

*A Bright Beginning Child Care Society*



**BRIGHT BEGINNING  
CHILD CARE CENTRE**

**LICENSING PROGRAM PLAN &  
ADMINISTRATIVE POLICIES AND  
PROCEDURES  
2016  
AS APPROVED**

## Child Discipline/Guidance Policy

### **POLICY:**

To provide a safe, healthy learning environment in which a child can feel safe, secure and nurtured through guidance and redirection that supports and respects each child as an individual. Each child is encouraged and supported to develop positive relationships with peers and staff. Staff will strive to be appropriate role models, showing respect for children, parents, co-workers and their environment.

Parents can therefore expect that staff will:

- Provide clear, simple and consistent limits regarding appropriate behaviours within the program. Such limits will be offered in a positive respectful manner. Harsh or belittling language will not be used at any time. Any child disciplinary action taken will/must be reasonable in the circumstances.
- Demonstrate affection and caring for your child through appropriate forms of verbal and physical interactions
- Maximize opportunities for appropriate and positive behaviour for your child through the programming and activities based on the children's interests.
- Staff will give verbal direction and redirection as the main means of guidance and discipline. Role modeling and guiding children through social interactions and situations that the child is having problems with.
- Staff will guide a child when a feeling or situation may be difficult to express.
- Engage in play with the child to guide them to a "settling" down activity when behaviour has become disruptive to other children.
- In a severe case of meltdown (child throwing, overturning, objects, screaming disruptively), the child will be removed from the room and supervised by the third staff of the room or the director if available. The child will be taken to the office or staff room, whichever one is suitable and/or available at the time. The staff will help the child calm, until he/she is able to regain control of them-selves. The child and staff will engage in reading or another quiet activity until the child is calm, and then the child may return to join his/her classmates. This removal is necessary for the safety of all children and staff involved. If this type of behaviour becomes a concern, an unacceptable behaviour strategy will be prepared with the parents input, refer to the policy below.

Staff will NOT:

- Inflict or cause to be inflicted any form of physical punishment, verbal or physical degradation or emotional deprivation.
- Deny or threaten to deny any basic necessity (including food)
- Use or permit the use of any form of physical restraint, confinement or isolation as discipline.

## *A Bright Beginning Child Care Society*

### **OUTCOMES:**

Parents are encouraged to question and discuss with staff if they are unclear about the handling of an incident, within the Centre. Parents are our partners and are respected as the main role models in the child rearing of their child/ren. Communication is essential, to create bonds. Each child will have a log book where staff will write about your child's day. Periodically, a phone discussion will be scheduled, at your convenience, to discuss your child's progress and development. As parents, guiding your child through these developmental years, it is desirable that staff and parents work closely and honestly together.

### **UNACCEPTABLE BEHAVIOR POLICY**

Our goal is to provide to the best of our abilities and resources, a nurturing environment where children will be respected as individuals, when they have shown unacceptable behaviors that has brought harm to others.

### **DEFINITION:**

Unacceptable Behavior: Biting, excessive tantrums, fighting with others that involve hitting and kicking

2 Types of Behavior: Verbal and Non-Verbal

Shadowing: Being with-in arm- length to the child, interacting and helping child with appropriate behavior

### **GUIDELINES:**

- Review each case individually to determine what the underlying issue(s) may be.
- Take into consideration the age and level of self-control of the child.
- Build empathy so the child engaging in the unacceptable behavior feels remorse and wants to comfort the other child.
- Plan for prevention of these types of behaviors during transitions.
- Observe the child to identify possible causes or triggers of the unacceptable behavior(s). Examples may include; is the child hungry, tired, teething, or frustrated with not being able to communicate their needs/desires.
- Communicate with the parents immediately, as soon as possible after the first incident. Ask parents questions about changes that may be occurring outside the Centre that could be influencing the child's behavior.
- Focus on prevention, as these incidents are 98% preventable.
- If a second incident occurs, provide families with information, strategies and this policy.
- Be vigilant, prepared (armed with preventive techniques) and involve the children and parents in finding solutions to the problem.
- Look at the situation from both sides and build empathy for all persons involved including staff, children and families of the room.

## *A Bright Beginning Child Care Society*

### **PROCEDURES:**

- First Incident - Always talk to the child at their level. Be respectful of the children's feelings, listen. Validate them. Present consequence. Ensure play environment is safe for all other children in the room.
- Verbal Child – Staff must stay with the child until he/she recovers self-control.
- Non-verbal Child – Staff will move the child to a safe area where he/she cannot harm again. Staff is to engage in interaction at all times until the child has calmed down.
- Second Incident – A staff of the room will be required to shadow the child. The room staff will prepare a plan as to how the behavior will be stopped or prevented from occurring again. This information must be shared with all persons involved, including the child's parents.
- Staff will use an Issue / Inappropriate Behavior / Concern Form to present & record:
  - Issue and Strategies/consequences
  - Timelines of incident reports
  - Number of children involved
  - What was happening in the play environment at the time of the behavior
  - Where and what staff were doing
  - Is there a known pattern (child is hungry/tired etc.)
  - Any known external factors to the program that could be impacting behavior
- Program for weekly plans that give opportunities for the child to show appropriate behaviors so that the child can be praised.
- Discuss with parent and co-workers the consequences of the child's actions, where will the child be put and with whom for a time away from the play, to reflect, so that you may provide a safe environment for the rest of the class. During this time the child will not be left alone. Include in your discussion with parent(s), the possibility of dismissal from the program. (Program Director should be involved in these discussions)
- If behavior discontinues for a period of 4 weeks, shadowing may be discontinued after room staff have evaluated the situation. Continued observation and support of the child to prevent reoccurrence will be required.
- Dismissal of children will be evaluated on an individual basis and will be presented to the Centre's Board for evaluation and decision

\*Severe incidents may result in immediate dismissal of a child from the program

### **OUTCOMES:**

- Staff member's interactions, planning, diligence and preparedness have given the child self-worth, self-awareness and self-control. This is the desired outcome.
- Dismissal of the child with the unacceptable behavior.
- Dismissal of staff for the negligence of implementing the procedures of this policy.

## *A Bright Beginning Child Care Society*

Parents are informed of the discipline policy in the parent hand book and verbal by staff when asked. Children are made aware, through conversation and with clear behaviour expectations (where developmentally appropriate). Staff are provided with policies (staff binder) of the Centre and sign off that they have read and understand the policies of the Centre. Clarification can be requested and reviews are done periodically during staff meeting.

### Off-site Activity and Emergency Evacuation

The board and staff believe that children should have the opportunity to play in outdoor playgrounds and to discover their surrounding community while also being accountable for the children's safety and welfare. The purpose for any off site activities is recorded in weekly program plans.

#### **DEFINITIONS:**

**Casual Outing:** destination with-in close vicinity of center, spontaneous, not always planned but with a purpose to enhance weeks program plans.

**Field trip:** destination planned to a physical place, with an educational component that will enhance and compliment program plans.

Staff may take children to an activity off the program premises **only** when the children's parents have been advised of the activity, including transportation and supervision arrangements with respect to the activity. The parents must consent in writing to the child's participation in the activity.

Parents sign consents for casual outings at registration. For field trips additional forms are signed and the trip is posted 4 working days in advance. Weekly outing/field trip forms are posted in individual room's attendance binders. Parents are required to sign, confirming that they have been notified about where their child is going and how. Staff leaving the program premises with children, **must** have children's portable records and have completed a field trip info sheet stating how many children & adults in the group, contact #, where they are going and when they will be back. Portable records for children must be taken in the event of any off site activities or an emergency evacuation.

The staff will not leave the premises alone with more than 2 children. The only exception to this is when the staff are escorting children to or from the school buses.

#### **GUIDELINES:**

## *A Bright Beginning Child Care Society*

- Additional staff need to be arranged whenever possible, to exceed minimum staff to child ratios, for all fieldtrips and casual outings.
- At all times, staff know how many children (including their names) are on an outing in their group, adding and deleting them from attendance sheets as they arrive and depart with parent/guardian/caregiver.
- No caregiver shall leave the center's premises with more than 2 children.
- When at a playground, one (1) staff (may be accompanied by children) is to supervise the entire group by walking the area of playground, watching for and removing any hazards. All other staff will be interacting with smaller groups of children, enhancing their play experiences, implementing planned activities or actively exploring what nature has to offer.
- When children are on an outing/fieldtrip, current detailed information about outing/fieldtrip will be posted for on child care room's door.
- No child shall be transported in a personal vehicle. Methods of transportation include public transit busses, hired bus or by walking to and from destination.

### **PROCEDURES:**

- First group out, one (1) caregiver is to access (without children) community playground to complete Outdoor Safety Checklist, initialing and dating, all other groups be observant that this has been done, complete if not. In the event that playground is unsafe inform director if assessor cannot correct deficiency.
- Before leaving for a casual outing or field trip, children are given information about the where, when, how, and whys of the outing, and a review of safety rules (crossing streets, staying together etc.)
- Upon leaving for a casual outing or field trip, room supervisor will post completed field trip information form at room's entrance. Form will include # of children in group, # of caregivers and adult volunteers, where (destination, general area), how (walking, bus etc.), return time, emergency contact #.
- Staff will also verify that they have their back packs and parents written consents prior to leaving for any off site activity.
- When leaving for activities, staff will ensure that volunteers are placed in the mid-section of walking children, with primary staff at the beginning and end of row. Children should not walk in a line or in pairs unless an adult is in-between. When walking and crossing streets the group needs to stay together at all times.
- One staff is to supervise (may be accompanied by children) large group, be observant for potential problems or safety concerns and pick-up garbage as necessary. All other staff are interacting and following all licensing requirements (supervision, out-door play space, ratio's etc.), Best practices and encompass Accreditation Standards with smaller groups or individual children's interests.
- Returning indoors, (from Community playgrounds, field trip destinations and center playground), take roll call from list that was prepared and up dated during outing. When

## *A Bright Beginning Child Care Society*

all children are accounted for, proceed. In the event that the group is getting on a bus, this roll call will need to be repeated at each transition, till arrival at center. Caregivers should locate themselves at the front and rear of group so that entire group is visible during the roll call and transition time.

- Head count should be completed again, upon arrival into child care room at program by staff member who has list.

## Safety and Health

To the best of our abilities, (staff and Board of A Bright Beginning Child Care) we will make sure that the safety and health of each child is considered by being watchful through supervision and by interactions with the child. We will also strive to create an environment that is mindful and meets the developmental needs of the children's activity level.

The staff and children are urged to wash hands upon arrival at the program and often throughout the day.

Opening staff will fill in checklists daily, removing/repairing safety issues and /or reporting issue in communication books and to director for corrective action.

The first staff entering the playground area will complete a checklist clean/repair and report any issues. All outdoor play structures will comply with the standards outlined in the current edition of A Guideline on Children's Play-spaces and Equipment, CSA Standards. The outdoor play area must be free of toxic plants, outdoor sand box must have a tight fitting cover (if there is one available to the children). The outdoor play time is valued and exercised daily (exception, colder than -20 or severe weather) for its physical play and nature exploration that is need for our wellbeing.

Closing staff will complete closing checklist before locking up. Issues will be reported with a written note, addressing any issues to opening staff/director for the next day. For urgent issues, the director will be notified by phone. Emergency contact information is posted in front entrance and is visible from outside the main entrance of the Centre.

## Incident Reporting

The following incidents will be reported immediately to the regional child care office:

- An emergency evacuation
- Unexpected program closure

## *A Bright Beginning Child Care Society*

- An injury requiring medical attention
- A serious illness or injury to a child that requires the program to request emergency health care and/or requires the child to remain in hospital overnight.
- An error in the administration of medication by a program staff member or volunteer resulting in the child becoming seriously injured or ill and requiring first aid, or the program requesting emergency health care and/or requires the child to remain in hospital overnight
- An intruder on the program premises
- The death of a child
- An unexpected absence of a child from the program (i.e. missing or lost child)
- A child removed from the program by a non-custodial parent or guardian
- An allegation of physical, sexual, emotional abuse and/or neglect of a child by a program staff member or volunteer
- The commission by a child of an offense under an Act of Canada or Alberta
- A child left on the premises outside of the program's regular operating hours

In the event that any of the above noted incidents occur, the program will submit a CFS incident report form to the regional child care office within 2 working days of the incident.

In the event of an emergency evacuation, staff are to help children exit the building safely; taking children's portable records, turning off lights and closing doors. The evacuation routes and staff responsibilities will be followed as posted in each playroom and in the main entrance of the Center. Alternate housing is at the Prairie Mall across the street to the northwest, in the event that the building cannot be re-entered after the evacuation.

Unexpected program closure (i.e flooding, no water, no heat). Parents will be notified by Email, phone call and radio notification. The expected reopening date will be relayed to parents through email as soon as possible. Centre will seek alternate locations for the program to operate in if closure is for more than 1 week.

Currently the Centre has made an agreement with the Christian Fellowship Assembly to be a temporary operational space (pending licensing's approval) in the event that the Centre's current location is unusable for more than one week.

In the event of an intruder on program premises, police will be notified immediately as well as parents.

In the event of an illness/injury requiring emergency health care and/or requires the child to remain in hospital overnight the child will be attended to immediately. Staff/Director and parents will be notified, and an ambulance will be called if needed. Director will ensure that child/staff ratios are met during the event.

In the event that there was an error in the administration of medicine by a program staff or volunteer causing serious injured or ill and requiring emergency health care and/or requires the child to remain in hospital overnight, the child's parents will be notified immediately and



## *A Bright Beginning Child Care Society*

information will be collected, to determine the need to transport child by ambulance to the hospital.

In the event that a child is left on the premises outside of the program's operating hours, child welfare will be called to pick up the child. A note will be left on the front entrance of the Centre, to inform parent of who has custody of the child, and contact number for child welfare.

In the event that an unexpected absence of a child from the program, as in being lost or missing, police and parents will be notified immediately. Intake reports will be taken from all staff and individuals who may have information concerning the child and the event.

In the event that there is an allegation of physical, sexual, emotional abuse and/or neglect of a child by a program staff member or volunteer, the staff or volunteer will be excused from her duties immediately, and an investigation will be conducted.

In the event of a **commission by a child of an offence under an Act of Canada or Alberta**, the parents will be notified immediately. Staff will prepare report for parent, for presentation to the police, if issue was not dealt with directly after the offence was committed. Child, staff and parents would discuss a solution and consequence suitable to the development of the child and the situation.

In the event that a child is removed from the program by a non-custodial parent or guardian without permission from the parent or guardian, our policy requires that parents be contacted for permission, in the event that a non-custodial person wants to remove child from the Centre. In the event that it was immediately confirmed that a non-custodial person had removed the child the parent and police would be notified.

In the event of the death of a child while in the care of the Centre, all emergency personnel, Parents and Police will be contacted.

All accident/incident reports and government critical incident reports are analyzed monthly and discussed at staff meetings. A prescribed form is submitted on an annual basis to the regional childcare office.

## Accident and Illness Policy

Parents will be notified immediately In the event of an accident or serious illness involving a child at the Center:

1. Attend to child
2. Alert another staff member to ensure that other children are adequately supervised and staff to child ratios are met
3. Administer first aid and/or call 911 for an ambulance if needed, staff are not to transport children to the hospital
4. Comfort the child
5. Inform the Director or Acting Director (designated worker)
6. Contact parents immediately to pick up their child to take them to the hospital or meet them at the hospital depending on situation. If ratio allows, a staff member will accompany child to the hospital and bring the child's portable record of information with them.
7. If the accident or illness meets the criteria for a reportable incident, notify regional child care office immediately. Complete and submit CFS incident report form and send (email, fax) to child care licensing within 24 hours
8. Staff who were present when the incident occurred, are to provide a detailed written account of the incident from their perspective, including what they were doing at the time of the incident and how many other staff and children were in their group at the time of the incident.
9. Complete all other internal report forms
10. A designated staff member will also contact the child's parents for updates on the child's condition.
11. In house accident /illness/incident forms will be reviewed on a monthly basis as they are being filed and analyzed for any similarities or common occurrences that could have been avoided. These reports will also be discussed at monthly staff meetings for ideas on how to prevent them from occurring if possible.

In the event of a minor accident/incident, staff will fill out an incident/accident/illness report form and have it signed by the parent at pick-up or call ahead by phone if the incident/accident has left the child very upset or with a noticeable wound. The director will also review and sign the report. If the parent requests a copy of the report, it will be provided to them.

### **Staff Accident:**

1. Alert another staff member to cover in ratio if staff member that is hurt is in ratio
2. Inform director and any other co-workers affected immediately
3. Seek medical attention if necessary and complete WCB forms if required
4. Write a report about what happened for anyone who witnessed the accident

## *A Bright Beginning Child Care Society*

### Potential Health Risk

A child who is ill, must not be brought to the Child Care Centre. The definition of an ill child according to The Child Care Licensing Regulation is a child who:

1. Is vomiting, has a fever ( i.e an oral temperature of over 100°F or 37.8°C, normal temperature is 98.6°F or 37°C. ) , diarrhea or a new or unexplained rash or cough;
2. Requires greater attention than can be provided without compromising the care of other children in the program; or
3. Having or displaying any other illness or symptom that the staff member knows or believes may indicate that a child poses a health risk to persons on the program premises

In addition, the program requires that children be kept home if they exhibit the following symptoms:

1. Has an eye infection (Conjunctivitis (Pink Eye) that is not being treated by medication. The eye looks red and tender, with some burning, itching and may have a thick yellow discharge
2. Is suffering from a severe cold - the child is fevered, severe coughing and discharge from the nose
3. Is afflicted with a communicable disease - some examples are: chicken pox, mumps, rubella, red measles, strep throat, head lice, etc. A physician must diagnose the child and the parent must report to the director the diagnosis and when the child can return to the program
4. Is not feeling well enough to participate in the program, including outside play

The staff will monitor children for signs and symptoms of illness by observing them for any signs of unusual behavior or appearance. This will include, taking the child's temperature with a forehead scanner.

When a staff member knows or has reason to believe that your child is exhibiting the signs or symptoms of illness as indicated above, we must ensure that parents/guardians arrange for the immediate removal of the child from the program premises and that their child does not return to the program premises until the director is satisfied that the child no longer poses a health risk to persons on the program premises.

NOTE: With any of the above noted conditions, we ask that parents arrange to see a physician as soon as possible.

Once diagnosed by a physician, we ask that the parents report this diagnosis to the program immediately.

The program will post information sheets about any illnesses, in each playroom, as soon as a diagnosis is made and confirmed by a doctor.

When a parent fails to pick-up a sick child, as required by child care licensing regulation, staff will continue to call parent and or emergency contact until someone can be reached. The child

## *A Bright Beginning Child Care Society*

will be made comfortable and will be kept as far away as is practicable from the rest of the children. In the event that the child's condition becomes more serious, emergency medical attention will be sought and the procedures for reporting incidents of this nature will be followed.

A child may return to the program premises when the director is satisfied that the child no longer poses a health risk to persons on the program premises. Acceptable evidence allowing a child return to the program premises includes the parent providing a written notice from a physician indicating the child does not pose a health risk to persons on the program premises or the child has been symptom free for 24 hours.

Children may also return to the program when the following conditions are met:

1. The cold is mild and the child has no fever and is eating and sleeping well
2. The child has a type of infection, but the child has taken an antibiotic for twenty-four hours
3. The child's rash is not contagious
4. The child has a loose bowel movement, because of something the child ate or because of medication that he/she is taking
5. Has been treated with an appropriate treatment and is clean of nits (Head lice)

When a staff member knows or suspects that a child may pose a potential health risk they will record and document their illness on an Incident/Accident/Illness form. This form will indicate the child's name, date the child was observed to be ill, name of staff person who observed that the child was ill, time the parent was initially contacted, name of staff person who contacted parent, time child was removed from program and the date child returned to program. Parents will read and sign the form once the child returns to the Centre.

Parents are advised about the program's management of children who are ill, in the parent handbook that is provided to them when children are registered at the program.

## Supervised Care for Sick Children

If a child is sick and waiting to be picked up and taken home, he/she will be laid down and/or made comfortable, on a sleep mat (supervised by a primary staff member) as far away as is practical from the other children, until the parent/guardian arrives to pick them up. The child may be kept in the office, with the director or assistant director if they are available to supervise them.

## Administration of Medication

All of the following requirements will need to be met prior to administering children medication:

1. All medications must be in their original labeled containers
2. All prescribed medications need to be clearly labeled with the name of the physician and child and dosage instructions
3. All medications need to be administered according to labeled directions
4. Parents will be required to sign a medication form giving us their written consent to administer medications
5. Staff will ensure that the following will be recorded on medication forms where medication is administered to a child: the name of the medication, the time of administration, the amount administered, and the initials of the staff member who administered the medication
6. All medications will be stored in a locked container that is inaccessible to children, with the exception of emergency medications, which will be stored in a place that is inaccessible to children, but easily retrieved in the event of an emergency

## Health Care

Children requiring specialized health care (other than regular medication) will only have medications administered by a professional or a staff member who has been trained in administering that type of health care. The staff member responsible will require documented evidence of their skill or training and record will be kept in their file as well as that of the child's file. Written permission must be obtained from the parent.

The program will provide or allow for the provision of health care to a child only if the written consent of the child's parent has been obtained, or the health care provided is in the nature of first aid.

Health care that is provided and is in the nature of first aid will be administered by a staff with a valid first aid certificate and to the best of their abilities. A written report be given to the parent/guardian and a signed copy will be filed in the child's administration file.

Health care services that are outside the scope of the program will have obtained written consent from the parent /guardian and be filed in the administration file of the Child. The consent will cover:

1. When a child is involved with a service
2. Which service & scope of service
3. Supervision of child if treatment is away from regular class activities, but remaining on program property in the care of the special service provider.

## Smoking

The facility and property are considered a non-smoking environment **at all** times. Smoking is prohibited where staff members are caring for children, including field trips and casual outings off the property. The Dumpster out of sight of the children is the designated smoking area.

## Nutrition

The program provides meals and snacks to the children. The program ensures that each child receives sufficient nutrition by following the criteria established in the Canada Food Guide and by making sure adequate quantities of food are prepared for each meal or snack. The staff that are responsible for the food storage and preparation has completed a food-handling course. These procedures ensure that hot foods are kept hot and cold food is kept cold at all times.

Parents who do supply all food and formula for infants in clearly labeled containers and/or bottles. Staff and parents will discuss child's feeding schedules and when the child will be introduced to the program's menu. **No beverages are left with children during nap times.**

Special provisions will be made for children with special diets or food allergies. Allergies are posted in all rooms and also in the kitchen. Special diets are noted and an alternate meal will be made available or will be supplied by parent. We will promote an environment through encouragement to experience cultural and unique foods. The program is also peanut and nut free.

Program feeding schedule

1. 8:30 – 9:30 am snack (min 2 food groups) open for arriving children
2. starting at 11:00 for babies, 11:00 – 12:15 all other groups Lunch (all food groups)  
children are given all the time they need to eat
3. 3:00 pm snack( 2 food groups)
4. 5:30 pm snack if children request

## Manner of Feeding

Children will be required to stay seated at tables while eating and drinking. They will be encouraged to try the foods that are available and to socialize in a relaxing environment meal and snack times. Children will receive assistance where needed, that is appropriate to their age and level of development. Children in the baby room are fed in highchairs.

When infants and toddlers require bottles or sippy cups for naptime, the bottle or sippy cup will be removed once the child is sleeping.

## Children's Record's

In respect of each child attending the program, the following confidential records will be kept up to date and maintained on the program premises:

1. Completed enrollment form which includes: the child's name, date of birth, home address, parent's name, home address and telephone number, and the name, address and telephone number of a person who may be contacted in the case of an emergency
2. Copies of developmental assessments
3. Letters or notes given by the parents
4. Medication forms which will include, parent request, written consent from the parent and the name of the medication, the time of administration, the amount administered and the initials of the person who administered the medication.
5. When a child is involved with a service outside the scope of the program.
6. Consent form when a child needs to be treated away from regular programming activities, but remaining on program premises in the care of the special service provider.
7. Any relevant health information including child's immunization, allergies, and the particulars of any health care provided to the child including the parent's written consents.
8. Copies of incident/accident/ Illness reports
9. Updates of subsidy notices
10. Other pertinent information deemed important by the Executive Director
11. Agreements, Waivers and Consent forms

All information will be kept in the child's file for the duration of their enrolment and two years thereafter.

Parents are responsible to notify the Director of any changes relating to their child's registration.

Children's files are reviewed and updated regularly (new form sent out minimally once per year) to ensure all information is relevant and current. Children's files are available for inspection at all times to the director and to the child's parents at reasonable times.

## *A Bright Beginning Child Care Society*

### Administrative Records

The following confidential records will be kept up to date and maintained on the program premises:

1. Particulars of the daily attendance of each child, including arrival and departure times;
2. Particulars of the daily attendance of each primary staff member, including arrival and departure times and hours spent providing child care;
3. Evidence of the program supervisor's or members child care certification;
4. Current first aid certificates for program supervisor and each primary staff member as required. These are also posted outside of child care rooms;
5. Verification of a current criminal record check, including a vulnerable sector search, is required and updated every 3 years. Will also include who reviewed the criminal record check and the date it was received.
6. Letters from the Executive Director and/or Board to the staff
7. Income tax forms
8. Resume
9. Oath of confidentiality
10. Other information deemed important by the Executive Director

Staff are responsible to notify the Executive Director of any changes relating to their personnel records.

Staff files are reviewed and updated regularly to ensure all information is relevant and current.

Staff and children's daily attendance sheets will be maintained on the program premises for a minimum period of 2 years.

Volunteers will also record monthly attendance at the program.

### Portable Records

The program will maintain a portable record of emergency information for each child. This will be kept in an easily accessible location. (Kept in a back pack in each child care room, in a location that the staff can quickly and easily reach.) The portable record of emergency information will include; the child's name, date of birth and home address, the parent's names, home address, home address and telephone numbers. The portable record will also include alternate contact information for a person/s who can be contacted in case of an emergency if parents cannot be reached. This will include the emergency contact's name, address and telephone numbers. Individual emergency cards will also include any other relevant health information pertinent to the child including the child's immunizations, allergies and health issues, if any. Included with the portable records, will be the telephone numbers for the local emergency response services and poison control.



## Emergency Procedures

Evacuation plans are posted in each room and at the main entrance to the program. Emergency evacuation procedures are reviewed with staff upon hiring. Monthly fire drills are practiced to ensure children are familiar with the procedure in the event of a real emergency. During the winter months children are educated and review the procedures, but may not physically evacuate building due to weather. The plaza that the program is housed in, ensures that there is a minimum of one bell and siren fire drill annually.

In the event of a fire or necessity to evacuate the program premises staff will relocate with the children to The Prairie Mall Food Court, bringing with them the children's portable records. We have a written agreement with the mall that we can use their facility for our relocation site. It is open during child care hours and no key is required. Once outside, at a safe distance from the evacuation site, staff will do a roll call to ensure that all children are accounted for. Parents will be notified, by using the contact numbers provided on the children's portable records. They will be asked to pick up their children from the mall, if it is not possible to return to the program after the evacuation.

### **POWER/WATER FAILURE:**

Power Interruption:

1. Director or alternate will inquire about duration and failure
2. If interruption is longer than 4 hours call parents to come and pick up children

Water Failure:

1. Confirm whether there is a water main break somewhere
2. Contact care takers of building to report problem (number is posted at front desk)
3. If water supply is not available for longer than 2 hours call parents to come and pick up children

## Supervision Policy and Procedures

We strive to provide effective supervision to the children at all times. Effective supervision promotes an environment where a child can feel safe, secure and respected by all and promotes positive interactions for learning. This also promotes the children's overall well-being. Interacting and engaging in play, both indoors and outdoors, with the children, will help in planning activities that interest the children and promote developmental growth. This will also provide opportunities to talk about playing safe to avoid harm. Effective supervision reduces the risk of harm by preventing injuries and accidents. It promotes positive, responsive and intentional learning environments. Effective supervision requires Centre caregivers to be involved, engaged and familiar with the children in their care. If staff would like to have a copy of the center's policy on supervision, they can ask the director who will provide them with a copy of the policy.

### **GUIDELINES:**

Caregivers should be involved and familiarized with the children that are in their care. They should be observant for patterns that can affect the balance in the child care room or outdoor play environment. Toys, equipment and furnishings should be arranged in a manner to promote effective supervision both indoors and outdoors. Staff are expected to maintain minimum staff to child ratios at all times, and exceed them when staffing allows. Only when ratio allows, should staff carry out activities that draw their attention away from the children. Co-workers should be notified when a staff member will not be actively supervising the entire group while engaged in housekeeping, phone calls etc. Staff are expected to be familiar with staff to child ratios and max group sizing as well as the program's policy on supervision. Interacting and engaging in play with the children will help in planning activities that interest the children and allows the opportunity to talk about staying safe during play as events occur. We will regularly evaluate and assess supervisory practices with caregivers to ensure that we are meeting the needs of the children in our program. Potential safety issues and how to minimize them are reviewed during weekly planning sessions and monthly staff meetings.

### **PROCEDURES:**

- Staff are asked to complete all required checklists and notify director of any hazards that they cannot rectify or fix themselves.
- Do head counts periodically throughout the day and more often through transitions.
- Staff are required to supervise the children at all times and ensure that they will not be left in an unsupervised area. Children are given flexibility with age appropriate behaviours (three year olds use washroom by themselves, four year olds may remove him/herself to quiet area for self-reflection). Babies and Tots will be supervised in the washrooms at all times. The washrooms in the Junior and Senior rooms are easily visible

## *A Bright Beginning Child Care Society*

from the classrooms where the staff will supervise from unless needed directly in washroom to assist.

- Position themselves and equipment (through well designed play learning environment that foster the best development opportunities for a child's development) so that it allows for best view of children in your care, so you can see potential problems quickly or be proactive by engaging in communication quickly before issues develop.
- Ensure that records of when children arrive and depart are updated and completed periodically throughout the day. ( this can be done when staff sign themselves in and out through the day). The staff should know how many children are present in their group at all times. When staff leave at the end of their shift, it is expected that they review the children's attendance sheet in their room and update it if parents have forgotten to sign children out, prior to sign themselves out. If staff cannot recall seeing a parent leaving with child, a phone call needs to be made to parent to verify the time the child was picked up prior to the staff member indicating this on the children's attendance sheet.
- Doors to the class room should be kept closed at all possible times and when children are visiting in another room, make sure that staff are aware of the visitor. Children need to be accompanied by a Visitors Key that contains emergency portable information; name date of birth, parent's names and contact numbers AB health number and any allergies /health issues and need to be signed in on the visitor's sheet.
- Staff should avoid carrying out activities that take their attention away from the group of children e.g. Phone use, vacuuming, files, when in ratio.
- Ask for identification when unfamiliar persons are picking up children. Verify with parent and/or child's file before releasing child to someone else.
- Establish simple, age appropriate classroom rules that are positive ("indoors we walk") and simple that reinforce safety and respect to all in Centre.
- Monitor for children's health by being watchful for early signs; fever, illness, or unusual behaviors, inform parent.
- In the event of an incident that has injured the child physically or impacted the child emotionally, but is not of a serious life threatening nature a quick phone call to the parent should be considered.

## *A Bright Beginning Child Care Society*

### **WORKING ALONE:**

- When working alone, staff should engage themselves directly with the children and be situated in a manner where they can still see and verbally engaged with children without the need to shout across the room.
- Plan for this part of the day to ensure that developmentally appropriate and centers of interest are available for the children present.
- In the event that staff do need to collect some supplies, (toilet paper cloths, playdough making, extra toys etc.) they will need to bring all children with them (try and get these things done before the 2nd staff leaves for the day)
- Staff are directed to close centres when they feel that they are not able to supervise or have a good visual on the happenings within that part of the room or play centre.
- Reduce lively play to where you can be directly involved only.
- Maintain communication with other parents during drop off and pick up, however keep it brief.
- Combine with the next room when numbers allow.
- Under no circumstances should staff have their back to the children or be engaged in an activity that reduces their sight or hearing (vacuuming, playing in a tent etc.)
- Keep doorways open to hallway (door to washroom area between Tot and Junior), so that staff can be heard if they need to call out for help.
- In the event of an emergency where a child is injured and cannot be moved, send a child (where developmentally appropriate i.e. seniors and juniors) to get help in the next room.

### **FIELD TRIPS/OUTINGS:**

- Additional staff need to be arranged for, or a reduced staff child ratio, for all Fieldtrips and Casual outings.
- No staff members shall leave the center's premises with more than 2 children.
- At all times, Caregivers know how many children are at play/outing in the group, # of children and names, adding and deleting as children arrive and depart with parent/guardian/caregiver.
- When additional staff, volunteers, or parents are used, on the fieldtrip or casual outing these persons should stay to the middle of the group.
- When additional staff, volunteers or parents are used on a fieldtrip or casual outing they will be placed in the mid-section of walking children, with the primary staff at the beginning and end of the group. Children should not walk in a line, in pairs unless an adult is in-between. When walking and crossing streets, the group needs to stay together at all times.
- Every attempt will be made for additional staff or volunteers to be present for field trips/outings or at minimum a reduced ratio per age group size.

## *A Bright Beginning Child Care Society*

- No child shall be transported in personal vehicle only on public transit busses, hired bus or by walking to destination.
- Before leaving for a Casual outing or field trip children are given information about the where, when's, how, and whys of the outing, and all that are going will be given a review on safety rules (crossing streets, staying together etc.).
- Head counts are done consistently when on field trips and casual outings to ensure that all children are accounted for.
- Before leaving and upon return from community playgrounds, field trip destinations and center playground staff are to do another head count/roll call from list of children's names that they bring with them. When all children are accounted for the group may proceed inside the program. In the event that the group is getting on a bus, this roll call will need to be repeated at each transition, till arrival at center. Caregivers should locate themselves at the front and rear of group so that entire group is visible during the roll call and transition time.
- Another head count is completed upon arrival into child care room in center by staff member who has list of children's names.

Parent are informed about the supervisory policy with-in the Parent hand book, which they receive at time of registration. Parent handbook is also available on line at [www.abrightbeginningchildcare.ca](http://www.abrightbeginningchildcare.ca)

## OUTDOOR PLAY SPACE

- First group out, one (1) caregiver is to access (without children) play space to complete Outdoor Safety Checklist, initialing and dating. All other groups need to verify that this has been completed prior to taking their children into outdoor play space. In the event that play space is unsafe, inform director if staff members cannot correct/remove any hazards.
- When getting ready to leave center for outside play, a list of children's names is prepared by the staff before leaving the room. To minimize wait time for children one staff will proceed with a group of children when they are dressed for outdoor play, maintaining the staff to child ratio at all times. The first staff member out will take the portable records and back pack with them. The last staff member leaving the room will bring the list with the children's names on it. At the end of the day, if class is still outdoors this list is then to be given to closing staff, with all amendments (arrivals and departures).
- At all times staff should know how many children are in their group in outdoor play space, adding and deleting from attendance sheet as children arrive and depart with parent/guardian/caregiver.
- One staff to supervise (may be accompanied by children) large group, be observant for potential problems or safety concerns and pick-up garbage as necessary. All other staff are interacting and following all licensing requirements (supervision, out-door play space, ratio's etc.), Best practices and encompass Accreditation Standards with smaller groups or individual children's interests. Outdoor play-time is to be planned time which is included on weekly programming sheets.
- Last group of day in center's playgroup is responsible to put toys away, tricycles stacked in shed, any equipment that should not be rained on or is inside equip./toys will be brought into center. Gates and shed should also be locked.
- Returning indoors from center playground. Caregivers should locate themselves at the front and rear of group so that entire group is visible during the roll call and transition time. Take roll call from list of children's names that was prepared and up dated during outdoor time prior to leaving outdoor play space. Once back inside the program another roll call should be completed again to ensure that all children are accounted for.

## Nap Time

### **POLICY:**

Nap time routines. There should be regular routines for each room to follow during nap/quiet time.

### **GUIDELINES:**

Children should have a regular routine for nap time for their day to run smoothly with the rest of the day. With exception, the Baby room, where it might be necessary to nap a child due to personal needs in the morning. Children still need to be visible with the staff at all times so placement of their nap time mats should be in clear view and be in compliance with government regulations. Proper bedding should be placed on the mats and washed weekly. When stored, mats should be placed in container supplied and labelled with child's name. Quiet music can be played to ease child to sleep as well as to drown out exterior noise from the Center to make for a pleasanter sleep time experience for the children. Room staff will discuss during orientation and periodically with parents/guardians the individual needs of child/children's sleep needs. Each room shall post /orientate and evaluate their individual class room routine as needed, with changing children's needs and new staff.

### **PROCEDURES (All ROOMS):**

- Bedding for naps should not be set out too early for sanitary reasons for some children it may cause unneeded stress, about nap. Children will wash their hands, brush teeth, and use the washroom or if diapering is needed, will be done before. Children could also assist in setting out their own beds.
- At 12:30 children are given the option to do a puzzle, read a book or a relaxing activity.
- Room darkened no sooner than 12:45pm with exception to Baby room, which may be sooner.
- Children that do not fall asleep within 20- 30 minutes, will be allowed to get up and have a choice of quiet activities such as puzzles, reading books, play dough, coloring, or one centre may be opened with-in the room that promote quiet play.
- If a child should wake before nap time is over, they will join the children awake and choose an activity as well.
- Staff will do their best with children that have restrictions on the duration of their sleep time by waking them gently, and then allowed to play at the table with the other children.
- Staff are encouraged to sit beside a child/children on the floor (no lying down beside the children) to rub backs.
- If there are days the Center is short staffed, nap time will be extended if all children are sleeping to ensure the room stays in ratio.

## *A Bright Beginning Child Care Society*

# Sanitizing Procedures/ Toy washing

### DAILY TASKS

- Toys that can be put through dishwasher should not have batteries or be battery operational.
- House-keeping toys and nobs/handles.
- Small blocks/manipulative building sets in the rooms where children are still putting them in their mouths (tots, babies) weekly in other rooms (Jr. Sr.).
- When cleaning tables and chairs after meals/snacks, do not spray cleaner/disinfectant if child/children are still sitting at table, spray into a clean cloth and wipe.

### WEEKLY TASKS

Disinfecting as per room task list:

- Cloth coverings pillowcases chair covers, Dress-up cloths.
- Larger equipment (table legs/under edges chairs dividers shelving).
- Bedding and mats.
- **Wooden and battery powered** toys and equipment should be hand wiped with a rag that is wet with disinfectant which is to be mix as per directions on disinfectant directions, to a strength of 200 p.p.m active QUAT. Disinfectant is to be mixed in a label spray bottle, in the class room which is kept out of the reach of the children. Testing strips available in kitchen (we are at present using Airx 15 which is mixed 1 part Airx15 to80 parts water).
- Dampen/wipe toys/equipment using disinfectant cleaner
- Allowing to air dry this includes toys that have gone through dishwasher.
- Replace toys on shelves in an eye appealing order, sorted (puzzle pieces in there puzzle trays).
- No aerosol disinfectants are to be used when children are present.

### IN THE EVENT OF ILLNESS:

1. Wash all bedding and vacuum room thoroughly (with a fresh bag) for head lice
2. Disinfect cubby of specific child and adjacent cubbies
3. Disinfect surfaces such as equipment and shelving where children put hands often.
4. Post information sheet about any illnesses/communicable diseases in each room
5. Follow potential health risk policy for exclusion guidelines



# *A Bright Beginning Child Care Society*

## Video Materials

### **POLICY:**

The Board and Staff believe that children should have the opportunity to view video material as part of their programming.

### **DEFINITION:**

Video material includes film nonfiction/fiction viewed on a television within the classroom, non-fiction information on internet which is viewed on laptop and going to the movie theater.

### **GUIDELINES:**

- Before children view, an adult has previewed the material.
- All material is developmentally appropriate, unbiased and culturally sensitive.
- All material is non-violent and does not contain sexually explicit material.
- Childcare staff will view material with children, opening opportunities for further discussion and use of information for room activities and center development.
- The video material is used to expand on children's interests.
- Alternative activities are available within the classroom during the viewing time.
- The use of video material is limited to once monthly, with exceptions granted by program Director.
- Parents will be informed when children view video material and its content.

## Technology

### **POLICY:**

The Board and staff believe that a child can gain knowledge and skills (fine motor eye hand coordination) if given the opportunity to experience the use of our world's technology, primarily the computer.

### **GUIDELINES:**

- Child development worker previews computer games for content and to establish developmental appropriateness before introducing to children.
- All computer games are unbiased and culturally sensitive.
- Content of games is non-violent with no sexual connotations.
- An adult continuously monitors computer station and interacts with children as needed to guide appropriate use and monitor time limits.
- Maximum of 30 min. per day per child

# *A Bright Beginning Child Care Society*

## Products

### **POLICY:**

The board and staff support a non-toxic environment, which is free of, fragrances, aerosol cleaners and products that children may have sensitivities to. This includes products used with children for experiences.

### **GUIDELINES:**

- All cleaning/disinfecting products are used in pump spray bottles and are diluted to the recommended strength.
- Art and craft products are non-toxic.
- Traps are used for unwanted pests when needed. Traps are placed in locations that are inaccessible to the children.
- City will post a notice when and if outdoor play areas will be or have been sprayed. No access for children for a min. of 3 days after spraying.
- Staff will refrain from wearing perfumes and heavily fragranced products.
- The dishwasher chemical is stored in a securely latched cupboard.

## Diaper Changing

### **PROCEDURE:**

- Wash hands
- Check to make sure that all supplies needed are ready and within easy reach: fresh diaper, fresh damp wipes, bag for diaper disposal, disposable gloves.
- Is change table free of all clutter and disinfected.
- While holding child away from your body, lay child down (if child is not laying still fasten child with safety belt). Talk and exchange verbal conversation about what you are doing with the child.
- Remove soiled diaper and put in plastic bag or package together and dispose of in designated container. Disposable gloves may be used.
- Clean child (from front to back) with pre-moistened towelette and dispose in designated container.
- If child needs to be washed completely, use running water, disinfect sink immediately after you are finished diaper child.
- Use clean applicator or Q-tip to remove ointment from containers, apply ointment and discard applicator.
- Diaper and dress child
- Wash child's hands and return child to previous activity
- Spray disinfectant onto diaper changing area
- Wash your hands with running water and soap
- Clean and wipe all of the diaper changing area, equipment and or supplies touched.
- Wash your hands again with soap and running water.

*A Bright Beginning Child Care Society*