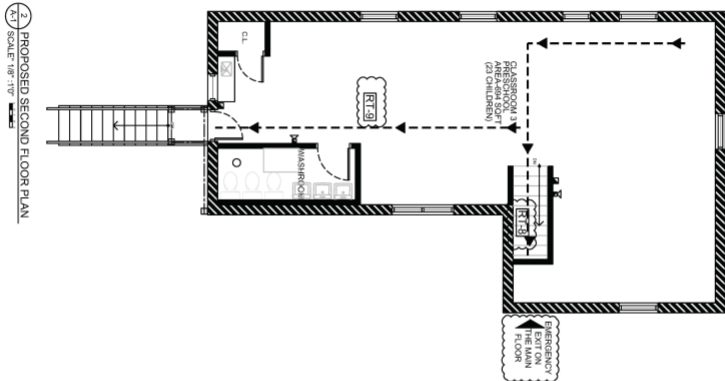
OFF-SITE EMERGENCY EVACUATION LOCATION

In the event that the Cornerstone Preschool Binbrook premises are not available due to emergency circumstances, the following off-site emergency evacuation location shall be utilized:

Site Name	Binbrook Pizza
Contact	Tony
Phone #	(289) 286-1638
Address	2668 Binbrook Rd #102, Binbrook, ON L0R 1C0

SITE DIAGRAM WITH EXITS

Refer to the following site floor plan.



TRAVEL DISTANCE PROVIDED :
RT - 1 : 12.09m
RT - 2 : 8.26m
RT - 3 : 4.93m
RT - 4 : 6.25m
RT - 5 : 4.27m
RT - 6 : 3.28m
RT - 7 : 7.75m
RT - 8 : 0.45m
RT - 9 : 7.82m

CLEAR PASS OF TRAVEL 1100MM TO
MAINTAIN AT ALL TIME NO OBSTRUCTION
IN EGRESS PATH TRAVEL

2
A-1

PROPOSED SECOND FLOOR PLAN

SCALE: 1/8" = 1'-0"

STAFF RESPONSIBILITIES

The Cornerstone Preschool Binbrook staff shall:

- Acknowledge and adhere to the specific transfer of duties from one classroom supervisor on break, to the staff member who will assume their responsibilities for fire safety.
- **Activate the fire alarm system audible signal during each monthly fire drill.** Supervisor will lead the monthly fire drills.
- As often as necessary, but at intervals not greater than twelve months, shall conduct a fire drill during children's nap time.
- Confirm responding Hamilton Fire Department emergency personnel have been advised of any missing occupants in the event of a fire emergency.
- Contact the Hamilton Fire Department non-emergency telephone number before and after any fire drill **and fire alarm system test**. 905-546-3333. Press 6. Leave a voicemail message before and after the fire drill **and fire alarm system test**. Collaboration / co-ordination with the Director or the Supervisor may be required to facilitate this.
- Ensure that children are wearing footwear at all times.
- Ensure that in the event of an emergency, 9-1-1 has been called.
- Evacuate children accordingly, whenever the **fire alarm system** audible signal is heard.
- Exclude actual real time emergency evacuations from the site's required monthly fire drills.
- Know the nearest Exit and alternate Exit from their building occupancy locations.
- Maintain accurate fire drill records that include the date, time of day, time to complete the evacuation, brief detailed fire drill comments and are accessible for review on-site.
- Provide any new information of changes in the use and other characteristics of the building (if applicable), to the **primary occupant**, Cornerstone Preschool Binbrook and Hamilton Fire Department (if necessary).
- Participate in all required fire drills.
- Participate in training and receive instruction in their responsibilities for fire safety.
-

- Practice their assigned fire safety duties.
- Remain on-site, in the premise and accessible when they are designated to assume the fire safety responsibilities for staff colleagues on break, so reductions in staffing ratios do not occur.
- Review the approved **Cornerstone Preschool Binbrook** Fire Safety Plan and this Addendum Fire Drill & Emergency Evacuation Procedure as often as necessary, but at intervals not greater than 12 months.
- Understand and be able to fulfill their responsibilities per the approved **Cornerstone Preschool Binbrook** Fire Safety Plan and this Addendum Fire Drill & Emergency Evacuation Procedure.

NOTE: Any changes to this Addendum Fire Drill & Emergency Evacuation Procedure will require resubmission to the Hamilton Fire Department for review and approval prior to implementation.

FIRE SAFETY PLAN

FSP.2

PROCEDURES FOR OCCUPANTS

To Be Posted On Each Floor

IN CASE OF FIRE:

- A) CALMLY NOTIFY ALL OCCUPANTS IN THE IMMEDIATE AREA OF A FIRE CONDITION.
- B) IF SAFE TO DO SO, LEAVE THE BUILDING IMMEDIATELY BY THE NEAREST AND SAFEST EXIT, TAKING YOUR KEYS AND CLOSING DOORS BEHIND YOU.
- C) SOUND THE ALARM BY ACTIVATING A MANUAL PULL STATION.
- D) CALL THE FIRE DEPARTMENT FROM A SAFE LOCATION BY DIALING 911, GIVING YOUR NAME AND SAY THERE IS A FIRE AT:

Cornerstone Preschool Binbrook - 2665 Binbrook Rd, Hamilton, ON L0R 1C0

IF YOU HEAR AN ALARM OR ARE NOTIFIED OF A FIRE:

- A) IF SAFE TO DO SO, LEAVE THE BUILDING IMMEDIATELY BY THE NEAREST AND SAFEST EXIT, TAKING YOUR KEYS AND CLOSING ALL DOORS BEHIND YOU.
- B) CALL THE FIRE DEPARTMENT FROM A SAFE LOCATION BY DIALING 911, GIVING YOUR NAME AND SAY THERE IS A FIRE AT:

Cornerstone Preschool Binbrook - 2665 Binbrook Rd, Hamilton, ON L0R 1C0

IF YOU REMAIN IN THE BUILDING:

IF YOU CANNOT EXIT THE BUILDING DUE TO EXCESSIVE SMOKE, HEAT OR FIRE YOU SHOULD SEEK REFUGE IN A SAFE LOCATION.

- A) KEEP SMOKE FROM ENTERING THE ROOM BY CLOSING THE DOOR AND USE WET TOWELS AND DUCT TAPE TO SEAL CRACKS AROUND THE DOOR. SEAL VENTS OR AIR DUCTS THE SAME WAY.
- B) MOVE TO THE MOST PROTECTED ROOM OPENING THE WINDOW FOR FRESH AIR.
- C) KEEP LOW TO THE FLOOR WHERE THE AIR IS CLEANER.
- D) CALL 911 AND ADVISE THE FIRE DEPARTMENT OF YOUR LOCATION.
- E) LISTEN FOR INSTRUCTIONS FROM AUTHORITIES.

**DO NOT PROCEED TO THE ROOF AREA
DO NOT USE THE ELEVATOR**

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- THE PERSON IN CHARGE SHALL MEET THE FIRE DEPARTMENT WHEN THEY ARRIVE AND DIRECT THEM TO THE SCENE OF THE FIRE AND HAVE AVAILABLE ALL KEYS NECESSARY AND ADVISE THEM OF ANY KNOWN TRAPPED OR ENDANGERED OCCUPANTS WHO MAY STILL REQUIRE ASSISTANCE IN EVACUATING THE BUILDING.
 - IF POSSIBLE, EFFORTS SHALL BE MADE TO CONFINE, CONTROL AND EXTINGUISH THE FIRE USING AVAILABLE PORTABLE FIRE EXTINGUISHERS AFTER SOUNDING THE ALARM AND PHONING 911. IF SMOKE OR FIRE THREATEN THE SAFETY OF THE OPERATOR, LEAVE THE FIRE AREA AND CLOSE DOORS TO CONFINE THE SPREAD OF SMOKE AND FIRE.
 - ALL FIRE HAZARDS IN THE BUILDING SHALL BE CONTROLLED AND ELIMINATED.
 - ALL BUILDING FACILITIES PROVIDED FOR THE SAFETY OF OCCUPANTS SHALL BE MAINTAINED AND TESTED IN ACCORDANCE WITH THE APPLICABLE SECTIONS OF THE ONTARIO FIRE CODE.
 - DURING ANY SHUTDOWN OF FIRE PROTECTION EQUIPMENT OR PART THEREOF, THE PERSON IN CHARGE WILL ARRANGE FOR HOURLY ROUNDS OF THE AFFECTED AREA(S) AS WELL AS IMPLEMENTING ALTERNATE MEASURES. THE FIRE DEPARTMENT AND ALL OCCUPANTS SHALL BE NOTIFIED BOTH WHEN SHUTDOWNS HAVE OCCURRED AND ALSO WHEN SYSTEMS HAVE BEEN RESTORED. SHUTDOWNS SHALL BE CONFINED TO AS SHORT A DURATION AS POSSIBLE. A LOG BOOK RECORDING THE HOURLY ROUNDS OF THE AFFECTED AREAS IS TO BE MAINTAINED.
 - A FIRE DRILL WILL BE HELD ON AN ANNUAL BASIS.
 - THERE SHALL BE A RESPONSIBLE PARTY AVAILABLE WHEN THE BUILDING IS OCCUPIED TO PERFORM THE DUTIES AS REFERRED TO IN THIS PLAN. ALL SUPERVISORY STAFF AND OTHER OCCUPANTS SHALL READ THE FIRE SAFETY PLAN AS OFTEN AS NECESSARY, BUT AT INTERVALS NOT GREATER THAN 12 MONTHS SO THEY ARE AWARE OF THEIR RESPONSIBILITIES FOR FIRE SAFETY.

Phase 2: Next Steps During the Emergency

- 1) Where emergency services personnel are not already aware of the situation, A staff member must notify 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: [insert information (e.g. supervisor, licensee, on-site designate, board of directors, local authority)]

Local Police Department: 905-546-4925 Ambulance:

911

Local Fire Services: 905-546-3333 Site

Supervisor:

Licensee Contact(s): Mac Mehta –

info@cornerstonepreschool.ca

Childcare Centre Site Designate:

Supervisor – 905-692-7444

- 4) Where any staff, students and/or volunteers are not on site, Supervisor 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 return to the child care centre.
- 5) Supervisor must wait for further instructions from emergency services personnel. Once instructions are received, they must communicate the instructions to staff and ensure 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 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	<ol style="list-style-type: none">1) The individual who receives the ‘all-clear’ from an authority must inform all staff that the ‘all-clear’ has been given and that it is safe to return to the child care centre.2) Designated staff who have assisted individuals with medical and/or special needs with exiting the building will assist and accompany these individuals with returning to the child care centre.3) Staff must:<ul style="list-style-type: none">• take attendance to ensure all children are accounted for;• escort children back to their program room(s), where applicable;• take attendance upon returning to the program room(s) to ensure that all children are accounted for; where applicable; and• re-open closed/sealed blinds, windows and doors.4) Director / Supervisor will determine if operations will resume and communicate this decision to staff.
Communication with parents/guardians	<ol style="list-style-type: none">1) As soon as possible, Educators of each room must notify parents/guardians of the emergency situation and that the all-clear has been given.2) Where disasters have occurred that did not require evacuation of the child care centre, Supervisor must provide a notice of the incident to parents/guardians by Phone/HiMamMa3) If normal operations do not resume the same day that an emergency situation has taken place, Director/Supervisor must provide parents/guardians with information as to when and how normal operations will resume as soon as this is determined.

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) Staff must take attendance to confirm that all children are accounted for, and escort children to the evacuation site. 3) Designated staff 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) Supervisor/Assistant Supervisor will post a note for parents/guardians on the childcare 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; and • 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, Binbrook Pizza, 2668 Binbrook Rd #102, Binbrook, ON L0R 1C0 will notify parents/guardians of the emergency situation, evacuation and the location to pick up their children. 2) Where possible, Supervisor/ Assistant will update the child care centre’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.

Additional Procedures for Next Steps During an Emergency

1. All Accident/incidents will be logged in the daily logbook and Supervisor’s log book
2. All Parents will be provided with an incident/accident report form
3. Children will be provided water and snacks in accordance with their dietary restrictions

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

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.	<ul style="list-style-type: none"> • Supervisor will email Program Advisor • Insurance will be contacted • Fire Safety will be called • If required, the catering company will be called as well • All Parents will be called and an update of the situation will be provided
Procedures for Providing Support to Children and Staff who Experience Distress	Staff can go to http://thinkmentalhealth.ca/mental-health-crisis-options/ Or Call 1-800-784-2433
Procedures for Debriefing Staff, Children and Parents/ Guardians Include, where, applicable, details about when and how the debrief(s) will take place, etc.	<p>Supervisor must debrief staff, children and parents/guardians after the emergency.</p> <p>Supervisor will debrief parents at Pickup</p> <p>Supervisor will send out an email to all families to let them know what happened and to give an update on the situation</p>

Regulatory Requirements: Ontario Regulation 137/15

Emergency management

68.1 (1) In this section,

“emergency” at a child care centre means an urgent or pressing situation in which immediate action is required to ensure the safety of children and adults in the child care centre. O. Reg. 126/16, s. 42.

(2) Subject to subsection (3), every licensee shall ensure that each child care centre it operates has written policies and procedures regarding the management of emergencies that,

- (d) set out the procedures that will be followed to ensure children's safety and maintain appropriate levels of supervision;
 - (e) set out requirements regarding communications with parents;
 - (f) set out requirements regarding contacting appropriate local emergency response agencies; and
 - (g) address recovery from an emergency, including,
 - (i) requiring that staff, children and parents be debriefed after the emergency,
 - (ii) setting out how to resume normal operations of the child care centre, and
 - (iii) setting out how to support children and staff who may have experienced distress during the emergency. O. Reg. 126/16, s. 42.
- (3) Despite subsection (2), a licensee is not required to have emergency management policies and procedures described in that subsection if,
- (a) the child care centre is located in a school, the licensee uses or adopts the school's emergency management policies and procedures and those policies and procedures address the same matters as described in subsection (2); or
 - (b) the licensee is otherwise required to have a plan that addresses the same matters as described in subsection (2). O. Reg. 126/16, s. 42.

Intent

The intent of this provision is to require licensees to have policies and procedures that protect the health and safety of children and staff in the event of an emergency.

The provision requires that staff roles and responsibilities be clearly outlined in the event of an emergency.

Disclaimer: This document is a sample of a policy and procedure that has been prepared to assist licensees in understanding their obligations under the CCEYA and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates.

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.

Waiting List / Registration Policy

Policy and Procedure

1. The Childcare maintains a running list of available spots in each classroom for prospective students. Spots are offered to families on a “**first-come, first-served**” basis.
2. Parents can join the waitlist exclusively by completing the **online waitlist form** available on our website (via Lillio).
3. The date the online form is submitted determines the parent’s seniority on the waitlist.
4. Parents must provide all required information when completing the form, including the earliest month they are considering for their child’s start date (e.g., you prefer to start in March but require a space no later than May).
5. If there are changes to a parent’s contact information, it is the parent’s responsibility to update the Childcare.
6. Only the Supervisor or Director manages and updates the waitlist to ensure all information is accurate and treated as confidential. Waitlist details will never be shared with other parents.
7. Supervisors can inform parents of their position on the waitlist, including how many families are ahead of them, but no personal details of other children or families will be disclosed.
8. There is no charge or deposit required to join the waitlist.
9. When a spot becomes available, the Supervisor will contact parents (via the phone number or email provided) based on their position on the waitlist and whether the available spot meets their stated preferences.
10. Once a parent decides to register for the program, they must complete the necessary paperwork and pay the **non-refundable registration fee***.
11. Upon completing the paperwork and payment, the child’s name will be added to the class attendance, and a file will be created in the Childcare’s records.

CORNERSTONE Preschool
WAITLIST FOR PROSPECTIVE PARENTS/STUDENTS

Name of Parent	Name of Student	DOB of student	Program/days they are interested	Contact number	Date called/added
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Vacation, Absence, and Sick Day Policy

If your child is on vacation, absent, or sick, full payment is still required. Should your child be away from the centre for more than two weeks without notice, childcare fees and late fees will still apply. Full fees also apply for all statutory holidays, including but not limited to Civic Holiday. Adequate notice will be provided for any other closure dates.

Withdrawal Notification

If you plan to withdraw your child from Cornerstone Preschool, please provide written notice to the Supervisor at least **one month (4 weeks)** prior to your child's last day of care. This notice helps us manage classroom ratios and support smooth transitions for all children.

Failure to provide proper notice may result in additional charges or the full month's fees being applied.

Health Policy

We follow a scheduled routine at the daycare. If your child is ill or not attending, please inform the supervisor as soon as possible so that our daily routines are not disrupted. If your child is not well enough to participate in daily activities, they should not attend until they are well enough to do so.

Refunds and Credits Policy

In the event a parent or guardian is eligible for a refund or credit—whether due to overpayment, program changes, or other approved circumstances—Cornerstone Preschool will conduct an internal review to verify and approve the request.

Once the request has been reviewed and approved:

- Refunds or credits will typically be processed via **e-transfer** to the parent/guardian on file.
- Please allow up to **10 business days** for processing from the date of approval.
- All refund/credit requests must be submitted in writing to the Supervisor and may require supporting documentation.

Please note: Refunds and credits are not guaranteed and are subject to administrative review and approval on a case-by-case basis.

Drug and Medication Administration Policy and Procedures

Name of Child Care Centre: Cornerstone Preschool

Date Policy and Procedures Established: November, 2023

Date Policy and Procedures Updated: February, 2024

Note: The following items are not considered drugs or medication for the purposes of this policy, except where the item is a drug, as defined in the *Drug and Pharmacies Regulation Act*, prescribed for a child by a health professional:

- Sunscreen
- Moisturizing skin lotion
- Lip balm
- Insect repellent
- Hand sanitizer
- Diaper cream

These over-the-counter products may only be administered in accordance with the following rules:

- Must have written authorization by a parent.
This can be in the form of a “blanket authorization” on the enrolment form. It does not require an Authorization for Medication Form, described in this policy.
If a parent does not provide written authorization for the use of these items at the child care centre, licensees must communicate this to their staff (e.g. information will be included on the centre’s allergy list where applicable or a separate list of names of the children where written authorization was not given by the parent will be provided).
- Must be stored in accordance with the instructions for storage on the label and the container or package must be clearly labelled with the child’s name and the name of the item.
- A container or package does not need to be labelled with a child’s name where items are shared (if appropriate), such as hand sanitizer located at entrances and exits.
- Must be administered to a child only from the original container or package and in accordance with any instructions on the label and any instructions provided by the parent of the child.

Purpose

The purpose of this policy and the procedures outlined within is to provide clear direction for staff, students and volunteers 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). For the purpose of this policy, drugs and medications fall into the following two categories:

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

This policy and procedures document support children’s health, safety and well-being by setting out measures to:

- ensure children receive 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.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for the administration of drugs and medication in a child care centre.

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

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 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 situations 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.
- Prescription/over-the-counter skin products (with a DIN) that need to be administered for acute or 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.
- Authorization for Medical Administration Forms will be reviewed with parents every year to ensure the dosage continues to be accurate (e.g. based on the child's age or weight).
- Cornerstone Preschool will supply a Medication Form to Parents/Guardian to complete.
- 2) Staff members will be informed by Parent/Guardian of Medication and Medication Form being signed.

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 with 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 versus left in a purse in the classroom) to children and will not be administered to children at any time.

Drug and Medication Handling and Storage:

- All drugs or 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 be made aware of the location of children's emergency medications at all times.
- **All emergency medication is stored in outdoor backpack of each room.**
- Emergency medications will be brought on all field trips, evacuations and off-site activities.
- Any topical products or drugs/medication 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.
- Any drugs or medications remaining after the treatment period will be returned to a 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 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 may 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).
- Child's educator will administer the medication along with another staff member.
- The other staff member will have the medication form on hand and will confirm the child's name, medication name and the dosage.
- The staff member administering the medication will also let the Supervisor know, or the designate, if the supervisor is not available.
- 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. A parent of the child will be notified.
- Medication Forms (once complete) will be for a period of **three** years from the beginning administration date.

Confidentiality

- 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).

Additional Policy Statements

- If your child needs daily medication, you **MUST** fill out a Medication Release Form and bring all medications in original packages. We will diligently give your child the medication needed as set out in the Medication Release Form.
- If your child is on antibiotics, you **MUST** keep them home for **48 hours after initial dose**. After which time, we will gladly continue the medication until completed providing a Medication Release Form is signed and on file.
- We ask that you do not send your child with vitamins, Children's Tylenol, sunscreen, or any other type of medication. We ask that you apply sunscreen to your child prior to beginning their/them school day. It would be very time consuming to do so for each child. You can purchase 8-hour sunscreen that will last for the time spent at school.

Drug and Medication Administration Procedures

SCENARIO: A parent requests that a drug or medication (prescription or over-the-counter) be administered to their child and provides the drug or medication.

Roles and Responsibilities

1. Staff must:

- 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 drug or medication:
 - 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), and the label to verify that all sections are complete and accurate, and that the information in the authorization matches the medication label.
 - 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 is 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).

SCENARIO: A child is authorized to carry their own emergency allergy medication.

Roles and Responsibilities

1. Staff must:

- i. ensure that written parental authorization is obtained to allow the child to carry their own emergency medication;
- 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

- 2. Where there are safety concerns relating to the child carrying their/them 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).**

SCENARIO: A prescription or over-the-counter drug or medication must be administered to a child.

Roles and Responsibilities

- 1. Where a non-emergency medication must be administered, the person in charge must:**

- 5. 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);**

6. where possible, remove the child from the activity area to a quiet area with the least possible interruption;
 7. administer the medication to the child in accordance with the instructions on the label and the written parental authorization;
 8. 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);
 9. 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
 10. where applicable, document any symptoms of ill health in the child's records.
 11. Where a medication is administered on an "as needed" basis, notify a parent of the child.
 12. Where a child is absent, document the absence on the Record of Drug/Medication Administration (Appendix B).
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:
- administer the emergency medication to the child in accordance with the emergency procedures on the child's individualized plan;
13. administer first aid to the child, where appropriate;
 14. contact, or have another person contact emergency services, where appropriate; and
 15. contact, or have the supervisor/designate contact a parent of the child.

After the emergency situation has ended:

document the administration of the drug or medication on the medication administration record (see Appendix B);

16. document the incident in the appropriate staff communication book (e.g. daily written record).; and
17. document any symptoms of ill health in the child's records, where applicable.

3. Where a child is authorized to self-administer their own drug or medication, the person in charge must:
- supervise and observe the child self-administer the drug or medication to ensure that the proper dosage and procedure for administration is being followed;
18. where the child asks for help, assist the child in accordance with the parent's written authorization;
 19. 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);
 20. 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 their/their own emergency allergy medication (in such cases, follow the steps outlined in Scenario C [a child is authorized to carry their own emergency allergy medication]);
 21. where applicable, document any symptoms of ill health in the child's records; and
 22. where there are safety concerns relating to the child's self-administration 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).

SCENARIO: A child has a reaction to an administered drug or medication.

Roles and Responsibilities

1. Where adverse symptoms appear upon medication administration, the person in charge must immediately:
administer first aid to the child, where appropriate;
23. 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;
24. notify a parent of the child;
25. notify the supervisor/designate;
26. document the incident in the appropriate staff communication book (e.g. daily written record); and
27. document any symptoms of ill health in the child's records, where applicable.

Where the reaction results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

SCENARIO: A drug or medication is administered incorrectly (e.g. at the wrong time, wrong dosage given).

Roles and Responsibilities

1. The person in charge must immediately:
where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication);
and
28. contact the parent of the child to report the error;
29. report the error to the supervisor/designate;
30. document the actual administration of the drug or medication on the medication administration record (see Appendix B); and
31. document the incident in the appropriate staff communication book (e.g. daily written record).

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.

SCENARIO: A drug or medication is administered to the wrong child.

Roles and Responsibilities

1. The person in charge must immediately:
where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication);
and
32. contact the parents of the children affected to report the error;
33. report the error to the supervisor/designate;
34. document the incident in the appropriate staff communication book (e.g. daily written record); and
35. 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.

SCENARIO: Surplus or expired medication is on site.

Roles and Responsibilities

1. Where possible, the surplus or expired medication must be returned to a 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.

Do not flush any drugs or medications down the toilet or sink or throw them in the garbage.

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) 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 licence issued by the Ministry of Education responsible for the operation and management of the child care centre.

Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal guardians, but will be referred to as “parent” in the policy).

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).

Administration of drugs or medications

40.

- (9) Where a licensee agrees to the administration of drugs or medications, the licensee shall ensure that,
- (c) a written procedure is established for,
1. the administration of any drug or medication to a child receiving child care at a child care centre operated by the licensee or at a premises where it oversees the provision of home child care, and
 2. the keeping of records with respect to the administration of drugs and medications
- (d) all drugs and medications on the premises of a child care centre operated by the licensee or at a premises where it oversees the provision of home child care are,
1. stored in accordance with the instructions for storage on the label,
 2. administered in accordance with the instructions on the label and the authorization received under clause (d),
 3. inaccessible at all times to children, and
 4. in the case of a child care centre, kept in a locked container;
- (e) one person in each child care centre operated by the licensee and in each premises where it oversees the provision of home child care is in charge of all drugs and medications and that all drugs and medications are dealt with by that person or a person designated by that person in accordance with the procedures established under clause (a);
- (f) a drug or medication is administered to a child only where a parent of the child gives written authorization for the administration of the drug or medication and that included with the authorization is a schedule that sets out the times the drug or medication is to be given and amounts to be administered; and
- (g) a drug or medication is administered to a child only from the original container as supplied by a pharmacist or the original package and that the container or package is clearly labelled with the child's name, the name of the drug or medication, the dosage of the drug or medication, the date of purchase and expiration, if applicable, and instructions for storage and administration.
- (10) Despite subclauses (1) (b) (iii) and (iv) and clause (1) (c), the licensee may permit a child to carry his or her own asthma medication or emergency allergy medication in accordance with the procedures established under clause (1) (a).
- (3) The following items do not constitute drugs or medication for the purposes of this section, except where the item is a drug, as defined in the Drug and Pharmacies Regulation Act, prescribed for a child by a health professional:
1. Sunscreen.
 2. Moisturizing skin lotion.
 3. Lip balm.
 4. Insect repellent.
 5. Hand sanitizer.
 6. Diaper cream.
- (4) In respect of an item described in subsection (3) that does not constitute a drug or medication for the purposes of this section, a licensee shall ensure that,
- (a) the item is administered to a child only if a parent of the child has given written authorization for the administration of the item;

- (b) the item is stored in accordance with the instructions for storage on the label and the container or package is clearly labelled with the child's name and the name of the item; and
- (c) the item is administered to a child only from the original container or package and in accordance with any instructions on the label and any instructions provided by the parent of the child.

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Communicable Diseases: Guidelines for Absence

If a child displays one or more symptoms of the illnesses listed below, we will contact you and ask that your child be picked up promptly. Absences must follow the outlined guidelines, and a doctor's note is required for your child to resume attendance.

Illnesses and Absence Guidelines

- Chickenpox: Until the child is well enough to participate in all activities.
- Diarrhea: Until diarrhea has stopped.
- Impetigo: Until the prescribed antibiotic has been taken for at least one full day.
- Measles (Rubella): For at least 4 days after the rash begins.
- Mumps: For at least 9 days after swollen glands appear.
- Pink Eye (Conjunctivitis): Until the prescribed antibiotic has been taken for at least one full day.
- Ringworm: Until treatment has been started and taken for at least one full day.
- German Measles (Rubella): For at least 7 days after the rash first appears.
- Scabies: Until treatment has been completed.
- Scarlet Fever: Until the prescribed antibiotic has been taken for at least one full day.
- Strep Throat: Until the prescribed antibiotic has been taken for at least one full day.
- Whooping Cough (Pertussis): Until 3 weeks after the cough begins or as directed by a doctor.
- Head Lice (Pediculosis): See details below.

Head Lice (Pediculosis)

Head lice are a common nuisance in schools and daycares but do not pose a health hazard.

- - If you suspect your child has head lice, please notify the daycare so we can check other classmates.
- - Children may not return until a We-Care Health Services practitioner (1-866-577-4499) provides a signed note confirming the child is free of live lice and nits.

Fifth Disease

What is Fifth Disease?

Fifth disease is a respiratory infection caused by parvovirus B19. It spreads through:

- - Contact with an infected person's hands.
- - Contaminated objects or surfaces.
- - Airborne droplets from breathing, coughing, or sneezing.

Symptoms:

- - Bright red rash on the cheeks ('slapped cheek' appearance), followed by a lace-like rash on the arms and body (lasting 1–3 weeks).
- - Fever may accompany the rash.
- - Often mild, and children may not feel sick.

When is it Dangerous?

- - In children with sickle cell anemia or other chronic anemia, the condition may worsen.
- - In pregnant women, there is a very small risk (3%) of the unborn child developing anemia before birth. Note: Fifth disease has not been linked to congenital malformations in newborns.

Smoke Free Policy

On May 31, 2006, the Smoke-Free Ontario Act came into effect. Under this act, smoking is prohibited in all licensed early years facilities and outdoor properties associated with licensed child care facilities under the Ministry of Education. This means that all licensed child care centers, including Cornerstone Preschool, must be smoke-free 24 hours a day, 7 days a week, regardless of whether children are present. This policy applies to our entire facility, including parking lots.

Sunscreen

Cornerstone Preschool is committed to the health and well-being of your children. To ensure your child can participate in all aspects of our outdoor program, we require that they wear sunscreen. We recommend applying sunscreen to your child before arriving at daycare in the morning. We will reapply sunscreen in the afternoon before outdoor playtime.

Immunization Records

It is the responsibility of the parent/guardian to provide Cornerstone Preschool and the local Health Unit with up-to-date immunization records for your child.

Change of Information

If any of the information provided during registration changes throughout the school year, we kindly ask that you update it in the office as soon as possible. It is crucial that the Supervisor/Director and staff have the correct information for your child in case of emergencies.

Program and Child's Development:

Program areas & activities

It is important to maintain an ongoing program plan that fosters physical, social, intellectual, emotional, and creative development, as well as self-help skills and community awareness.

The daily areas, activities, and routines include:

Table Toys and Play Areas

- Develop fine motor skills, color and shape concepts, mathematical concepts, and problem-solving abilities.
- Allow children to work independently or cooperatively.
- Encourage children to take responsibility for their achievements in play and tidy up independently.

Large Motor Activities

- Include daily indoor and outdoor activities.
- Promote good health and development of growing young bodies.
- Develop balance and coordination.
- Promote social skills such as sharing, taking turns, and cooperating.

Creative Art Activities

- Encourage self-expression and creativity.
- Develop basic manipulative skills such as painting, pasting, cutting, using crayons, and modeling.
- Allow children to communicate their feelings through their art.
- Teach children to follow instructions and learn sequencing skills.

Sensory/Sand and Water Play

- Provide opportunities to explore, create, feel, and discover the properties of water, sand, and other sensory materials.
- Promote social interactions and sharing experiences.
- Develop an understanding of math and physical concepts such as size, shape, volume, floating and sinking, full and empty.

Dramatic Play

- Includes a dress-up center, housekeeping area, and block play.
- Provide opportunities for children to learn about their own feelings and experiment with ways of expressing themselves.
- Encourage social interaction and language development through role-playing.
- Increase language skills through self-expression and social play.

Music and Movement Activities

- Encourage self-expression, creativity, and fun.
- Develop an awareness of sounds, tones, and rhythm.
- Foster confidence in their own sense of rhythm and movement.

Reading Area

- Provide a relaxing area (with soft cushions and beanbag chairs).

- Promote enjoyment and pleasure in stories and pictures.
- Allow for concentration and focus.
- Provide a variety of multicultural books and magazines.

Science and Nature Center

- Encourage children's interest in the world and community around them.
- Teach early math and science concepts such as measuring, weighing, and mixing.

Block Play

- Allow for manipulation of three-dimensional objects.
- Provide an opportunity to work cooperatively and encourage sharing.
- Develop eye-hand coordination as children connect blocks together.

Fine Motor / Cognitive Activities

- Allow children to work independently or cooperatively.
- Develop color and shape concepts.
- Foster the development of fine motor control (e.g., lacing beads, peg boards, writing, coloring).
- Enhance concentration and memory skills through activities such as memory games and word building.

Washroom Routine

- Provide opportunities for independence (toileting, hand-washing).
- Teach hygiene practices.

Snack and Lunch Routine

- Provide children with a healthy menu.
- Encourage children to taste different foods.
- Increase language skills by learning about the types of foods.
- Teach table manners.

Rest Time

- Provide a comfortable environment for children to rest (with soft music, personal blankets, soft toys, or back rubs if needed).
- If the child does not rest or nap, quiet activities will be provided at the table/bed to allow the rest of the class to sleep.

Planning

Staff plan activities based on children's interests and needs. Monthly calendars and newsletters are provided to parents in advance to keep them informed about special events and trips. These calendars and programs are also posted outside each classroom for easy reference.

During July and August, we offer an optional summer camp program for an additional cost, and a special summer camp calendar is shared with parents. Daily communication with your child's teacher is encouraged, and we welcome parent-teacher discussions.

Parent interviews can be scheduled to provide an opportunity for both parents and staff to review your child's progress. Interviews can be arranged according to the parents' schedules and the child's needs.

Supervision of Students and Volunteers Policy

Name of Child Care Centre: Cornerstone Preschool

Date Policy and Procedures Established: December 2023

Date Policy and Procedures Updated: Feb 8th, 2023

Purpose

Cornerstone Preschool welcomes both placement students and volunteers into the various programs offered in our childcare program. We believe it is a valuable part in gaining experience in a child care environment. Volunteers and students also play an important role in supporting staff in the daily operation of child care programs.

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

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

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 to child ratios.

Additional Policy Statements

- Cornerstone Preschool accepts volunteer and parent involvement within in ourschool.
- If parents would like to volunteer on field trip, they are only able to do so if wehave the criminal record check (VSC) on file.

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 offence declarations are on file for all students and/or volunteers in accordance with the child care centre'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/volunteers are never included in staff to child ratios.
- Ensure that students/volunteers are supervised at all times and never left alone with children.
- Introduce students and/or volunteers to parents/guardians.
- Provide an environment that facilitates and supports students' and/or volunteers' learning and professional development.
- Provide students and/or volunteers with clear expectations of the program in accordance with the established program statement and program statement implementation policy.
- Provide students and/or volunteers with feedback on their performance.
- Work collaboratively with the student's practicum supervising teacher.

- Monitor and notify the centre supervisor/director of any student and or volunteer misconduct or contraventions with the centre's policies, procedures, prohibited practices or individual plans (where applicable) in accordance with the child care centre's written process for monitoring compliance and contraventions.
- The Director/Supervisor shall require an interview with all volunteers before they are in the classroom. At this interview, and if deemed appropriate; the volunteer will be asked to provide a CRC vulnerable sector to the school before beginning.
- Parents who wish to volunteer will also be asked to provide the school with a CRC to be in the classroom. Once the CRC vulnerable sector is provided, it will be kept on file within the office for 1 year. Staff members will review this policy with the Supervisor annually. All Parents, Volunteers, and/or Placement students will review this policy with the Supervisor before beginning within our school.
- The staff will direct all contact between the children and volunteer, parent, or student.

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 centre's criminal reference check policy.
- Provide an offence declaration to the supervisor/designate as soon as possible any time they have been convicted of a Criminal Code (Canada) offence.

Cornerstone Preschool

Volunteer/Parent/Placement Student Policy

I _____ have read and understand this policy. I understand that I will not be left unattended with the children and will take direction from the staff members on-site. Furthermore, I will provide a recent copy of a Police Reference Check to the school.

I also understand that if at any time I have questions or concerns regarding my placement/time spent in the school I can ask any staff member or speak to the Director / Supervisor.

Signature: _____

Printed Name: _____

Date: _____

Witness Signature: _____

Printed Name: _____

Date: _____

Glossary

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

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

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

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

Regulatory Requirements: Ontario Regulation 137/15

Supervision of volunteers and students

11.1 (1) Every licensee shall ensure that every volunteer or student at a child care centre it operates or at a premises where it oversees the provision of home child care is supervised by an employee or home child care provider at all times and is not permitted to be alone with any child who receives child care at the child care centre or home child care premises.

(2) Every licensee shall ensure that there are written policies and procedures regarding volunteers and students that set out, at a minimum,

(a) the requirement described in subsection (1);

(b) the roles and responsibilities of the licensee and supervising employees; and

(c) the roles and responsibilities of volunteers and students.

Disclaimer: This document is a sample of a policy and procedure that has been prepared to assist licensees in understanding their obligations under the CCEYA and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates.

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.

Off-Premises Activities

Cornerstone Preschool conducts off-premises activities from time to time. Parents will be given ample notice of these special events and are required to complete a permission form for their child to participate. Participation is not mandatory—if you prefer to keep your child at the daycare, care will still be provided.

Some of the excursions may include trips to the movie theater, zoo, or African Lion Safari. For the safety of all children, Cornerstone Preschool reserves the right to refuse a child's participation in off-premises activities, ensuring the well-being of everyone.

Transportation for these events will be provided either by Cornerstone Preschool's buses or a rental bus.

Nutrition

Cornerstone Preschool provides a nutritious lunch each day, catered by Food for Tots. All breakfast and snacks are prepared by fully qualified, food-handler certified staff. Meals meet the recommendations of Canada's Food Guide, as Food for Tots collaborates with a Registered Dietitian of Ontario to select the menu.

Food for Tots offers two lunch options, with the center choosing based on the children's favorite foods. We also work with families to ensure that the foods we select support a variety of flavors and textures, while carefully attending to children's allergies and recognizing the diversity of the children and families in our care. Weekly menus, based on a four-week rotation, are posted for parents' reference, and change seasonally (Fall/Winter and Spring/Summer).

Lunch meals are kept hot in a warmer until ready to be served. Once the meal arrives, the kitchen staff checks the temperature upon arrival and again before serving to ensure it remains at 60 degrees Celsius or above. The meals are then portioned out to each classroom, where staff serve them to the children.

Breakfast and snacks are also prepared by the kitchen staff. Milk is served with breakfast and lunch, and fruit-infused water is provided with the second snack. Water is available throughout the day in the children's personal sippy cups, which parents are asked to provide. These sippy cups are sanitized daily by the opening staff.

At Cornerstone Preschool, meals are served family-style, promoting a calming environment and social interaction between children, as well as between children and staff. Staff are encouraged to sit at the table and eat with the children while modeling appropriate behavior and using utensils. Assistance in feeding is provided when necessary.

Children are encouraged to try new foods; however, they are never forced to eat. If a child does not want to eat during mealtime, their food will be saved, wrapped up, and placed in the fridge. When they are hungry or ask for it, the staff will reheat the food and serve it.

Staff will use familiar language during mealtime conversations, which may include discussions about the food being served or the children's interests.

Please note that candy and non-nutritious foods are not permitted at the center as they offer no nutritional value. However, special arrangements can be made for birthdays and celebrations. Cornerstone Preschool is a nut-free facility. If you wish to bring treats for birthdays or celebrations, please ensure they are not homemade, and that the packaging clearly indicates a peanut- and nut-free label. If you are unsure, please speak with the staff.

Anaphylactic Allergy Policy and Procedures

Name of Child Care Centre: Cornerstone Preschool
Date Policy and Procedures Established: November 2023
Date Policy and Procedures Updated: February 2024

Policy Overview

In compliance with Sabrina’s Law, Cornerstone Preschool is committed to providing a safe environment for children with life-threatening allergies. While it is not possible to completely eliminate allergens in the environment or during off-site activities, we strive to minimize risks and ensure that proper emergency protocols are followed.

Development of Individualized Plans and Emergency Procedures

To ensure the safety of children with anaphylactic allergies, Cornerstone Preschool will implement individualized care plans for each child with a life-threatening allergy.

- 1. Registration and Notification:
 - Parents or guardians must inform the preschool office before registering a child with an anaphylactic allergy.
 - Parents will be required to complete necessary forms and provide recent photos of the child.
 - A valid EpiPen must be provided and kept on the premises for the child’s entire attendance at the preschool.

- 2. Food Protocol:
 - Parents bringing food from home due to dietary restrictions must label all food clearly with the child's name and guarantee that the food is nut-free. A waiver must be signed for each food item.
 - No outside food or drinks (except water) should be brought into the classroom by parents, including foods for special occasions like Halloween, Easter, etc.
 - Any dietary substitute (e.g., gluten-free foods) must be nut-free and labeled with the child's name.

- 3. Emergency Plan (A.C.T.):

In case of exposure to a life-threatening allergen, the following steps will be followed as recommended by Anaphylaxis Canada:

 - A: Administer the auto-injector (EpiPen) immediately if the child exhibits symptoms of anaphylaxis.
 - B: Call 911 immediately.
 - C: Transport the child by ambulance to the hospital, even if symptoms subside.

Risk Reduction Strategies

Food and Beverage Restrictions:

- Parents are asked to avoid bringing outside food into the classroom, including for holiday celebrations. Non-food items are encouraged for celebrations.
- All food provided by parents must be nut-free and clearly labeled with the child’s name.

Precautions for Staff and Volunteers:

- Staff, students, and volunteers must be vigilant about the food they consume on breaks, using precautions to prevent cross-contamination (e.g., handwashing).
- Latex-free gloves must be worn by staff when handling food.
- Family-style meals will be served with extra caution to prevent contamination.

Classroom and Meal Guidelines:

- Snacks and meals will be served on individual plates to avoid sharing and cross-contact.

- Children will sit separately at tables during meals to minimize the risk of accidental exposure.
- Each child will have an individual, labeled cup for drinking water.

Hand Hygiene:

- Children will wash their hands before meals/snacks and immediately after.
- Disposable paper towels will be used for wiping faces.

Communication Plan

The supervisor will ensure that:

Staff Training and Awareness:

- All staff will be informed of the children who have anaphylactic allergies and the details of their individualized plans.
- The emergency procedures and individual plans will be reviewed with staff before engaging with children and annually thereafter or whenever there is a change.
- The individualized plans and emergency procedures will be posted in prominent places for all staff to review, including classrooms, kitchen, and common areas.

Forms and Documentation:

- Parents must complete and submit forms such as the Medical Authorization, Asthma Emergency Plan, and Parent/Guardian Responsibilities Checklist before the child attends the center.
- All forms will be reviewed and updated regularly.

Training for Staff

EpiPen Administration:

- Staff will receive annual training on how to administer the EpiPen correctly.
- Training will be documented with a signature and date.

Emergency Action Plan Posting:

- A copy of the Anaphylaxis Emergency Action Plan will be posted in key areas of the center (e.g., office, classrooms, kitchen) and be included in the emergency bag for each program.
- The location of each child's EpiPen and its expiry date will be documented.

Recognizing Anaphylaxis Symptoms

Anaphylaxis can present with the following symptoms:

- One symptom from the following list is enough for an anaphylaxis diagnosis:
 - Throat: Itching, tightness, hoarseness, or closure.
 - Lungs: Shortness of breath, coughing, wheezing.
 - Heart: Weak pulse, dizziness, fainting.
- OR two of the following symptoms:
 - Mouth: Itching or swelling of lips/tongue.
 - Skin: Hives, itching, redness, swelling.
 - Gastrointestinal: Vomiting, diarrhea, cramps.
 - Nasal: Sneezing or congestion.
- Immediate Action:
 - If any of the symptoms above are present, administer the EpiPen and call 911 immediately.

Administration of the EpiPen

Correct Use:

- Hold the EpiPen with the orange tip pointing downward.
- Remove the blue safety cap by pulling it straight up (do not twist).
- Firmly press the orange tip into the child's outer thigh until you hear a "click".
- Hold the EpiPen in place for several seconds.

Post-Administration:

- After removing the EpiPen, the orange needle cover will automatically extend to cover the needle.
- Call 911 and take the child to the hospital, even if symptoms seem to subside.

EpiPen Storage Guidelines

Proper Storage:

- EpiPens must be stored in their carrier tube and kept at room temperature.
- Avoid storing them in vehicles or places exposed to direct sunlight or extreme temperatures (15°C to 30°C).
- Check regularly for discoloration. If the solution appears brown or cloudy, it should be replaced.

Inspection:

- Regularly inspect the EpiPen through the viewing window to ensure the solution is clear.
- Never drop the EpiPen or expose it to physical shock.

Regulatory Requirements: Ontario Regulation 137/15

Anaphylactic policy

39.

(11) Every licensee shall ensure that each child care centre it operates and each premises where it oversees the provision of home child care or in-home services has an anaphylactic policy that includes the following:

3. A strategy to reduce the risk of exposure to anaphylactic causative agents.
4. A communication plan for the dissemination of information on life-threatening allergies, including anaphylactic allergies.
5. Development of an individualized plan for each child with an anaphylactic allergy who,
 5. receives child care at a child care centre the licensee operates, or
 6. is enrolled with a home child care agency and receives child care at a premises where it oversees the provision of home child care or in-home services.
6. Training on procedures to be followed in the event of a child having an anaphylactic reaction.

(12) The individualized plan referred to in paragraph 3 of subsection (1) shall,

- (h) be developed in consultation with a parent of the child and with any regulated health professional who is involved in the child's health care and who, in the parent's opinion, should be included in the consultation; and
- (i) include a description of the procedures to be followed in the event of an allergic reaction or other medical emergency.

Disclaimer: This document is a template that has been prepared to assist licensees in understanding their obligations under the CCEYA and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates.

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.

Health Inspections

Please be advised that the Health Department will be conducting a semiannual inspection of the center. At Cornerstone Preschool, educators take every precaution to ensure compliance with all health standards during and after inspections. Parents can support staff in maintaining high standards during health inspections by labeling all children's belongings, including sippy cups, sunscreen, hats, mitts, and clothing.

First Aid Policy and Procedures: Accidents and/or Injuries

Any accidents and/or injuries are reported to the supervisor and/or director of operations as soon as possible. The incident will be documented in writing on an accident report form. Once completed, the teacher who witnessed the incident will sign the report, and it will be given to the supervisor for review and signature.

When parents arrive to pick up their child(ren), they will be asked to read the accident report and sign it to confirm that they were informed of the accident or injury. A copy of the report will be provided to the parent.

Any incidents involving a child will also be documented using an incident form. Parents are required to sign the form, and a copy will be provided.

A First-Aid kit is located in each room and must be carried at all times during outdoor activities, outings, or walks.

Teachers are responsible for filling out an accident report for all injuries (e.g., band-aids, scrapes, cuts, bumps, or use of a cold compress).

Once the form is signed by the teacher, it must also be signed by the supervisor and then signed by the parent before the child's pick-up. A copy of the form will be provided to the parent.

Serious Occurrence Policy and Procedures

Name of Child Care Centre: Cornerstone Preschool

Date Policy and Procedures Established: November 2023

Date Policy and Procedures Updated: Mar 2024

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 addressed by the child care centre and reported to the Ministry of Education for review.

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 the document.

Policy

Identifying a Serious Occurrence

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

7. the death of a child who received child care at a child care centre,
8. abuse, neglect or an allegation of abuse or neglect of a child while receiving child care at a child care centre,
9. a life-threatening injury to or a life-threatening illness of a child who receives child care at a child care centre,
10. an incident where a child who is receiving child care at a child care centre goes missing or is temporarily unsupervised, or
11. 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.

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 licence by email or by telephone within 24 hours of becoming aware of the occurrence. A serious occurrence report will be submitted in CCLS 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, [individual's name/position] will complete a Serious Occurrence Notification Form in either CCLS or using the form available in Appendix A.
- 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.
- Where a serious occurrence is updated or revised, the summary should also be updated to reflect this change.
- All serious occurrence summaries will be retained for 3 years from the date they are created or last updated (whichever date is most recent).

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 the 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.

Procedures to Respond to a Serious Occurrence

Steps to Follow for All Serious Occurrences

Steps for Staff, Students and Volunteers to Follow:

36. Immediately:

- Ask for assistance from other staff, students, or 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 child and/or other children present to prevent the risk of further harm.
- Notify the supervisor/designate.

37. Ongoing and after the incident:

- Follow any direction provided by third-party authorities (e.g. police, CAS, public health, etc.)
- Ensure that children are supervised at all times.

38. Within 24 hours:

- Document the incident in:
the daily written record;
the child's record of symptoms of illness, if applicable; and/or
in an accident report, if applicable.
- Where an accident report is created, provide a signed copy to a parent of the child.

Steps for the Licensee/Supervisor/Designate to Follow:

Immediately:

- 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.

39. Within 24 hours of becoming aware of the incident:

- Collect all pertinent information to report the incident to the Ministry of Education as a serious occurrence, including:
 - 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).

40. 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.

41. 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.

42. Ongoing and after the incident:

- Follow any direction provided by third-party authorities (e.g. police, CAS, public health, etc.)
- Always maintain confidentiality.
- 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 probability of repeat occurrences.
- Provide children, parents, staff, students and/or volunteers with supports, if needed.

Review with staff, students and volunteers the childcare 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: Death of a Child

Steps for Staff, Students and Volunteers to Follow:

Death occurs while a child is receiving childcare:

See 'Steps to Follow for All Serious Occurrences' for staff, students and volunteers.

Steps for the Licensee/Supervisor/Designate to Follow:

See 'Steps to Follow for All Serious Occurrences' for the Licensee/Supervisor/Designate, and

Death occurs while a child is receiving childcare:

Immediately, upon becoming aware of the incident:

- Contact a parent of the child, or where a parent cannot be reached, contact the child's emergency contact.

Death occurs while a child is not receiving childcare:

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.

SERIOUS OCCURRENCE: Allegation of Abuse and/or Neglect

Steps for Staff, Students and Volunteers to Follow:

'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:

Immediately:

- Report concerns to the local Children's Aid Society (CAS) as per the duty to report obligations under the *Child, Youth and Family Services Act, 2017* (CYFSA).
- Document the conversation with CAS and follow their recommendations.
- Notify the supervisor/designate of the incident and the report made to CAS, where appropriate.
- Refrain from discussing the allegation with others.
- Maintain confidentiality at all times.

Steps for the Licensee/Supervisor/Designate to Follow:

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:

Immediately:

- Notify the person who reported concerns about their duty to report obligations under the *Child, Youth and Family Services Act, 2017* (CYFSA).

- Report the concerns to the local Children’s Aid Society (CAS) as per the duty to report obligations under the CYFSA, unless it is confirmed that a report has already been made to CAS.
- Document the concerns.
- Contact and notify a 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:
 - Report the allegation of abuse to the appropriate regulatory body;
 - 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.
- Refrain from discussing the allegation with others.
- Maintain confidentiality at all times.

43. Once all external investigations are complete (e.g. by police and/or CAS), if applicable:

- 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.).

SERIOUS OCCURRENCE: Life-threatening Injury or Illness

a. Injury

b. Illness

Steps for Staff, Students and Volunteers to Follow:

See ‘Steps to Follow for All Serious Occurrences’ for staff, students and volunteers.

Steps for the Licensee/Supervisor/Designate to Follow:

See ‘Steps to Follow for All Serious Occurrences’ for the Licensee/Supervisor/Designate.

SERIOUS OCCURRENCE: Missing or Unsupervised Child(ren)

a. Child was found

b. Child is still missing

Steps for Staff, Students and Volunteers to Follow:

‘Steps to Follow for All Serious Occurrences’ for staff, students and volunteers, and

Immediately, upon becoming aware that a child or children are missing:

- 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.

Where the child or children are not found after being deemed missing.

- Continue to search the premises.
- Update the supervisor/designate.

Where the child or children are found after being deemed missing.

- Update the supervisor/designate.

44. After the child or children have been found, after being deemed missing:

- Document the incident in the daily written record.

Steps for the Licensee/Supervisor/Designate to Follow:

See ‘Steps to Follow for All Serious Occurrences’ for the Licensee/Supervisor/Designate, and

Immediately, upon becoming aware that a child is missing:

- Assist with searching for the missing child(ren).

Where the child or children are not found after being deemed missing:

- 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.

Where the child or children are found after being deemed missing:

- Update the child(ren)’s parent(s), or where a parent cannot be reached the child(ren)’s emergency contact(s).

SERIOUS OCCURRENCE: Unplanned Disruption of Normal Operations

a. Fire

b. Flood

c. Gas Leak

d. Detection of Carbon Monoxide

e. Outbreak

f. Lockdown

g. Other Emergency Relocation or Temporary Closure

Steps for Staff, Students and Volunteers to Follow:

‘Steps to Follow for All Serious Occurrences’ for staff, students and volunteers, and

Where the incident is suspected to be an outbreak:

Immediately:

- Notify the supervisor/designate on site of concerns.
- Separate children who are showing symptoms of illness from other children.
- Follow the child care centre’s sanitary practices policy and procedures.

45. Within [insert timeframe]:

- Record symptoms of ill health in the affected child(ren)'s records,
- Document the incident in the daily written record.

Where the incident is not an outbreak (all other disruptions of normal operations):

Immediately:

- Follow the child care centre's fire safety and evacuation plan and/or the emergency management policies and procedures, as applicable.

46. Within [insert timeframe]:

- Document the incident in the daily written record.

Steps for the Licensee/Supervisor/Designate to Follow:

See 'Steps to Follow for All Serious Occurrences' for the Licensee/Supervisor/Designate, and

Where the incident is suspected to be an outbreak:

Immediately:

- Contact the local public health department.

Where the incident is deemed an outbreak by public health:

Immediately:

- 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 local Medical Officer of Health and post in an area easily accessible for parents.

Note: Outbreaks must be reported as a serious occurrence only if deemed an outbreak by public health.

47. Within [insert timeframe]:

- Notify all parents of children enrolled at the child care centre of the outbreak.

Where the incident is not deemed an outbreak, follow sanitary practices policy.

Where the incident is not an outbreak (all other disruptions of normal operations):

Immediately:

- Follow the child care centre'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.

Glossary

Children's Aid Society (CAS): A local agency with the exclusive mandate, under the [Child, Youth and Family Services Act](#), 2017 to investigate allegations of child abuse or neglect and to deliver child protection services.

Emergency: An urgent or pressing situation in which immediate action is required to ensure the safety of children and adults in the child care centre.

Interact: To be or become involved in communication, social activity or work with somebody else or one another (Source: Encarta Dictionary). Examples of interactions with children include conversing, playing, directing, intervening, supervising or assisting in fulfilling their needs (e.g. food/drink consumption, toilet use).

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).

Lockdown: A threat inside the building that will restrict movement within 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 only be referred to as “parent” in this policy).

Serious Occurrence: An incident that must be reported to the ministry of education within 24 hours.

Staff: Supervisor or the Director

[enter additional definitions here]

Regulatory Requirements: Ontario Regulation 137/15

Serious occurrences

38.

(13) Every licensee shall ensure that,

- (j) there are written policies and procedures with respect to serious occurrences in each child care centre operated by the licensee and each premises where it oversees the provision of home child care, that address, at a minimum, how to identify, respond to and report a serious occurrence;
- (k) a report is provided to a program adviser of any serious occurrence in any child care centre operated by the licensee or any premises where it oversees the provision of home child care within 24 hours of the licensee or supervisor becoming aware of the occurrence;
- (l) a summary of the report provided under clause (b) and of any action taken as a result is posted for at least 10 business days in a conspicuous place at the child care centre or home child care premises; and
- (m) the report and the summary of the report are each kept in accordance with section 82.

Disclaimer: This document is a sample of a policy and procedure that has been prepared to assist licensees in understanding its obligations under the CCEYA and O. Reg. 137/15. It is the responsibility of the licensee to ensure that the information included in this document is appropriately modified to reflect the individual circumstances and needs of each child care centre it operates.

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.

Supervision Policy and Procedures

Name of Child Care Centre: Cornerstone Preschool

Date Policy and Procedures Established: Jan 2024

Date Policy and Procedures Updated: Feb 2024

Purpose

Children’s sleep and rest play an integral part in a child’s well-being and development. The purpose of this policy and procedures described within is to provide staff, students and volunteers with rules and procedures to follow to safeguard children from harm, injury or death while sleeping.

The procedures provided for placing children under 12 months of age on their own backs for sleep align with the requirement to meet the recommendations set out in Health Canada’s document entitled “[Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada](#)”.

Procedures for monitoring sleeping children reduce the risk of harm or injury so that caregivers can look for and identify signs of distress and implement immediate responses to protect the health and safety of children.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for sleep policies for child care centres.

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

Policy

General

Cornerstone Preschool has a clear policy regarding safe and comfortable sleep/rest for children based on Child Care and Early Years Act, 2014.

- All children will be provided with the opportunity to sleep or engage in quiet activities based on their needs.
- Children under 12 months of age will be provided time to sleep based on their individual schedules and will be assigned to a crib/cradle. Children between 12-18 months of age, who receive child care for six hours or more, will be assigned to a crib/cradle or cot in accordance with written instructions from a child’s parent.
- Only light, breathable blankets will be used for infants.
- Children 18 months or older but younger than 30 months, who receive child care for six hours or more, will be provided time to sleep for a period of no more than two hours each day, and will be assigned to a cot.
- Children 30 months or older but younger than six years old, who receive child care for six hours or more, will be provided with a cot unless otherwise approved by a director.
- Children 24 months or older but younger than five years old and in a licensed family age group, who receive child care for six hours or more, will be provided with a cot unless otherwise approved by a director.

Placement of Children for Sleep

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

Consultation with Parents

- All parents of children who regularly sleep at the child care centre will be advised of the centre's policies and procedures regarding sleep at the time of their child's enrolment and/or any time the policies and procedures are revised, as applicable. This information will be available to parents on the website, www.cornerstonepreschool.ca
- Supervisor 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 Supervisor after meeting with the parent/guardian.
- Parents will be advised by the supervising staff of any significant changes in their child's behaviours 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 on HiMama.
- 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 who is in a licensed infant or toddler age group or is in a licensed family age group and is younger than 24 months will be conducted to look for indicators of distress or unusual behaviours. Direct visual checks will be documented by staff by filling out the attached form.
- 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.
- 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.

Additional Policy Statements

It is a requirement that all children attending a licensed Preschool Centre have a rest period each day. It is not necessary for your child to sleep, but he/she will be encouraged to rest quietly on their/them cot during this time. A child-sized blanket from home, labeled with your child's name, is required. Children may also bring a soft comfort item from home for rest time only.

Procedures

Age Group	Frequency of Direct Visual Checks*
Toddler	visual checks every 15 minutes during 2- hour sleep/rest period.
	[insert minimum frequency of direct visual checks]

* **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

12. Staff must:

be physically present beside the child;

check each child's general well-being by looking for signs of distress or discomfort including, at a minimum:

- laboured breathing;
- changes in skin temperature;
- changes in lip and/or skin colour;
- whimpering or crying; and
- lack of response to touch or voice.

13. 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.

Where the child wakes up, staff must:

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

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

perform appropriate first aid and CPR, if required;
inform other staff, students and volunteers in the room of the situation;
contact emergency services or, where possible, direct another individual to contact emergency services;
separate the child from other children or vice versa if the child appears to be ill;
inform the supervisor/designate of the situation; and
contact the child's parent;

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

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

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:

follow the serious occurrence policies and procedures, where applicable;
document the incident in the daily written record; and
document the child's symptoms of illness in the child's records.

14. Staff must:

adjust blankets as needed;
ensure the child's head is not covered;
ensure there are no other risks of suffocation present;
document the date, time and initial each direct visual check on the room's visual check schedule; and
verbally inform other staff in the room that the check has been completed, where applicable and possible.

Additional Sleep Supervision Procedures

- Parents will send bed sheets for their children's cots, and each cot will be fitted with the sheets provided by their parents. All sheets, along with their blankets are sent home every week for a wash.
- Parents will let the Supervisor know if they do not wish for their children to nap
- An extra field will be provided where the parents can include any other special instructions during sleep hours
- All sleeping arrangements will be clearly outlined in the parent's handbook.
- The Supervisor will notify parents of any significant changes in a child's sleeping patterns or behaviors during sleep/rest time. Based on the observations, necessary adjustments will be

made.

- If the staff notices any significant change in a child's behaviors during seep time or sleep patterns, it will be communicated to the parents right away.
- Any unusual patterns will be communicated to the supervisor immediately and recorded in the daily log.

SLEEP SUPERVISON VISUAL CHECK SCHEDULE

<u>DATE</u>	<u>STAFF INITIALS</u>	<u>VISUAL CHECK 12:15 pm</u>	<u>VISUAL CHECK 12:30 pm</u>	<u>VISUAL CHECK 12:45 pm</u>	<u>VISUAL CHECK 1:00 pm</u>	<u>VISUAL CHECK 1:15 pm</u>	<u>VISUAL CHECK 1:30 pm</u>	<u>VISUAL CHECK 1:45 pm</u>	<u>VISUAL CHECK 2:00 pm</u>

Glossary

Adequate lighting: Enough lighting to perform visual checks easily

Direct Visual Check: A mechanism for monitoring sleeping children whereby an individual is physically present beside a child to look for signs of distress, discomfort or unusual behaviours (e.g. change in skin colour, change in breathing, signs of overheating) and react as required.

Electronic Monitoring Device: A device used to observe a sleeping child from a distance. Such devices may capture

images, video, and/or sound to keep track of a child's sleeping patterns, but cannot be used in place of direct visual checks.

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

Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal guardians, but will be referred to as "parent" in the policy).

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

Regulatory Requirements: Ontario Regulation 137/15

Sleep policies and supervision

33.1

- (14) Every licensee shall ensure that a child who is younger than 12 months who receives child care at a child care centre it operates or at a premises where it oversees the provision of home child care is placed for sleep in a manner consistent with the recommendations set out in the document entitled "Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada", published by the Public Health Agency of Canada, as amended from time to time, unless the child's physician recommends otherwise in writing.
- (15) Every licensee shall ensure that, if child care is provided for a child who regularly sleeps at a child care centre the licensee operates or at a premises where it oversees the provision of home child care,
- (n) an employee or the home child care provider periodically performs a direct visual check of each sleeping child who is in a licensed infant or toddler age group, is in a licensed family age group and is younger than 24 months, or is at a home child care premises and is younger than 24 months, by being physically present beside the child while the child is sleeping and looking for indicators of distress or unusual behaviours;
 - (o) there is sufficient light in the sleeping area or room to conduct direct visual checks; and
 - (p) there are written policies and procedures at the child care centre or home child care premises with respect to sleep, and the policies and procedures,
7. provide that children will be assigned to individual cribs or cots in accordance with this Regulation,
8. provide that parents will be consulted respecting a child's sleeping arrangements at the time the child is enrolled and at any other appropriate time, such as at transitions between programs or rooms or upon a parent's request,
9. provide that parents of children younger than 12 months will be advised of the licensee's obligation under subsection (1),
10. provide that parents of children who regularly sleep at the child care centre or home child care premises will be advised of the centre's or agency's policies and procedures regarding children's sleep,
11. provide that the observance of any significant changes in a child's sleeping patterns or behaviours during sleep will be communicated to parents and will result in adjustments to the manner in which the child is supervised during sleep, and
12. include details regarding the performance of direct visual checks, including how frequently direct visual checks will be performed and how direct visual checks will be documented.
- (16) In determining the matters described in clause (2) (c) (vi) in respect of children who are enrolled with a home child care agency and who receive child care at a home child care premises, the licensee shall consider parents' ⁸⁴input, the

sleep environment at the premises and the proximity of the sleeping area or room to the child care provider when the child is sleeping.

- (17) Every licensee shall ensure that in each child care centre it operates that has a separate area or room for sleeping, there is a system in place to immediately identify which children are present in the area or room.
- (18) Every licensee shall ensure that if electronic sleep monitoring devices are used at a child care centre it operates or at a premises where it oversees the provision of home child care,
 - (a) each electronic sleep monitoring device is able to detect and monitor the sounds and, if applicable, video images, of every sleeping child;
 - (b) the receiver unit of the electronic sleep monitoring device is actively monitored by employees at the child care centre or the home child care provider at all times;
 - (c) each electronic sleep monitoring device is checked daily to ensure it is functioning properly; and
 - (d) electronic sleep monitoring devices are not used as a replacement for the direct visual checks required under clause (2)(a).

Criminal Reference Check policy **(including Vulnerable Sector Check)**

Policy

Cornerstone Preschool Binbrook will ensure that each adult working within the school, during the school hours when the children are present, has had a Criminal Reference Check and a Vulnerable Sector Clearance.

Cornerstone Preschool Binbrook requires that the Criminal Reference Check and Vulnerability Sector Clearance be conducted by the police force.

Before the start date of employment each staff member, students and volunteers/placement students etc working within the school or having close contact with the children enrolled at Cornerstone Preschool Binbrook re required to provide the office a current (not more than 6 months old) Criminal Reference check with Vulnerable Sector Clearance.

No person under the age of 18 is required to obtain a Criminal Reference Check and Vulnerable Sector Clearance. However within one month after the person turns 18 years old, they are required to provide a statement that discloses every previous finding of guilt under the Youth Criminal Justice Act (Canada), if the person received an adult sentence.

A Vulnerable Sector Check is then required within one month after the individual turns 19

Criminal Reference Check with Vulnerable Sector Clearances are to be updated and provided every 5 years to the school and kept on file within the office. Moreover, new Criminal Reference Check with Vulnerability Sector

Procedure

The application process is outlined as follows –

- The applicant obtains the Criminal Reference Check and Vulnerability Sector Clearance application form from the local police force.
- The applicant brings the form and required identification to the police station and pays the fee
- The police service will provide the applicant with a date-stamped receipt showing the application was received
- The police service will mail the results of the Criminal Reference Check and Vulnerability Sector Clearance to the applicant.

Once the applicant receives the results, they will submit it to the current supervisor or the Director, who will review the results and the staff member or volunteer will be then permitted to start their work with the school.

Additional measures until results are received – If a circumstance arises, where a child must interact with an adult before the school has received their/them vulnerable sector clearance – it will only be done under the supervision of the current supervisor or the Director. Under no circumstances will they ever be left alone with children!

Offence Declarations

Offence Declaration shall be obtained from each staff member and volunteer in every calendar year (refer to form below)

Annual offense declarations will be considered current to within 15 days of the anniversary of the previous offense declaration or Criminal Reference Check with Vulnerable sector clearance. Any time an individual is convicted of an offence under the Criminal Code (Canada), there is an expectation that the offence be declared as soon as reasonably possible.

Confidentiality Issues

To guard the confidentiality of personal information, the following policies will apply:

1. An original or a 'certified true copy' of the Criminal Reference Check including Vulnerability sector check will be kept in the individual's personnel file in a locked cabinet for the duration of the applicant's employment with the school and only accessible by the Administration
2. All original or 'certified true copies' of the Criminal Reference Check including Vulnerability sector check of Police Record Checks of unsuccessful applicants will be immediately destroyed.
3. All original or 'certified true copies' of Police Record Checks for staff no longer employed or students/volunteers whose placement has ceased will be destroyed upon termination.

Other Areas

Individuals with a conditional offer of placement who have pertinent information on their criminal record will not be automatically disqualified. The Vulnerable Persons Criminal Reference Check forms only part of the selection process. The following factors will be considered in reaching a final decision:

- The nature and number of conviction(s)
- The length of time since the conviction(s)
- The candidate's employment record, qualifications and references
- The relevance of the particular criminal conviction to the position

Collection of Personal Information

Cornerstone Preschool wants to assure all parents that the information provided to the centre remains confidential. We will only collect information required to provide for your child and for auto withdrawal purposes. Once your child leaves the centre, your file will be kept in archives and destroyed after three years. Please note it is the responsibility of the parent to update any information including immunization.

Inclusion Policy

Policy Name: Inclusion Policy

Approved by: Mac Mehta

Date Approved: Nov 19th, 2024

Date Reviewed: Nov 19th, 2024

Guiding Principles

Cornerstone Preschool is committed to creating an inclusive environment that reflects the values of equity, diversity, inclusion, and belonging. Our guiding principles are:

1. Belonging: Every child and family deserves to feel safe, respected, and valued within our community.
2. Individuality: We celebrate the uniqueness of each child and family, embracing diverse abilities, cultures, and perspectives.
3. Collaboration: Families, staff, and community partners work together to support children's holistic development.
4. Access: All children have equitable opportunities to engage and thrive in our programs.
5. Commitment to Growth: Our educators continually enhance their understanding of inclusive practices through professional development.

Policy Statement

At Cornerstone Preschool, we are dedicated to fostering an inclusive environment where every child, regardless of ability, identity, or background, is supported to reach their full potential. We believe in the power of diverse experiences and the importance of accessible learning environments.

Our programs are designed to provide children with opportunities to participate meaningfully, build friendships, and develop their unique strengths. We are committed to removing barriers and ensuring equity by tailoring our approach to meet individual needs in collaboration with families and community resources.

Definitions

- Inclusion: A proactive and intentional approach that ensures all children and families feel welcomed, valued, and supported to participate fully in all program aspects.
- Equity: Addressing systemic barriers to ensure fair treatment and opportunities for every child and family.
- Diversity: The range of unique identities, abilities, and perspectives within our community.
- Belonging: The feeling of being respected and included as a valued member of a group.

Procedures

1. Welcoming and Orientation

- All children and families are welcomed into the program with a personalized orientation process to foster a sense of belonging.
- Supervisors and educators engage with families to understand the child's strengths, needs, and goals.
- Families are provided with clear information about the center's inclusive practices, available supports, and how their child's needs will be met.

2. Programming and Adaptations

- Activities are designed to reflect the diverse needs, interests, and identities of children.
- Learning environments are adapted to accommodate varying abilities, promoting full engagement.
- Children are encouraged to co-learn and build positive relationships with peers.

3. Family Engagement

- Families are recognized as valuable partners and contributors to their child's learning journey.
- Feedback from families is actively sought and incorporated into policy updates.
- Flexible engagement opportunities (e.g., surveys, focus groups) are provided to accommodate family schedules and preferences.

4. Professional Development

- Staff are trained in inclusive practices, cultural competence, and strategies to support children with special needs.
- Training opportunities, if required, are offered regularly to ensure staff stay updated on best practices.

5. Collaboration with Community Resources

- Partnerships with Special Needs Resourcing agencies, health professionals, and community organizations ensure appropriate supports are in place.
- Transition plans are developed collaboratively to support children's continued care and development.

Accountability and Policy Review

- The Inclusion Policy is reviewed annually to ensure alignment with legislative requirements and evolving community needs.
- Orientation for new staff and volunteers includes a review of the policy.

Supporting Documentation

This policy complements the following:

- Employee Handbook: Providing clear guidelines on expectations, responsibilities, and inclusivity practices.
- Parent Handbook: Offering families detailed information on the preschool's values, policies, and inclusive practices.
- Staff Training and Development Policy: Fostering a culture of continuous learning and inclusivity.