



Family Handbook

66B Waubeek Street, Parry Sound

ON P2A 1C6

Child Care: Clara's Place Preschool Inc.

Date Family Handbook Established: September 7th, 2024

Date Family Handbook Updated: January 29th, 2025

The parent handbook is available free of charge to a parent/guardian of every child who receives child care at a child care centre at the time the child starts receiving child care and at any time when the parent handbook is modified

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A.0 Welcome

Welcome to Clara's Place Preschool Inc! We are so excited that you are allowing us to be a part of your incredible journey through preschool!

Clara's Place Preschool was inspired by my late grandma Clara who had an undeniable love and passion for teaching young children through Home Child Care.

A.1 Program Statement

At Clara's Place preschool is proud to provide a high-quality care and education program that nurtures the uniqueness of each student through a holistic approach in a warm, inviting and inclusive environment. Our programs are child-centred and family-oriented with the lens of all children being competent, capable, curious and rich in potential. We are committed to supporting families and children by developing strong relationships built on respect and providing an environment that supports positive and responsive interactions.

Every individual who walks through the doors of Clara's Place Preschool should feel welcomed, like they belong, that they are engaged in the program, that their well-being is supported, and that they are free to express themselves. These four foundations of belonging, engagement, well-being and expression are the rights of all children and provide the basis of our goals and expectations for our program.



Our program statement continually evolves with ongoing engagement of the families and staff that attend. Annual and ongoing review of the program statement with staff, students, volunteers and families to ensure its relevancy.

Clara's Place Preschool staff are supported to make meaningful contributions to the ongoing development of the program through professional learning in the form of online training, workshops, goal planning interviews and support with education.

The below information categorizes and specifies the approaches we will use to

1. Promote health, safety, nutrition and well-being
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 and which is inclusive of all children, including children with individualized plans
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 a child care centre or home child care premises in relation to continuous professional learning

11. Document and review the impact of the strategies set out in clauses (a) to (j) on the children and their families

Promoting Health, Safety, Nutrition and Well-Being

Our goal is to make the health, safety, nutrition and well-being of the children in our program a focal point, meeting the individual developmental needs of the child in a holistic approach.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Ensuring that all staff members are trained and able to appropriately respond to health, safety and emergency situations;
- Performing daily health checks and monitoring of students as well as daily safety monitoring checks to ensure that indoor and outdoor environments are safe;
- Providing a variety of indoor, outdoor (minimum of 2 hours a day), active, rest and quiet experiences throughout the day that meet the individual child's needs;
- Providing opportunities for children to engage in developmentally appropriate level of risk;
- Supporting mental health wellness through encouraging children's development of self regulation, resiliency and a rich emotional vocabulary;
- Providing nutritious foods in accordance with the Canada's Food Guide with a family-style, positive eating environment with foods and portion sizes that are responsive to children's cues of hunger and fullness.

Support Positive and Responsive Interactions Among the Children, Parents, Child Care Providers and Staff

Our goal is to create and nurture authentic, positive, caring relationships and connections to create a sense of belonging between children, adults and the world around them.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Providing opportunities for children to be heard and for their contributions to be appreciated within their communities;
- Welcoming and greeting families at arrival and departure with a warm smile and positive attitude;
- Honouring children's ideas and contributions by responding to them in a respectful way and by focusing on using authentic language in our interactions with them;
- Maintain communication with families, sending updates on their child's day;
- Support continuous learning between staff, children and families by periodic visits from community partners (e.g., librarian, fire fighters);
- Support positive and responsive interactions among the children, parents, and staff;
- Reframing challenging behaviours by reflecting on why they may be occurring and what the child might be trying to express;
- Knowing when to be an intentional observer in a play scenario and to support these learning experiences from afar;
- Modeling resiliency and problem-solving skills with children and helping them to identify their feelings, the feelings of others, and possible solutions;
- Placing importance on encouraging children to develop authentic skills for solving problems, instead of having them take part in a prescribed solution (e.g. making a child say sorry);
- Actively listening to children and giving them the time and space to express themselves;

- Getting to know the children on an individual basis to identify and work to proactively minimize stressors, and to help the children become self-aware

Encourage the Children to Interact and Communicate in a Positive Way and Support their Ability to Self-Regulate

Our goal is to encourage and support children to communicate with one another, staff and themselves in a positive way that includes positive self-talk as a way to self regulate.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Modeling positive communication with one another in play;
- Providing opportunities during the day to practice affirmations and positive self-talk (i.e. class discussion “I am...” or demonstrating being frustrated with a task and how to overcome it (i.e. pretending to be angry that my tower keeps falling, taking a pause, deep breathe and saying outloud “I can do hard things, I will keep trying”);
- Reading books that focus on modelling these goals.

Foster Children’s Exploration, Play and Inquiry

Our goal is for the preschool environment to engage children in active, creative and meaningful exploration, play and inquiry. Through this type of play and inquiry, they develop skills such as problem solving, creative thinking, and innovating, which are essential for learning and success.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Observing and engaging with children to understand their questions and inquiries and using these as a guide for programming;
- Capitalizing on spontaneous, meaningful learning moments during the day by being actively engaged with the children;

- Providing natural elements (e.g. sticks, rocks, shells, plants) to help children explore the natural world;
- Organizing the learning environments in a way that makes them aesthetically appealing, uncluttered, engaging and welcoming;
- Role modeling and encouraging respect for materials in the shared learning environment;
- Providing opportunities for extended and uninterrupted play and exploration multiple times each day;
- Engaging in open-ended conversations with children and asking thought-provoking questions to help expand the children's learning and our understanding of their explorations

Provide Child-Initiated and Adult-Supported Experiences

Our goal is to provide a well-balanced program of child-initiated and adult supported experiences that fit the interests and needs of our students.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Communicating with families about our students interests at home;
- Having flexible programming that can be adapted daily to follow the lead of our students;
- Plan for adult-supported experiences that fit with the developmental needs and interests of the students;
- Observe and document student's interest for geared programming.

Plan for and Create Positive Learning Environments and Experiences in Which each Child's Learning and Development will be Supported and which is Inclusive of all Children, Including Children with Individualized Plans

Our goal is for the learning environment to be inclusive, engaging and supporting of children's development.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Promote child-led and active exploration opportunities in carefully planned and inclusive learning environments by offering a wide variety of open-ended play materials in loosely defined areas so that children can freely use the materials to support their exploration, inquiry and play with bodies, minds and senses;
- Viewing the environment as the "third teacher" and understanding the significant impact it has on our program;
- Review individualized plans with staff on a regular basis and how it pertains to the learning environment.

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

Our goal is for children to participate in a variety of active indoor and outdoor play, rest and quiet time as it suits children's individual needs each day.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Develop and implement a daily routine and schedule that includes ample time for outdoor active play, indoor play, rest and quiet time that is also flexible enough to accommodate individual students;
- Incorporate "body breaks" as needed into the day to get children moving;
- Provide a quiet space in each class where children can go to break from the busy play happening around them;

- Have floater staff available to pull smaller groups aside who may have different needs than the majority (i.e. a few students could need a quiet activity outside of the class in which the floater staff could provide).

Foster the Engagement of and Ongoing Communication with Parents about the Program and their Children

Our goal is for families to be active participants in their child's experience at Clara's Place. We strive to foster positive, responsive relationships with children and their families by promoting engagement and ongoing communication about the program and their children.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Communicating with families on a daily in-person basis at minimum at arrival and departure;
- Communicating our perspective of the children's learning and development with families in daily documentation sent electronically through our program communication app;
- Inviting family participation within the daily program and encouraging them to share their varied perspectives and cultural experiences with the children;
- Displaying family information and photographs throughout the learning environments;
- Encouraging parent participation and engagement in program surveys for feedback;
- Planning special events and social activities for families to engage in throughout the year (e.g. holiday gatherings, annual family picnics).

Involve Local Community Partners and Allow those Partners to Support the Children, their Families and Staff

Our goal is to develop and foster community partners that can offer support to children, families and staff.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Reaching out to children's service partners to gain insight, information and support regarding specific child development needs such as speech therapy, behaviour therapy etc.;
- Connecting families with local community partners for additional support and services;
- Invite community partners into our daily programs to offer observations and support.

Support Staff, or Others who Interact with the Children at a Child Care Centre in Relation to Continuous Professional Learning

Our goal as educators is to continue to be active learners and working towards being more knowledgeable and up to date on the most recent research surrounding children's development and learning.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Participate in regular professional learning courses, webinars and conferences;
- Offer support for staff to attend and/or complete specialized training.

Document and Review the Impact of the Strategies Set Out in Clauses (a) to (j) on the Children and their Families

With the understanding how important pedagogical documentation is as a way for program staff to learn about how children think and learner, our goal as is to ensure all staff have read, understood and signed off on the program statement in order to actively implement the statement in daily routines.

Our program supports these goals through the implementation of a variety of approaches, such as by:

- Having all staff, students and volunteers will independently read through the program statement and then participate in a team discussion regarding it;
- Each classroom will maintain a binder containing observations, plans and documentation to support their understanding of the program statement. Copies of the documentation, relevant to each child, will be shared with that parent/guardian;
- The Director and Supervisor will observe staff and provide feedback.

Documentation

Clara's Place Preschool uses a variety of methods to document children's learning and development, support communication with families, reflect on our planning as well as to review and monitor the impacts and effectiveness of our experiences and approaches. These methods include but are not limited to:

- Daily written record
- Planned learning experience observation notes
- Team meetings as a time to reflect and review
- One on one meetings with the director involving goal planning and professional development
- Documentation of learning (images and notes) posted to each student's individual profile

B.0 Services

B.1 Services Offered and Age Categories

Clara's Place Preschool offers two high quality 8+ hour day programs (8:00 a.m.-4:45 p.m.) that feature two classrooms; one class of 10 toddlers (18 months-2.5 years old) and one class of 16 preschools (2.5 years old-4 years old). With qualified and compassionate staff, we have the ability to tailor our program to fit the individual needs of our students with daily schedules incorporating lots of outside time, play, activities, large group, small groups and rest times. We base our curriculum off of the framework "Early Learning for Every Child Today" (E.L.E.C.T) as well as "How Does Learning Happen?" in conjunction with the evolving needs of our students.

B.2 Hours and Holidays

Clara's Place is open Monday-Friday 8:00 A.M.-4:45 P.M.

Holidays- at the start of each year or at the start of enrollment or when requested, parents/guardians will receive a calendar for the year outlining days of closure due to holidays or planned professional development days.

Families will be required to pay for all planned closures with the exception of professional development days and Christmas break.

2025/2026 year (September 1st, 2025 to August 31st, 2026)

Holidays Observed (closures)

Monday August 4th, 2025 (Civic Holiday)

Friday August 29th, 2025 (Professional Development Day)

Monday September 1st, 2025 (Labour Day)

Monday October 13th, 2025 (Thanksgiving)

Friday October 24th, 2025 (DSSAB run Professional Development Day)

Monday December 22nd, 2025-January 2nd, 2026 (Christmas Break)

Friday January 30th, 2026 (Professional Development Day)

Monday February 16th, 2026 (Family Day)

Friday April 3rd, 2026 (Good Friday)

Monday April 6th, 2026 (Easter Monday)

Friday May 15th, 2026 (Professional Development Day)

Monday May 18th, 2026 (Victoria Day)

Wednesday July 1st, 2026 (Canada Day)

Monday August 3rd, 2026 (Civic Holiday)

Friday August 28th, 2026 (Professional Development Day)

B.3 Fees, Refunds and Credits

Clara's Place Preschool Inc. is enrolled in the Canada-wide Early Learning and Child Care (CWELCC) program.

The base-fee (what parents/guardians pay) for our program is \$22.00 a day for the toddler age group and for the preschool age group.

Payments will be required bi-weekly for child care fees via automatic withdrawal through the Lillio application.

Non-base fees are any fees charged for optional services or any fees charged where the parent/guardian fails to meet the terms of agreement with the licensee (e.g. late fees).

Late pickup fee \$1.00 per minute you pickup late (after 4:45 P.M.) unless otherwise discussed with the director or supervisor.

Late payment of child care fees \$25.00/day until paid.

Parents and guardians can contact us directly regarding other subsidy programs that they may qualify for.

Receipts will be issued at the end of each year or upon request, any licensee or child care provider shall provide a receipt for payment to a person who pays the licensee or child care provider for child care, and the receipt shall be provided free of charge and in accordance with the regulations.

Refunds and Credits

Credits of the daily fee (\$22.00/day) will be applied to invoices and payees account in the following circumstances;

- An unplanned closure (i.e. due to building or staffing issues)
- Professional Development Days
- Christmas Break

Refunds will only be issued via e-transfer if a payee is charged the wrong amount by mistake.

Attendance Policy

Effective March 1, 2025, the District of Parry Sound Social Services Administration Board is changing the allotted number and requirements for approved absent days in the Attendance and Absenteeism Policy for families using subsidy.

The policy change states that effective immediately families (with subsidy) will be allotted a fixed number of allowable absences per calendar year based on eligible hours of care (full time, part-time, school/ work schedule) to a maximum of twenty-four (24) per full time enrollment. Days may be used to cover illness, vacation, extended visits etc.... Absent days are calculated

based on each child's start date and approved days of care. The assigned number of absent days will be reassigned in January of each new year, unused absences cannot be carried over to the next year.

For new applicants the allowed number of absent days will be calculated based on the month in which your child starts care. The Ontario Child Care Management Software System (OCCMS) used by the fee subsidy office will track and monitor attendance. In addition, eligible families are responsible for managing their child's attendance within the given allowance. When the fixed number of absent days is exceeded, families will be responsible for paying the service provider the full fee rate for additional absent days used. The fees will be directly payable to the child care program, unpaid fees will result in termination of care. In extenuating circumstances, a request can be made for fee subsidy to cover additional absent days above the initial allotment, additional documentation will be required to support these requests.

B.4 Waiting List Policy and Procedure

Child Care Centre Waiting List Policy and Procedures

Name of Child Care Centre: CLARA'S PLACE PRESCHOOL INC.

Date Policy and Procedures Established: July 29th, 2024

Date Policy and Procedures Updated: February 16th, 2024

Purpose

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

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

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15, SS. 75.1

(2) for a child care centre that maintains a waiting list to have related policies and procedures.

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

Policy

General

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

Procedures

Receiving a Request to Place a Child on the Waiting List

The licensee or designate will receive online waitlist applications through the District of Parry Sound Child Care Application Portal <https://www.psdssab.org/early-years-services/resources-for-families-2/child-care-options/district-of-parry-sound-child-care-application-portal/>

Placing a child on the Waiting List

1. The online application portal will place a child on the waiting list in chronological order, based on the date and time that the completed Waitlist Form was received.
2. Once a child has been placed on the waiting list, parents or guardians can ask the licensee or designate of their child's position on the list.

Determining Placement Priority when a Space Becomes Available

1. When space becomes available in the program, priority will be given to (in the order listed); children of staff, children currently enrolled and moving to a different room, children currently enrolled part-time and looking to add days, and children of siblings currently enrolled.
2. Once these children have been placed, other children on the waiting list will be prioritized based on program room availability and the chronology in which the child was placed on the waiting list.

Offering an Available Space

1. Parents of children on the waiting list will be notified via telephone and/or email that a space has become available in their requested program.
2. Parents will be provided a timeframe of five business days in which a response is

required before the next child on the waiting list will be offered the space.

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

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

1. The Director or Supervisor will be the contact person for parents who wish to inquire about the status of their child's place on the waiting list.

2. The Director or Supervisor will respond to parent inquiries and provide the child's current position on the list and an estimated likelihood of the child being offered a space in the program.

Maintaining Privacy and Confidentiality

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

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

Additional Procedures

A family may be removed from the waiting list if; the family is offered and accept a spot for their child, due to inability to contact parents after multiple attempts to offer a spot or if a parent or guardian requests to be removed from the waiting list.

Glossary

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

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

B.5 Admission and Discharge Policy

Determining Placement Priority when a Space Becomes Available

1. When space becomes available in the program, priority will be given to (in the order listed); children of staff, children currently enrolled and moving to a different room, children currently enrolled part-time and looking to add days, and children of siblings currently enrolled.
2. Once these children have been placed, other children on the waiting list will be prioritized based on program room availability and the chronology in which the child was placed on the waiting list.

Offering an Available Space

1. Parents of children on the waiting list will be notified via telephone and/or email that a space has become available in their requested program.
2. Parents will be provided a time frame of five business days in which a response is required before the next child on the waiting list will be offered the space.
3. Where a parent has not responded within the given timeframe, the licensee or designate will contact the parent of the next child on the waiting list to offer them the space.

When a parent is interested in the space, they should respond as soon as possible and book a meet and greet.

Registration packages along with a copy of the child's immunization records must be completed and submitted to the Program Director or Supervisor at least 3 days prior to your child(ren)'s start date.

Discharge

If you are withdrawing your child(ren) from any of our programs we require One month written notice submitted to the Program Director or Supervisor. Payment is required for that month.

B.6 Off Premises Activities

Clara's Place is excited to be able to incorporate community walks off premises into programming.

Community walks relate to the belonging foundation of “How Does Learning Happen? Ontario's Pedagogy for the Early Years”. Belonging is a crucial foundation for learning, influencing how children develop a sense of connectedness and value within their communities. When children feel valued and connected, they are more likely to engage in learning and thrive. The feeling of belonging promotes positive relationships, supports well-being, and encourages children to contribute and express themselves.

For community walks through Clara’s Place the student to staff ratio will be reduced to 1 staff per 4 students. Children will be kept in the wagon/stroller on sidewalks but may have the opportunity to explore out of the wagon/stroller on the fitness trail or at a park.

Parents wishing to volunteer can contact Jazzy or Mackenzie.

Consent will provide more flexibility and allow for more spontaneity in daily planning.

Messages will be sent notifying parents prior to leaving the premise via the parent communication app.

Alternative arrangements will be made if consent is not given. Consent forms for class trips will be separate and for each outing. If you have any questions or concerns, please reach out prior to signing the off-premises consent form.

C.0 Volunteers and Students

Child Care Centre Supervision of Students and Volunteers Policy

Name of Child Care Centre: Clara’s Place Preschool Inc.

Date Policy and Procedures Established: August 24th, 2024

Date Policy and Procedures Updated: August 24th, 2024

Policy

General

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

Roles and Responsibilities of the Licensee and Supervising Employees

- The licensee and/or supervisor are responsible for conducting initial interviews for prospective volunteers and students.
- After the volunteer or student has been determined a good fit for the program the licensee and/or supervisor is required to obtain a vulnerable sector check, health assessment and immunizations from said volunteer or student before they are permitted to interact with students at the centre.

- Once these documents are collected the licensee and/or supervisor will review centre policies, procedures and individualized plans with the volunteer or student.
- The licensee and/or supervisor must then hold a mandatory orientation for the volunteer or student on expectations such as attendance, behaviour, and program statement implementation.
- Employees who are responsible for supervising students will have a meeting with the licensee and/or supervisor and the student to determine how they may work with a student's practicum supervising teacher to support the student's learning and provide feedback as a team. (this may include but is not limited to extra prep times, virtual or in-person meetings or weekly progress reports) Roles and Responsibilities of Volunteers and Students
- All volunteers and students must go through an initial interview in order for the child care centre to determine if the placement would be the right fit for all parties involved.
- All volunteers and students must obtain a vulnerable sector check before the individual starts interacting with children at the child care centre. Vulnerable sector checks and offence declarations must be provided in accordance with the child care agency's criminal reference check policy. A vulnerable sector check is not required for any volunteer or student who is less than 18 years of age.
- A vulnerable sector check shall be considered to be satisfied only if the police record check is,
 - (a) conducted by a police service; and
 - (b) prepared no earlier than six months before the day it is obtained by the licensee.
- All volunteers or students are required to have a health assessment and immunization as directed by the local medical officer of health.
- A person would not be subject to the health assessment and immunization requirements in either of these circumstances: there is a medical reason why the person cannot be immunized OR the person objects to immunization based on their religion beliefs or conscience grounds. If either of these circumstances apply, the person needs to give the licensee paperwork that documents this.

The paperwork has to be done on one of two ministry-issued standard forms; each form has two versions – one for employees, volunteers and students, and one for parents of children. The forms are public and available in both English and French on the Government of Ontario's Central Forms Repository.

- Once the volunteer or student has been determined a good fit for the program and the vulnerable sector screen as well as the health assessment and immunization requirements have been received, the volunteer or student must review all policies and procedures of the centre and participate in a mandatory orientation.

- At the child care centre volunteers and students are required to exhibit professionalism, adhere to the centres program statement implementation policy and maintain confidentiality of the centre and its students.
- Volunteers and students are expected to arrive at designated times, excited and prepared to learn and engage in our daily routines and activities.
- If volunteers or students suspect any abuse or neglect, they are first asked to speak with the director or supervisor about the situation prior to calling Children’s Aid Society.

D.0 Anaphylactic Policy

Child Care Centre Anaphylactic Policy and Procedures

Name of Child Care Centre: Clara’s Place Preschool Inc.

Date Policy and Procedures Established: August 24th, 2024

Date Policy and Procedures Updated: August 24th, 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/guardian 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/guardian, and any regulated health professional who is involved in the child’s care that the

parent/guardian 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 posted in each classroom, in a file beside the door in a wall mounted file folder holder and in the office.
- All individualized plans and emergency procedures will be reviewed with a parent/guardian of the

child every 3 months (unless updates or changes are required) to ensure the information is current and up to date.

- Every child's epinephrine auto-injector must be carried everywhere the child goes.
- For students with emergency allergy medication (e.g. oral allergy medications, puffers and epinephrine auto-injectors) consider having parents/guardians keep one at the centre and a separate one for home.

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.

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.

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/guardian communication app, via email and postage on the door.

- A list of all children's allergies including food and other causative agents will be posted in all cooking and serving areas, in each play activity room, and made available in any other area where children may be present.
- Each child with an anaphylactic allergy will have an individualized plan and emergency procedures that detail signs and symptoms specific to the child describing how to identify that they are having an allergic reaction and what to do if they experience a reaction.
- Each child's individualized plan and emergency procedures will be made available and accessible wherever the child may be present while receiving child care.
- The caterer, cook, 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.

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.

Training

- The licensee will ensure that the supervisor/designate and/or all staff, students and volunteers receive training from a parent/guardian 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

If student does not have a separate emergency allergy medication that they leave at the centre ensure staff are checking to make sure the student arrives with it.

Procedures to be followed in the circumstances described below:

Circumstance	Roles and Responsibilities
<p>A) A child exhibits an anaphylactic reaction to an allergen</p>	<ol style="list-style-type: none"> 1. The person who becomes aware of the child's anaphylactic reaction must immediately: <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.
<p>B) A child is authorized to carry his/her own emergency allergy medication.</p>	<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.

Glossary

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

- Skin: hives, swelling, itching, warmth, redness, rash
- Breathing (respiratory): coughing, wheezing, shortness of breath, chest pain/tightness, throat

tightness/swelling, hoarse voice, nasal congestion or hay fever-like symptoms (runny nose and watery eyes, sneezing), trouble swallowing

- Stomach (gastrointestinal): nausea, pain/cramps, vomiting, diarrhea
- Heart (cardiovascular): pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock
- Other: anxiety, feeling of “impending doom”, headache, uterine cramps, metallic taste in mouth

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

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

- eggs
- milk
- mustard
- peanuts
- seafood including fish, shellfish, and crustaceans
- sesame
- soy
- sulphites which are food additives
- tree nuts
- wheat
- latex
- insect stings

Epinephrine: A drug used to treat allergic reactions, particularly anaphylaxis. This drug is often delivered through an auto-injector (e.g. EpiPen or Allerject).

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

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

Parent: A person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family (all references to parent include legal

guardians, but will be referred to as “parent” in the policy).

Regulatory Requirements: Ontario Regulation 137/15

Anaphylactic policy 39.

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

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

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

(a) be developed in consultation with a parent of the child and with any regulated health professional who is involved in the child’s health care and who, in the parent’s opinion, should be included in the consultation; and

(b) include a description of the procedures to be followed in the event of an allergic reaction or other medical emergency.

D.1 Prohibited Foods and Allergy Mitigation

Currently Clara’s Place Preschool is a peanut free and scent free program. Please ensure that is your child consumes peanut products prior to arriving that their hands and face are thoroughly cleaned.

Our prohibited foods and allergy mitigation will be updated as it pertains to individual registrations into our programs.

D.2 Administration of Drugs and Medication Policy

Child Care Centre Drug and Medication Administration Policy and Procedures

Name of Child Care Centre: Clara’s Place Preschool Inc.

Date Policy and Procedures Established: August 27th, 2024

Date Policy and Procedures Updated: February 5th, 2024

Purpose

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

Where the term drugs and/or medications is used in this policy, the term refers to any product with a drug identification number (DIN). For the purpose of this policy, drugs and medications fall into the following two categories:

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

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

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

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

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

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

- ensure children receive only those drugs or medications deemed necessary and appropriate by their parents;
- reduce the potential for errors;
- ensure medications do not spoil due to improper storage;
- prevent accidental ingestion;
- administer emergency allergy and asthma drugs or medications quickly when needed; and

- safely administer drugs and medications according to established routines.

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

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

Policy

Parental Authorization to Administer Medication:

- Whenever possible, parents will be encouraged to administer drugs or medications to their children at home if this can be done without affecting the child's treatment schedule.
 - Parents and guardians should strongly consider if their child is well enough to attend should they require the administration of medication prior to or while at the Child Care center
- Prescription and over-the-counter medications for acute, symptomatic treatment will only be administered to a child where a parent of the child has given written authorization to do so by completing the child care centre's Authorization for Medication Administration (the form in Appendix A may be used). **The Authorization for Medication Administration form must be accompanied by a doctor's note for over-the-counter medications.**
- The authorization must include a schedule that sets out the times the drug or medication is to be given and the amounts to be administered.
- Where a drug or medication is to be administered to a child on an "as needed" basis (i.e. there is no specific schedule or time of the day for administration), the drug or medication must be accompanied with a doctor's note outlining signs and symptoms for administering the drug or medication and the appropriate dosage. In addition, the Authorization for Medication Administration Form must clearly indicate the situations under which the medication is to be given as outlined in the doctor's note, including observable symptoms. Examples may include:
 - 'When the child has a fever of 39.5 degrees Celsius';
 - 'when the child has a persistent cough and/or difficulty breathing'; and
 - 'when red hives appear on the skin', etc.
- Prescription/over-the-counter skin products (with a DIN) that need to be administered for acute or symptomatic treatment will only be administered to a child where a parent of the child has given written authorization to do so by completing the child care centre's Authorization for Medication Administration.

- Authorization for Medical Administration Forms will be reviewed with parents each week to ensure the dosage continues to be accurate (e.g. based on the child's age or weight).

Drug and Medication Requirements

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

- All drugs and medications must be stored in their original containers as supplied by a pharmacist, or their original packages. **Medications that have been removed from their original package or transferred into a different container will not be accepted or administered to children.**

- **All drug or medication containers must be clearly labelled with:**

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

Drug and Medication Administration:

- Drugs or medications will be administered according to the instructions on the label and only with written parental authorization.
- Designated person(s) in charge of medications will deal with all drugs and medications to reduce the potential for errors, whether on or off the premises. Where the person(s) is absent, they will delegate this responsibility to another individual. The name of the individual who has been delegated and the duration of the delegation will be documented in the appropriate staff communication book (e.g. daily written record).
- A drug or medication will only be administered from its original container as supplied by a pharmacist or its original package, and where the container is clearly labelled as outlined under the Drug and Medication Requirements section of this policy.
- A drug or medication will only be administered using the appropriate dispenser (e.g. syringe, measuring spoon/cup, etc.).
- To support the prompt administration of emergency medication:
 - Emergency medications may be administered to a child by any person trained on the child's individualized plan at the child care centre; and
 - Children will be allowed to carry their own asthma or emergency medication in accordance with this policy, the drug and medication administration procedures, and the child's individualized plan, where applicable.
- Drugs or medications that are expired (including epinephrine) will not be administered at any time

Record-Keeping:

- Records of medication administration will be completed using the Records of Medication Administration (the form in Appendix B may be used) every time drugs or medications are administered. Completed records will be kept in the child's file.
- Where a child's medication administration form includes a schedule setting out specific times to administer the medication and the child is absent on a day medication would have been administered, the child's absence will be documented on the medication administration record to account for all days during the treatment period (excluding weekends, holidays and planned closures).
- If a dose is missed or given late, reasons will be documented on the record of medication administration and a parent will be notified as soon as possible as it may impact the treatment schedule or the child's health.

- Where a drug or medication is administered 'as needed' to treat specific symptoms outlined in a child's medication administration form or individualized plan and emergency procedures for an anaphylactic allergy (e.g. asthma, fever, allergic reaction), the administration and the reason for administering will be documented in the appropriate staff communication book (e.g. daily written record) and in the child's symptoms of illness record. 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).

Drug and Medication Administration Procedures

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

ROLES AND RESPONSIBILITIES

1. Staff must:

i. provide the parent with the appropriate form to complete to obtain written authorization to administer the medication from Appendix A as applicable;

ii. verify that drug or medication:

- is accompanied by a doctor's note (for over-the-counter medications);
- is in its original container as prescribed by the pharmacist or in the case of over-the counter medications is in its original package; and
- is not expired.

iii. obtain the appropriate dispenser, where applicable;

iv. review the medication administration form and (and doctor's note, where applicable), and the label to verify that all sections are complete and accurate, and that the information in the authorization matches the medication label.

- Where errors are found on the form or the label is incomplete, the form/medication must be returned to the parent to make and initial corrections;

v. sign the form once it is complete and accurate;

- vi. take the drug or medication and dispenser and store it in the designated locked storage space in accordance with the instructions for storage on the label; and
- vii. log the receipt of the authorization form and the drug or medication for the child in the appropriate staff communication book (e.g. daily written record).

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

ROLES AND RESPONSIBILITIES

1. Staff must:

- i. ensure that written parental authorization is obtained to allow the child to carry their own emergency medication;
- ii. ensure that the medication remains on the child (e.g., fanny pack, holster) and is not kept or left unattended anywhere at the child care centre (e.g. in the child's cubby or backpack);
- iii. ensure that appropriate supervision is maintained of the child while they are carrying their medication and children in their proximity so that other children do not have access to the medication; and

2. Where there are safety concerns relating to the child carrying his/her own medication (e.g. exposure to other children), notify the centre supervisor/designate and the child's parent of these concerns and discuss and implement mitigating strategies. Document the concerns and resulting actions in the appropriate staff communication book (e.g. daily written record).

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

ROLES AND RESPONSIBILITIES

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

- i. prepare the medication dosage in a well-lit area in the appropriate measuring device, where applicable (e.g. do not use a household spoon for liquid medications);
- ii. where possible, remove the child from the activity area to a quiet area with the least possible interruption;
- iii. administer the medication to the child in accordance with the instructions on the label and the written parental authorization;
- iv. document the administration of the drug or medication and any comments/observations on the medication administration record after it has been administered (see Appendix B);

- v. store the medication in the designated storage space in accordance with the instructions on the label and the parental authorization received on the medication administration form; and
- vi. where applicable, document any symptoms of ill health in the child's records.
- vii. Where a medication is administered on an "as needed" basis, notify a parent of the child.
- viii. Where a child is absent, document the absence on the Record of Drug/Medication Administration (Appendix B).

2. Where an emergency allergy medication must be administered due to a severe allergic reaction, the staff who becomes aware of the emergency situation must immediately:

- i. administer the emergency medication to the child in accordance with the emergency procedures on the child's individualized plan;
- ii. administer first aid to the child, where appropriate;
- iii. contact, or have another person contact emergency services, where appropriate; and
- iv. contact, or have the supervisor/designate contact a parent of the child.

After the emergency situation has ended:

- i. document the administration of the drug or medication on the medication administration record (see Appendix B);
- ii. document the incident in the appropriate staff communication book (e.g. daily written record).; and
- iii. document any symptoms of ill health in the child's records, where applicable.

3. Where a child is authorized to self-administer their own drug or medication, the person in charge must:

- i. supervise and observe the child self-administer the drug or medication to ensure that the proper dosage and procedure for administration is being followed;
- ii. where the child asks for help, assist the child in accordance with the parent's written authorization;
- iii. document the administration of the drug or medication and any comments/observations on the medication administration record after it has been administered (see Appendix B);
- iv. store the medication in the designated storage space in accordance with the instructions on the label and the parental authorization received on the medication administration form, unless the child is authorized to carry his/her own emergency allergy medication (in such cases, follow

the steps outlined in Scenario C [a child is authorized to carry their own emergency allergy medication]);

- v. where applicable, document any symptoms of ill health in the child's records; and
- vi. where there are safety concerns relating to the child's self-administration of drugs or medications, notify the centre supervisor/designate and the child's parent of these concerns, and discuss and implement mitigating strategies. Document the concerns and resulting actions in the appropriate staff communication book (e.g. daily written record).

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

ROLES AND RESPONSIBILITIES

1. Where adverse symptoms appear upon medication administration, the person in charge must immediately:

- i. administer first aid to the child, where appropriate;
- ii. contact emergency services, where appropriate and send the drug/medication and administration information with the child if they are leaving the premises to seek medical attention;
- iii. notify a parent of the child;
- iv. notify the supervisor/designate;
- v. document the incident in the appropriate staff communication book (e.g. daily written record); and
- vi. document any symptoms of ill health in the child's records, where applicable. Where the reaction results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

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

ROLES AND RESPONSIBILITIES

1. The person in charge must immediately:

- i. where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication); and
- ii. contact the parent of the child to report the error;
- iii. report the error to the supervisor/designate;

- iv. document the actual administration of the drug or medication on the medication administration record (see Appendix B); and
- v. document the incident in the appropriate staff communication book (e.g. daily written record). Where any reaction to a drug or medication results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

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

ROLES AND RESPONSIBILITIES

1. The person in charge must immediately:
 - i. where applicable, follow the steps outlined in Scenario D (a child has a reaction to administered medication); and
 - ii. contact the parents of the children affected to report the error;
 - iii. report the error to the supervisor/designate;
 - iv. document the incident in the appropriate staff communication book (e.g. daily written record); and
 - v. administer the medication to the correct child per Scenario B (a drug or medication must be administered to a child). Where any reaction to a drug or medication results in a life-threatening situation for the child, call emergency services and follow the serious occurrence policy and procedures.

SCENARIO: Surplus or expired medication is on site.

ROLES AND RESPONSIBILITIES

1. Where possible, the surplus or expired medication must be returned to a parent of the child.
2. Where attempts have been made to return a drug or medication to a parent and the parent has not taken the medication home, the person in charge of drugs and medications will attempt to return unused drugs or medications to a local pharmacist for proper disposal.

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

Glossary

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

Drug or Medication: Any product with a drug identification number (DIN) Drugs and medications fall into the following two categories, unless otherwise specified in this policy:

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

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

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

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

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

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

Regulatory Requirements: Ontario Regulation 137/15

ADMINISTRATION OF DRUGS OR MEDICATIONS

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

(a) a written procedure is established for,

(i) the administration of any drug or medication to a child receiving child care at a child care centre operated by the licensee or at a premises where it oversees the provision of home child care, and

(ii) the keeping of records with respect to the administration of drugs and medications

(b) all drugs and medications on the premises of a child care centre operated by the licensee or at a premises where it oversees the provision of home child care are,

(i) stored in accordance with the instructions for storage on the label,

(ii) administered in accordance with the instructions on the label and the authorization received under clause (d),

(iii) inaccessible at all times to children, and

(iv) in the case of a child care centre, kept in a locked container;

(c) one person in each child care centre operated by the licensee and in each premises where it oversees the provision of home child care is in charge of all drugs and medications and that all drugs and medications are dealt with by that person or a person designated by that person in accordance with the procedures established under clause (a);

(d) a drug or medication is administered to a child only where a parent of the child gives written authorization for the administration of the drug or medication and that included with the authorization is a schedule that sets out the times the drug or medication is to be given and amounts to be administered; and

(e) a drug or medication is administered to a child only from the original container as supplied by a pharmacist or the original package and that the container or package is clearly labelled with the child's name, the name of the drug or medication, the dosage of the drug or medication, the date of purchase and expiration, if applicable, and instructions for storage and administration.

(2) Despite subclauses (1) (b) (iii) and (iv) and clause (1) (c), the licensee may permit a child to carry his or her own asthma medication or emergency allergy medication in accordance with the procedures established under clause (1) (a).

(3) The following items do not constitute drugs or medication for the purposes of this section, except

where the item is a drug, as defined in the Drug and Pharmacies Regulation Act, prescribed for a child

by a health professional:

1. Sunscreen.
2. Moisturizing skin lotion.
3. Lip balm.
4. Insect repellent.
5. Hand sanitizer.
6. Diaper cream.

(4) In respect of an item described in subsection (3) that does not constitute a drug or medication for the purposes of this section, a licensee shall ensure that,

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

E.0 Parent/Guardian Issues and Concerns Policy

Parent/Guardian Issues and Concerns Policy and Procedures

Name of Child Care Centre: Clara's Place Preschool Inc.

Date Policy and Procedures Established: September 6th, 2024

Date Policy and Procedures Updated: September 6th, 2024

Purpose

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

Definitions

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

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

Policy

General

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

All issues and concerns raised by parents/guardians are taken seriously by the director and will

be addressed. Every effort will be made to address and resolve issues and concerns to the satisfaction of all parties and as quickly as possible.

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

An initial response to an issue or concern will be provided to parents/guardians within 3 business day(s). The person who raised the issue/concern will be kept informed throughout the resolution process.

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

Confidentiality

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

Conduct

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

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

Concerns about the Suspected Abuse or Neglect of a child

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

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

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

For more information, visit

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

Procedures

Nature of Issue or Concern	Steps for Parent and/or Guardian to Report Issue/Concern:	Steps for Staff and/or Licensee in responding to issue/concern:
Program Room-Related E.g.: schedule, sleep arrangements, toilet training, indoor/outdoor program activities, feeding arrangements, etc.	Raise the issue or concern to <ul style="list-style-type: none"> - the classroom staff directly or <ul style="list-style-type: none"> - the supervisor or licensee. 	<ul style="list-style-type: none"> - Address the issue/concern at the time it is raised or <ul style="list-style-type: none"> - arrange for a meeting with the parent/guardian within 1-3 business days. Document the issues/concerns in detail. Documentation should include: <ul style="list-style-type: none"> - the date and time the issue/concern was received; - the name of the person who received the issue/concern; - the name of the person reporting the issue/concern; - the details of the issue/concern; and - any steps taken to resolve the issue/concern and/or information given to the parent/guardian regarding next steps or referral.
General, Centre- or Operations-Related E.g.: child care fees, hours of operation, staffing, waiting lists, menus, etc.	Raise the issue or concern to <ul style="list-style-type: none"> - the supervisor or licensee. 	
Staff-, Duty parent-, Supervisor-, and/or Licensee-Related	Raise the issue or concern to <ul style="list-style-type: none"> - the individual directly or <ul style="list-style-type: none"> - the supervisor or licensee. <p>All issues or concerns about the conduct of staff, duty parents, etc. that puts a child's health, safety and well-being at risk should be reported to the supervisor or licensee as soon as parents/guardians become aware of the situation.</p>	Provide contact information for the appropriate person if the person being notified is unable to address the matter. <p>Ensure the investigation of the issue/concern is initiated by the appropriate party within 1-3 business days or as soon as reasonably possible thereafter. Document reasons for delays in writing.</p>
Student- / Volunteer-Related	Raise the issue or concern to <ul style="list-style-type: none"> - the staff responsible for supervising the volunteer or student or <ul style="list-style-type: none"> - the supervisor and/or licensee. <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 supervisor or licensee as soon as parents/guardians become aware of the situation.</p>	Provide a resolution or outcome to the parent(s)/guardian(s) who raised the issue/concern.

Escalation of Issues or Concerns: Where parents/guardians are not satisfied with the response or outcome of an issue or concern, they may escalate the issue or concern verbally or in writing to the issue relating regulatory bodies listed below.

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

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

Contacts:

Licensee/Director, Jasmine Badger 705-346-2552

North Bay/Parry Sound Health Unit (705) 746-5801

Ontario Provincial Police- West Parry Sound, (705) 746-4225

Ministry of Natural Resources and Forestry-Parry Sound, (705) 746-4201

Ministry of Labour-Ontario +1 833-279-4733

Parry Sound Fire Complex, (705) 746-2262

College of Early Childhood Educators, (416) 961-8558

Ontario College of Teachers, +1 (416) 961-8800

Ontario College of Social Workers and Social Service Workers, (416) 972-9882

Children's Aid Society Nipissing and Parry Sound, (705) 746-9354

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

Regulatory Requirements: Ontario Regulation 137/15**Parent issues and concerns**

45.1 Every licensee shall ensure that there are written policies and procedures that set out how parents' issues and concerns will be addressed, including details regarding,

(a) the steps for parents to follow when they have an issue or concern to bring forward to the licensee;

(b) the steps to be followed by a licensee and its employees in responding to an issue or concern brought forward by a parent; and

(c) when an initial response to the issue or concern will be provided. O. Reg. 126/16, s. 31.

Parent handbook

45. (1) Every licensee shall have a parent handbook for each child care centre or home child care agency it operates which shall include,

(a.2) a copy of the licensee's policies and procedures required under section 45.1 regarding how parents' issues and concerns will be addressed;

Intent

This provision is intended to provide licensees and parents with a clear and transparent procedure to follow when a parent has brought forward an issue or concern, they wish to have addressed by the licensee.

F.0 Prohibited Practices

(Ontario Regulation 137/15)

48. No licensee shall permit, with respect to a child receiving child care at a child care centre it operates or at a premises where it oversees the provision of child care,

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

No employee or volunteer of the licensee, or student who is on an educational placement with the licensee shall engage in any of the prohibited practices set out in subsection (1) with respect to a child receiving child care.

Intent

- Section 48 is in place to protect the safety and security of children by prohibiting dangerous, threatening and hurtful behaviours and practices which can cause serious physical or psychological harm to children.
- Section 48 applies to all persons in the child care centre at all times whether the children are on or off-the premises (like on a bus or on a field trip).
- It is an offence under the CCEYA to contravene or fail to comply with section 48 of the regulation per subsection 88.1(5) of the regulation.

Best practices

Children's behaviours and emotions occur within the context of and are affected by the relationships they have with the people around them. The relationships that a child has with child care staff may not be the same as a child's relationship with their parents, but these relationships are still very important and have a real impact on children.

Children who attend programs where they experience nurturing and supportive relationships with the people in the centre are happier, less anxious and more motivated to learn than those who do not have such warm relationships.

G.0 Emergency Management

Emergency Management Policy and Procedures

Name of Child Care Centre: Clara's Place Preschool Inc.

Date Policy and Procedures Established: September 15th, 2024

Date Policy and Procedures Updated: September 20th, 2024

Purpose

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

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

Definitions

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

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

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

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

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

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

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

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

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

Policy

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

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

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

For situations that require evacuation of the child care centre, the **meeting place** to gather immediately will be located at: 66 A Waubeek Street, Parry Sound P2A 1C6- In the grass field (near batting cage) by staff parking lot

If it is deemed 'unsafe to return' to the child care centre, the **evacuation site** to proceed to is located at: 70 Isabella Street, Parry Sound ON P2A 1M6 (One Kids Place)

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

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

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

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

All emergency situations will be documented in detail by the director, supervisor or designate in the daily written record.

Staff and students will participate in regular fire drills. The director or supervisor will document date and time of drill in log book.

Procedures

Phase 1: Immediate Emergency Response

Emergency Situation	Roles and Responsibilities
<p>Lockdown When a threat is on, very near, or inside the child care centre. E.g. a suspicious individual in the building who is posing a threat.</p>	<ol style="list-style-type: none"> 1) The staff member who becomes aware of the threat must inform all other staff of the threat as quickly and safely as possible. 2) Staff members who are outdoors must ensure everyone who is outdoors proceeds to a safe location. 3) Staff inside the child care centre must: <ul style="list-style-type: none"> • remain calm; • gather all children and move them away from doors and windows; • take children’s attendance to confirm all children are accounted for; • take shelter in closets and/or under furniture with the children, if appropriate; • keep children calm; • ensure children remain in the sheltered space; • turn off/mute all cellular phones; and • wait for further instructions. 4) If possible, staff inside the program room(s) should also: <ul style="list-style-type: none"> • close all window coverings and doors; • barricade the room door; • gather emergency medication; and • join the rest of the group for shelter. 5) The director, supervisor or designate will immediately: <ul style="list-style-type: none"> • close and lock all child care centre entrance/exit doors, if possible; and • take shelter. <p>Note: only emergency service personnel are allowed to enter or exit the child care centre during a lockdown.</p>

<p>Hold & Secure</p> <p>When a threat is in the general vicinity of the child care centre, but not on or inside the child care premises. E.g. a shooting at a nearby building.</p>	<ol style="list-style-type: none"> 1) The staff member who becomes aware of the external threat must inform all other staff of the threat as quickly and safely as possible. 2) Staff members who are outdoors must ensure everyone returns to their program room(s) immediately. 3) Staff in the program room must immediately: <ul style="list-style-type: none"> • remain calm; • take children’s attendance to confirm all children are accounted for; • close all window coverings and windows in the program room; • continue normal operations of the program; and • wait for further instructions. 4) The director, supervisor or designate must immediately: <ul style="list-style-type: none"> • close and lock all entrances/exits of the child care centre; • close all blinds and windows outside of the program rooms; and • place a note on the external doors with instructions that no one may enter or exit the child care centre. <p>Note: only emergency services personnel are allowed to enter or exit the centre during a hold and secure.</p>
<p>Bomb Threat</p> <p>A threat to detonate an explosive device to cause property damage, death, or injuries E.g. phone call bomb threat, receipt of a suspicious package.</p>	<ol style="list-style-type: none"> 1) The staff member who becomes aware of the threat or the director, supervisor or designate must: <ul style="list-style-type: none"> • remain calm; • call 911 if emergency services is not yet aware of the situation; • follow the directions of emergency services personnel; and • take children’s attendance to confirm all children are accounted for. A. Where the threat is received by telephone, the person on the phone should try to keep the suspect on the line as long as possible while another individual calls 911 and communicates with emergency services personnel. B. Where the threat is received in the form of a suspicious package, staff must ensure that no one approaches or touches the package at any time.

Disaster Requiring Evacuation

A serious incident that affects the physical building and requires everyone to leave the premises. E.g. fire, flood, power failure.

1) The staff member who becomes aware of the disaster must inform all other staff of the incident and that the centre must be evacuated, as quickly and safely as possible. If the disaster is a fire, the fire alarm pull station must be used and staff must follow the centre's fire evacuation procedures.

2) Staff must immediately:

- remain calm;
- gather all children, the attendance record, children's emergency contact information any emergency medication;
- exit the building with the children using the nearest safe exit, bringing children's outdoor clothing (if possible) according to weather conditions;
- escort children to the meeting place; and
- take children's attendance to confirm all children are accounted for;
- keep children calm; and
- wait for further instructions.

3) If possible, staff should also:

- take a first aid kit; and
- gather all non-emergency medications.

4) Designated staff will:

- help any individuals with medical and/or special needs who need assistance to go to the meeting place (in accordance with the procedure in a child's individualized plan, if the individual is a child); and
- in doing so, follow the instructions posted on special needs equipment or assistive devices during the evacuation.
- If individuals cannot be safely assisted to exit the building, the designated staff will assist them to the closest accessible exit and ensure their required medication is accessible, if applicable; and
- wait for further instructions.

5) If possible, the site designate must conduct a walk-through of the child care centre to verify that everyone has exited the building and secure any windows or doors, unless otherwise directed by emergency services personnel.

<p>Disaster – External Environmental Threat</p> <p>An incident outside of the building that may have adverse effects on persons in the child care centre. E.g. gas leak, oil spill, chemical release, forest fire, nuclear emergency.</p>	<p>1) The staff member who becomes aware of the external environmental threat must inform all other staff of the threat as quickly and safely as possible and, according to directions from emergency services personnel, advise whether to remain on site or evacuate the premises.</p> <p>If remaining on site:</p> <p>1) Staff members who are outdoors with children must ensure everyone who is outdoors returns to their program room immediately.</p> <p>2) Staff must immediately:</p> <ul style="list-style-type: none"> • remain calm; • take children’s attendance to confirm all children are accounted for; • close all program room windows and all doors that lead outside (where applicable); • seal off external air entryways located in the program rooms (where applicable); • continue with normal operations of the program; and • wait for further instructions. <p>3) 5) The director, supervisor or designate must:</p> <ul style="list-style-type: none"> • seal off external air entryways not located in program rooms (where applicable); • place a note on all external doors with instructions that no one may enter or exit the child care centre until further notice; and • turn off all air handling equipment (i.e. heating, ventilation and/or air conditioning, where applicable). <p>If emergency services personnel otherwise direct the child care centre to evacuate, follow the procedures outlined in the “Disaster Requiring Evacuation” section of this policy.</p>
<p>Natural Disaster: Tornado / Tornado Warning</p>	<p>1) <i>The staff member who becomes aware of the tornado or tornado warning must inform all other staff as quickly and safely as possible.</i></p> <p>2) Staff members who are outdoors with children must ensure everyone who is outdoors returns to their program room(s) immediately.</p> <p>3) <i>Staff must immediately:</i></p> <ul style="list-style-type: none"> • remain calm; • <i>gather all children;</i> • <i>go to the basement or take shelter in small interior ground floor rooms such as washrooms, closets or hallways;</i> • take children’s attendance to confirm all children are accounted for; • <i>remain and keep children away from windows, doors and exterior walls;</i> • keep children calm; • conduct ongoing visual checks of the children; and • wait for further instructions.

<p>Natural Disaster: Major Earthquake</p>	<ol style="list-style-type: none"> 1) Staff in the program room must immediately: <ul style="list-style-type: none"> • remain calm; • instruct children to find shelter under a sturdy desk or table and away from unstable structures; • ensure that everyone is away from windows and outer walls; • help children who require assistance to find shelter; • for individuals in wheelchairs, lock the wheels and instruct the individual to duck as low as possible, and use a strong article (e.g. shelf, hard book, etc.) to protect their head and neck; • find safe shelter for themselves; • visually assess the safety of all children.; and • wait for the shaking to stop. 2) Staff members who are outdoors with children must immediately ensure that everyone outdoors stays away from buildings, power lines, trees, and other tall structures that may collapse, and wait for the shaking to stop. 3) Once the shaking stops, staff must: <ul style="list-style-type: none"> • gather the children, their emergency cards and emergency medication; and • exit the building through the nearest safe exit, where possible, in case of aftershock or damage to the building. 4) If possible, prior to exiting the building, staff should also: <ul style="list-style-type: none"> • take a first aid kit; and • gather all non-emergency medications. 5) Individuals who have exited the building must gather at the meeting place and wait for further instructions. 6) Designated staff will: <ul style="list-style-type: none"> • help any individuals with medical and/or special needs who need assistance to go to the meeting place (in accordance with the procedure in a child’s individualized plan, if the individual is a child); and • in doing so, follow the instructions posted on special needs equipment or assistive devices during the evacuation. • If individuals cannot be safely assisted to exit the building, the designated staff will assist them to the closest accessible exit and ensure their required medication is accessible, if applicable; and • wait for further instructions. 7) The site designate must conduct a walkthrough of the child care centre to ensure all individuals have evacuated, where possible.
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Phase 2: Next Steps During the Emergency

- 1) Where emergency services personnel are not already aware of the situation, the director, supervisor or designate must notify emergency services personnel (911) of the emergency as soon as possible.
- 2) Where the child care centre has been evacuated, emergency services must be notified of individuals remaining inside the building, where applicable.
- 3) If the licensee is not already on site, the site designate must contact the licensee to inform them of the emergency situation and the current status, once it is possible and safe to do so.

List of Emergency Contact Persons: For Emergencies Call 911

Local Police Department: 705-746-4225

Ambulance: 705-746-8440

Local Fire Services: 705-746-2262

Site Supervisor: Mackenzie 705-774-1898

Licensee Contact(s): Jasmine 705-346-2552

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

8a) Procedures to Follow When "All-Clear" Notification is Given

<p>Procedures</p>	<ol style="list-style-type: none"> 1) The individual who receives the 'all-clear' from an authority must inform all staff that the 'all-clear' has been given and that it is safe to return to the child care centre. 2) Designated staff who have assisted individuals with medical and/or special needs with exiting the building will assist and accompany these individuals with returning to the child care centre. 3) Staff must: <ul style="list-style-type: none"> • take attendance to ensure all children are accounted for; • escort children back to their program room(s), where applicable; • take attendance upon returning to the program room(s) to ensure that all children are accounted for; where applicable; and • re-open closed/sealed blinds, windows and doors. 4) the director, supervisor or designate will determine if operations will resume and communicate this decision to staff.
<p>Communication with parents/guardians</p>	<ol style="list-style-type: none"> 1) As soon as possible, the director, supervisor or designate must notify parents/guardians of the emergency situation and that the all-clear has been given. 2) Where disasters have occurred that did not require evacuation of the child care centre, the director must provide a notice of the incident to parents/guardians by sending a message via our program's communication app. 3) If normal operations do not resume the same day that an emergency situation has taken place, the director must provide parents/guardians with information as to when and how normal operations will resume as soon as this is determined.

8b) Procedures to Follow When “Unsafe to Return” Notification is Given	
Procedures	<ol style="list-style-type: none"> 1) The individual who receives the ‘unsafe to return’ notification from an authority must inform all staff of this direction and instruct them to proceed from the meeting place to the evacuation site, or the site determined by emergency services personnel. 2) Staff must take attendance to confirm that all children are accounted for, and escort children to the evacuation site. 3) Designated staff who have assisted individuals with medical and/or special needs with exiting the building will assist and accompany these individuals to the evacuation site. 4) the director, supervisor or designate will post a note for parents/guardians on the child care centre entrance with information on the evacuation site, where it is possible and safe to do so. 5) Upon arrival at the evacuation site, staff must: <ul style="list-style-type: none"> • remain calm; • take attendance to ensure all children are accounted for; • help keep children calm; • engage children in activities, where possible; • conduct ongoing visual checks and head counts of children; • maintain constant supervision of the children; • keep attendance as children are picked up by their parents, guardians or authorized pick-up persons; and • remain at the evacuation site until all children have been picked up.
Communication with parents/guardians	<ol style="list-style-type: none"> 1) Upon arrival at the emergency evacuation site, the director, supervisor or designate will notify parents/guardians of the emergency situation, evacuation and the location to pick up their children. 2) Where possible, the director or supervisor will update the child care centre’s voicemail box as soon as possible to inform parents/guardians that the child care centre has been evacuated, and include the details of the evacuation site location and contact information in the message.

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

<p>Procedures for Resuming Normal Operations</p> <p>E.g. where, applicable, reopening the child care centre, contacting the Ministry of Education Program Advisor, responding to media and community inquiries, contacting the insurance company, informing the caterer, temporarily relocating, etc.</p>	<p>if possible, reopen centre. (If necessary, and are able to- find temporary location); Contact parents via email or phone; Contact volunteers and students via email; Contact Ministry of Education Program Advisor; and if necessary; respond to media and community inquires. Contact insurance company if necessary.</p>
<p>Procedures for Providing Support to Children and Staff who Experience Distress</p>	<p>If staff, volunteers, students or children experience stress related to an emergency event at Clara’s Place, management will provide individuals or parents/ guardians with the contact information for North Bay/Parry Sound District Health Unit to access appropriate mental health supports & services. North Bay/Parry Sound District Health Unit: 1 (705) 746-5801</p>
<p>Procedures for Debriefing Staff, Children and Parents/ Guardians</p> <p>Include, where, applicable, details about when and how the debrief(s) will take place, etc.</p>	<p>The director must debrief staff, children and parents/guardians after the emergency.</p> <p>The director and supervisor will prepare a memo providing details of the emergency situation and next steps for the centre to resume regular service to clients. This memo will be emailed to all parents/guardians, staff, volunteers and students. If individuals do not have an email address, staff will contact these individuals by phone. Parents/guardians are welcome to call or set up a meeting to discuss the situation further.</p>

G.1 Accident Reporting

When an accident occurs at school, staff are required to fill out an “accident report” and send a copy to parents/guardians via the program communication app or email. Parents/guardians will be asked to sign the report at pick up.

For severe injuries parents/guardians will be called immediately.



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H.0 Exclusion of Sick Children

Childcare professionals, parents/guardians, and the Health Unit all share the common goal of protecting and promoting health in childcare. Our student's health and wellness are our top priority.

To prevent the spread of illness and keep everyone healthy if your child is sick, please keep them home and let us know they will not be attending.

Students are required upon registration to submit updated immunizations and may not attend until immunizations are up to date- for the health and safety of others.

We ask that Parents and guardians strongly consider if their child is well enough to attend should they require the administration of medication prior to or while at the Child Care center.

Please keep your child home if they exhibit the following symptoms;

Children may be sent home if they display these symptoms while in our care

- Vomiting
- Two or more unexplained episodes of diarrhea within a 24-hour period.
- Fever
- New or worsening cough
- Runny nose that's green in colour
- Demonstrating symptoms of bacterial conjunctivitis such as redness in the eye, clear, white, yellow, or green discharge or crusting
- Small, fluid-filled blisters on or around the lips (cold sores/hand foot and mouth disease)
- Unidentified rash
- Inability to participate in daily programming and routines (e.g. falling asleep during morning or afternoon routines)

If a child is staying home due to illness OR they have been sent home due to illness they cannot return until they are:

1. fever free
2. symptoms have been improving for at least 24 hours or 48 hours if vomiting or diarrhea



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3. Children with streptococcal pharyngitis, impetigo or bacterial conjunctivitis need 24 hours of antibiotic therapy before returning to child care.
4. Children with cold sores may return when sore(s) are healed

Outbreaks

Germs can spread rapidly in group settings such as a childcare centre. Prevention, timely detection, and management of outbreaks are key to reducing the impact of the illness in these settings.

What is it?

An outbreak may be occurring when you have a greater than usual number of persons ill with the same symptoms (e.g., fever, diarrhea, vomiting, cough, and/or rash) in a specific period of time.

Gastroenteritis outbreaks

Symptoms of infectious gastroenteritis include vomiting and/or diarrhea. It is also known as the "stomach flu". Gastroenteritis can be caused by several different viruses, including rotaviruses and noroviruses, bacteria, or parasites.

A gastroenteritis outbreak exists when you have two or more cases of infectious gastroenteritis within a 48-hour period.

To be considered a case, one of the following must be met:

- Two or more unexplained episodes of diarrhea within a 24-hour period.
- Two or more unexplained episodes of vomiting within a 24-hour period.
- One episode of diarrhea and one episode of vomiting within a 24-hour period, not explained by another cause.

Respiratory outbreaks

Symptoms of respiratory illness may include fever, headache, cough, sore throat, runny nose, sore muscles, or tiredness. Children can have as many as 8 to 10 colds per year. Illness is typically mild and often caused by a virus.

Since children are exposed to many viral illnesses circulating in the community and within families, increased respiratory illness at a childcare centre does not necessarily result in an outbreak being declared. However, infection prevention and control (IPAC) measures are put in place to limit the spread of illness at the centre.



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Parents must be able to pick up their child (or designate an emergency contact) within an hour at any given time during preschool hours should you be required to

Let's do our part to keep others safe and healthy!

I.0 Behaviour Management Policy

At Clara's Place Preschool Inc. the health, safety and wellbeing of our students and staff are our top priority. The goal of the behaviour management policy is to maintain a safe, positive environment for everyone while helping children to cope with feelings, aggression and conflicts.

Procedures:

1. Classrooms will be set up in such a way that children are free from unnecessary restrictions allowing child directed play. Staff will ensure that all areas are safe for students.
2. If necessary, staff will set out whatever limits are necessary prior to activities beginning. They will follow through on these limits consistently.
3. Staff will at all times approach problems in a calm and patient manner. Their behaviour will model appropriate interaction with each other and students.
4. By maintaining close observations of students, staff will be aware of potential problems. They will try to position themselves if necessary close to children who may have trouble coping.
5. Developmentally appropriate planned daily activities ensure children are engaged in positive behaviour.
6. Staff will help the children to verbalize their feelings, to identify and express anger, frustration, sadness and happiness.
7. In the event of a volatile circumstance such as when a child becomes harmful to him/herself or others, staff will implement the following procedures to de-escalate the behaviour:
 - Seek assistance from other staff
 - Remove child from classroom if necessary
 - Implement calming techniques such as: taking the child for a walk
8. Children will never be labelled as bad. Staff will strive to help the children see that hitting, biting, pushing, etc. are not acceptable. They will help all the children find a constructive way of expressing feelings.
9. If staff are having problems dealing with a situation, they may need to call upon another staff member for support and/or assistance.



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Behaviour Management Policy for Individual Children:

When an individual child is exhibiting a consistent behaviour that can cause self-harm or harm to another individual i.e. pulling hair, scratching, spitting, excessive hitting, or kicking, the following will occur;

1. ABC functional assessment is to be completed.
2. Parents are notified of the behaviour, strategies used to redirect thus far and warned that if it does continue (the same harmful behaviour 3 or more times) the child may have to be picked up
3. Behaviour Support Plan is to be developed and implemented by staff
4. All staff, volunteers, students and child's parents are to be notified and given instructions about the Individual Behaviour Support Plan.

To prevent serious physical and mental harm to staff and students the following specific circumstances will be handled as indicated below;

Biting- If a child bites someone a note will be sent to parents. If they bite again in the same day, it will be required that they get picked up. They are then placed on a "probation" for the remainder of the week in which they will be sent home each day after the first biting instance.

Swearing- If a child is using vulgar words or terminology such as swear words and this continues after several attempts to redirect families may be asked to pick their child up in an effort to prevent other students from copying said words.

If a child demonstrates a pattern of putting their hand(s) down their pants for health and safety concerns parents will be asked to dress their child in a shirt that buttons at the bottom, preventing them from engaging in this behaviour. If the child does not come in said type of shirt one may be put on them or staff may ask that you pick up your child

Parents must be able to pick up their child (or designate an emergency contact) within an hour at any given time during preschool hours should you be required to

J.0 Arrival and Departure

Safe Arrival and Dismissal Policy and Procedures

Name of Child Care Centre: Clara's Place Preschool Inc.

Date Policy and Procedures Established: August 29th, 2024



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Date Policy and Procedures Updated: August 29th, 2024

Purpose

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

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

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

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

Policy

General

- Clara's Place Preschool 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.
- Clara's Place Preschool will only dismiss children into the care of their parent/guardian or another authorized individual. The centre will not release any children from care without supervision.
- Where a child does not arrive in care as expected or is not picked up as expected, staff must follow the safe arrival and dismissal procedures set out below.

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:



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- greet the parent/guardian and child.
- ask the parent/guardian how the child's evening/morning has been and if there are any changes to the child's pick-up procedure (i.e., someone other than the parent/guardian picking up).

Where the parent/guardian has indicated that someone other than the child's parent/guardians will be picking up, the staff must;

- confirm that the person is listed on the child's approved pickup list located on the child's profile of the parent communication app or
- where the individual is not listed, ask the parent/guardian to provide authorization for pick-up in writing (e.g., note or email)
- document the change in pick-up procedure in the daily written record.
- sign the child in on the classroom attendance record.

Where a child has not arrived in care as expected

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

-inform the lead educator and supervisor and they must commence contacting the child's parent/guardian no later than 10:00 A.M. Staff shall send a message or email via the program's communication app and if no response is received within 25 minutes of sent message a phone call must be made at least once to each parent/guardian (if no one answers leave message).

- If contact has not been made after above steps to confirm absence or late arrival of the child by 10:45 A.M. notify the director who will reach out to the emergency contacts on the child's file and if necessary, the police.

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



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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 15-20 minutes after said time the lead educator or supervisor shall contact the parent/guardian via the program's communication app and advise that the child is still in care and has not been picked up.

-Where the staff is unable to reach the parent/guardian, staff must try calling and leaving a message. 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 notify the director and wait until program closes, then refer to procedures under "where a child has not been picked up and program is closed".

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

1. Where a parent/guardian or authorized individual who was supposed to pick up a child



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from care and has not arrived by 5:00 P.M. staff shall notify the director, ensure that the child is given a snack and activity, while they await their pick-up.

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

3. If the staff is unable to reach the parent/guardian or authorized individual who was responsible for picking up the child, the staff shall contact other authorized individuals listed on the child's file.

4. Where the staff is unable to reach the parent/guardian or any other authorized individual listed on the child's file (e.g., the emergency contacts) by 5:30 P.M. the staff shall proceed with contacting the local Children's Aid Society (CAS) at 705-472-0910 or 705-746-9354. Staff shall follow the CAS's direction with respect to next steps.

Staff will only release children from care to the parent/guardian or other authorized adult.

Under no circumstances will children be released from care to walk home alone.

Glossary

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

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

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

Please note:



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Students cannot be dropped off before 8:00 a.m. or picked up later than 4:45 p.m. If a student is not picked up by the closing time of 4:45 p.m. you could be charged a late pickup fee.

In the event that an emergency arises please ensure to send a message or call.

J.1 Safe Re-Entrance into School from Outdoor Play Protocol

Name of Child Care Centre: CLARA'S PLACE PRESCHOOL INC.

Date Established: January 23rd, 2026

Date Updated: January 23rd, 2026

Purpose

The purpose of the "Safe Re-Entrance into School from Outdoor Play Protocol" is to ensure all students arrive safely back into the building after outdoor play.

Procedure

During outdoor play staff need to be completing head counts every 15-20 minutes

Re-entrance from the **preschool** playground to classroom via the walkway and side door:

1. Educators call upon students to meet at the gate where they complete a head count, do a sweep of the playground and notify via walkie talkie how many students they have and that they are heading inside
2. As the educator opens the gate one at a time students go through while the educator taps each student's head, counting out loud directing students to line up on the wall
3. Once the last student is through the educator secures the gate and notifies via walkie talkie that they are in the walk way heading in with X amount of students
4. Educator instructs students to walk in a line to the door while following behind the last student
5. At the door the educator holds it open while tapping each child's head and counting out loud as they enter the class one at a time
6. Once everyone is in educator uses the attendance to perform a name to face check, calling each student's name and confirming they are inside
7. Educator confirms via walkie talkie that all children in attendance are back inside

Re-entrance from the **preschool** playground to the classroom via the backdoor:

1. Educators call upon students to meet at the bottom of the steps where they complete a head count, do a sweep of the playground and notify via walkie talkie how many students they have and that they are heading inside



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2. The educator opens the gate at the top of stairs and comes back down to the bottom where one at a time they send students up the steps tapping each student's head, counting out loud directing students to wait at the door
3. Once the last student goes up the educator follows and secures the gate behind them
4. Educator holds the door open while taping each child's head and counting out loud as they enter the hallway one at a time, finding a number in the hallway to stand at
5. Once everyone is in the door the educator shuts the door and completes another head count before entering the cubby area
6. Once in the classroom the educator uses the attendance to perform a name to face check, calling each student's name and confirming they are inside
7. Educator confirms via walkie talkie that all children in attendance are back inside

Re-entrance from the **toddler** playground classroom via the front door:

1. Educators call upon students to meet at the gate that opens to the parking lot where they complete a head count, do a sweep of the playground and notify via walkie talkie how many students they have and that they are heading inside via the front door
2. One educator opens the gate and leads the students to the front door keeping a very small gap while the other educator follows the last student and closes the gate behind them
3. The first educator opens the front door tapping each student's head and counting out loud as they enter one by one
4. Once the last student enters the second educator follows and secures the door behind them
5. Educator holds the second door open while taping each child's head and counting out loud as they enter the cubby area
6. Once everyone is through the door the educator shuts it behind them
7. Once in the classroom the educator uses the attendance to perform a name to face check, calling each student's name and confirming they are inside
8. Educator confirms via walkie talkie that all children in attendance are back inside

Re-entrance from the **toddler** playground classroom via the backdoor:

9. Educators call upon students to meet at the gate that joins the two playgrounds where they complete a head count, do a sweep of the playground and notify via walkie talkie how many students they have and that they are heading inside



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10. One educator opens the gate and leads the students to the bottom of the stairs while the other educator follows the last student and closes the gate behind them
11. The first educator opens the gate at the top of stairs assisting students one by one to the top by the back door while the other educator waits with the other students competing a head count out loud as they go up the stairs
12. Once the last student goes up the second educator follows and secures the gate behind them
13. Educator holds the door open while tapping each child's head and counting out loud as they enter the hallway one at a time, finding a number in the hallway to stand at
14. Once everyone is in the door the educator shuts the door and completes another head count before entering the cubby area
15. Once in the classroom the educator uses the attendance to perform a name to face check, calling each student's name and confirming they are inside
16. Educator confirms via walkie talkie that all children in attendance are back inside

If educators have students who frequently run away or have challenges listening or following the line they will walkie talkie for assistance making their way inside

K.0 Duty to report

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

If you have reasonable grounds to suspect that a child is, or may be in need of protection, you must immediately report the suspicion and the information on which it is based directly [to a children's aid society](#). If you think the matter is urgent and you cannot reach the children's aid society, call your local police.

We all share a responsibility to protect children from harm. This includes situations where children may be at risk, suffer abuse and/or neglect in their own homes. [The Child, Youth and Family Services Act, 2017 \(CYFSA\)](#) provides protection for these children.

A professional must report that a child is, or may be, in need of protection, even when the information is otherwise confidential or privileged. This duty overrides any other provincial statutes, including the Personal Health Information Protection Act, 2004, and specifically overrides any provisions that would otherwise prohibit someone from making a disclosure.



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L.0 Weather

Outdoor play provides opportunities for discovery and learning and is also important for children's overall health and well-being.

As per Ministry requirements, children are required to spend at least two hours outdoors per day, weather permitting.

Children can play outdoors in different types of weather if they are dressed appropriately, and necessary modifications are made.

Weather permitting means the absence of severe weather conditions. Severe weather conditions include the following:

- Extreme heat/humidity alert
- Extreme cold – temperatures of -15° C or colder or a windchill of -20° C or colder
- Poor air quality – air quality advisory has been issued
- Thunderstorm warning
- Tornado warning
- Winter and ice storms (heavy snow fall, hail, ice pellets, and more.)

If the above weather occurs staff will collaborate with the supervisor or director to reduce the amount of time spent outdoors that day. This will be noted in the daily communication log and communicated with families via the Lillio app or at pickup.

M.0 Orientation and First Day Check List

You will have the opportunity to come for a scheduled orientation (meet and greet) to see the space, meet the team and ask any questions. This must be booked ahead of time and prior to the student's first day.

First Day Check List

On your child's first day (or prior to) please send the following to be left at the preschool;

- Two sets of extra clothes (dependent on season) in a **labelled** Ziplock or wet/dry bag
- Reusable water bottle, **labelled** (this goes home every night to be washed)
- Sunscreen (in summer months), **labelled**
- Indoor shoes, **labelled**
- Diapers/pull ups, wipes and any creams or ointments you would like us to use, **labelled**



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- Quiet time comfort item (e.g. stuffy), **labelled** (the preschool provides a cot sheet and blanket that are washed each week)

Daily Check List

Each day your child should come with a backpack that has the following;

- Wet/dry bag, labelled
- Proper outside clothing based on weather, labelled
- Personal reusable clean water bottle, labelled

Please ensure any personal items are labelled and personal toys be kept to a minimum of one per child. We also ask that no potential hazards be brought as a personal item (i.e., choking hazard) or packed in students backpacks.

We are not responsible for any lost or damaged personal items.

M.1 Parking

Drop off and pick up parking is located in the front parking area in between our building (66B) and Waubeek Childcare (66A).

Please be aware of children arriving and departing in the parking area.

Staff parking is located on the far side of Waubeek Childcare in front of the batters cadge.

Please be mindful of how long you are parked in the parking area. The lot is small and we have a lot of families using it for drop offs and pick ups. We also share the parking area with next door.

M.0 Contacts

Jasmine Badger, Director info@clarasplacepreschool.ca

Communication

Clara's Place Preschools main method of communication is through a communication app called bright wheel. In this app you can message staff and receive updates on the school as well as your child's day.

You can access this through an email link sent to you upon registration!



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At the time of registration, you will fill out a photo/video release consent form stating if you give permission for us to share photos/videos of your child with other families and on our social media pages. You can opt out of this and only have photos of your child go to you.

At the time of registration, you will fill out an off-premise permission form if you consent to allowing staff to take your child on community walks. You can opt out of this and alternate care will be provided.

If you have any questions, comments or concerns regarding the handbook or our program please do not hesitate to reach out



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We cannot wait to welcome you into our program!

Jasmine Badger, RECE, BASC

Owner/Operator