



PARENT HANDBOOK

Riverside Site

81 Mill Street South
Port Hope, Ontario
L1A 2S8

Phone: 1-905-885-4166

Fax: 1-905-885-2514

Email: gcccriverside@outlook.com

Website: www.ganaraskachildcare.com

Hours of Operation

Monday to Friday: 6:30 am to 5:30 pm

Closed on (observed) Statutory holidays.

Last updated: April 2025

Licensed by the Ministry of Education

Table of Contents

| | | | |
|--|------|---|-------|
| <u>Introduction</u> | | <u>Parent Involvement</u> | |
| Welcome Families..... | 3 | Parent Board of Directors..... | 23 |
| History Of the Centre..... | 4 | Fundraisers..... | 23 |
| License Capacity..... | 4 | Field trips/off site excursions..... | 23 |
| Staff and Child Ratio..... | 4 | <u>Food and Nutrition</u> | |
| Our Team..... | 5 | Menu..... | 24 |
| <u>Statements</u> | | Allergies/dietary concerns..... | 24 |
| Program Statement Implementation Policy..... | 6 | <u>Policies</u> | |
| Mission Statement..... | 6 | Ganaraska Child Care Policies..... | 25 |
| Philosophy Statement..... | 6 | Anaphylaxis Food Policy..... | 26-31 |
| <u>Goals</u> | | Outside Food Policy..... | 32 |
| As Early Childhood Educators/Our Approaches..... | 7 | Bagged Lunch Policy..... | 33 |
| Pedagogical Leader/ Pedagogy..... | 8 | Health and Wellness Policy..... | 34 |
| Program Guide/Approaches..... | 9-10 | Symptoms and Action Illness Chart..... | 35 |
| <u>Waitlist Information</u> | | <u>Drug and Medication Administration</u> | |
| Policy | 11 | Common Childhood illnesses Reference Sheet..... | 36-39 |
| Management..... | 11 | Policy and Procedures..... | 40 |
| Priorities..... | 11 | Parental Authorization to Administer Medication..... | 40-41 |
| <u>Enrollment</u> | | <u>Drug and Medication</u> | |
| Registration..... | 12 | Requirements..... | 41 |
| Immunizations..... | 12 | Handling/Storing..... | 41-42 |
| <u>Attendance</u> | | Administration..... | 42 |
| Requirements..... | 13 | Record Keeping..... | 42 |
| Absent children..... | 13 | Confidentially..... | 42 |
| Vacation and entitlement..... | 13 | Additional Policy Statement | 43 |
| <u>Statutory Holidays</u> | | <u>Supervision of Students and Volunteers</u> | |
| Observed Statutory days..... | 14 | Purpose/Policy..... | 44 |
| Year End..... | 14 | Roles and Responsibilities..... | 44-46 |
| Christmas closure..... | 14 | Additional Policy Statement | 46 |
| <u>Fees</u> | | <u>Behavior Guidelines</u> | |
| Rates..... | 15 | Behavior Guidance Policy..... | 47 |
| Late pick up..... | 15 | Child Guidance | 47 |
| Notice of Withdrawal/Discharge..... | 15 | Safe Arrival and Dismissal Policy and Procedures..... | 48-51 |
| <u>Invoicing Information</u> | | Prohibited Practices/Positive Practice Policy..... | 52-53 |
| Invoices..... | 16 | Parental Conduct..... | 53 |
| Late payments..... | 16 | Bullying, Harassment & Violence..... | 54 |
| Outstanding fees..... | 16 | Polices and Procedures | 54 |
| General Office Fees & Charges..... | 17 | <u>Weather</u> | |
| Income Tax Receipts..... | 17 | Extreme Weather Policy | 55 |
| Fee assistance..... | 17 | Inclement Weather/Bus Cancellation and School Closure..... | 55 |
| <u>Summer</u> | | Shelter in place..... | 55 |
| Summer care..... | 18 | <u>Parent Issues and Concerns Policy Procedures</u> | |
| Sunscreen..... | 18 | Concerns/Complaints and Compliments | 56 |
| Clothing..... | 18 | Parent issues and Concerns..... | 56 |
| <u>Arrivals/Departures</u> | | Confidentiality..... | 56 |
| Parking | 19 | Conduct..... | 56 |
| Smoking/Vaping/Marijuana..... | 19 | Concerns about the suspected Abuse or neglect of a child..... | 56 |
| <u>Things You Need To Know</u> | | Parent Issues and Concern Procedures..... | 57-59 |
| Toys from home..... | 20 | Contacts..... | 60 |
| Newsletter/Program room updates..... | 20 | Personal Privacy Policy..... | 60 |
| <u>Emergency Management</u> | | Parent Handbook Acknowledgement Agreement..... | 61 |
| Policies and Procedures..... | 21 | | |
| Serious Occurrence Notification..... | 21 | | |
| Hold and Secure..... | 21 | | |
| Lockdown..... | 21 | | |
| <u>Emergency Procedures</u> | | | |
| Emergency Planning..... | 22 | | |
| Follow up..... | 22 | | |
| Fire drills and Procedures..... | 22 | | |
| Communication..... | 22 | | |



Introduction

Welcome to the Ganaraska Child Care centre.

Parents and Guardians please use this handbook as a reference. This handbook will be updated on an ongoing basis as the needs of the centre continue to change. Any policy changes made to this handbook are approved by Parent Board of Directors.

Dear Families,

Welcome to our Centre! We are happy that you and your family will be a part of our child care facility.

The Centre offers child care spaces to children whose parents live and work in the community and those that reside outside the catchment area of Port Hope. All children are welcome at our centre. We pride ourselves in providing an inclusive environment.

We are licensed by the Ministry of Education and have a purchase of service agreement with the County of Northumberland. This agreement enables us to provide childcare to families who qualify for subsidy.

The Centre provides care for children ranging in age from 18 months to under 6 years. Community colleges have chosen us as a training site for their Early Childhood Education students to do field placements.

Staff and students, work together to provide a warm, caring and stimulating environment for the children in our care. For a child to feel secure and happy in child care, it is also important that parents are satisfied with the care their children receive. Parents should not hesitate to ask questions and discuss any concerns they may have. An annual survey of our services helps us determine any areas needing improvement.

Once again, welcome to our Centre.

History of the Ganaraska Child Care Centre

On January 2nd 2025, Ganaraska Child Care Centre opened a second location in Port Hope at the old Ruth Clarke senior activity centre at 81 Mill Street. The building was renovated to accommodate two toddler programs, and two preschool programs. In partnership with the town of Port Hope and the County of Northumberland, we are pleased to be able to provide 70 more licensed child care spots for families. This site will offer full day care for 30 toddlers and 40 preschool aged children.

License Capacity and Staff to Child Ratio

Ganaraska Child Care Centre is Licensed for up to 70 children. The Program rooms are divided by ages set out in the Child Care and Early Years Act, 2014.

| Group | Staff | Ratio | License Capacity |
|--|--|--------------|-------------------------|
| Junior Toddler 18-30 months | 1 Registered Early Childhood Educator 2 Assistant | 1:5 | 15 |
| Senior Toddler 18-30 months | 1 Registered Early Childhood Educator 2 Assistant | 1:5 | 15 |
| Junior Preschool 30 months - 6 years | 1 Registered Early Childhood Educator 1 Assistant | 1:8 | 16 |
| Senior Preschool 30 months - 6 years | 2 Registered Early Childhood Educator 1 Assistant | 1:8 | 24 |
| Kitchen | 1 Dietary Aid | | |
| Office | Administrative Director Supervisor | | |

Licensing

The centre is licensed under the Child Care and Early Years Act and the licence is renewed annually. An advisor from the Ministry of Education visits the centre annually and reviews the operating procedures with the Management Team and staff. When the review is complete, the licence is renewed provided there are no outstanding non-compliances.

Our Team

The **Board of Directors** is comprised of parents whose children attend the Centre as well as interested members of the community and parents whose children may have left the Centre but still want to play an active role. The Board meets bi-monthly to set fees, review policies and discusses Centre issues with regards to hiring, staffing, etc. The participation of these members is strictly on a volunteer basis.

Our management team consists of a **Director of Operations, Administrative Director** and **Supervisors** who work as a team to operate both of our centres with advice from the Parent board of directors. We are here to answer all your questions and inquiries.

Our **Registered Early Childhood Educators, Assistants** and **Enhanced Staff** work hand in hand with each other to create a warm and inviting program for our children. The educators at the centre are chosen with care and reflects the philosophy of the child care centre. All educators ensure that your child has a well balanced and complete experience while in our care. From our most recent graduates to our most experienced Registered Early Childhood Educators, we offer enthusiasm continuity and commitment. believe and stand for quality child care in our community.

The centre strives to employ the most qualified Early Childhood Educators to provide the best quality programs for all children. All Early Childhood Educators must be members of the **COLLEGE OF EARLY CHILDHOOD EDUCATORS** and renew their membership annually in order to be employed in our child care centre. All educators must submit Criminal Reference Checks, up to date immunization, and current First Aid/CPR documentation before beginning at our centre. Educators must also present proof of graduation from a recognized Early Childhood Education program with a recognized college and membership to the College of Early Childhood Educators.

We are very fortunate to have dietary staff on site to create healthy, nutritious snacks and lunch for your children to enjoy. Everything is prepared on site in our kitchen.

The staff at the centre is chosen with care and reflects the philosophy of the child care centre. All our staff ensures that your child has a well balanced and complete experience while in our care.

Ganaraska Child Care Centre Inc.
Program Statement Implementation Policy

Ganaraska Child Care Centre Inc. is committed to providing the best child care within Northumberland County. We are motivated to provide and maintain a safe, warm, and nurturing environment for children to assist in their development.

The educators at the Centre, strive to provide and maintain

- a warm, nurturing environment that ensures the child's experience away from home is a secure and happy one.
- the childcare program must balance with the child and his/her family situation
- meet the individual development needs of the whole child (social skills as well as fine and gross motor skills and cognitive development. Independence, self-esteem, and respect for themselves as well as others)

Ganaraska Child Care Centre offers an emergent curriculum

- for all children's individual learning styles and interests based on the foundational guidelines and policy framework of "How Does Learning Happen" (Early Years Act 2014, subsection 53 (3))

The curriculum (content of learning) and the pedagogy (How Does Learning Happen?) are shaped by what we as educators believe in:

- that children are capable, competent, curious, and rich in learning.

Our program statement is defined by our Program Implementation Policy which includes our goals and approaches to achieving our goals.

Mission Statement

Ganaraska Child Care Centre Inc. is committed to providing the best child care within Northumberland County. We are motivated to provide and maintain a safe, warm, and nurturing environment for children to assist in their development.

Philosophy Statement

The Centre strives to provide and maintain a warm, nurturing environment that ensures your child's experience away from home is a secure and happy one. The Centre believes that the childcare program must balance with the child and his/her family situation. The caring, qualified staff encourages the development of social skills as well as fine and gross motor skills and cognitive development. Independence, self-esteem, and respect for themselves as well as others are also fostered.

Goals

As Early Childhood Educators we will....

- Be required to read and understand the Program Statement and be committed to following the expectations.
- Be positive with all parents/guardians about the program and allow for open communication and interaction with all families.
- Encourage the children to have positive communication skills and interaction with their peers.
- Allow ourselves to be the support and guidance children need to feel that they have a sense of Belonging.
- Encourage the children to explore their own capabilities and their own sense of self reflecting.
- Abide by the standards of our profession set out by the College of Early Childhood Education Code of Ethics and Standards of Practice.
- Be part of the child care team that will work together to build on each others strengths and allow for open communication that will benefit the whole program.
- Allow for open suggestions that will benefit us professionally.

| FOUNDATIONS | GOALS FOR CHILDREN | EXPECTATIONS FOR PROGRAMS |
|-------------------|--|--|
| Belonging | Every child has a sense of belonging when he or she is connected to others and contributes to their world. | Early childhood programs cultivate authentic, caring relationships and connections to create a sense of belonging among and between children, adults, and the world around them. |
| Well-Being | Every child is developing a sense of self, health, and well-being. | Early childhood programs nurture children's healthy development and support their growing sense of self. |
| Engagement | Every child is an active and engaged learner who explores the world with body, mind, and senses. | Early childhood programs provide environments and experiences to engage children in active, creative, and meaningful exploration, play, and inquiry. |
| Expression | Every child is a capable communicator who expresses himself or herself in many ways. | Early childhood programs foster communication and expression in all forms. |

Pedagogy

Pedagogical Leader

The pedagogical leader provides ongoing opportunities for educators to engage in critical discussion and reflection about pedagogy and practice to support continuous professional learning and growth. They use the four foundations from "How Does Learning Happen". Belonging, Engagement, Well Being and Expression to work along side program educators in setting goals and bringing together emergent curriculum planning and the classroom environment. The pedagogical leader guides, organizes, and plans team meetings which will assist the educators in evaluating the curriculum, pedagogical documentation, the environment, and experiences. The leader supports educators to meet their goals which reflects the needs of the children and enhances their development and learning.

Curriculum planning is guided by both the educator and the child. Through daily observations, reflective practice, and research, educators plan activities and experiences to support all domains of development. The curriculum focuses on the process and allows for change and grows to follow the needs of the children.

Our emerging curriculum encompasses a reflective pedagogical approach. Educators plan experiences that motivate opportunities for learning and are based on the children; considering their skills, needs, and interests. Educators create our atmosphere of discovery, exploration and appropriate risk-taking. Using the foundational guidelines in "How does Learning Happen" they provide a sense of belonging, well-being, engagement, and expression in their classrooms for all children. Educators reflect on what is happening, what could happen next, and collaborate their ideas with others which are vital for optimum curriculum development.

Positive, caring, and trusting relationships are at the centre of every person's health, well-being, and social-emotional development. Every child's family brings value when sharing, caring, and participating in their child's activities and experiences each day. We understand that families know their child best and encourage them to have a voice about what is important to them and the lives of their children.



Our Goals that guide the program

1. Promote the health, safety, nutrition and well being of the children.
2. Support positive and responsive interactions among the children, parents, child care providers and staff
3. Encourage the children to interact and communicate in a positive way and support their ability to self-regulate.
4. Foster the children's exploration play and inquiry.
5. Provide child-initiated and adult – supported experiences.
6. Plan for and create positive learning environments and experiences in which each child's learning and development will be supported.
7. Incorporate indoor and outdoor play as well as active play, rest, and quiet time into the day, and give consideration to the individual needs of the children receiving child care.
8. Foster the engagement of and ongoing communication with parents about the program and their children.
9. Involve local community partners and allow those partners to support the children, their families, and staff.
10. Support staff, home child care providers or others who interact with the children at the centre in relation to continuous professional learning.
11. Document and review the impact of the strategies set out in the above goals on the children and their families.

Our Approaches that will be implemented to achieving our goals above:

1. We do a daily visual health check of the children upon arrival. Our posted menus consist of nutritious meals and snacks that follow Canada Food Guide as well as we work with the local dietician from the local health unit. We will encourage our children.
 - a. To explore new and exciting foods. We provide a clean, organized, and safe play environment.
2. We have one on one interaction, discovery of unique characteristics of each child by talking with his or her family, supporting inclusion, observing, and documenting.
3. As educators we have a responsibility to build each child's foundation of inner strength (self-regulation), inner confidence (initiative) and how to develop meaningful relationships (attachment). We guide children to understand the importance of sharing, caring, respect and empathy.
4. Planned and unplanned activities and experiences allow children to explore and can ask questions, solve problems, and offer social opportunities. Making learning and development visible through different types of pedagogical documentation.
5. Our classrooms must be stimulating and always evolving. Having variety of centres within the classrooms allows the children to experience small and large group play and to be able to choose what interests them. Keeping neat, tidy, and well-organized space models respect for the environment and allows for children to explore and be imaginative.
6. Curriculum should be in constant revision to reflect the children's developmental abilities, individual similarities and differences and the opportunity for children's interests and expressions.
7. Patterns of good eating, physical activity, and sleep that are established in the early years of childhood continue for the child into later life. Connecting with each child and valuing his or her unique spirit, individuality, and presence
8. The relationship we build with our families must be ongoing and information must be shared to ensure consistency between home and child care. It is beneficial when parents are involved in their child's development, interests, goals, and achievements. The best way to communicate is via class dojo.
9. Allowing excursions to the community which allow the children to explore the world around them and have the community partners come to the centre to share their experiences with the children.
10. As educators we need to continue our professional learning through attending workshops, abiding by the standards of our profession set out by the College of Early Childhood Education Code of Ethics and Standard Practice. Allow for open suggestions that will benefit us professionally.
11. We encourage our families to participate in their child's play and work and to also have a voice about what is important to them and the lives of their children.

Program Approach (Specialized Services)

The Ganaraska Child Care Centre Inc. believes that ALL children, regardless of ability, are entitled to the same opportunities for participation, acceptance and belonging in child care.

- All children and families are welcome, regardless of their individual special need(s)
- All children and families are offered equal access to services and programs.
- All children and families participate fully in group activities, programs, and routines.

To ensure full inclusion, the Ganaraska Child Care Centre Inc., to the best of their ability will:

- Modify the childcare environment and provide extra support to accommodate individual children's needs.
- Actively encourage parent involvement by removing barriers to participation
- Train and support staff in their efforts
- Work collaboratively with other service providers
- Support children's involvement in community activities, advocating for inclusive practices.

Waitlist Information - Policy

It is the policy of Ganaraska Child Care Centre Inc. that our waitlist policy will be maintained as such that all parents/guardians will be treated with integrity, compassion, and fairness. Both Ganaraska Child Care Centre (Port Hope high school and Riverside) sites will share a waitlist.

Parents are required to fill out waitlist form on website www.ganaraskachildcare.com . The form will be sent to Management via email.

- | | |
|--|---|
| 1. Parent Name and Phone Number | 8. Does your child require extra support? |
| 2. Email address | 9. Does your child require outside resources? |
| 3. Child's Full Name (last name if different). | 10. Any other details needed. |
| 4. Child's Date of Birth | 11. School age family needs. |
| 5. Desired Start Date | |
| 6. Has your child attended child care before? | |
| 7. Does your child have any allergies? | |

Waitlist Management

1. Spaces may come available when a child transitions into another program room and or leaves the centre.
2. There is no specific amount of time that a family is required to be on the waitlist. The Management team will reach out to family either by email or by phone call when a spot comes available.
3. If a family refuses an offered spot or fails to contact the management team about the current available spot three times, family will be taken off the waitlist. The family will be given 24 hours to contact management and confirm spot.
4. No fees will be charged to have your child's name on our waitlist.
5. Contact the management/office team via email or phone to confirm individual placement on waitlist. Our waitlist contains personal and confidential information.
6. It is the responsibility of the family to contact management about any changes to current waitlist information. Ex – desired start date or not needing the care.
7. Registration package must be returned within 72 hours (3 days) from the time package was picked up or you may lose your spot in the program room. If your start date should change, you will be invoiced from your original start date. At this point in the registration process staffing has already been arranged.
8. If there is no space available in requested program room, parents can ask to also be placed on the list in the next (older) program room.
9. Confidentiality and privacy of family information will be kept with the upmost respect to the privacy of the family.

Waitlist Priorities

1. Children of currently employed staff.
2. Children currently enrolled moving into next program room.
3. Siblings of currently enrolled children
4. Five (5) days is preferred and will take priority.
5. Four (4) Three (3) days may be available at the discretion of the management team.

Enrollment

For the safety of your children, we must be aware of all pertinent information regarding your children.

Before your child may start at our centre, the following information must be given to the child care office 72 hours (3 days) after picking up registration package.

1. Completed registration forms.
2. Child's up to date immunization card – will be photocopied and put in child's folder
3. A copy of all documents relating to the custody of the child/ren being registered, if applicable.
4. Completed Medical Need Plan and Individualized Support Plan-if applicable.
5. Individual Anaphylaxis Emergency Form for every child who may be a risk of anaphylaxis (life threatening allergic reactions).

Registration

Once a spot has been confirmed in writing and the registration forms have been completed and returned within 72 hours (3 days), a **two-week withdrawal notice** is required if the family decides not to attend. In such cases, families will be invoiced accordingly for the two-week period.

Immunization

All immunization records must be kept up to date. Incomplete information can mean exclusion for your child. Record of immunization must be provided before your child may start at the centre. If the educators in your child's program room notices any discomfort or symptoms possibly related to recent immunizations, you may be required to pick up your child. However, it is highly recommended that the day of your child's immunization they are to stay home for observation by Parent/Guardian.

Attendance

Requirements – Full Day Programs - 5 days only

Junior Toddler

Senior Toddler

Junior Preschool

Senior Preschool

Irregularly scheduled families that require different days per week, will be invoiced for 5 days per week. This is **required** to keep your spot open and available for your scheduled days. We ask that a 2–4-week schedule is provided. Submit any schedules directly to your child's program room, either by paper or over class dojo.

Scheduled families may be asked to fill out a calendar for your upcoming child's schedule. 2-4 weeks will be required.

You are **required** to keep the same number of days that you signed up for. No reduction of days will be accepted.

Each Spring you will be **required** to fill out a form. This form will help the management team, determine the upcoming Summer, and school year needs of each of our families.

Absent Children

If your children will be away, you must notify the educators via class dojo before 8:30 am. Absent days are still invoiced for.

Vacation Days and Entitlement

| Schedule | 5 days | 4 days | 3 days |
|-------------------|--------|--------|--------|
| 1 to 3 years | 5 | 4 | 3 |
| 3 years and above | 10 | 8 | 6 |

Vacation entitlement takes place 1 year after child's start date.

Families wanting to take vacation through out the year will need to request their entitled days via their child's program room's class dojo. Requests must be submitted **1 week (5 business days)** prior to desired vacation day.

Any vacation days in December will need to be requested no later than the last Friday in the previous month of November (this is for invoicing purposes).

Children's vacations days will be tracked by Management.

Vacation time may not be used in lieu of a withdrawal from the centre. Please refer to notice of Withdrawal.

Statutory(observed)Holidays

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

The centre will be closed on the above Statutory observed holidays:
This applies to Full time, Part time and Scheduled families.

All observed holidays are billed at your normal daily rate.

EXCEPTION: You will not be billed for Easter Monday

In a case where a holiday falls on a weekend, we will observe either the Monday/Friday or in some cases both as an observed day.

Vacation days can not be used in lieu of an observed holiday.

Christmas Closure

In accordance with the KPRDSB school calendar and the Port Hope high school site the centre will be closed during the week between Christmas and New Years Day. The number of "closed" days varies year to year and you will not be invoiced for those days. EXCEPTIONS – Two stat days, please see above.

Year End (December)

All fees must be paid on time according to the due date that is provided at the beginning of December so Management can close year end. If no payment is received a \$25.00 late fee (non base fee) will be applied daily.

CWELLCC

Ganaraska Child Care Centre has enrolled in the Canada Wide Early Learning and Child Care Program between the Province of Ontario and the Government of Canada. The Fees listed on below are CWELLCC reduction fees. These fees apply to children under the age of 6-year-old. Children turning 6 will continue receiving the reduced fee till the first of the following month from their birthday.

Base and Non-Base Fees

As a not-for-profit organization, Ganaraska Child Care Centre relies on prompt payment of base fees so that the day-to-day expenses can be met. Both Base and Non-Base fees may change yearly with approval from the board of directors and our county. Enrolled families will be notified of any fee changes.

| | |
|---|---------------------------------------|
| TODDLER (18 to 30 months) | \$19.99 (Base Fee) - Reduction |
| PRESCHOOLER (30 months to 6 years) | \$18.61 (Base Fee) - Reduction |

Late Pick Up Charges

The centre is open until 5:30pm. If you arrive after 5:30pm according to the centre clock, you will be charged a late fee per child. If you arrive before 5:30pm and remain past 5:30pm then late fees will be applied. Parents will receive this late fee charge on next invoice. Our Educators are scheduled within the time frame of 6:30am to 5:30pm and we respect their needs to leave on time to meet their personal obligations. Please see chart below.

| Time Frame | Late Fee |
|-------------------|--------------------------|
| 5:31- 5:41pm | \$25.00 (non- base fees) |
| 5:41- 5:51pm | \$35.00 (non- base fees) |
| 5:51- 6:01pm | \$45.00 (non- base fees) |

If all resources have been made to contact parent/guardian along with emergency contacts by 5:30 pm with no communication made, local authorities (Police and CAS) will be contacted. After 3 late pick ups within a 1-month time frame, Ganaraska Child Care Centre Management Team and the Parent Board of Directors have the right to terminate your childcare spot effective immediately.

Notice of Withdrawal/Discharge

If you need to withdraw your child from one of our programs, you must provide the office a two-week written notice. If no notice is given, you will be billed the additional two weeks at your normal daily rate. If your final payment has not been received within (5) five business days of invoice date, you will only receive (1) one email reminder before having your account sent to the collection agency.

Invoicing Information

Parents/Guardians will receive an invoice bi-weekly. Number of days per invoice will vary to be kept within each month.

Fee Payment Information

1. Scheduled payments are due according to the noted due date on each invoice. Invoices will go out via email on Monday mornings and are due on Friday the same week. Invoices are sent twice a month; the month will be split equally where possible. Please only pay the exact amount owing.
2. After two unpaid invoices your child care spot will be terminated. Your account will be sent to collection immediately.
3. NSF charges –This will vary depending on your bank institution. If left unpaid directly to the bank, you will receive the same charge from the centre on your invoice.
4. Absent days are still invoiced-regardless of if your child is here or not.

Method of Payments-

- E-transfers to (ganaraskachildcare@gmail.com).
- Auto-Withdrawal. Provide office with void cheque or Direct Deposit form

Credits Or Refunds

Any credits/refunds to invoices due to overpayments/underpayments due to schedule changes will be adjusted within the respective billing period. If a reduction in CWELCC occurs, you will be refunded for any overpayments made. An overpayment is the difference between the old base fee and the new base fee.

Late Payment Fee (Non-base)

If no payment has been sent by the following Monday (from when invoices went out) a late fee of \$25.00 (non- base fee) will be applied. If no payment has been sent after the first late charge, each day following a \$10.00 non-base fee will be applied and sent out.

Outstanding Fees (Base and Non-base)

Any outstanding fees upon withdrawal will be put through a collection agency if a parent has not made any attempt to clear up any past due amount. Court costs will be added to the outstanding balance.

Invoicing Information

1. Parents/Guardians will receive an invoice bi-weekly. Number of days per invoice will vary to be kept within each month. Payments are due according to the noted due date on each invoice. Invoices will go out via email. Please only pay the exact amount owing.
2. Please send e-transfers to (ganaraskachildcare@gmail.com). **Auto-Withdrawal is now available. Please reach out to the office for information.**
3. After two unpaid invoices your child care spot will be terminated. Your account will be sent to collection immediately.
4. Any NSF charges –This will vary depending on your bank institution. If left unpaid directly to the bank, you will receive the same charge from the centre on your invoice. (Centre is not responsible for any NSF charges)
5. Any adjustments to invoices will be reconciled within the respective billing period
6. Absent days are still invoiced-regardless of if your child is here or not.

Late Payment Fee

If no payment has been sent by the following Monday (from when invoices went out) a late fee of \$25.00 (non-base fees) will be applied. If no payment has been sent after the first late fee, each day a \$10.00 fee (non-base fee) will be applied and sent out.

General Office Fees & Charges

Fees to be paid prior to receiving documentation.

| Description | Unit | Fee |
|-------------------------|-------------------|----------------------------|
| Document Preparation | Per document | \$25.00 (non – base - fee) |
| Photocopies or reprints | Per document | \$5.00 (non – base - fee) |
| Miscellaneous requests | Per hour required | \$15.00 (non – base - fee) |

Income Tax Receipts

A receipt for payments made for child care fees for the year will be issued on or before February 28th every year. Parents will be required to sign off that they have received their Income tax receipts. They will be available for pick up at the centre.

Fee Assistance - County of Northumberland – Subsidy

If you require assistance with childcare fees, Contact the county of Northumberland 905-372-6846. Reminders for families that have subsidized child care:

- Allowed 36 absent/sick days per year. unless authorized by subsidy office
- subsidy will only cover days that you are at work.
- must keep subsidy updated on personal information.
- If given a termination notice by subsidy your current financial assistance may be terminated and that full child care fees will be applied.

Summer Care

If you choose to withdraw your child for the summer. You will not be guaranteed a spot in the future any will loose any accumulated vacation entitlement. If you decide to re-register your child you will be required to submit a new waitlist application. There is no guarantee of a spot. If you require your spot to be held for the summer (July and August) you will be invoiced for full base-fees of your currently enrolled days. We will not accept a reduction in days. Example: Going from 5 days a week to 3 days a week.

For the months of July and August, summer care only may be offered.

Sunscreen

Parents will be required to provide sunscreen with a SPF of 15 or higher and be water resistant for their child. Parents must apply sunscreen to their child prior to arriving in the morning and inform staff that they have done so, however depending on when your child arrives in the morning and when the program room goes outside, sunscreen may need to be applied again as sunscreen should be applied 20 minutes prior to going outside.

Sunscreen will be applied with parental consent to their child in the morning (if needed) and afternoon prior to outdoor time.

If parents/guardians choose not provide sunscreen you will be required to sign a form (which can be found in the registration package under the non medication form)

Clothing

Please dress your child in comfortable play clothes so that they may enjoy all aspects of our daily program-painting, sand, water etc.

As a ministry requirement we spend one hour in the morning and one hour in the afternoon outside, so please make sure your child has all the appropriate outdoor clothing suitable for weather conditions/seasonal changes. Hats/Mitts must be worn.

Indoor shoes and extra clothes must be left at the centre (labelled with child's name).

Only closed toed shoes with backings (fitted properly) will be allowed for outside play - No Flip flops.

Arrivals and Departures

Safety of the children is our top priority. Children must be accompanied by a parent for drop off and pick up at the centre. Do not allow your child to walk in or out of the building on their own. It is important to speak with the educator when dropping your child off or picking your child up to relay or receive any pertinent information about your child. Please make eye contact daily with your child's educator in the room.

Parents must notify the centre by 8:30 am daily by either phone or class dojo if your children will not be attending for any of our programs, including before and after. If this becomes an ongoing concern, due to the lack of communication Ganaraska Childcare Centre Management Team and Parent Board of Directors have the rights to terminate the family effective immediately.

The Kitchen and Office require final numbers for each program room by 9:30 am

Lunch is served between 11:00-11:30 am – Lunch will not be held.

No drop offs after 9:30 am – NO EXCEPTIONS – without notice

24-hour notice to be given if you require drop off time after 9:30 am (can be approved at the discretion of the management team)

However, please keep in mind that Programs start at 9:30 am and it will be the responsibility of Parents/Guardians to locate your children's program room (etc. Could be on a walk, trip)

Please note the following times; Please avoid pick up and drop off during these times as they cause interruptions in the program rooms. (Unless illness occurs, and child needs to leave immediately)

Toddler, Junior Preschool and Preschool nap is 12:00-2:00

Only persons listed in your child's file will be permitted to pick up your child. If anyone else is picking your child up other than on pick up list, you need to call the centre to inform us. Photo I.D. is required to be shown.

Parking

Child care parking is located on the other side of the road. There are a few parking spots available at the front of the building, please limit your parking time.

Please do not allow your children to play or run around in the parking lots.

Smoking/Vaping/Marijuana

There is no smoking/vaping or Marijuana use allowed anywhere on the property.

Things You Need to Know

Toys from Home

We ask that children not bring toys from home unless it is a special blanket for sleep time. If bringing a blanket, we ask that it stays at the centre and it will get laundered weekly. If items of value or of sentimental value are brought to the centre, it is the responsibility of the child to keep track of his/her treasures. The staff are not responsible for any items that go missing or are broken.

Newsletter/Program Room Updates

Updates for the centre and or program rooms will be sent via class dojo on a as needed basis. Educators and the management team will provide any updates regarding upcoming events, changes, and special information about each program room.

Emergency Management

Policies and Procedures

Ganaraska Child Care Centre has Emergency Management Policies and Procedures in place in the event of an emergency we will contact parents/guardians by phone or by the class dojo.

Serious Occurrence Notification

If a serious occurrence occurs at the centre, a serious occurrence notification form will be completed and posted for 10 days from the date of final update in a conspicuous highly visible place for parents. All personal and private information regarding the child and staff will not be identified.

Hold and Secure

Hold and Secure is a problem outside the building area.

All outside doors to the building will be locked as well as the child care centre doors, but continue a normal routine inside the child care centre.

Lockdown Procedures

The staff member who becomes aware of the threat must inform all other staff of the threat as quickly and safely as possible.

Staff members who are outdoors must ensure everyone who is outdoors proceeds to a safe location. (bring all the children indoors as quickly as possible and proceed to each of the program rooms)

Staff inside the child care centre must:

- 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.

If possible, staff inside the program room(s) should also:

- close all window coverings and doors.
- barricade the room door.
- gather emergency medication; and
- join the rest of the group for shelter.

Program staff, Administrative Director and Supervisor will immediately:

- close and lock all child care centre entrance/exit doors, if possible; and take shelter

Note: only emergency service personnel are allowed to enter or exit the child care centre during a lockdown.

Emergency Procedures

Emergency Planning

- ✓ Ensure that all staff are trained and aware of procedures followed by their group in the event of a drill or real situation.
- ✓ Provide information regarding the lockdown – in the parent handbook or newsletters.
- ✓ Encourage staff to incorporate age-appropriate discussions with the children in circle and remind them of the importance of cooperation at that time.
- ✓ Provide opportunities during staff meetings to discuss roles/responsibilities of everyone during a Lockdown procedure.

Follow up

In the event of a Lockdown, the parents will be notified at the earliest convenience. The procedures relating to Serious Occurrence Reporting will be followed including both the Parent Board Chair and the Ministry. A written record of any Lockdown/drills will be kept on file in the centre.

Fire Drills and Procedures

As per ministry licensing requirements we have regular monthly fire drills which will be conducted by Administrative Director and or Supervisor.

Each program will exit their program room and will go outside the building to a safe meeting area.

Communication

We strive to keep you informed of all events and important information. It is vital that you share any new information with the Educators and that we are aware of any changes. i.e., new address new allergies or change in diet. Please pass along new information so files are kept up to date, spend a few minutes with staff at the beginning or end of the day so that you are aware of what has happened during your child's day. We are here for you and your child: we hope to have a long happy relationship with you. This can only be accomplished through mutual respect, communication and understanding. Should you have any concerns please speak to your child's teacher, the Director of Operations (Port Hope Highschool site), Administrative Director, or Supervisor

Each program room uses the "Class Dojo" App. This will be limited to 2 members per family (Parent/Guardian only). Please ask your child's educator for the class code; it is a great tool for communicating with families.

Parent Involvement

Ganaraska Child Care Centre encourages parents/guardians to be involved in the daily program of their child's room by daily interactions with the staff, verbal and written communication, meetings, and workshops. Parents/guardians are encouraged to visit the program rooms when they can.)

Parents can also get involved by:

- Becoming a member of Ganaraska Child Care Centre Board of Directors
- Participating in Parent Surveys
- Attending Annual General Meeting in the Fall
- Participating in Fundraising
- Volunteering in on/off site activities (Police Check will need to be provided)

Parent Board of Directors

The Board of Directors is comprised of parents whose children attend the Centre as well as interested members of the community and parents whose children may have left the Centre but still want to play an active role. The Board meets monthly to set fees, review policies and discusses Centre issues with regards to hiring, staffing, etc. The participation of these members is strictly on a volunteer basis. Parents that are interested in joining the Board of Directors will be required to fill out a questionnaire.

Fundraisers

As a non-for-profit organization, we encourage families to participate in a variety of different fundraisers. All raised funds go directly back into our program rooms. This helps cover the cost of new toys, special activities, and creative supplies. We are always looking for different fundraising ideas. If you are interested in helping us fundraise, please reach out to the management team.

Field Trips/ Off Site Excursions

Through out the year the child care centre will organize special field trips/excursions off the premises. When we leave the centre, we ensure that our staff to child ratio is always met for safety reasons. We will inform parents/guardians in advance of the upcoming trips/excursions, and we will need parent/guardian to sign a permission form indicating destination, date and time before a child can participate in the activity.

Food and Nutrition

Please be advised.

We are a nut free centre; Please do not bring any products that may contain or may have come in contact with nuts and or nut oils.

No outside food will be permitted in the centre.

On occasion, parents may be asked to provide packed lunches. This would only occur on specific days such as an excursion day. Please see our Bagged Lunch Policy. (pg. 32)

The centre provides morning and afternoon snacks daily as well as hot nutritious lunches prepared in our own kitchen by our cooks.

Menus

Our menus are planned by the cook in consultation with the Directors and Program Leader and follow the guidelines of the Canada Food Guide along with feedback from the dietician of the local health unit. Our menu rotates on a four-week cycle from the Fall, Winter, Spring and Summer. This allows the children to experience a variety of foods. Our menus are posted on the bulletin board located in the hallway at the entrance of the child care so that you can see what your child is eating each day. Any changes to the menus are noted.

We are always eager to hear new ideas and would appreciate your suggestions. Please send us an email at GCCC

Allergies/Dietary Concerns

If your child has allergies or dietary restrictions, please speak to either of the Directors or Program Leader so that all necessary forms are filled out to ensure that your child's needs are being met. We ask that you book a time to speak with management, as we need to ensure we can set aside time to meet with you. We will do our best to accommodate children with food restrictions, however in some cases parents may be asked to supply foods in place of restricted items i.e., gluten free bread and pasta.

Ganaraska Child Care Policies

In any type of business there are policies and procedures in place for many reasons and hours of operation are determined. For us as a child care centre we are no different as we are a business and there are policies and procedures that we implement for all of families to follow and abide by.

Childcare policies are an integral part of the day-to-day operation of a childcare centre. They are required under the Child Care and Early Years Act, 2014 (Ministry of Education supports licensees with compliance) and do provide essential information and guidance for both parents and staff. Policies are reviewed on an annual basis and changes made if necessary. Comments or suggestions are welcome and are taken to the Board level for discussion.



Child Care Centre Anaphylactic Policy and Procedures

Name of Child Care Centre: Ganaraska Child Care Centre -Riverside Site

Date Policy and Procedures Established:

Date Policy and Procedures Updated: 2024

Purpose

Anaphylaxis is a serious allergic reaction that can be life-threatening. It requires avoidance strategies and immediate response in the event of an emergency. These policies and procedures are intended to help meet the needs and save the lives of children with severe allergies and provide relevant and important information on anaphylaxis to parents, staff, students, volunteers and visitors at the child care centre.

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

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

Policy

Individualized Plans and Emergency Procedures for Children with Life-Threatening/Anaphylactic Allergies

- Before attending the child care centre, the supervisor/designate will meet with the parent of a child to obtain information about any medical conditions, including whether the child is at risk of having or has anaphylaxis.
- Before a child attends the child care centre or upon discovering that a child has an anaphylactic allergy, an individualized plan and emergency procedures will be developed for each child with anaphylaxis in consultation and collaboration with the child's parent, and any regulated health professional who is involved in the child's care that the parent believes should be included in the consultation (the form in Appendix A may be used for this purpose).
- All individualized plans and emergency procedures will include a description of symptoms of an anaphylactic reaction that are specific to the child and the procedures to be followed in the event of an allergic reaction or other medical emergency based on the severity of the child's symptoms.
- The individualized plan and emergency procedures for each child will include information for those who are in direct contact with the child on a regular basis about the type of allergy, monitoring and avoidance strategies and appropriate treatment.
- All individualized plans and emergency procedures will be made readily accessible at all times to all staff, students and volunteers at the child care centre and will be kept on the board where the allergy list is located and in the attendance binder
- **All** individualized plans and emergency procedures will be reviewed with a parent of the child every three months or when parent informs child care of change in the individual plan and emergency procedures plan to ensure the information is current and up to date.
- Every child's epinephrine auto-injector must be carried everywhere the child goes.
- If child experiences any exposure to a possible allergen and is experiencing any symptoms staff must alert another staff. First staff stays with child until further medical helps arrive. Staff calls parent immediately and or call 911 (being careful to give accurate directions to the child care centre (81 Mill Stret Port Hope Ontario)

Strategies to Reduce the Risk of Exposure to Anaphylactic Allergens

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

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

Rules for Parents Who Send Food with their Child

- Ensure that parents label food brought to the child care centre with the child's full name and if applicable, the date the food arrived at the child care centre.
- Parents must advise the child care centre of all ingredients in food supplied by the parent or any ingredients to which children may be allergic.
- Anaphylaxis Food Policy will be included in Parent Handbook for parent to read
- Outside Food Policy will be included in the Parent Handbook for parent to read
- Bagged Lunch Policy will be included in the Parent Handbook for parents to read

Communication Plan

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

- Parents will be encouraged not to bring foods that contain ingredients to which children may be allergic.
- Parents and families will be informed about anaphylactic allergies and all known allergens at the child care centre through the parent handbook, class dojo or by email.
- A list of all children's allergies including food and other causative agents will be posted in all cooking and serving areas, in each play activity room, and made available in any other area where children may be present. Each attendance binder will have allergy list as well.
- Each child with an anaphylactic allergy will have an individualized plan and emergency procedures that detail signs and symptoms specific to the child describing how to identify that they are having an allergic reaction and what to do if they experience a reaction.
- Each child's individualized plan and emergency procedures will be made available and accessible wherever the child may be present while receiving child care.
- The caterer, cook, individuals who collect groceries on behalf of the child care centre and/or other food handling staff, where applicable, will be informed of all the allergies at the child care centre, including those of children, staff, students and volunteers. An updated list of allergies will be provided to the caterer or cook as soon as new allergies are identified. The supervisor or designate will communicate with the caterer/cook about which foods are not to be used in food prepared for the child care centre and will work together on food substitutions to be provided.
- The child care centre will communicate with the Ministry of Education by reporting serious occurrences where an anaphylactic reaction occurs in accordance with the established serious occurrence policy and procedures.
- This communication plan will be continually reviewed to ensure it is meeting the needs of the child care centre and that it is effectively achieving its intended result.
- It is up to the parent to keep the child care informed of any changes that occur with their child as well as the child care staff to report any changes they see to the parent.

Drug and Medication Requirements

- Where drugs or medications will need to be administered to a child in response to an anaphylactic reaction, the drug and medication administration policy will be followed including the completion of a parental authorization form to administer drugs or medications.
- Emergency allergy medication (e.g. oral allergy medications, puffers and epinephrine auto-injectors) will be allowed to remain unlocked or carried by children with parental authorization so that they can be administered quickly when needed.

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, except where written parental authorization to administer has been obtained (e.g. hand sanitizer).

Training

- Management team will ensure all staff, students and volunteers receive training from a parent of a child with anaphylaxis on the procedures to follow in the event of a child having an anaphylactic reaction, including how to recognize the signs and symptoms of anaphylaxis and administer emergency allergy medication.
- Where only the supervisor/designate has been trained by a parent, the supervisor/designate will ensure training is provided to all other staff, students and volunteers at the child care centre.
- Training will be repeated annually, and any time there are changes to any child's individualized plan and emergency procedures.
- A written record of training for staff, students and volunteers on procedures to be followed for each child who has an anaphylactic allergy will be kept, including the names of individuals who have not yet been trained. This will ensure that training is tracked, and follow-up is completed where an individual has missed or not received training. The form in Appendix B may be used for this purpose.

Confidentiality

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

Additional Policy Statements

Consider including additional policy statements, as applicable, e.g. what the policy will be regarding children with anaphylaxis who do not have epinephrine on site, what to do if a child returning from school does not arrive to the child care centre with their emergency allergy medication, how to return medication for discharged children, how many epinephrine auto-injectors will be required for each child, etc.

Children who do not have their proper medication (epinephrine) on site will not be allowed to stay at the child care until medication is on site. If noticed after child arrives parent will be called immediately to inform them about medication not on site and that child will need to be picked up till medication is brought to the centre.

If child comes from school without having the proper medication on site, parent will be called to inform and pick up will be required until medication is on site.

Any child that has been withdrawn from the centre and medication has not been returned parent will be notified to come and pick up and any forms signed off on.

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



Outside Food Policy

Ganaraska Child Care Centre encourages a supportive nutrition environment by not allowing outside food or beverages to be brought in by parents/caregivers and offers children the same meals and snacks, at regularly scheduled times.

By not having outside food or beverages within the centre gives the children opportunity to try a variety of safe and nutritious foods to help develop healthy eating habits.

When no outside food is brought into the centre:

- It provides safer and inclusive eating environments for children with food allergies and other restrictions.
- Parents/caregivers are aware of all the foods being offered to their children.
- Food safety can be ensured and monitored through the entire process of food purchasing, preparation and serving.

Exceptions to this policy would include:

- Special dietary concerns (such as food allergies).
- Alternate arrangements (bagged lunches for trip days- see bagged lunch policy)
- Emergency situations where our kitchen facility is unusable (power outage or departure from the centre)
- We will reach out to the health unit for direction if a outside food has been requested to come in.

If a child needs additional meals or snacks here at the centre, please speak directly to the Administrative Director and Supervisor to discuss arrangements.

Here at the centre to celebrate a child's birthday we can:

- Make birthday crown child can wear
- Be leader of the day
- Special birthday plate to be used at lunch
- Special background music
- Sing Happy Birthday
- Bubbles

Other ideas (not food related) can be suggested to the educators.



Bagged Lunch Policy

It is the policy of Ganaraska Child Care Centre to ensure that a bagged lunch policy is in place that is consistent with the Ministry guidelines of nutrition and Canada's Food Guide.

From time to time the centre may ask parents to provide a bagged lunch for their child.

The following guidelines will be in place for bagged lunches:

Lunches should meet the recommendations set out from the Canada Food Guide and lunches should be healthy choices.

Example - lean turkey on whole wheat bun

- carrot sticks
- cheese cubes
- grapes
- water (drink)

Lunches must be peanut and nut free

List of allergies are posted in each room. Children may be required to avoid bringing in other foods depending on children's allergies or illnesses. Please confirm with your child's program room as to what food to avoid as per allergies in the room.

Parents must include an ice pack with the bagged lunches. If the program is going on a trip the centre will use a cooler to store all lunches in, extra ice packs will be provided.

High sugary foods and drinks (candy, chips, chocolate, pop,) are to be avoided due to low nutrient value and high sugar content.

Lunches, drinks and food containers must be clearly labelled with child's name.

If a child forgets their lunch, the centre will provide a lunch consisting of a sandwich (meat, cheese or wow butter) vegetable sticks, fruit and water to drink.

If at any time the centre feels that bagged lunches are not following the guidelines, parents will be notified, and healthy suggestions will be made.

Written instructions from the parent are required for children younger than 44 months of age.



Health and Wellness Policy

In order to provide quality child care and prevent the spread of illness within the child care setting, our staff observes and promotes proper health and sanitary practices at all times. Any staff, students or visitors showing signs of illness will be excluded from the centre.

Upon arrive children's hands are washed or sanitized.

Staff washes their hands frequently. Children are encouraged to cough in their sleeve, wash their hands after blowing their noses, and after each visit to the washroom.

If your child displays any of these conditions while in the child care programs you will be called to make suitable arrangements for immediate pick up.

Child's temperature is based and taken on the child care centre thermometers (ear and non body touch thermometer). We understand that parents may get home and take temperature on home thermometers and call and say child did not have fever, we have to base our 24-hour policy from the temperature take from the child care and ask that it be respected.

If your child is not well enough to participate in the entire program, please do not bring them to the centre and make alternate arrangements for care.

If your child is too ill to attend school, he or she is too ill to attend the child care centre programs.

Please inform the centre of any types or possible illnesses/rashes or health concerns happening with your child. We worked hand and hand with our local health unit and must keep them informed. The centre is required to post any communicable diseases.

When your child is sent home due to illness/infection/fever and medication is required (antibiotics, eye drops, etc.) your child MUST be free of fever (without fever reduced medication) and symptoms for 24 hours (48 hours if you have nausea, vomiting and or diarrhea) before returning to the child care centre.

To minimize the spread of head lice in our programs, we have a nit free policy. Children who are found to have head lice (nits and/or live lice) will be sent home for treatment and will not be allowed to return until they are nit free.

The start of the 24-48 hours is at 5:30pm of the day your child goes home

Illness Chart

The children are checked daily for signs of illness. Parents will need to make alternate child care arrangements and seek medical attention for their child if any of the following conditions are present:

| <u>Symptoms</u> | <u>Action</u> |
|--|--|
| Fever of 38 c or 100.4 F or greater | 24 hours free and clear (without fever reducing medication) |
| Diarrhea 1 – 2 bouts | 48 hours free and clear |
| Vomiting | 48 hours free and clear |
| Undiagnosed skin rash (chicken pox, impetigo, fifth disease, hand foot and mouth, roseola etc.) | Doctors note (is it contagious?) |
| Acute colds, runny nose, and eyes. | Remain home until symptoms have improved at least 24 hours. |
| Red, itchy painful eyes, discharge/goop from eyes. | Refer to the common childhood illnesses reference sheet. |
| Headache – Stiff neck | At the discretion of management. (Can your child participate in program?) |
| Unusual tiredness/lethargic | Unable to participate in the program |

Common Childhood illnesses Reference Sheet

| Disease | Symptoms | Transmission | Contagious period | Treatment | Prevention | Exclusion Requirements |
|--|--|--|--|--|---|--|
| Chicken Pox (Varicella) | Viral Infection. Fever and mild cold-like symptoms, followed by a rash. Rash starts with red spots, turn into fluid-filled blisters that dry up and form scabs. | Through the air or Direct contact with the fluid from blisters. Pregnant women can pass it to their baby. | 1-2 days before the rash appears and until all the spots have crusted over (usually 5 days). | Can be treated with antiviral medication, however not usually prescribed. High-risk people should contact their doctor for treatment | Vaccination can prevent chicken pox. Don't touch the fluid in a chicken pox blister. Cover your mouth and nose with a tissue when you cough or sneeze, put in the waste basket or use your upper sleeve or elbow, not your hands. | No Regardless of rash, can attend if children feel well enough to participate in activities. |
| Fifth Disease (Parvovirus B19, Erythema Infectiosum, or "slapped cheek syndrome") | Viral infection. Asymptomatic or only mild symptoms. Fever, headache, mild cold like symptoms, and upset stomach. A red rash will appear on the cheeks ("slapped cheek" rash). A red lace-like rash then appears on the trunk and arms, followed by the remainder of the body. Rash may come and go for over a week. | Direct contact with an infected person's saliva or nasal discharge, coughing or sneezing. or Indirect contact with surfaces contaminated with the virus. | Most contagious a few days before the rash appears. | There is no medication to treat it. Provide support to keep children comfortable. Pregnant staff that has been in contact with the child should contact their doctor. | There is no vaccine to prevent the infection. Frequent hand-hygiene. Clean and disinfect contaminated surfaces and toys. Carefully wash or dispose of articles soiled with nose and throat discharges. | No Regardless of rash, can attend if children feel well enough to participate in activities |
| Hand, Foot, and Mouth Disease (Enterovirus, coxsackie virus) | Viral infection. Fever, headache, sore throat, loss of appetite, lack of energy. Small painful ulcers in mouth, and a rash most often seen on the hands and feet. The rash appears as red spots, often with a blister. | Direct contact with an infected person's saliva and/or stool. or Indirect contact with surfaces contaminated with the virus. | Most contagious during the first week of illness and when symptoms present. Virus can still be found in stool for several weeks. | There is no medication to treat it. Provide support to keep children comfortable. Ease pain, aches, or a fever (medication, rest, hydration). Infection usually goes away in 7-10 days | There is no vaccine to prevent the infection. Frequent hand hygiene. Clean contaminated surfaces and toys. Carefully wash or dispose of articles soiled with nose and throat discharges. | Yes, Children should stay home if they have symptoms |
| Head Lice (Pediculosis) | Tiny wingless, crawling insects that live on the scalp. It does not spread disease. Itchy scalp, but possible to have head lice without any symptoms. Scratch marks or small red lesions like a rash. Lice and nits are usually found very close to the scalp, at the bottom of the neck and behind the ears. | Direct contact through hair-to-hair contact. or Indirect contact by sharing hats, combs, hairbrushes, helmets, and headphones. | As long as live lice and live nits are present. | Treatment (shampoos and rinses) are available at pharmacies without a prescription | Avoid hair-to-hair contact. Do not share combs, brushes, towels, headphones, and clothing that comes into contact with the head. Get rid of lice or nits from items that touch the head such as hats, pillowcases, combs and brushes. Wash in hot water and dry them using the hot setting of the dryer for at least 15 minutes. Clothing and items that are not washable can be stored and sealed in an airtight bag for 2 weeks | Yes Children should be treated and then attend as usual. 'No-nit' policies that keep children with head lice or nits after treatment away from school are not necessary. |

| Disease | Symptoms | Transmission | Contagious period | Treatment | Prevention | Exclusion Requirements |
|---|---|---|--|--|--|---|
| Impetigo (Staphylococcus or Streptococcus) | Bacterial skin infection. Cluster of red bumps or blisters ooze or cause a yellow crust. | Direct contact: touching an impetigo rash or Indirect contact: with bed sheets, towels or clothing that have been in contact with someone's skin. Then another person can pick up the germs from touching those objects | Until blisters have dried up. For Streptococcus - until 24 hours of antibiotic treatment. | Antibiotics taken by mouth or spread on the skin as a cream - prescribed by a doctor | Frequent hand hygiene. Clean and disinfect contaminated surfaces and toys. Carefully wash or dispose of contaminated articles soiled with nose and throat discharges, or fluid from the sores. | Yes Until 24 hours after starting antibiotic treatment. |
| Norovirus | Viral infection. Nausea, vomiting, diarrhea, abdominal cramps, mild fever, headache, muscle aches and fatigue. | Direct contact with an infected person's stool or vomit. or Indirect contact with contaminated surface such as sink, taps, counter, toys, etc. Breathing in air contaminated with Norovirus when an infected person has vomited. | From time when person feels ill until at least 48 hours after symptoms have stopped | There is no medication to treat it. Fluid replacement to help prevent dehydration. | Frequent hand hygiene. Clean and disinfect contaminated surfaces and toys. Carefully wash or dispose of articles soiled with vomit or stool. Follow best practice for diaper changing | Yes Until 48 hours after symptoms have resolved. |
| Pink Eye (Conjunctivitis) | Viral or bacterial infection. Red, itchy, painful eyes Discharge from eyes cause crusting, often during sleep | Direct contact with secretions from a person's eye or nose and from coughing and sneezing. or Indirect contact with surfaces contaminated with the virus or bacteria. | Bacterial – at the time when symptoms begin to 24 hours after antibiotic treatment is started. Viral – as long as symptoms are present | Eye drops or ointment may be required if bacterial infection. | Frequent hand hygiene. Do not share towels/washcloths, pillowcases, and bedding. Clean contaminated surfaces and toys. Carefully wash or dispose of articles soiled with tears or eye discharge, or from coughing or sneezing. | No – if cause is viral. Yes – if cause is bacterial; Until 24 hours after starting antibiotic treatment. Can attend as long as children feel well enough to participate |
| Pinworm (Enterobiasis) | Tiny, white thread-like roundworm that live in the rectum. Pinworms can be uncomfortable, but they do not cause disease. Anal itching, disturbed sleep, irritability. Some children have no symptoms. | Direct Contact when an infected child scratches the itchy area and transfers eggs to another child's mouth. or Indirect contact with contaminated hands or objects such as toys, toilet seats, baths, or bedding. Eggs can live up to 2 weeks outside the body on objects | As long as pinworms are present and have not been destroyed by treatment of the child and their environment. | Oral medication can be prescribed which takes up to 2 weeks to eliminate pinworms, may require a second dose 2 weeks later. Other family members may need to be treated at the same time to avoid re-infestation | Frequent hand-hygiene. Change and clean bed linens and underclothes of infected children often without shaking (which will scatter eggs). Open blinds and curtains in the bedrooms during the day – eggs are sensitive to sunlight. If laundry is being sent home - keep in sealed plastic bags. Bathing children in the morning using a shower or stand-up tub bath. Advise children and staff to keep fingernails short and avoid nail-biting. | Yes, Children can return the day after treatment is given. |
| Rotavirus | Viral infection. Vomiting, fever, watery diarrhea, dehydration. | Direct contact with stool or vomit or touching hands of an infected person. or Indirect contact with surfaces contaminated with the virus. | Upon onset of symptoms until approximately 8 days after onset. | There is no medication to treat it. Fluid replacement to help prevent dehydration | Vaccination can prevent Rotavirus. Follow best practice for diaper changing. Clean and disinfect contaminated surfaces, toys, clothing, and linen. | Yes Until 48 hours after symptoms have resolved |

| Disease | Symptoms | Transmission | Contagious period | Treatment | Prevention | Exclusion Requirements |
|--|--|---|---|---|---|--|
| Roseola Infantum (Sixth Disease) | Viral infection. A fever appears suddenly and lasts 3-5 days. When the fever ends, a rosy-pink raised rash usually develops on the face and body. The spots (rash) will turn white if you press on them and they may have a lighter colour ring around them. | Direct contact with saliva, nose and throat secretions or Indirect contact from coughing or sneezing by droplets through the air. | Most contagious during the fever stage, before the rash develops | There is no medication to treat it. Provide support to keep children comfortable. Ease pain, aches, or a fever (medication, rest, hydration). | Frequent hand hygiene. Cover your mouth and nose with a tissue when you cough or sneeze, put in the waste basket or use your upper sleeve or elbow, not your hands. Do not share eating or drinking utensils. Clean and disinfect contaminated surfaces and toys | No Regardless of rash, can attend as long as children feel well enough to participate in activities |
| Scabies | Skin condition caused by tiny insects called mites. They burrow under the skin and lay eggs. Scabies can be uncomfortable, but they do not directly cause disease. Itchy red rash, usually between fingers and toes, wrists, or groin with thread-like lines, tiny red bumps, and scratch marks. | Direct contact (prolonged) with infested skin or Indirect contact with clothing or personal items of an infested person. The mites can live off the skin up to 3 days. | As long as person is infested and until mites and eggs are destroyed by treatment | Cream or lotion that is prescribed by a doctor. Everyone who lives in the home and anyone who has had close skin-to-skin contact should be treated at the same time. Treatment may need to be repeated. | Cream or lotion that is prescribed by a doctor. Everyone who lives in the home and anyone who has had close skin-to-skin contact should be treated at the same time. Treatment may need to be | Wash all bed linens, towels and clothes in hot water and dry in a dryer at the hottest setting. Items that are not washable can be sealed in an airtight plastic bag for 1 week to kill the mites. |
| Strep Throat | Bacterial Infection (group A strep bacteria). Sore, red throat; fever, tiredness, headache, sores around mouth, swollen glands in the neck. | Direct contact from saliva or nasal discharge or Indirect contact through coughing or sneezing as droplets through the air. | From onset of illness until 24 hours of antibiotic treatment received. | Antibiotics may be prescribed by a doctor. Provide support to keep children comfortable. Ease pain, aches, or a fever (medication, rest, hydration). | Frequent hand hygiene. Cover your mouth and nose with a tissue when you cough or sneeze, put in the waste basket or use your upper sleeve or elbow, not your hands. Do not share eating or drinking utensils. Clean and disinfect contaminated surfaces and toys | Yes Until 24 hours after starting antibiotic treatment and if children feel well enough to participate in activities. |
| Scarlet Fever | Bacterial Infection (group A strep bacteria). Similar to strep throat but includes a pink-red skin rash that feels like sandpaper and "strawberry" tongue (white coating on tongue with bright red patch) | Direct contact from saliva or nasal discharge or Indirect contact through coughing or sneezing as droplets through the air. | From onset of illness until 24 hours of antibiotic treatment received. | Antibiotics may be ordered by health care provider. Provide support to keep children comfortable. Ease pain, aches, or a fever (medication, rest, hydration). | Frequent hand hygiene. Cover your mouth and nose with a tissue when you cough or sneeze, put in the waste basket or use your upper sleeve or elbow, not your hands. Do not share eating or drinking utensils. Clean and disinfect contaminated surfaces and toys. | Yes Until 24 hours after starting antibiotic treatment And if children feel well enough to participate in activities. |
| Gastrointestinal Illness: Vomiting and/ or diarrhea | Viral or bacterial infection. Often cause is unknown. | Direct contact with stool or vomit or touching the hands of an infected person. or Indirect contact with surfaces contaminated with the virus and through coughing or sneezing as droplets through the air. | Variable – usually upon onset of symptoms to 48 hours after symptoms have resolved. | No specific treatment. Fluid replacement to help prevent dehydration. | Frequent hand hygiene especially after changing diapers and toileting. Clean contaminated surfaces, toys, clothing, and linen. | Yes Until 48 hours after symptoms have resolved. |

| Disease | Symptoms | Transmission | Contagious period | Treatment | Prevention | Exclusion Requirements |
|---|---|--|-------------------|--|--|--|
| Respiratory Illness – Cold and flu-like symptoms | Usually, a viral illness. Often unknown cause | Direct contact from saliva or nasal discharge. or Indirect contact with surfaces contaminated with the virus | Variable | There is no medication for treatment. Provide support to keep children comfortable. Ease pain, aches, or a fever (medication, rest, hydration) | Frequent hand hygiene. Cover mouth and nose when you cough or sneeze. Do not share cutlery, glasses etc. Clean contaminated surfaces and toys. | Yes Remain home until fever and symptoms have improved at least 24hours. Wear a mask for 10 days after symptoms started unless COVID19 test is negative. |

Direct Contact: a person carrying germs in the nose, mouth, eyes, stool, or skin lesions usually contaminates their hands, then spreads these germs by touching or being touched by others.

Indirect Contact: an infected person transfers germs by touching or mouthing an object (i.e., toy, doorknob, used tissue) that is then touched by another person which can cause infection when that person touches their eyes, nose, or mouth.

Please note - all the information on the common childhood illness chart is directly from the KPR health unit.

Drug and Medication Administration Policy and Procedures

Date Policy and Procedures Updated: 2022

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), with the exception of sunscreen, lotion, lip balm, bug spray, hand sanitizer and diaper cream that is not used for acute, symptomatic treatment. For the purpose of this policy, drugs and medications fall into the following two categories, unless otherwise specified:

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

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

- ensure children 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 or if expired.
- 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.

Allergy lists will be posted in all program rooms, kitchen area and bathrooms. One copy in each program attendance binder.

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 Authorization for Medication Administration form must be accompanied by a doctor's note for over-the-counter medications.
- The authorization must include a schedule that sets out the times the drug or medication is to be given and the amounts to be administered.
- Where a drug or medication is to be administered to a child on an "as needed" basis (i.e., there is no specific schedule or time of the day for administration), the drug or medication must be accompanied with a doctor's note (for over-the-counter medication only) 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, (for over-the-counter medication only), including observable symptoms. Examples may include:
 - 'when the child has a fever of 38 degrees Celsius or 100.4 degrees Fahrenheit or chills
 - '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' month to month to ensure the dosage continues to be accurate (e.g., based on the child's age or weight).
- If sunscreen, lotion, lip balm, bug spray, hand sanitizer and diaper cream are non-prescription and/or are not for acute (symptomatic) treatment, and due to their longer-term daily usage, these products:
 - must have a blanket authorization from a parent on the enrolment form.
 - can be administered without an Authorization for Medication Administration form; and do not require record-keeping.

Drug and Medication Requirements-

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

- All drugs and medications must be stored in their original containers as supplied by a pharmacist, or their original packages. Medications that have been removed from their original package or transferred into a different container will not be accepted or administered to children.
- All drug or medication containers must be clearly labelled with:
 - The child's full name.
 - The name of the drug or medication.
 - The dosage of the drug or medication.
 - Instructions for storage.
 - Medication amounts in ML's only.
 - 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, except where written parental authorization to administer has been obtained (e.g., hand sanitizer).

Drug and Medication Handling and Storage

- All drugs or medications will always be kept inaccessible to children 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).
- Backpacks are to be placed out of reach of children when medications are in them.
- In case of an emergency, all staff, students, and volunteers will be always made aware of the location of children's emergency medications.
- Emergency medications will be brought on all field trips, evacuations, and off-site activities.
- Any topical products or drugs/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 must 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). (Program message book)
- 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.
- Individual Support Plan with Medical Needs copy will be in each program attendance binder.

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.

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

Any child with an Anaphylactic allergy that does not have their epinephrine here at the centre the parent will be notified immediately to bring the medication or ask to pick up the child.

If any unknown Anaphylactic allergies arise during centre hours a parent will be called for the child to be picked up and taken for medical assessment.

If at any time children who are known to have medication through out the day, the staff will ask the parent in the morning if they have the medication and deal accordingly.

All medication boxes are in each program room (one for non –fridge medication and one for the fridge) keys are hanging in the room or are the fridge.

If a child is withdrawn, the centre will get a hold of the parent to inform them that there is medication that was left and needs to be picked up. If no contact is made, then medication will be taken back to a local pharmacy to discard.

All medication will be verified monthly for any expired dates.

Never leave medication of any kind in your child's basket or backpack

Always hand deliver to staff.

Child Care Centre Supervision of Students and Volunteers Policy

Purpose

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

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

- 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.

If policies and procedures are not being met at any given time students and volunteers may be asked to leave the child care centre if the operator feels that safety of the children, staff or parents are being jeopardized.

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 Aid Society

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.

Students and/or volunteers must:

Always maintain professionalism and confidentiality, 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.

Additional Procedures

All students who come into the child care centre will be there for the purpose of helping out and assisting the child care staff and carrying out any placement activities or duties set out by the school or college which will be discussed with the staff in the room.

Proper permission forms (parental consent) and procedures must be followed prior to any involvement with the children here at the centre.

If at any time there are offsite excursions, students and volunteers may accompany the program rooms however:

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.

Students and volunteers will help and assist where needed.

Behaviour Guidelines

Upon admission to the centre the Behaviour Guidance Policy is discussed with each parent.

The safety and well being of each child is the primary concern. No child will be permitted to express him/herself in a manner that is inappropriate and dangerous at the centre and may become harmful to others or themselves.

Children and staff alike will be treated with mutual respect. Should inappropriate behaviour continue and becomes a concern, a meeting with the Directors and the parents will be held. The best course of action will be determined at that time. Should a decision not be reached, a further interview with a representative from the Parent Board of Directors will be necessary. All decisions will be made under the advisement of staff observations and support of the Directors. A final decision will be made by the Parent Board of Directors.

Behavior Guidance Policy

The primary goal of the Ganaraska Child Care Centre is to provide each child with a safe, warm, and nurturing environment in which to spend his/her day. As a team the staff works together to ensure a secure atmosphere in which the child will learn, grow, and develop.

Inappropriate behaviours can be defined as frequent actions that can harm or injure another person as well as create disorder in a program. Some examples of inappropriate behaviours include kicking, swearing, hitting, throwing of furniture, or inflicting bodily harm to oneself or others.

When these actions escalate to parental complaints or physical harm to a child, withdrawal from the centre will be recommended. Not all children are suited to large group settings and individual needs must be assessed so that a child is receiving the best care he/she is entitled to receive.

Child Guidance

The word discipline describes the teaching/learning process whereby children develop socially acceptable behaviour through the establishment of clear, concise limits. The staff at the centre focuses on the behaviour, not just the child. When unacceptable behaviour occurs, the trained staff reminds the child of the limits, distracts, or diverts when appropriate, offers choices and redirects. The centre complies with all the requirements of the Child Care Early Years Act. The use of positive behavioural strategies is promoted with every age group i.e., praise, encourage and other positive reinforcement.

There is no corporal or humiliating discipline used at any time or under any circumstance.

Please see the Prohibited practices and positive practices policy below.

Ganaraska Child Care Centre

Safe Arrival and Dismissal Policy and Procedures

Name of Child Care Centre: Ganaraska Child Care Centre

Date Policy and Procedures Established: December 2023

Date Policy and Procedures Updated:

Purpose

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

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

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

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

Policy

General

- Ganaraska Child Care Centre will ensure that any child receiving child care at the child care centre is only released to the child's parent/guardian or an individual that the parent/guardian has provided written authorization the child care centre may release the child to.
- Ganaraska Child Care Centre will only dismiss children into the care of their parent/guardian or another authorized individual. The centre will not release any children from care without supervision.
- Where a child does not arrive in care as expected or is not picked up as expected, staff must follow the safe arrival and dismissal procedures set out below.

Additional Policy Statements

Only persons listed in your child's file will be permitted to pick up your child. If anyone else is picking your child up other than on pick up list, you need to call the centre to inform us. Photo I.D. is required to be shown. Parents must notify the centre by 8:30 am daily by either phone or class dojo if your children will not be attending for any of our programs, including before and after. If in a situation that a school aged child leaves during the school day, Parents must inform the centre by 2:45 pm as our educators are gathering their numbers and preparing to leave for the schools

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 child's registration forms/file or where the individual is not listed, ask the parent/guardian to provide authorization for pick-up in writing over their child's room class dojo.
 - document the change in pick-up procedure in the daily written record.
 - sign the child in on the classroom attendance record.

Where a child has not arrived in care as expected

1. Where a child does not arrive at the child care centre and the parent/guardian has not communicated a change in drop-off (e.g., left a voice message or advised the closing staff at pick-up), the staff in the classroom must:
 - inform the management team in the child care office and they must commence contacting the child's parent/guardian no later than 9:00 am. through class dojo or a call home and leave message.
 - If all attempts have been made to contact parent/guardian and no communication has been made, child will be marked absent.
2. Once the child's absence has been confirmed, program staff shall document the child's absence on the attendance record and any additional information about the child's absence in the daily written record.

Releasing a child from care

1. The staff who is supervising the child at the time of pick-up shall only release the child to the child's parent/guardian or individual that the parent/guardian has provided written authorization that the child care may release the child to. Where the staff does not know the individual picking up the child (i.e., parent/guardian or authorized individual),
 - confirm with another staff member that the individual picking up is the child's parent/guardian/authorized individual.
 - where the above is not possible, ask the parent/guardian/authorized individual for photo identification and confirm the individual's information against the parent/guardian/authorized individual's name on the child's file or written authorization.

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

1. Where a parent/guardian has previously communicated with the staff a specific time or timeframe that their child is to be picked up from care and the child has not been picked up by 5:25 pm the program staff, management or designate shall contact the parent/guardian by phone call, or class dojo message sent 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, program staff, management or designate must try [and call again and leave a message for the parent/guardian to call the centre immediately. 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 wait to 5:30 pm and then proceed 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 5:30 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 inform that the authorized person has not come for pick-up of child and discuss next steps and proceed accordingly as per parent direction.
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 other authorized individuals on the child's file.
4. Where the staff is unable to reach the parent/guardian or any other authorized individual listed on the child's file (e.g., the emergency contacts) by 6:00 pm, the staff shall proceed with contacting the local Children's Aid Society (CAS) and/or Police Services Staff shall follow the CAS's direction with respect to next steps as well Police Services if needed.

Dismissing a child from care without supervision procedures

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

Additional Procedures

Parent/Guardian must send written authorization to the child care office do to any changes to their child's drop off or pick up schedule. Examples: late due to doctors' appointment, not coming in for the day, leaving early or someone else dropping off or picking up. For Ministry requirements written authorizations will be printed off and put in child's file.

Glossary

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

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

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

Regulatory Requirements: Ontario Regulation 137/15

Safe arrival and dismissal policy

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.

Depending on the offence other disciplinary actions could include professional development and/or other requirements to be done within a time frame for improvement.

If a major contravention of the prohibited practice policy indicates child abuse the Children's Aid Society will be called immediately by the Directors/Supervisor. The Board of Directors will consult with the Directors or Supervisor and decide on disciplinary action up and including suspension and dismissal. All unacceptable practices will be documented and filed in the staff member's file.

Positive Practices that staff could implement:

- Talking with the child
- Praise the positive interaction.
- Keep routines/rules simple and easy to understand.
- Encourage children to make positive choices.
- Teaching the children to problem solve
- Respect the child.
- Staff setting good examples.

Our educators and families work together and have clear common expectations of children while the children are in the child care setting. Children in the child care setting will:

- Not be yelled at, belittled, ridiculed, or threatened.
- Not receive deliberate use of harsh or degrading words/measures that would humiliate the child or undermine their self respect.
- Not be placed in an isolated or non isolated location for the purpose of confining the child
- Not deprive a child of the basic needs which includes food, shelter, clothing, or bedding.
- Not receive corporal punishment.

The above behaviours by an Educator, student or volunteer towards the children will not be tolerated and have immediate grounds of disciplinary action which may include termination of employment. If at any time an Educator observes a parent treating a child harshly, they have an obligation to report the incident to the Childs Aid Services, all employees of the child care centre have a professional duty and responsibility to protect children from harm.

The prohibited practices policy is reviewed with all staff, students, and volunteers prior to working here at the centre and annually there after or when there is a change to the policy. The staff is monitored on a quarterly basis by management. Any contravention of the policy may lead to reprimands suspension or dismissal depending on the severity of the offence.

Parental Conduct

Code of Conduct for Parents/Guardians and Emergency Contacts

- All staff are to be treated fairly and with the utmost respect.
- All families treat each other with respect and dignity.
- Always act in the best interest of the children, families, and staff
- Confidentiality is to be upheld.
- Any parent/Guardian or Emergency contact who exhibited any type of disruptive behaviour that staff feel is unsafe will be asked to leave the centre immediately (failure to do so will result in local authorities being called)
- Any person picking up a child here at the centre and staff feel are under the influence of any type of alcohol or drugs will not be permitted to take the child and local authorities will be called.

Ganaraska Child Care Inc.
Prohibited Practices and Positive Practices Policy

The primary goal of the Ganaraska Child Care Centre Inc. is to provide each child with a safe environment in which to spend his/her day. The children and staff will strive together to ensure a secure atmosphere in which they can grow and develop. Inappropriate behaviours exhibited in a program hinder potential growth and development of the children and need to be addressed accordingly.

Depending on the offence other disciplinary actions could include professional development and/or other requirements to be done within a time frame for improvement:

- Duty to Report Training and yearly review

If any contravention of the prohibited practice policy indicates child abuse the Children's Aid

Society will be called immediately by the management team.

Management team will inform and consult with the Board of Directors. Disciplinary action including Administrative Leave and Termination will be determined by the management team with considerations from the Board of Directors. All unacceptable practices will be documented and filed in the staff member's file.

If employees are Registered Early Childhood Educators, management will consult with the College of ECE to determine if a Mandatory Employer Report needs to be filed.

Positive Practices that staff could implement:

- Talking with the child
- Praise the positive interaction
- Keep routines/rules simple and easy to understand
- Encourage children to make positive choices
- Teaching the children to problem solve
- Respect the child
- Staff setting good examples

Our educators and families work together and have clear common expectations of children while the children are in the child care setting. Children in the child care setting will:

- Not be yelled at, belittled, ridiculed, or threatened
- Not receive deliberate use of harsh or degrading words/measures that would humiliate the child or undermine their self respect.
- Not be placed in an isolated or non isolated location for the purpose of confining the child
- Not deprive a child of the basic needs which includes food, shelter, clothing, or bedding.
- Not receive corporal punishment.
- Not have bodily harm inflicted which includes making children eat or drink against their will

Any behaviours by an Educator, student or volunteer towards the children will not be tolerated and have immediate grounds of disciplinary action which may include termination of employment. If at any time an Educator observes a parent treating a child harshly, they have an obligation to report the incident to the Childs Aid Services, all employees of the child care centre have a professional duty and responsibility to protect children from harm.

Administrative Leave with Pay Policy will be implemented Pending an Investigation of Prohibited Practices.

The prohibited practices policy is reviewed with all staff, students, and volunteers prior to working here at the centre and annually there after or when there is a change to the policy. The staff is monitored on a quarterly basis by management. Any contravention of the policy may lead to reprimands, administrative leaves or termination depending on the severity of the offence.

Management Team will meet with the Educator for discussion and next steps as per the Prohibited Practices on following page

The following prohibited practices by a staff member, student or volunteer toward the children is unacceptable and will not be tolerated at the centre at any time and will be disciplined as follows:

| <u>Prohibited Practices</u> | <u>1st Offence</u> | <u>2nd Offence</u> |
|---|---|---|
| Use of harsh or degrading measures or threats or use of derogatory language directed at or used in the presence of a child that would humiliate, shame, or frighten the child or undermine his or herself — respect, dignity, or self-worth | <u>Step 1:</u> Written Reprimand and documentation Administrative Leave possible pending call to CAS and Ministry | <u>Step 1:</u> Administrative Leave <u>Step 2:</u> Termination or Return to Work based on outcome of investigation |
| Deprivation of Basic Needs including food, drink shelter, sleep, toilet use, clothing, or bedding | <u>Step 1:</u> Administrative Leave and documentation <u>Step 2:</u> Termination or Return to Work based on outcome of investigation | |
| Locking the exits of a child care centre for the purpose of confining the child or confining the child in an area or room without adult supervision, unless such confinement occurs during an emergency and is required as part of the licensee's emergency management policies and procedures | <u>Step 1:</u> Administrative Leave and documentation <u>Step 2:</u> Termination or Return to Work based on outcome of investigation | |
| Physical restraints of the child such as confining the child to a highchair, car seat, stroller, or other devices for the purpose of discipline or in lieu of supervision, unless the physical restraint is for the purpose of preventing a child from hurting himself, herself, or someone else and is only used as a last resort and only until the risk of injury is no longer imminent. | <u>Step 1:</u> Administrative Leave and documentation <u>Step 2:</u> Termination or Return to Work based on outcome of investigation | |
| Corporal Punishment of a child | <u>Step 1:</u> Administrative Leave and documentation <u>Step 2:</u> Termination or Return to Work based on outcome of investigation | |
| Inflicting any bodily harm on children including making children eat or drink against their will | <u>Step 1:</u> Administrative Leave and documentation <u>Step 2:</u> Termination or Return to Work based on outcome of investigation | |

Bullying, Harassment & Violence

Ganaraska Child Care Centre provides a warm working environment where all individuals are treated with respect and dignity. Under no circumstances any form of bullying, harassment or violence will not be tolerated. **This includes Staff, Children and Parents.** Ganaraska Child Care Centre will take all necessary measures to protect staff and prevent incidents.

Children – Children towards other children and their educators

Physical aggression directed by children towards children or educators could result in the children being sent home for the day.

Parents/Guardians – Towards Management/Educators

Verbal or Physical Aggression directed by a Parents/Guardian or adult towards any staff including the management team will result in this person being asked to leave the premises immediately and or dismissal from the child care centre. This could result in immediate termination of your child care spot. Some situations may be taken to the Parent board for discussion. Based on severity of the situation you may be given a time frame for dismissal. You will be invoiced until your termination date. Any outstanding fees will be sent to collections.

Polices and Procedures

Ganaraska Child Care Centre is licensed by the Ministry of Education – Child Care Sector

We follow all guidelines, procedures and direction set from the Ministry of Education, Ministry of Health, and our local Public Health unit.

Parents/Guardians are expected to abide by the Policies and procedures that are set by Ganaraska Child Care centre. If any time the Staff feel like they are being challenged, the situation will be taken to the Parent Board of Directors.

Extreme Weather and Situations

Extreme Weather Policy

The safety of the children and staff is top priority. When weather becomes a safety issue, emergency decisions may be made by the Directors and or Program lead with consultation of the Board Chair/Board Vice Chair.

Decisions to close the centre for part/full day are given careful consideration as we understand the impact it will have on our families.

If we need to close the centre, every measure will be taken to ensure that those involved will be contacted immediately through class dojo. Please make sure you inform the child care office the best way to reach you.

We do monitor the weather through Environment Canada. Weather can affect our outdoor activities time to time -intense heat, extreme cold, rainfall and wind-chill etc... We may reduce our outdoor time due to those weather conditions. Again, our top priority is always the safety of the children and staff.

Please ensure that we have current and up to date information for your child and those on the emergency contact lists.

Inclement Weather

The child care centre will remain open unless otherwise directed by the Parent Board of Directors or other circumstances beyond our control.

Reasons of but not limited to

Extreme weather (examples blizzard or tornado)

Power Outages: Upon opening of centre and for extended period of time up to three hours- unable to maintain a 20-degree indoor temperature.

Any serious situation that will jeopardize the health and well being of the entire centre during normal operating hours of 6:30am to 5:30pm.

Closure of centre full day: By either Town of Port Hope, Centre Board of Directors/Management team (no fee charged for the day) Parents will be notified as soon as possible through Class/office dojo message will be sent.

Early Closure: By either Town of Port Hope or by the Centre Board of Directors/Management team. Parents will be notified as soon as decision has been made parents will be notified through class/office dojo of early closing and time frame for pick up.

Delayed Opening: By either Town of Port Hope or by the Centre Board of Directors/Management team. Parents will be notified as soon as possible through class/office dojo message will be sent.

Shelter in Place

In an event of an environment or weather-related situation, where it is necessary to keep all children/staff within the child care centre to protect them from external situations. Child Care doors will be secured.

Concerns/Complaints/Compliments

If at any time you have a concern, complaint, or compliments, please feel free to speak with the Directors or Program leader. We pride ourselves on providing quality programs that enrich the development of each child within our care. Please see below **“Parents Issue and Concern Policy and Procedures” in this handbook**

Parent Issues and Concerns Policy and Procedures

Purpose

The purpose of this policy is to provide a process for parents/guardians, and the child care centre to use when parents/guardians bring forward issues/concerns.

Policy

Ganaraska Child Care Centre encourages parents/guardians to have a voice when it comes to their children and the role the child care plays as child care providers. 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. All issues and concerns raised by parents/guardians are taken seriously by Ganaraska Child Care Centre 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. All issues and concerns can be brought forth verbally or written and will be addressed with the utmost respect, an initial response to an issue or concern will be provided to parents/guardians within 1 business day. The person who raised the issue/concern will be kept informed throughout the resolution process.

Confidentiality

Every issue and concern will be treated confidentially, and every effort will be made to protect the privacy of parents/guardians, children’s 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

Ganaraska Child Care maintains high standards for positive interaction, communication, and role-modeling for children. Under no circumstances is it appropriate to scream, yell or talk down to any staff or management. In all cases we are adhering to public health rules and centre policies. Harassment and discrimination will therefore not be tolerated from any party. If at any point a parent/guardian, child care provider and/or staff feel uncomfortable, threatened, abused or belittled, they may immediately end the conversation and report the situation to the child care office. As needed any issues or concerns will be brought to the attention of the Parent Board of Directors to discuss further actions, such as the possibility of suspension or termination of your childcare spot.

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 <http://www.children.gov.on.ca/htdocs/English/childrensaidthereportingabuse/index.aspx>

Parent Issue and Concern 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: |
|---|---|--|
| <p>Program Room-Related</p> <p>E.g: schedule, sleep arrangements, toilet training, indoor/outdoor program activities, feeding arrangements, etc.</p> | <p>Raise the issue or concern to:</p> <ul style="list-style-type: none"> ○ the classroom staff directly or Director of operations and or Administrative Director | <ul style="list-style-type: none"> ○ Address the issue/concern at the time it is raised. ○ Arrange for a meeting with the parent/guardian within 1-2 business days or at the most suitable time available. <p>Document the issues/concerns in detail. Documentation should include:</p> <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. <p>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 1-2 business days or as soon as reasonably possible thereafter. Document reasons for delays in writing.</p> <p>Provide a resolution or outcome to the parent(s)/guardian(s) who raised the issue/concern.</p> |
| <p>General, Centre- or Operations-Related</p> <p>E.g.: child care fees, hours of operation, staffing, waiting lists, menus, etc</p> | <p>Raise the issue or concern to:</p> <p>Director of operations and or Administrative Director</p> | <ul style="list-style-type: none"> ○ Address the issue/concern at the time it is raised. ○ Arrange for a meeting with the parent/guardian within 1-2 business days. <p>Document the issues/concerns in detail. Documentation should include:</p> <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. <p>Issues or Concerns will go to the Board of Directors for further direction if needed</p> |

| | | |
|--|--|--|
| <p>General, Centre- or Operations-Related</p> <p>E.g.: child care fees, hours of operation, staffing, waiting lists, menus, etc</p> | <p>Raise the issue or concern to:</p> <p>Director of operations and or Administrative Director</p> | <ul style="list-style-type: none"> ○ Address the issue/concern at the time it is raised. ○ Arrange for a meeting with the parent/guardian within 1-2 business days. <p>Document the issues/concerns in detail. Documentation should include:</p> <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. <p>Issues or Concerns will go to the Board of Directors for further direction if needed</p> |
|--|--|--|

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 1-2 business days or as soon as reasonably possible thereafter. Document reasons for delays in writing.

Provide a resolution or outcome to the parent(s)/guardian(s) who raised the issue/concern.

Issues or Concerns will go to the Board of Directors for further direction.

Meeting will be conducted with all parties involved and decisions will be made on how to proceed forward.

| Name of issue or concern | Steps for parent/Guardian to report issue/concern: | Steps for staff and or licensee in responding to issue/Concern: |
|-----------------------------|---|--|
| Student/Volunteer – related | <p>Raise the issue or concern to:</p> <ul style="list-style-type: none"> ○ The staff responsible for supervising the volunteer or student or Director of operations and or Administrative Director <p>All issues or concerns about the conduct of students and/or volunteers that puts a child's health, safety and well-being at risk should be reported to the Director of operations and or Administrative Director as soon as parents/guardians become aware of the situation.</p> | <p>Document the issues/concerns in detail. Documentation should include:</p> <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. <p>Ensure the investigation of the issue/concern is initiated by the appropriate party within 1-2 business days or as soon as reasonably possible thereafter. Document reasons for delays in writing. Provide a resolution or outcome to the parent(s)/guardian(s) who raised the issue/concern.</p> <p>If it is a concern with a placement student, the contact teacher and college/school will be notified as well.</p> <p>Meeting will be conducted with all parties involved and the appropriate decisions will be made if the student or volunteer can continue to be at the centre.</p> |

Issues/concerns related to compliance with requirements set out in the *Child Care and Early Years Act, 2014* and Ontario Regulation 137/15 must 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

Contacts: Ganaraska Child Care Centre Inc (Riverside) 905-885-4166

Ganaraska Child Care Centre Inc (Port Hope Highschool) 905-885-2637

Email: gcccriverside@outlook.com – General inquires – Riverside site

Email: ganaraskacccc@outlook.com – General inquiries -Port Hope Highschool site

Director of Operations –Sherri Riha RECE

Administrative Director – Carissa Chalmers RECE

Supervisor (Riverside)– Sarah Pethick RECE

Supervisor (Port Hope Highschool) – Corrine Burghall RECE

Office Assistant (Port Hope Highschool) – Tara Nugent E.A

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

Children's Aid Society- 905-372-1821

College of Early Childhood Educators – 1-416-961-855

Personal Privacy Policy

The Ganaraska Child Care Centre is committed to protecting personal information by following current privacy laws. We collect and use personal data to ensure the safety of the children in our care, to comply with government obligations and for statistical purposes.



Parent Handbook

The Parent Handbook is found on our website www.ganaraskachildcare.com

Please acknowledge below that you have read and understand the Parent handbook.

This **MUST** be signed prior to your child's start date.

- ☐ I have read and understand the Parent Handbook provided by Ganaraska Child Care Centre Inc.

Child's Name: _____

Parent's Signature: _____

Date: _____

Please return this page along with registration forms

A copy of this form can be found in the registration package.

Thank you.

Ganaraska Child Care Centre