

BRIDLEWOOD
CHILD
LEARNING
CENTRE

PARENT HANDBOOK

I have read the Parent Handbook and understand its contents.

I have been informed this is a Peanut and Nut Free centre and agree not to bring food or beverages into the building.

**I have informed the centre of all my child's allergies or medical conditions.
If any new allergies or medical conditions change I will inform the centre immediately.**

Date: _____ Signature: _____

Date: _____ Signature: _____

(Both parents or guardians, when appropriate, should be familiar with the Parent Handbook and sign above. Please return this form to the Centre's office.)

TABLE OF CONTENTS

Dear Parents
Organization
History
Facts
Program Development
Program Statement
Program Goals
Volunteers and Students
Criminal Reference Checks
Admission Criteria
Waiting List Policy
Discharge Policy
Confidentiality
Space Sharing
Fees
Holidays and Illness
Semester
Payment Options
Returned Cheques
Late Pick-Up Charges
Arrival and Pick-Up
Health
Nutrition
Administration of Drugs
Smoking
Accidents
Holidays
Clothing
Toys
Naptime
Field Trips
Discipline
Parental Involvement
Parent Contact
Program and Parent Information
Inclement Weather
Visiting Privileges
Updating Records
Code of Behaviour
Anaphylactic Policy - Life Threatening Allergies
Pandemic Contingency Plan
Workplace Harassment and Discrimination
Violence Prevention
Concerns or Issues

Dear Parents:

The Parent Handbook has been prepared to provide you with information which will help make your child's child care experience successful, and to familiarize you with Centre policies and goals.

I look forward to getting to know you and your child throughout the coming year, and sharing with you the joys and accomplishments of your growing and developing child.

Feel free to visit with your child during the day, or join us for lunch or a field trip. Welcome to the Bridlewood Child Learning Centre!

Respectfully,

Melanie Yearington, RECE,
Director.

ORGANIZATION

The Bridlewood Child Learning Centre is governed by a Board of Directors made up of representation from the Bridlewood Community Church of the Nazarene, parents of children enrolled in the Bridlewood Child Learning Centre and the community at large. The seven person board is incorporated as a non-profit corporation under the appropriate Province of Ontario Statute.

The Bridlewood Child Learning Centre Board of Directors elects a Chair and a Vice-Chair, a Secretary, a Treasurer and two Standing Committees; Operations Committee and Finance Committee.

The day to day operation of the Centre is under the supervision of the B.C.L.C. Director who reports to the Board of Directors. The staff of the Bridlewood Child Learning Centre consists of twelve Teaching Staff, a Cook, a Housekeeper, and an Administrative Assistant. These staff report to the B.C.L.C. Director.

HISTORY

In April of 1985, Bridlewood Community Church of the Nazarene began discussions with the Ministry of Community and Social Services to plan, construct and operate a child care Centre on the Church-owned land at the corner of Eagleson Road and Stonehaven Drive in the City of Kanata. The Church determined that there was a need for child care services within the Church congregation and after conducting a survey in the communities of Bridlewood, Glen Cairn and Katimavik found that there was a critical shortage of licensed child care services in Kanata.

This information verified the Ministry's view that the City of Kanata was lacking in important child care services. It was the Church's intention to construct a facility which would serve 40 preschool children but as the planning of the project developed it became more and more evident that a larger centre ought to be built to serve a greater number.

In consultation with the Ministry of Community and Social Services and Gale and Ling Architects the Church decided on a building that would accommodate 72 preschool children in a licensed full-day program. In addition it was decided that the Church would build a gym, space for the Bluegrass Cooperative Nursery School, as well as a worship centre and offices for the Church.

The 16,600 square foot, multi-purpose building was designed to be constructed on one level with a large, landscaped, fenced play area and parking for 80 cars. Construction commenced in July 1987 and the Centre opened its doors to the first children on March 07, 1988. The 8,000 square foot, purpose built Child Learning Centre is the largest single component of the structure.

The Church began to recruit staff in November 1988 and in consultation with Evelyn Gripton from the Ministry of Community and Social Services, Lorraine Ladan was hired as the Centre's first Director.

Following is a list of features and facts about the Centre:

Architect: Alister Gale (Gale and Ling Architects)

Engineer: Ian Clapperton (Environmental Engineering)

Engineering Consultant: Paul Van Steen

Construction Manager: D. Thiessen Developments Ltd.

Landscape Architect: Wheeler-Douglas

Number of Spaces: 63

Handicapped Spaces: yes

Subsidized Spaces: yes

Type of Programs: Toddler (12 months to 30 months)

Preschool (2.5 years up to age 5)

B.C.L.C. cannot guarantee your child a spot in the higher age group based on their actual age. It will be based on their development and the availability of a spot.

Licensing: Ontario Day Nurseries Act / Child Care and Early Years Act, 2014

Classrooms: 3 large, fully equipped

Dining Room: Large, separate from group areas

Kitchen: Large, fully equipped

Gym: Available for indoor activity during inclement weather

PROGRAM DEVELOPMENT

The approaches set out in this program statement are implemented in B.C.L.C.'s programs and are reviewed at least annually to best meet the needs of the families served, and to reflect changes within the Child Care and Early Years Act, 2014. All new staff, students and volunteers will review the program statement prior to interacting with the children and at any time when the program statement is modified. We will also be asking for parent participation in a questionnaire to assist us in evaluating the program.

PROGRAM STATEMENT

The Board of Directors and Staff of Bridlewood Child Learning Centre believe that all children are unique, valuable and have the right to high quality child care without distinction or discrimination. We view each child as being competent, capable, curious and rich in potential. Our centre's pedagogy (how learning happens) and curriculum (the content of learning) are guided by 'Early Learning for Every Child Today' (ELECT) curriculum framework and Ontario's Pedagogy for the Early Years document entitled: 'How Does Learning Happen?' a "professional learning resource guide about learning through relationships for those working with young children and families." 'How Does Learning Happen?' is organized around four foundational conditions that are important for children to grow and flourish: **Belonging, Well-Being, Engagement, and Expression**. They are conditions that children naturally seek for themselves.

The centre provides a secure, consistent environment which fosters a positive self-image in every child. The classroom environment is respectful to the children's needs, facilitates decision-making and independence, and fosters creativity and language, as well as providing a warm welcome for parents. B.C.L.C. supports positive and responsive interactions among the children, parents, and all staff.

We believe that each child should, through their exploration, play and inquiry, experience a feeling of success and accomplishment on a daily basis by participating in a program that is concrete, valuable and developmentally appropriate to meet their needs and desires. We believe that children should be allowed to learn, think for themselves and be creative. They are given every opportunity to express their learning within the classroom through many different mediums

available to them. We understand that children are naturally curious and thrive while exploring the world around them and use the environment as a third teacher. We believe that a child's work and play should be respected and held in highest regard. We encourage the children to interact and communicate in a positive way and support their ability to self-regulate.

The Early Childhood Educators follow the children's lead when preparing the program. The use of open ended questions and materials accentuates explorations and discoveries of the world around the children and utilize teachable moments. Weekly program plans are posted to identify the activities for each learning area and the goals and skills we are supporting with the children through programming and documentation. Projects provide the backbone of the children's and educator's learning experiences. These projects engage the child's interests, help them to make constructive choices, challenge their curiosity which in turn, facilitates their individual learning and development. The children are developing language, cognitive, problem-solving, social-emotional and physical skills. Respectful, positive relationships for themselves, their peers and their work are supported and encouraged. Documentation is posted throughout the classroom through written format, pictures, and art work, making the children's learning visible and providing accountability to both the parents and the Ministry of Education Child Care Quality Assurance & Licensing Offices.

The progress of each child's development is evaluated by the Early Childhood Educators. Although all staff work within a team, your child will have a primary educator who will be responsible for compiling a child portfolio on your child and meet with you once during the year. We also believe that the children, the families, the community and the educators play an intrinsic role in the education of each child and we welcome that partnership with the centre.

The Board of Directors supports staff in relation to continuous professional learning. This helps the staff to develop new approaches and ways of thinking about their work; both individually and as a whole Centre. The staff attend workshops, seminars, training, etc. in order to remain current in the field. Educators also conduct yearly self-evaluations and develop personal goals for themselves, striving to complete them throughout the year.

These early childhood years are critical developmentally, intellectually, socially, psychologically and physically to optimize the fullest potential of each child. The Board of Directors and Staff are committed to providing this high quality Early Childhood Education experience for all children in our care and their families.

PROGRAM GOALS

FOR THE CHILD

1. To provide an exceptionally high quality initial educational experience for young children so that each child is able to meet their activities with success.
2. To provide child-initiated and adult-supported experiences which recognize supports and respects individual differences in children, be it needs, interests, abilities, limitations, personality, etc.
3. To provide high qualified educators who engage with, observe and listen to children using an inclusive approach. This helps to promote and encourage growth in physical, emotional, and cognitive development and provide children with a sense of belonging.

4. To plan for and create positive learning environments and experiences in which each child's learning and development will be supported. The children are active participants in the classroom environment which is planned to promote discovery and inquiry, encompassing a holistic approach of body, mind and spirit. We include materials that stimulate the senses; open ended activities which allow the child to create from the knowledge they have and also to discover beyond what they already know. Experiments allow the educators to be co-learners with the children by observing, gathering information, testing theories and reaching conclusions. Children learn best when they are engaged with their learning environment and focussed in their play.
5. To provide safe and nurturing indoor and outdoor play, rest and quiet time, into the day, and give consideration to the individual needs of the children receiving child care.
6. To foster a keener awareness and real enjoyment of the world around the children. A variety of first hand experiences such as creative arts, music, science, literature, and language are geared to the needs and development of the young child.
7. To promote the health, safety and well-being of the children. Educators teach good hygiene practices, self-care, and healthy eating by providing well balanced and nutritious meals that incorporate allergies and family or cultural preferences while following the Canada Food Guide.

FOR THE PARENTS

1. To provide affordable, licensed, non-profit quality child care so that the parent may pursue their own work or other interests.
2. To work cooperatively with the parents in identifying and meeting their child's goals through the engagement of and ongoing communication about the program and their children.
3. To support the family by providing education through newsletters, daily communication books, emails and program plans. Parents also have the opportunity to socialize with other parents of young children and attend parent/teacher interviews, discussing progress or difficulties being experienced by the child.
4. To welcome parents to visit the program or by encouraging their child to bring in resources pertaining to our projects. Parents also participate in a variety of ways such as fundraising, repairs, sharing special talents, board participation or joining us for a meal.

FOR THE COMMUNITY

1. To help meet the needs of the community for an early childhood education facility.
2. To enhance the role of the Centre as an integral part of the community by inviting special guests to the Centre, such as the local librarian or photographer for photo day. The program will also be linked with all appropriate social services, and other community resources.
3. To promote public awareness of the importance of sound educational, child care facilities for young children, which will help contribute to their wholesome growth and development as future citizens of the community.

4. To provide field placement and training for student teachers in Early Childhood Education facilities such as the local colleges, or to welcome university students who are conducting a range of special interest surveys, questionnaires or projects, or high school students participating in co-op.
5. To welcome professionals and volunteers into the program who will assist the staff in enhancing and supporting the learning experiences and environment for the children, their families and staff. Some of these experiences include specialized training coordinated through the Children's Integrated Support Services (CISS). To provide a setting where people of various backgrounds can work together for a common interest or purpose.

CHILD GUIDANCE AND PROHIBITED PRACTICES

The policies and procedures with respect to child guidance and prohibited practices shall be reviewed with all Centre employees, students and volunteers by the Director upon commencement of employment and at least annually thereafter.

Prohibited Disciplinary Practices:

The following practices are prohibited at B.C.L.C.:

- a) Corporal punishment of a 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 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.

Contravention of the Prohibited Practices

Should a contravention occur the Director will, to the best of their ability, determine the facts at issue. A meeting will be held with the person in question and the Director to discuss the possible contravention and its reason for happening and to ensure that the employee, student or volunteer understands that the requirements have not been met and an opportunity for improvement may exist. This may include but not limited to direct review of the policy and procedures, peer mentoring, formal feedback from the Director, and / or training. All discussions and actions taken will be documented and be kept on file.

Any staff member contravening the prohibited practices may be placed on probation, or if deemed necessary dismissed from employment. The Director will discuss any contraventions with the Board of Directors before a final decision is made regarding employment status.

ACCEPTABLE ACTIONS OR PRACTICES

Discipline is to be maintained by using positive techniques. A simple set of limits and guidelines are to be established in each classroom which are consistently enforced to promote self-discipline, ensure health and safety, respect the rights of others, maintain equipment and to minimize conflict and disruptive behavior.

Children are to be made aware of all limits and guidelines, and are to be given extra assistance by staff, when new to the program, in order to become familiar with and follow through with rules.

Children are to be redirected to other play areas if after two (2) warnings they still cannot stay within the established limits.

Children are to be disciplined in a manner which is appropriate to their actions and age level.

Staff are to reinforce positive behaviours in children with hugs, verbally praising children for appropriate actions and deeds, allowing children to select favorite activities and so on.

A quiet area of the room can be used for periods of up to two (2) minutes (or longer if by choice of the child) for aggressive behaviours such as biting, hitting, pushing, etc.

Staff are role models for the children, and should behave in an appropriate manner. Yelling at children is an unacceptable form of discipline.

Undesirable behavior by children should be prevented whenever possible by good supervision, anticipating potential disruptions, intervening and redirecting.

The daily schedule, program plans and classroom floor plans should be re-evaluated if numerous behavior difficulties are being experienced with a particular group of children.

Some behaviours are best to ignore, such as inappropriate language, so as not to focus too much attention on the child. Behaviours will likely increase if a child gains too much attention for his/her actions, particularly if a reaction of shock and obvious anger is displayed by others.

If a difficult situation arises with a child, the classroom Team Leader and the Director should be informed. A meeting can be scheduled with the parents to discuss strategies.

Methods of discipline are to be discussed at staff meetings, so that consistency is ensured. Questions concerning discipline can be brought to the Team Leader and Director.

VOLUNTEER AND STUDENT POLICY

Volunteers and Students are responsible to report directly to a designated staff member. The designated staff member will be supported in the supervision of students and volunteers. Volunteers and Students must read and agree to follow Bridlewood Child Learning Centre's behaviour management policies and procedures related to volunteers and students. They must familiarize themselves with all anaphylaxis children and any emergency procedures for children with specific needs within Bridlewood Child Learning Centre's care. They must review and sign agreement to abide by Bridlewood Child Learning Centre's policies and procedures prior to being involved in programs with the children and review again annually.

Volunteers and students are not permitted to have direct access to the children without a Bridlewood Child Learning Centre employee present. They are not to be counted in the staffing ratios. They cannot discipline a child. Only under the direct supervision of an RECE may an early childhood education student discipline a child.

CRIMINAL REFERENCE CHECKS

To help ensure the safety and security of children in the Centre's care, and to comply with Ministry guidelines effective August 2015, criminal reference checks will be completed for all staff, volunteers and students.

ADMISSION CRITERIA

1. Children between the ages of 12 months and 5 years are eligible for the child care programs.
2. Preschool children should be toilet trained.
3. An interview will be scheduled prior to commencing child care to review admission data, familiarize you and your child with the facilities, learn about Centre policies and answer your questions. A non-refundable registration fee of \$25.00 is required upon receipt of admission forms.
4. Children should be immunized as recommended by the local Medical Officer of Health prior to admission, as stipulated by the Child Care and Early Years Act, 2014.
5. Before your child starts child care, you are encouraged to spend some time at the Centre until they become comfortable with the new surroundings. This will help facilitate your child's adjustment in the program.

WAITING LIST POLICY

Parents can have their children placed on a waiting list for admissions to our programs either through the City of Ottawa Child Care Registry (CCRAW) or by completing a registration application at B.C.L.C. The registration applications will be kept in two separate binders; one for the toddler program and one for the preschool program. When the toddler child turns of age, his application will be transferred to the preschool program based on the date it was completed. There is no charge to be placed on our waiting list.

Subsidized families must be registered on the CCRAW in order to receive City funding and be placed at B.C.L.C. They will be admitted based on their "accepted" status and priority ranking as determined by the City of Ottawa.

Full fee families will be selected according to the date on their application. It will also be based on the age of the child and the program that has the available spot.

Priority is given to siblings of present and past B.C.L.C. families. Families requesting full time care are given priority over part time children. The Director has the discrepancy to evaluate the priority given based on the parents needs and for the health and safety of the children.

Parents may request to see their registration application on the CCRAW and / or in the B.C.L.C. binders. Privacy and confidentiality will be maintained at all times.

Families may be removed from our wait list upon their request, or if the child has aged out of the program or after three (3) unsuccessful attempts of contacting them.

DISCHARGE POLICY

Bridlewood Child Learning Centre reserves the right to discharge a child with three (3) weeks written notice if the Centre is unable to address the needs of the child and in the absolute discretion of the Director, the child is not adjusting to the setting after a reasonable period of time. If an individual child's behaviour becomes detrimental to this child care experience or disruptive for the other children, staff, and families, the Director will take the following action:

- (a) Meet with the parent(s) to discuss concerns and provide them with a guideline of expectations and specific dates.
- (b) Develop a plan which may include use of outside services and / or volunteer assistance.
- (c) Notify the Board of Directors.
- (d) Maintain ongoing contact with the parent(s) to monitor the situation.
- (e) If in the opinion of the Director and the Board, the Centre needs have not been met, the parent(s) will be given three (3) weeks' notice to withdraw the child.
- (f) If the family were required to make alternate child care arrangements, the child would be eligible for readmission when the circumstances involving the discharge were resolved and a child care space became available.

The Board reserves the right to immediately dismiss a family in the event of a serious contravention of the Code of Behaviour. No notice may be required.

Behaviour reports will be completed for all occurrences to keep you informed. You will be asked to sign the report. A copy will also be kept at the centre in your child's file.

Every effort will be made on the part of B.C.L.C. to exceed all expectations and provide the highest quality care to your family. Meetings, first with the Director and then with the Director and a Board Member will be held with families to discuss their situation in circumstances where a family repeatedly expresses that the level of service they are receiving is not meeting their own personal expectations. However, in the event that a mutually satisfactory solution cannot be met, the Board reserves the right to immediately dismiss a family without notice.

Three weeks written notice is required at any time you wish to withdraw your child from the program. If notice is not received, full program fees will be charged.

If you temporarily withdraw your child from the program, you may have their name placed on the waiting list for readmission. We regret that we cannot guarantee that a space will be available when requested.

Children who qualify to attend senior kindergarten by September of that school year will be discharged by the last Friday before Labour Day weekend.

Unpaid fees result in termination of services.

Services may be terminated if Centre policies are not followed.

CONFIDENTIALITY

All information regarding children and families is considered confidential, and is shared only amongst staff members and regular volunteers. We respect the privacy of our children and families, and will protect this right to the greatest extent possible. Every staff member and volunteer is briefed on the Centre policy regarding confidentiality.

SPACE SHARING

1. Space sharing is an option for parents who are interested in part-time care. One full-time seat may be purchased by two families, and shared. The Director will assist in matching up part-time parents when possible, but the purchase of the seat is their responsibility. This will secure the spot for each child.
2. A part-time child who is not paired will be bumped in favor of full-time. Part-time parents will be given the first option to purchase the space full-time.
3. Children sharing spaces must attend the child care a minimum of 3 full-days or 2 full-days per week, for consistency. Children coming only 2 full-days or 3 full-days per week will have a 6 week period where their abilities to cope with the situation will be assessed. The Director will make parents aware at the end of the time period, if the child does not seem to be making the necessary adjustments. A consultation would then be held with parents to discuss some other option, (ie. adding more time to the week at child care or perhaps that child care is not the best placement for the child at the present time).
4. Part-time children will be permitted to attend without sharing a space, at times when the Centre is not full. (See #2 for when Centre becomes full.)
5. When the Centre is full, part-time children will not have the option of attending for the full week or full day occasionally. We must comply with Ministry staff/child ratios.
6. In order to address the distribution of statutory holidays between part-time families, we roll the cost of all statutory holidays into the part-time daily rate. This means that the part-time daily rates are higher, but part-time parents are then not charged for statutory holidays that may fall on their child's enrolment day.

NEW REGISTRANTS

New registrants will pay a deposit to Bridlewood Child Learning Centre. This deposit must be paid within 2 weeks of the allocation of the space. Subsequent to this **A)** if a parent is unable to accept the space allocated and provides written notice a minimum of four (4) weeks prior to the assigned start date a full refund of the deposit less the registration fee will be made. **B)** If a parent is unable to accept the space allocated and provides written notice a minimum of three (3) weeks prior to the assigned start date the deposit less a 25% administration charge will be returned by the Bridlewood Child Learning Centre. **C)** If written notice is not provided three (3) weeks before the start date the full deposit will be forfeited.

FEES

See current Fee Payment Schedule for dates and amounts due.

Holidays and Illness:

Regular fees must be paid for holidays on which the Centre is closed and all days for which a child does not attend due to illness, family vacation, etc.

Semester:

A teaching semester is defined as four consecutive months. The 3 semesters of the years will be as follows:

- #1 January 1 to April 30
- #2 May 1 to August 31
- #3 September 1 to December 31

Payment Options:

Two options are available to pay for the Centre's services:

- (a) Use post-dated cheques. Cheques must be dated for the 1st and 15th of each month of the semester(s) desired. New registrants will pay a deposit to Bridlewood Child Learning Centre. If three (3) weeks' notice is not given, the advance will be forfeited. Upon registration, the deposit cheque and eight (8) postdated cheques will be received by the Centre one (1) month prior to the start of the forthcoming semester.
- (b) Pay in cash. New registrants wishing to pay in cash will pay a deposit to Bridlewood Child Learning Centre. If three (3) weeks notice is not given, the advance will be forfeited. In addition, fees for half a month will be collected in advance to cover the first half month of services. From then on, fees for each half month are due on the 1st and 15th, prior to receiving Daycare services. (Please have correct change).
- *** Children not registered by the first day of the new semester will lose their right of renewal and may, at the discretion of the Director, be placed at the bottom of the Centre's waiting list for spaces.
- (c) Subsidized Fees are paid to the City of Ottawa.

Returned Cheques:

Cheques returned from the bank, due to non sufficient funds or any other reason, will be charged back to the parent plus an administration charge of \$20.00.

A replacement cheque shall be obtained immediately from the parent for the original amount and \$20.00 handling fee.

Late Pick-Up Charges: The Centre is open from 7:00 a.m. to 5:45 p.m.

The family will be subject to a late pick-up charge for any child/ren picked up after 5:45 p.m. Please arrive in plenty of time to ensure an easy departure for your child and to be respectful to our staff members so that they are not delayed in closing the Centre and finishing their working day in a timely manner.

- (a) The late pick-up fee will be \$10.00 for every five (5) minutes or part thereof after 5:45 p.m. the first time this occurs. The late pick-up fee for the second time will be \$20.00 for every five (5) minutes or part thereof after 5:45 p.m. The late pick-up fee for the third time will be \$30.00 for every five (5) minutes or part thereof after 5:45 p.m. Time will be determined by the teacher in charge.
- (b) All charges are to be paid in cash within 48 hours directly to the teachers who were obligated to remain past their normal working hours. Any charges not paid will be considered delinquent and may result in termination of service.
- (c) If late pick-up of children occurs three (3) times in a semester, the parent may be asked to withdraw the child from the centre.

There are no exceptions to this policy, except by the discretion of the Director.

ARRIVAL AND PICK-UP

Children are required to arrive prior to 10:00 a.m. each day. If your child has a medical or dental appointment in the morning and will arrive after 10:00 am, this must be previously arranged with the Director or the classroom Team Leader. These children will be admitted into the program up to 11:20 am. Programs will post any field trips, or local walks requiring early arrival. Should you require further clarification, please speak with the Director.

When dropping your child off, you may assist him/her to remove outdoor clothing and hang them in the appropriate cubby. The child must then be brought into the classroom and signed-in daily. The classroom staff must be made aware that your child has arrived.

Your child will feel most secure if you establish a regular arrival and departure time. If you are going to pick your child up later than usual, we would appreciate a phone call so that we may reassure your child of your arrival.

When picking your child up, he/she must be signed-out, and staff informed that you are leaving.

Only the individuals that you have indicated on the admission forms will be permitted to pick up your child, unless we have received a written note from you specifying otherwise. Please be certain to inform other persons who may be picking up or dropping off your child, of the sign-in and out procedure, and that picture identification will be required for picking up your child.

The daily recommended number of hours that a child remains at our centre should not exceed ten (10) consecutive hours.

HEALTH

Parents are expected to use the following public health guidelines to help decide whether a child is too ill to attend for the day:

“Needs to Stay Home” symptoms include:

- appears to have fever 100.4F/38C or higher - must be 24 hours fever free before readmit to child care
- vomiting or diarrhea – must be 24 hours symptom free after symptoms have ended before readmit to child care
- very congested cough or cold
- complaints of a bad headache or sore throat
- a suspicious rash or weeping sore
- red or runny eyes or ears

If the child has a rash, a doctor’s note is required before returning to the Centre, to confirm whether or not it is contagious. A doctors’ note may be requested for other questionable illnesses as well.

We will keep you informed about any communicable illnesses by posting them in the Centre.

Children will be observed by the Teacher as they enter the classroom, in order to detect possible symptoms of ill health. It will be left to the discretion of the Teacher and / or Director at arrival time to determine whether the child is within the health guidelines to remain at the Centre.

You are asked to call the Centre if your child is ill and won’t be attending. Please inform the staff at this time of the nature of the child’s illness, so that we can be alert to similar symptoms in the other children and the possible cause.

“Can Attend Daycare” symptoms include:

- runny nose
- slight cough
- slight headache or stomach ache
- mild symptoms (use common sense)

Staff are to be made aware if a child is not feeling his / her usual self. If your child develops any of the more severe symptoms during the day, you will be notified to take the child home. If the parents cannot be contacted, the Emergency Contact person will be notified. We will do our best to comfort and reassure the child until your arrival.

Health and Outdoor Play:

It is our policy that children too ill to play outdoors, remain at home.

NUTRITION

We provide a peanut and nut free environment. No food or beverages are to be brought into the

building.

A nutritious mid-day meal and morning and afternoon snack will be served. Weekly menus will be posted for the current and following week to inform you of what your child is eating, and to assist you with menu planning at home.

We must be informed of any food allergies or special dietary needs concerning your child, which we will post in the cooking and dining areas.

ADMINISTRATION OF DRUGS

Whenever possible, medication should be administered by the parent, before and after the child attends daycare. Some drugs are available which are longer acting, and the parent should ask the physician of their availability.

If the child must have medication while at the Centre, they shall be administered medication only upon written permission from the parent or guardian of the child. The parent should hand deliver the medication and give it to the appropriate staff member, along with the written instructions. Do not leave any medication in the cubby area or elsewhere in the Centre.

All medication administered at the Centre must be prescribed by a physician, or accompanied by a written note from the physician before being administered.

A drug or medication will be administered to a child only from the original container as supplied by a pharmacist and the container or package must be clearly labelled with the child's name, the name of the drug or medication, the date of purchase and instructions for storage and administration.

You will be asked to complete a Medication Authorization form that sets out the times the drug or medication is to be given and amounts to be administered.

A staff member will be delegated to administer the medication, and they will document the appropriate information afterwards on a Medication Administration Record.

Medication will be kept in a locked container in the refrigerator, out of the children's reach. All medication no longer needed is to be taken home by the parent.

SMOKING

We provide a smoke-free environment for the health of the children. Please extinguish any cigarettes before entering the building.

ACCIDENTS

In the event of a serious accident, the parents will be notified immediately. A detailed report of the accident will be written by the staff member involved. In the event that a serious occurrence form is filed with the Ministry, a serious occurrence notification form will be posted in the daycare to comply with Ministry guidelines effective November 01st, 2011.

Accident reports are completed for less serious occurrences as well, to keep you informed of minor mishaps. We try to keep you informed of small scrapes and bruises which occur at the Centre and you will be asked to sign the report. First aid will be administered by staff. Please notify the teacher in the morning of any accidents your child may have had at home, so that we will not be alarmed by any injuries which we have not previously seen.

HOLIDAYS

The program observes the following holidays:

New Year's Day	Civic Holiday in August
Family Day	Labour Day
Good Friday	Thanksgiving
Easter Monday	Christmas Day
Victoria Day	Boxing Day
Canada Day	
and one Floating Holiday in Lieu of Remembrance Day.	

The centre is also closed between Christmas and New Year's. Plus, the centre closes at 1:00 pm the work day prior to Christmas.

CLOTHING

Please be sure that your child is appropriately dressed for the weather, as we play outdoors twice daily.

Your child should also have a complete change of clothing at the Centre, which may be kept in the locker area. This includes underclothes, socks, tops, bottoms, etc. Check the locker area daily to see if this clothing has been soiled.

You may also want to leave a spare pair of shoes at the Centre, so as to avoid forgetting them at home. During the summer, running shoes are recommended. Sandals with a toe covering and heel strap are acceptable. Please ensure that the shoes fit properly. Flip flops and shoes such as "croc" style shoes are not permitted to be worn in the daycare by the children. A bucket style hat with a velcro strap under the chin is recommended during the summer months.

During the winter, boots that have removal liners are recommended as this gives us an opportunity to dry them between outdoor playtimes. The winter hat should cover the ears and also have a velcro strap under the chin.

All clothing must be labeled with your child's name.

TOYS

We ask that children leave all toys at home, with the exception of a safe stuffed toy for naptime.

NAPTIME

There is a two (2) hour rest period provided for the children each afternoon. Children who are

awake after one (1) hour are permitted to get up and participate in quiet activities.

FIELD TRIPS

We will be taking the children on field trips from time to time. We will be visiting the fire station, parks, stores, etc. On such occasions, you will be asked to sign a form giving your child permission to attend. You will be notified of any preplanned outings, and are welcome to join us for the fun!

DISCIPLINE

Our approach is to maintain discipline by using positive techniques. There is a set of simple limits and guidelines established in each room, which are consistently enforced for safety reasons and to minimize the amount of conflict and disruptive behavior. We focus on preventing undesirable behavior whenever possible. This reduces the necessity for disciplinary action and helps create a happier, relaxed positive environment for children and staff alike.

Children are disciplined in a manner which is appropriate to their actions and age level.

We believe that by reinforcing positive behaviour that it will likely increase, therefore we praise the children for appropriate behavior. This also builds on the child's self-image and it is our intention that each child feel good about him/her self.

Corporal punishment of any form is not permitted.

If a difficult situation arises with a child, the parents will be notified.

We will be including articles of interest with tips on discipline for preschool-age children in our newsletter from time to time, which you may find helpful for at home.

PARENTAL INVOLVEMENT

We welcome visits from parents, and involvement in the daily program. We do realize that you have busy work schedules, but want you to feel free to join us if possible for lunch, a field trip or any way which you would like to contribute to the program. Parental involvement will enhance our program.

PARENT CONTACT

We attempt to maintain good communication with each family and you will have opportunities to speak to your child's teacher daily. However, the arrival and departure times are often very busy and you may not have the time or privacy to discuss a concern or issue that you may have regarding your child. If this occurs you may request an appointment with the teacher and meet when it is more convenient.

Each child is provided with a communication book in which their primary teacher details their day. Please ensure you read this daily.

We ask that you refrain from discussing difficulties concerning your child within his/her hearing, or

in the presence of the other children. The teacher will try to move to an area away from where the children are playing if you have an issue to discuss.

There will be periodic parent-teacher conferences schedule to inform you about your child=s progress at the Centre and to share information.

If you have any immediate concerns regarding your child at any time, please contact the Director for a conference.

PROGRAM AND PARENT INFORMATION

There is a bulletin board across from the office with information for parents. Your child's room also has a bulletin board, which should be read daily.

In addition a newsletter compiled by staff will be sent home to keep you updated on the project in their program. We will include some activities that your child may be enjoying at daycare, which he/she may want to share with you at home. We hope that you will take the time to read the newsletters.

INCLEMENT WEATHER

The Centre will attempt to remain open during inclement weather. If the Centre feels it necessary to close early due to weather conditions, parents will be notified by telephone.

In the event of severe snowstorms which start during the day, we ask that you consider driving conditions and leave work earlier if you generally pick your child up towards Centre closing time.

We will use radio stations **NEW COUNTRY-FM 93.9** and **MAJIC-FM 100.3** to announce any full-day Centre closures during inclement weather.

The Centre has an emergency management policy and procedures in place. We will contact parents by telephone or by using the radio stations mentioned above if the centre needs to close.

VISITING PRIVILEGES

Visiting rights of separated or divorced parents may not be exercised on the daycare premises.

UPDATING RECORDS

We must always have current emergency information available on each family. Please inform us immediately if any of the following changes:

1. Your home address or telephone number,
2. The persons we are to contact in case of emergency when you cannot be reached (or if their address or phone number changes),
3. Your place of employment,
4. Your family physician,
5. Your child's Ontario Health card number,

6. The persons to whom the child may be released.

CODE OF BEHAVIOUR

Bridlewood Child Learning Centre follows a Code of Behaviour for the children, the staff and families. Everyone is expected to abide by this code. Any violations will be cause for consequences, which may result in dismissal from the Centre. Interpretation and application of the code is at the discretion of the Director. The code is in place to ensure that the Centre provides a physically and emotionally safe environment for children, staff and families.

- (a) B.C.L.C. believes that children develop a capacity to understand which behaviour is acceptable in both the centre and the community.
- (b) B.C.L.C. believes that children should be encouraged to learn to accept both responsibility for their actions and appropriate consequences.
- (c) B.C.L.C. believes that children should be encouraged to have confidence in their ability to handle potentially aggressive situations.
- (d) B.C.L.C. believes that the policies of B.C.L.C. should ensure that a non-violent theme is reflected in all aspects of programming.
- (e) B.C.L.C. believes that children should be assured that while they are developing concepts, skills and confidence, B.C.L.C. will act on their behalf in situations that are out of their control.

The Board of Directors of Bridlewood Child Learning Centre follows a Code of Behaviour which states: Children and Families will respect the personal rights of each other. Any form of physical, emotional or verbal aggression is unacceptable. No behaviour of this nature whether it be child to child, child to adult, adult to child, or adult to adult will be tolerated. Children and Families will respect the property of other people and the Centre. Any damage done to the Centre itself or its contents, including the property of other children, staff, and families is unacceptable and appropriate consequences will be implemented.

Established consequences as outlined in the Parent Handbook: Discharge Policy Section will follow any aggressive, abusive, and / or violent acts.

ANAPHYLACTIC POLICY - LIFE THREATENING ALLERGIES

Bridlewood Child Learning Centre will enroll children with life threatening allergies and create an environment that minimizes the risk of exposure to allergens. This policy recognizes that the risk of accidental exposure can be reduced but not eliminated.

INTENT

The intent of this policy is to provide information to staff so they may work in co-operation with parents in managing life threatening allergies. The intent of this policy is also to provide guidelines and procedures for creating a safe and healthy environment for anaphylactic children.

BACKGROUND INFORMATION

What is a life-threatening allergy?

For more common allergies, most people react with symptoms in one body system. The most common site

for allergic reactions is the nose, causing congestion and sneezing. Other common sites for allergic reactions are the skin causing hives or eczema, the digestive system causing abdominal pain, and the lungs causing wheezing, coughing and difficult breathing. When two or more body systems are involved, especially the lungs, it is considered a serious allergic reaction called anaphylaxis.

Anaphylaxis can be caused by certain foods, insect bites, latex rubber and sometimes, but rarely, vigorous exercise. Exposure to these allergens can trigger a severe or anaphylactic reaction. Because an anaphylactic reaction can lead to rapid death, these allergies are considered to be life threatening. A life threatening allergy, or anaphylaxis, is diagnosed by a doctor, and can be treated with adrenaline / epinephrine.

Foods that commonly produce allergic problems are peanuts, nuts, eggs, soy, shellfish, fish and sometimes wheat.

Signs and Symptoms

An anaphylactic reaction can begin within seconds of exposure or after several hours. Anyone or combination of the following symptoms may signal the onset of a reaction.

- * Hives
- * itching (on any part of the body)
- * swelling (on any body parts, especially eyes, lips, face, tongue)
- * itching or tingling in the tongue mouth, or throat.
- * red, watery eyes
- * runny nose
- * vomiting, upset stomach
- * diarrhea
- * stomach cramps
- * wheezing
- * panic
- * difficulty swallowing
- * difficulty breathing
- * sense of doom, fear, apprehension
- * dizziness, unsteadiness
- * fainting, or loss of consciousness
- * coughing
- * change of colour
- * flushed face, body
- * change of voice (clearing, choking)
- * tightness in throat (closing) or in mouth or chest
- * coma and death

Symptoms do not always occur in the same order, even in the same individuals. Time from onset of first symptoms to death can be as little as a few minutes, if the reaction is not treated. Even when symptoms have subsided after treatment, they can return 10 minutes later or as much as eight hours after exposure.

Facts to Consider

- Strict avoidance of the food allergen is the only way to prevent a potentially fatal allergic reaction.
- Fatal reactions can be induced by as little as a milligram.
- Peanut protein residue can remain potentially dangerous for up to six months.
- Death can occur within minutes.
- Anaphylactic reactions can be caused by cross contamination from allergic food to a non-allergic food during food processing or preparation.

- For some children, allergic reactions can be triggered not only by eating foods but also by their touch and smell. This has implications for the whole learning centre, not just a particular area or room.
- Emotional stress is a factor of living with life threatening allergies. Children constantly deal with always being different; knowing they can die, peer pressure to conform, and bearing a constantly high level of responsibility.

PROCEDURE

In order to enroll a child with life threatening allergies, all precautions must be taken in order to ensure the child's safety in the program.

A) Information required from parents:

During the parent/child intake interview, the parent is responsible to advise the centre of the child's medical condition. Before the child enters the program the parent must provide:

- A list of foods and ingredients the child must avoid by having the child's doctor complete and sign an Allergy Information Sheet.
- A list of symptoms for staff to look for that may be unique or specific to the child if he/she is having an anaphylactic reaction.
- Written consent from the parent to advise other parents in the centre.
- Any information resources the parent may have regarding their child's allergy.
- Permission to post an information sheet such as the Allergy Information Sheet including a picture of the child, the allergies, symptoms, measures to be taken, information on how and when to use the auto- injector (EpiPen) and emergency telephone numbers for both the parent and the emergency contact. This information is to be updated a minimum of once a year or when information changes.
- Medical alert identification for their child as appropriate for the child's age.
- The appropriate number of up to date auto-injectors (EpiPen) as advised by the doctor. Children will not be accepted for attendance without their auto-injector. The learning centre will **not** accept twinject auto-injectors, EpiPens must be supplied.
- Time to meet with the staff in a mini-meeting to inform them of the child's allergies, signs and symptoms, and to answer any relevant questions.
- Information to the centre if their child's condition changes.
- Information to the Regional Ambulatory Services regarding their child's medical situation as well as the name and address of the learning centre they attend. This will shorten the response time by limiting questions needing to be asked by the dispatcher and by ensuring that a paramedic is available in the ambulance.

If a child is diagnosed with a life threatening allergy while already enrolled in the child care program, the parent must provide the above as soon as possible, maximum two weeks.

B) Training of staff

Prior to the first day a child with life threatening allergies starts attending the learning centre, training for all staff including Director, Teachers, Cook, and Housekeepers must take place. Casual staff, students and volunteers should be included in the training when possible, or informed of the situation during orientation to their participation in the program. Parents should be invited to all meetings/training sessions regarding the management of their child's allergy. All training will be arranged by the Director and may be provided by any combination of: parents of anaphylactic children, Public Health Nurse, local medical professionals, or representatives of allergy groups.

For a child who is diagnosed with a life threatening allergy while already enrolled in the program, this

training needs to happen as soon as possible, maximum within two weeks of being informed of the diagnosis.

The Director must ensure that The Life Threatening Allergies Policy is reviewed annually with all staff: including teachers, cook, and housekeepers.

All staff will be trained in avoidance strategies and emergency protocol, signs and symptoms, administration of an auto-injector, and will be provided with information regarding anaphylaxis. Training must also include knowledge of emergency plans for each child with a life-threatening allergy. Depending on the child's allergy janitors/housekeepers will receive awareness training for cleaning procedures and products used. The cook and any staff who prepare foods will be provided with a modified separate training session on reading labels, understanding ingredients and food preparation for the anaphylactic child.

C) Communication

With other parents:

When a child with a life-threatening allergy enrolls in the learning centre, or is diagnosed with one, it is important to gain the co-operation of other parents. The following are some strategies to assist with communication with other parents in the program.

- Introduce the policy on life threatening allergies during the intake process when an anaphylactic child is enrolled.
- Send home letters re: anaphylaxis, that no outside food is permitted in the learning centre etc.
- Parents of other children in the program should discuss any concerns with the Director, and not with the parents of the anaphylactic child.

With other children:

The learning centre should identify children with life threatening allergies to all other children enrolled in the program, asking for their co-operation. This should be done in a way that is appropriate to the child's age and maturity, without creating fear and anxiety and in consultation with the parents of individual anaphylactic children. The following are some strategies to use in communicating with other children in the centre.

- Use themes about food to help children understand how different foods affect the body.
- Talk to the children about the specific food allergy and why it is important for everyone to help out.
- Talk to the children about proper washing of hands and why it is important.
- Talk to the children about not sharing things that go into their mouth such as straws.
- Talk to the children about the importance of not sharing food.
- Use videos and story books to help children understand the situation without frightening them.

D) Avoidance

Children are dependant on parents and child care staff for assistance with everything from label reading to snack and special events. The following strategies are intended to minimize the risk of exposure to the allergen for the anaphylactic child without depriving them of normal participation in the daily program.

- If the allergy is life threatening then all steps will be taken to eliminate the allergen as much as possible from the menus of that child.
- Discourage the sharing of food, utensils and containers.
- Encourage the anaphylactic child to place food on a plate or a paper napkin rather than directly on the table to prevent other children from touching the food.
- Establish a hand washing routine before and after eating.
- Disinfect tables before and after eating.

- Avoid allergens in activities and materials such as play dough, stuffed toys, and art.
- Avoid art projects that require food, or empty milk or egg cartons.
- The allergic child should not clean up other children's food, nor should they participate in cleanup of the outdoor playground.
- Keep a box of safe snacks for unplanned special occasions.
- Go through the refrigerator, cupboards and pantry and identify and separate out all the foods that are safe for the child.
- Children with an allergy to insect venom should be immediately removed from the room if a bee or wasp enters the room.
- Designate one person to be responsible for giving food to the allergic child (and one person for back-up). This person should sit beside the allergic child at mealtime and monitor what she / he eats and drinks.
- Staff should refrain from eating foods containing allergens, but if they do, proper steps should be taken to wash hands, brush teeth, etc
- Use a special cup for the allergic child.
- Staff will be aware that nuts can be buried in the play yard by squirrels, etc., and will look for evidence of such when doing the daily yard check.

E) Special Occasion

With care and planning, special occasions in the learning centre can be fun as well as safe for the anaphylactic child. The following strategies may be useful:

- Avoid always using food for special occasions focusing instead on games, crafts, singing and other non-food related activities.
- Let parents of anaphylactic children know about special events in advance so they can send safe foods for their child.
- Invite parents of anaphylactic children to volunteer for parties and field trips. Do not allow any parent to bring in unexpected treats for the children.

F) Field Trips

Field trips with an anaphylactic child require extra care and precaution. The following strategies will ensure an uneventful trip for this child.

Review emergency plans with staff members/volunteers before a field trip.

- Designate one staff member who has training using the auto-injector (EpiPen) to be responsible for the anaphylactic child on field trips.
- This staff member will carry all available auto-injectors for the child and will have a cell phone if at all possible.
- For outdoor field trips in the winter, the designated staff member should keep the auto-injector (EpiPen) inside their coat and close to their body to ensure that the medication stays warm.
- This staff member will stay with the child at all times and will accompany the child to the hospital should a reaction occur.
- Require the parent of the anaphylactic child to provide several auto-injectors (EpiPen) to be administered every 10-15 minutes as prescribed by the doctor while on the way to the nearest hospital if symptoms persist or recur.
- Permission slips for field trips should include information about severe food or other allergies. Suggest that parents accompany their child on field trips.

G) Storage and use of the Auto-injector (EpiPen)

The Director must ensure that auto-injectors (EpiPen) are safely stored and available for quick use when

required. The auto-injector (EpiPen) should never be locked away.

- The auto-injectors (EpiPen) must be stored at room temperature, and not exposed to extreme heat or cold. The auto-injectors (EpiPen) must be kept in a fanny pack with the Primary Teacher.
- All staff including supplies and volunteers must be made aware of where the auto-injectors (EpiPen) are located. An Allergy Information Sheet must be posted in each room, as well as the form entitled Anaphylaxis Alert Form.
- The location of the child's auto-injectors (EpiPen) must be indicated on the Allergy Information Sheet.
- The supervisor will regularly check medication expiration dates, and for discoloration of the epinephrine.

To inject:

- Remove the grey cap.
- Jab the black tip into the mid, outer thigh until it clicks. (This may be done through thin clothing if necessary.)
- Hold the auto-injector (EpiPen) in place for 10 seconds. Take the time to count the seconds accurately – one one thousand, two-one thousand etc.
- Massage the area for 10 seconds.

H) Emergency Procedure

Planning ahead can save valuable minutes. Centre Director must identify beforehand:

- Where the child will be taken.
- Who will administer the auto-injector (EpiPen).
- Who will stay with the child, who will stay with the other children? Have a plan in place for keeping the other children busy.
- Who will call 911.
- Which entrance the ambulance should use.
- Who will call the child's parents.
- Who will stay with the child to monitor them at all times until emergency help arrives.
- Who will accompany the child to the hospital and stay with him or her until a parent or guardian arrives.

The instructions for use of the auto-injector (EpiPen) are clearly outlined on the Emergency Procedure Anaphylaxis and must be posted in each room and a copy kept with the EpiPen. Post the Allergy Information Sheet in each room as well as with the EpiPen. Post the Emergency Response Protocol beside the telephone. Check medication expiration dates regularly and check for discoloration of epinephrine.

If a reaction should occur, it is critical that staff remain calm and be prepared to act quickly. If staff has any suspicion that the anaphylactic child has come in contact with the allergen, or shows any signs of a reaction, act immediately using the following steps.

1. Administer the auto-injector (EpiPen). Do not hesitate.
Note the time the epinephrine was given. Safely contain the auto-injector to give to the ambulance attendant.
2. Call 911, informing them if the Regional Ambulatory Services has been previously informed of the child's condition.
3. Help the child to stay calm.
4. Contact the parents/guardians/emergency contact.
5. Observe and monitor the child until the ambulance arrives.
6. Administer additional medication according to written instructions.

7. Send additional auto injectors (EpiPen) with the child in the ambulance.
8. Document the event, detailing what occurred.

I) Emergency Review

Shortly after the emergency has been handled it will be important to review what happened to better prepare for another incident. After a reaction occurs:

- Review what led to the reaction.
- Review the emergency response. (What worked, what didn't)
- Adjust the emergency response plan and training of staff if necessary.
- Have parents replace medications promptly.
- Allow everyone involved to talk about the experience, including the children.

A COPY OF THIS FORM MUST BE KEPT WITH THE EPIPEN.
A COPY OF THIS FORM MUST BE POSTED IN EACH ROOM.

Emergency Procedure - Anaphylaxis

In case of Emergency!

1. Administer the auto-injector (EpiPen).

Don't hesitate.

The child should rest quietly.

To inject:

- Remove auto-injector (EpiPen) from case.
- Pull off grey safety cap.
- Jab into OUTER MID-THIGH of child's leg with the black tip end of the needle.
(This may be done through the child's clothing, if necessary.)
- Wait for fluid to enter body (10 seconds - an accurate way to count: one-one thousand, two-one thousand, etc.)
- The child should be rushed to the hospital after administration of an auto-injector (EpiPen); any additional auto-injector (EpiPen) should accompany the child in case a second injection (a maximum of three to be administered) is required if symptoms persist or recur.
- The time of the first injection should be noted so that the second auto-injector (EpiPen) can be administered in 10/15 minutes, if symptoms persist or recur.

2. Have someone call 9-1-1.

Tell them that a child has had an anaphylactic reaction.

Give the name and address of the centre.

3. Help the child to remain calm.

4. Call the parent/guardians/emergency contact.

5. Observe and monitor the child until the ambulance arrives.

6. Administer a second auto-injector (EpiPen) - only if needed and available.

Administer 10/15 minutes after the first, (a maximum of 3 doses to be administered).

Send any additional auto-injector (EpiPen) with child in the ambulance (maximum of 3 doses).

PANDEMIC CONTINGENCY PLAN

Bridlewood Child Learning Centre is committed to the health and safety of all the children, staff, parents, and visitors to the learning centre. Our priority during a pandemic is to conduct business in accordance with existing policies and operating procedures, and to ensure that the learning centre remains open and operating as long as it is safe to do so. This plan is our guide for providing child care services during a pandemic until directed otherwise.

A. COVID-19

This portion of the plan has been updated to include the Ministry of Education (MEdu) - *Operational Guidance During COVID-19 Outbreak Child Care Re-opening* guidelines released August 13th, 2020 [and the Ottawa Public Health \(OPH\) COVID-19 Guidance for Centre Based Child Care released September 08th, 2020.](#)

With community transmission of COVID-19 in Ottawa, there is a risk that transmission from both symptomatic and asymptomatic persons may occur. While measures to attempt to control these risks may be implemented in a child care centre, it is important that parents and staff are made aware of, and understand, the risks. Please see the ***Notice of Risk*** below:

Notice of Risk

When children from multiple families attend a single child care centre, there is an increased risk of the COVID-19 virus coming into the centre. Children who are infected with the COVID-19 virus are more likely than adults to have very mild infections or to have no symptoms at all, but these children can still transmit the infection to other children and to adults in the centre. This means that there is a higher risk of centre acquired infection that can be transmitted on to families of children attending child care. The learning centre has a screening process to help detect infections when there are symptoms; however, this screening process will not detect children or adults who are infected and who do not have symptoms at the time of screening.

The risk of serious COVID-19 infection increases with age, which older child care staff and those with certain underlying medical conditions should consider in terms of the risk to themselves personally, particularly if working in child care centres with children from multiple families.

Health and Safety Measures

- At this time, it is recommended that only staff and children enter the learning centre and that all others, such as parents/guardians of children and delivery persons, be met at the door.
- As much as possible, parents/guardians should not go past the screening area. It is recommended that parents/guardians wear masks when dropping off or picking up their child. When picking up your child, please call the learning centre at 613-591-0171 once you have arrived in the parking lot. A staff member will bring out your child to you.
- There should be no non-essential visitors at the learning centre.
- The provision of special needs services may continue and operators may use their discretion to determine whether the services being provided are essential and necessary at this time.
- There is to be only one point of entry and exit to the learning centre.

- Child care centres should develop procedures that support physical distancing and separate groups as best as possible (ie. Children of one room enter door A and children of another room enter door B, or staggered entrance times).
- All entrances should have hand sanitizer.
- All adults in the learning centre (staff, visitors and students) are required to wear medical masks and eye protection (ie. face shields) while inside the child care premises, including in hallways.
- All child care centres are responsible for maintaining daily records of anyone entering the learning centre. Daily records should include their first and last name, contact number and/or email, and the approximate length of their stay (such as cleaners, people doing maintenance work, people providing support for children with special needs, those delivering food). Records must be kept on the premises.
- Clearly communicate to parents/guardians to check their children's temperature and ask staff to check their own temperature daily before coming to the learning centre.
- Parents/Guardians should be actively informed of the possibility of exposure to COVID-19 in the learning centre. (ie. By reading this plan.)
- **COVID-19 Response Plan:** Child care centres must have a communication plan or protocol in place in the event that a child, parent/guardian or staff member at the centre is exposed to COVID-19.
- Personal belongings (ie. Backpack, clothing, etc.) should be minimized. If brought, belongings should be labeled and kept in the child's cubby/designated area.
- Children should bring their own sunscreen where possible and it should not be shared. Staff may provide assistance to applying sunscreen to any child requiring it and should exercise proper hand hygiene when doing so.
- Ensure that training is provided to all child care staff on the health, safety and other operational measures outlined in this document plus any additional local requirements in place.

Food Provision:

- Ensure proper hand hygiene is practiced when staff are preparing food.
- Staff and children should perform hand hygiene before and after eating.
- Children should neither prepare nor serve food to others.
- Meals should be served in individual portions to the children.
- There should be no food provided by the family outside of the regular meal provision of the program, except where required and special precautions for handling and serving the food must be put in place.
- Where possible, children should practice physical distancing while eating.
- Children must not share food (e.g. communal food platters), feeding utensils, soothers, bottles, sippy cups, etc. When possible, label these items with the child's name to discourage accidental sharing.
- Masks can temporarily be removed to eat or drink, but a 2 metres distance must be maintained at all times.
- Hand hygiene should be performed before removing the mask to eat, and prior to putting it back on.

Active Screening of Children and Staff

Active screening is the process of proactively checking for symptoms and asking pertinent questions that would indicate possible exposure to COVID-19 (see Screening Questions for details). All individuals including children attending child care, staff and students, Special Needs Resources (SNR) staff, and essential visitors must be screened each day before entering the learning centre.

- Child care centres are required to maintain a daily record of all screening results. All records must be kept on premise. Records (e.g. name, contact information, time of arrival/departure, screening completion/result, etc.) must be kept up-to-date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak.
- Parents should be reminded of this before registration and through visible signage at the entrances and drop-off areas.
- Parents/guardians should perform daily screening and temperature checks of their children prior to arrival at the learning centre (within 2 hours of arrival).
- The results can be reported to the learning centre in person.
- Parents/guardians who are unable to check temperatures at home must wait on site, until their child has had their temperature checked and is clear to participate in the day.

- Staff are to self-screen and check their temperature prior to arrival.
- If children are screened at the learning centre, screeners should take appropriate precautions when screening and escorting children to the centre, including maintaining a distance of at least 2 meters (6 feet) from those being screened, or being separated by a physical barrier (such as a plexiglass barrier), and wearing personal protective equipment (PPE).
- Alcohol-based sanitizer containing at least 60% alcohol content should be placed at all screening stations. Dispensers should not be in locations that can be accessed by young children. When possible, hand washing with soap and water is preferred over alcohol-based hand rub for children.
- At any time, children who have an infectious illness that may be communicable must not enter the learning centre while infectious. Examples include infectious respiratory illnesses and gastrointestinal illnesses.
- For guidance on when children can return to learning centre with illnesses other than COVID-19, please refer to OPH's website.

Temperature Check Guidance:

1. Parents/guardian take the child's temperature at home and report results in person.
2. If temperature is not checked at home, the parent/guardian is asked to take the child's temperature while the staff maintains a 2 meter physical distance and monitors. The staff will also need to ensure that the thermometer is properly cleaned following each use and that general infections prevention practices are followed between individuals.
3. In exceptions, the staff may need to take the child's temperature in lieu of the parent/guardian. In these cases the staff should take appropriate precautions when screening, including maintain a distance of at least 2 meters from those being screened, or being separated by a physical barrier (such as a plexiglass barrier or window), or wearing PPE (ie. Surgical/procedure mask and eye protection (goggles or face shield)). Please refer to Public Health Ontario for how to properly wear and take off masks and eye protection.

Procedure for temperature taking (by staff when the parent/guardian has not done so):

- Screener must complete hand hygiene (handwashing or hand sanitizing), then put on a surgical/procedure mask and eye protection (goggles or face shield).
- Take the temperature using a thermometer as per the manufacturer's instructions for use. If the temperature is equal to or greater than 37.8 degrees Celsius or if the child/children have any of the above symptoms, they must stay home.
- Disinfect the thermometer and wait appropriate disinfectant contact time as per the manufacturer's instructions for use.
- Complete hand hygiene (hand washing or hand sanitizer).
- Record the temperature in screening results log.

Screening Questions:

- For COVID-19 specifically, anyone who fits the criteria below will not be allowed into the learning centre and will need to self-isolate for a period of 14 days or as directed below related to management of symptoms:
 1. If you have any of the symptoms outlined below, from the Ministry of Health's 'COVID-19 Reference Document for Symptoms':
 - Fever (temperature of 37.8 degrees C or greater), new or worsening cough, shortness of breath
 - Other symptoms – sore throat, difficulty swallowing, new olfactory or taste disorder(s), nausea, vomiting, diarrhea, abdominal pain, runny nose, or nasal congestion (*in absence of underlying reason for these symptoms such as seasonal allergies, post nasal drip, etc.*)
 - Other clinical features – clinical or radiological evidence of pneumonia
 - Atypical symptoms and clinical features - unexplained fatigue/malaise/myalgias, delirium (a serious medical condition that involves confusion, changes to memory, and odd behaviours), unexplained or increased number of falls, acute functional decline, worsening of chronic conditions, chills, headaches, croup, conjunctivitis
 - Atypical signs - unexplained tachycardia (heart rate over 100 beats per minute), including age specific tachycardia for children, decrease in blood pressure, unexplained hypoxia (even if mild i.e. O2 sat <90%), lethargy and difficulty feeding in infants (if no other diagnosis)

- Multisystem inflammatory vasculitis in children (MIS-C): symptoms associated with MIS-C may include: persistent fever, conjunctivitis, gastrointestinal symptoms (such as nausea/vomiting, diarrhea, and abdominal pain) and rash.
- 2. If you have symptoms compatible with COVID-19 and results of your COVID-19 test are inconclusive.
- 3. If you have travelled outside of Canada in the last 14 days.
- 4. If you live with, or provided care for (without appropriate PPE), or spent time with someone who has tested positive for COVID-19, is suspected to have COVID-19, has an inconclusive laboratory diagnosis of COVID-19, or who has symptoms that started within 14 days of travel outside of Canada.
- 5. If you lived in or worked in an institution, group home, or other facility known to be experiencing an outbreak of COVID-19 (e.g., long-term care, correctional facility).
- 6. If you have given your child(ren) any fever masking medication today.

Personal Protective Equipment

- All adults in a child care setting (i.e., staff, essential visitors, and students) are required to wear medical masks and eye protection (i.e., face shields, goggles) while inside the child care premises, including in hallways.
- The use of masks is not required outdoors for adults or children if physical distancing of at least 2-metres can be maintained between individuals.
- Reasonable exceptions to the indoor mandatory mask requirement are expected to be put in place by licensees. Exceptions to wearing masks indoors may include reasonable exemptions for medical conditions, etc.
- Masks are not recommended for children under the age of two.
- Child care licensees should secure and sustain an amount of PPE (including but not limited to face shields, medical masks, gloves, etc.), that can support their current and ongoing operations.
- The Ontario Together Portal has a Workplace PPE Supplier Directory that lists Ontario businesses that provide personal protective equipment and other supplies.
- When wearing a medical mask and eye protection (i.e., face shields, goggles), you should wash your hands before putting them on, before adjusting them, and before and after removing them. Refer to Public Health Ontario resources for how to properly wear and take off masks and eye protection.
- Perform and promote frequent, proper hand hygiene (including supervising or assisting participants with hand hygiene). Hand washing using soap and water is recommended over alcohol-based hand rub. Refer to Public Health Ontario's How to Wash Your Hands fact sheet.

For more information, visit ottawapublichealth.ca/masks

Responsibilities of the Director

- Liaise with Ottawa Public Health (OPH) and City of Ottawa officials.
- Ensure adherence to the Ministry of Education (MEdu) - *Operational Guidance During COVID-19 Child Care re-opening guidelines* released August 13th, 2020 and implement any updates in a timely manner. <http://www.edu.gov.on.ca/childcare/child-care-re-opening-operational-guidance.pdf>.
- Ensure adherence to OPH Guidance with regards to the pandemic and COVID-19.
- Maintain ongoing communication within the learning centre; organize virtual (no in-person) meetings for updates.
- Ensure the dissemination of existing resources to share with staff and families regarding pandemics (ex. [City of Ottawa Resources](#), [Ottawa Public Health](#), etc.).
- Work with the Ministry of Education in receiving the appropriate license amendments if required.
- Ensure that all staff have proper training on the guidelines.

Responsibilities of the Director before reopening

Communicate with all staff before their first day onsite:

- Before entering the premises for the first time, provide and review the Pandemic Plan and all supplementary information.

Communicate with Families upon returning:

- Before returning to the learning centre the following information is to be communicated to parents and reinforced verbally preferably by virtual meeting or if necessary by phone:
 - Parents/guardians are to check their children's temperature daily before coming to the learning centre.
 - If the temperature is equal to or greater than 37.8 degrees Celsius or if the child/children have any of the symptoms listed by OPH they should stay home.
 - Reinforce the following:
 - The importance of keeping sick children at home and informing the learning centre of the child's symptoms.
 - Contacting the learning centre if the child is going to be away for any reason.
 - The importance of informing and communicating with OPH if they believe to have been exposed to Covid-19 and that they follow the recommendations set by OPH.
 - That strict screening processes for Covid-19 symptoms will be in place before children or anyone else is able to enter the learning centre;
 - At this time, it is recommended that only staff and children enter the learning centre and that all others, such as parents/guardians of children and delivery persons, be met at the door;
 - Someone must be available to pick up the child within thirty (30) minutes of being contacted if the child has developed symptoms;
 - Contact information must be kept up to date ie. Name, phone numbers and / or email;
 - Strongly encourage that back up care is established in case the learning centre is require to close.
- The Administrator Assistant is to ensure that an up to date list of contact information for all parents/guardians including emergency alternates is maintained.
- **Refer to the most up to date OPH Child Care Guidance document – as stated in that document, active screening of children, staff and visitors includes anyone who has any of the symptoms identified in the most recent Ministry of Health's COVID-19 Reference Document for Symptoms**
http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_reference_doc_symptoms.pdf - this is the document to be referred to for determining the screening questions. Anyone who fits the criteria will not be allowed into the learning centre and will need to self-isolate for a period of 14 days.

Ensure operating ratios and maximum capacities maintained at all times

- The Director is responsible for ensuring that the maximum capacity per room, as identified by the Ministry of Education, is enforced at all times; licensing ratios must be maintained. As of September 01st, 2020, child care settings may return to maximum group sizes as set out under the CCEYA. Staff are not included in this number, but should still be considered part of the cohort that stays together throughout the day and as much as possible and should not mix with other groups.
- Children are permitted to attend on a part time basis, and as with children attending full time, should be included in one group and should not mix with other groups.
- Maximum capacity rules do not apply to special needs resource staff (consultants and enhanced staff) on site (i.e. they are not counted towards staff to child ratios; they are not included in the maximum capacity rules).
- Licensees are required to maintain ratios set out under the CCEYA.
- Mixed age grouping is permitted as set out under the CCEYA where a director approval has been granted

on the license.

- Reduced ratios are permitted as set out under the CCEYA provided that cohorts are not mixed with other cohorts.
- Cohort staff and children:
 - A cohort is defined as a group of children and staff that stay together throughout the duration of the program for a minimum of 7 days.
 - OPH recommends when possible, children of the same family be put together in a group (as per current regulatory operating ratios and group size; and subject to Ministry of Education approval) to reduce the likelihood of transmission to children of multiple families. Mixed age grouping is permitted as set out under the CCEYA and where director approval has been obtained.
 - Limit cohorts to one room and will avoid interaction with children and staff in other rooms. Each cohort must stay together throughout the day and is not permitted to mix with other cohorts.
 - Each cohort must have their own assigned indoor space, separated from all other cohorts by a physical barrier. The purpose of the barrier is to reduce the spread of respiratory droplets that are thought to transmit Covid-19 and to reinforce physical distancing requirements between cohorts. The physical barrier must begin at the floor and reach a minimum height of 8 feet to ensure that it will always be 12 inches taller than the tallest person in the facility. It must be as wide as the space/room will allow.

How staff shifts will be scheduled to minimize the risks with respect to COVID-19:

- The same staff will be scheduled to work with the same children to minimize exposure(s).
- Cohorts are limited to one room and will avoid interaction with children and staff in other rooms.
- Limit staff interactions. If staff present in the same space, maintain a distance of at least 2 metres.
- Staff are assigned to a designated role and will not be scheduled to cover off other role(s). Staff assigned to a cohort of children will remain with the same cohort when covering breaks.
- Food trolleys will be delivered just outside the classroom door to avoid staff entering multiple rooms.

How to report an illness of child(ren) and / or staff with symptoms:

- All staff and parents are to inform the Director immediately if they or their child (who attends the centre) has signs of illness.
- The Director follows the guidance document provided by OPH for reporting illness
 - Any child, staff or student tests positive for COVID-19
 - Three or more children, staff or students have gastro-intestinal symptoms (nausea, stomach cramps, vomiting and / or diarrhea) within a program group or the facility in a 3 day period (even if the illness occurred at home)
 - One or more people have a reportable enteric disease
 - Greater than 15% of children, staff and students report symptoms (see list below) within a group or child care on one day (in the absence of underlying reasons for these symptoms such as seasonal allergies, post-nasal drip, etc.) Consideration should be given to factors such as the size of the groups / programs.

Symptoms

- | | |
|---|---|
| •Fever (temperature of 37.8 degrees C or greater) | •Unexplained or increased number of falls |
| •New or worsening cough | •Acute functional decline |
| •Shortness of breath (dyspnea) | •Worsening of chronic conditions |
| •Sore throat | •Chills |
| •Difficulty swallowing | •Headaches |
| •New olfactory or taste disorder(s) | •Croup |
| •Nausea | •Conjunctivitis |
| •Vomiting | •Tachycardia |
| •Diarrhea | •Age specific tachycardia for children |
| •Abdominal pain | •Decrease in blood pressure |
| •Runny nose | •Unexplained hypoxia |
| •Nasal congestion | •Lethargy and |

- Unexplained fatigue/malaise/myalgias
- Delirium
- Rash

- Difficulty feeding in infants
- Conjunctivitis

- A Serious Occurrence is required to be filed with the Ministry of Education when a child, parent, staff, student or visitor is suspected (ie. has one or more symptoms and has been tested, though results may be pending) of having COVID-19 or is a confirmed case of COVID-19.
- Provide all staff and families with information from OPH re: guidance for staff/child self-isolation;
- Work in partnership with OPH, to ensure they have all the necessary information (i.e.: contact information for families, staff, any potential close contacts)
- OPH's Outbreak (OB) Reporting Line: 613-580-2424 ext. 26325, open 7 days a week between 8:30 a.m. to 4:30 p.m., or call 311 outside of business hours and ask to speak with the on-call Public Health Inspector for further guidance.

Child Care Centres have a duty to report to Ottawa Public Health all confirmed cases of COVID-19 under the *Health Protection and Promotion Act*.

Management of child(ren) and staff with COVID-19 symptoms

All child(ren) and staff who are symptomatic should be referred for testing.

Please refer to the provincial testing guidance for updated information regarding the requirement for routine testing in a child care setting.

1. Child and/or staff with symptoms while at the learning centre:
 - All child(ren) and staff who are symptomatic should be tested for COVID-19.
 - Symptomatic child(ren) and staff must be immediately separated from others in supervised area until they are able to leave the learning centre. If a separate room is not available, the sick person should be kept at a minimum of 2 meters from others.
 - Please be beware that the first symptom of a COVID-19 infection in children can be gastrointestinal, including diarrhea.
 - Parents/guardian should be notified to come pick up the child(ren) as soon as possible.
 - The symptomatic person should be provided with tissues and reminded of hand hygiene, respiratory etiquette, and proper disposal of tissues.
 - If the symptomatic person is a child, staff should remain with the child until a parent/guardian arrives. If tolerated and above the age of 2, the child should wear a surgical/procedure mask. The staff must wear a surgical/procedure mask and eye protection (ie. Face shields, goggles) at all times and not interact with others. The staff should also avoid contact with the child's respiratory secretions. Staff should consider use of additional PPE (eg. Gloves) based on the child's symptoms (eg. if there is a potential for contact with body fluids).
 - Ensure staff properly discard PPE and perform hand hygiene after the child has left the facility.
 - Staff who develop symptoms during a shift must be separated from others, wash their hands and continue to wear a surgical/procedure face mask or 2- or 3- layer cloth mask as well as eye protection (ie. face shields, goggles) until they can leave the learning centre. Refer to Process for Staff Reporting Symptoms Diagram (see Appendix B) for next steps.
 - Environmental cleaning and disinfecting of the space in which the child was separated should be conducted immediately after child has been picked up. All items used by the sick person should also be cleaned and disinfected. Anything that cannot be cleaned should be removed and stored in a sealed container for a minimum of seven (7) days.
 - Clean and disinfect ill children's cots and laundry sheets and blankets immediately.
 - Inform parents/guardians of other children that a child(ren) and/or staff has developed a symptom and has been sent home pending testing and further assessment is needed. Ask parents to please monitor the health of their child(ren) and to notify the learning centre if their child develops symptoms. As long as children remain symptom-free, they can continue to attend the learning centre.
 - If the learning centre is located in a shared setting, follow public health advice on notifying others using the space of the suspected illness.
 - Reporting: See section When To Report to OPH
 - Staff, parents/guardians, and children who are symptomatic or have been advised to self-isolate by OPH, must not attend the learning centre.

2. Child and/or staff who develop symptoms while not at the learning centre:
 - All child(ren) and staff who are symptomatic should be referred for testing.
 - Child and/or staff must stay home and self-isolate while waiting for results of a COVID-19 test. Please refer to the Self-isolation Instructions on the OPH website.
 - Household contacts (ie. siblings, guardians, children) of the symptomatic child or staff should stay at home and self-isolate while waiting for results of the symptomatic person's COVID-19 test. Close contacts of the symptomatic child or staff at the centre over the previous two days (48 hours prior to when their symptoms started) should be monitored for symptoms and cohorted while waiting for results from the staff/child.
 - Inform parents/guardians of other children that a child has developed symptoms and has been sent home pending testing and further assessment is needed. Ask parents to monitor the health of their child(ren) and to notify the learning centre if their child develops symptoms. As long as children remain symptom-free, they can continue to attend the learning centre.
 - If not tested, the child and/or staff member must stay home and self-isolate for:
 - 14 days AND
 - Not have a fever AND
 - Symptoms have been improving for at least 72 hours, whichever is longer
 - Determining when the child and/or staff member can return to the learning centre will be done in consultation with OPH.
 - Closure and re-opening of the classroom and/or facility will be done in consultation with OPH.
3. Child and/or staff who are symptomatic and have a negative COVID-19 result:
 - Return to the learning centre may be based on usual policy and procedure (e.g., 24 hours symptom-free without fever-reducing medication, or 48 hours after resolution of vomiting and/or diarrhea).
 - Consult with OPH as needed.
4. Child and/or staff who have a positive COVID-19 test result:
 - Must self-isolate and not attend the learning centre. Please refer to the Self-isolation Instructions on OPH's website.
 - A single, symptomatic, laboratory confirmed case of Covid-19 in a staff or child must be considered a confirmed Covid-19 outbreak, in consultation with OPH. An outbreak number will be provided.
 - Determining when the child and/or staff can return to the learning centre will be done in consultation with OPH.
 - Closure and re-opening of the Centre will be done in consultation with OPH.
 - A serious occurrence must be reported to the Ministry of Education.
5. Child and/or staff who has been identified as a close contact of a confirmed or probable COVID-19 case:
 - Must self-isolate and not attend the learning centre.
 - Determining when the child and/or staff can return to the learning centre will be done in consultation with OPH.
 - Other children, including siblings of the sick child, and child care staff in the program who were present while the child or staff became ill should be identified as a close contact and further cohorted (i.e., grouped together). OPH will provide further direction on testing and isolation of these close contacts.
6. Testing of asymptomatic persons:
 - Should only be performed as directed by OPH as part of case/contact and outbreak management.

Cleaning and Disinfecting

OPH recommends the following enhanced cleaning practices to support infection prevention and control:

- Clean and disinfect frequently touched surfaces at least twice a day as they are most likely to be contaminated (e.g. doorknobs, water fountain knobs, light switches, toilet and faucet handles, electronic devices, and tabletops), using an enhanced cleaner/disinfectant.

- Please refer to Public Health Ontario's Environmental Cleaning fact sheet and the Public Services Health and Safety Association's Child Care Centre Employer Guideline for information on cleaning.
- Licensees are encouraged to provide toys and equipment which are made of materials that can be cleaned and disinfected (ie. avoid plush toys).
- Toys and equipment should be cleaned and disinfected at a minimum between cohorts.
- Staff are encouraged to have designated toys and equipment (ie. balls, loose equipment) for each room or cohort. Where toys and equipment are shared, they should be cleaned and disinfected at minimum between cohorts.
- Mouthed toys should be cleaned and disinfected immediately after the child is finished using it.
- Clean and disinfect ill children's cots/cribs when excluded from the learning centre and launder dirty sheets and blankets immediately.
- Linens and cots are to be cleaned weekly.
- The use of sensory materials (ie. playdough, water, sand, etc) should be avoided, however, Ministry guidance states that if sensory materials (ie. playdough, water, sand, etc.) are offered, they should be provided for single use (ie. available to the child for the day) and labelled with child's name, if applicable.
- Play structures can only be used by one cohort at a time.
- Enhance hand hygiene practices for both staff and children.
- Clean/disinfect staff/lunchrooms regularly. It is recommended that the learning centre keep a log to track and demonstrate cleaning schedules.
- Only one cohort should access the washroom at a time and it is recommended that the facilities be cleaned in between each use.
- The learning centre should secure and sustain an amount of cleaning supplies that can support their current and ongoing operations.
- Public Health Ontario provides best practices for cleaning and disinfecting, including, but not limited to:
 - which products to use;
 - how to clean and disinfect different materials
 - other items to remember, including checking expiry dates of cleaning and disinfectant products and following the manufacturer's instructions

Physical Distancing Strategies within the Learning Centre

- Each cohort must have their own assigned indoor space, separated from all other cohorts by a physical barrier. The physical barrier must begin at the floor and reach a minimum height of 8 feet to ensure that it will always be 12 inches taller than the tallest person in the facility. It must be as wide as the space/room will allow.
- When in the same common space (ie. entrances, hallways) physical distancing of at least 2 metres must be maintained between different cohorts and should be encouraged, where possible, between children within the same cohort by:
 - spreading children out into different areas, particularly at meal and dressing time;
 - incorporating more individual activities or activities that encourage more space between children; and
 - using visual cues to promote physical distancing.
- Shared spaces and structures that cannot be cleaned and disinfected between cohorts should not be used.
- Extend outdoor play as much as possible as this will limit close contacts.
- Increase the distance between cots or place the children head to toe or toe-to-toe if the space is limited.
- Children must not share food (e.g. communal food platters), feeding utensils, soothers, bottles, sippy cups, etc. When possible label these items with the child's name to discourage accidental sharing.
- In shared outdoor space, cohorts must maintain a distance of at least 2 metres between groups and any other individuals outside of the cohort.
- Play structures can only be used by one cohort at a time. Play structures must be cleaned and disinfected after use by each cohort.
- Where the outdoor play area is large enough to accommodate multiple groups, the learning centre may divide the space with physical markers to ensure cohorts remain separated by at least 2 meters.
- Licensees should find alternate outdoor arrangements (ie. community walk), where there are challenges securing outdoor play space. Providers should follow physical distancing practices when possible.

Responsibilities of all staff

- Ensure all children and staff at a minimum wash their hands upon arrival, before and after meals, when entering or leaving a classroom, after using the washroom, and always before touching one's face or the face of a child
- Provide services according to provincial guidelines and maintain ratios set out under the *CCEYA*.
- Stay current on pandemic status and up to date on the information provided by B.C.L.C.;
- Ensure that training is provided to all staff on the health, safety and other operational measures outlined in this document plus any additional local requirements in place prior to re-opening.
- Supervisors and/or designates should limit their movement between rooms, doing so when absolutely necessary:
- If absolutely necessary for staff to move between rooms to provide support, that staff member must perform proper hand hygiene before entering and leaving the rooms.
- Supply staff should be assigned to a specific cohort so as to limit staff interaction with multiple cohorts.
- Students on field placement should be assigned to a specific age group.
- Staff should stay within their designated role and not cover off other role(s).
- Staff assigned to a cohort of children should remain with the same cohort when covering breaks.
- Food trolleys/bins should be delivered just outside the door to each room, to avoid staff entering multiple rooms.
- More than one child care program can be offered per building as long as they are able to maintain separation between the programs and cohorts, and follow all health and safety requirements that apply to those programs.
- Maintain physical distancing of >2m between people in staff/lunchrooms. If physical distance cannot be maintained, only one (1) person at a time should be in the room. All staff must wear medical masks and eye protection (ie. face shields, goggles).
- Routine COVID-19 prevention strategies should be observed, refer to staff guidelines for more details.
- The provision of in-person special needs services in the learning centre should continue where appropriate. Should questions arise in respect to which service providers are permitted to enter the premises, please consult with OPH. Please work with special needs service providers to explore alternative modes of service delivery where in-person delivery is not possible.
- Licensees should inform all families when Special Needs Resources services are provided through external staff/service providers.
- Complete other duties as requested by the supervisor;

Responsibilities of all Educators

- To support thorough active screening, the learning centre will conduct an additional temperature check around mid-day of all children and maintain a log of the results.
 - If the temperature is equal to or greater than 37.8 degrees Celsius the child be sent home.
- Keep the windows open as much as possible, for air flow where it is safe to do so.
 - Ie. open the windows for approximately 30 minutes mid-morning and again mid-afternoon.
- Assist in coordination and delivery of any communication to staff and families.
- If a child is not in attendance, the parent must be contacted to confirm why the child is absent.
- Ensure all children and staff at a minimum wash their hands upon arrival, when entering from outdoor play, before and after changing diapers or assisting a child with toileting, before and after meals, when entering or leaving a classroom, after using the washroom, and always before touching one's face or the face of a child.
- Ensure PPE is worn as required.
- Complete a visual health check for each child upon entry to the program – relay any symptoms of ill health immediately to the Director;
 - Monitor children for signs of ill health throughout the day, report any signs and symptoms to the Director immediately.
- Spread children out into different areas.
- Ensure to have outdoor toys monitored and put aside to proper cleaning and disinfecting.
- Promote physical distancing during mealtime if possible and if safe to do so.
- During rest, ensure that cots/cribs are placed at least 2 meters apart from each other.

Read the Ministry of Education *Operational Guidelines* document for additional information

Screening Staff

- Complete all screening measures prior to allowing access to the building (including staff, parents, children and delivery people).
- During screening of staff and families wear all the PPE (mask, gown, and eye protection (goggles or face shield)) recommended.
- Report any concerns directly to the Director.
- Advise on the appropriate exclusion measures (for example: if a child presents any symptoms inform parents how long they need to stay home for as per the *OPH Guidance document*).
- Clean and disinfect the workstation between each staff (ie. chair, table).

Housekeeper or those tasked with HK duties

- Wear regular PPE, when conducting duties that require PPE; change gloves often.
- Maintain at least 2 metres distance from all other staff and children.
- Ensure the regular cleaning and disinfecting of all surfaces to help limit the spread of germs while following [outbreak cleaning measure](#) (including high touch surfaces: toilet flushers, faucet handles, doorknobs, light switches, phones, chair backs, etc.).
- Maintain regular communications and take directions from the Director.
- Ensure cleaning and disinfecting of outdoor doors, gates, outdoor play materials etc.
- Ensure sink locations and bathrooms are fully stocked with liquid soap and paper towels and report any concerns to the Director.
- Ensure to have sufficient cleaning products in stock and report if any products are needed to be restocked to the Director.
- Complete other tasks as requested by Director.

In the event of suspected or confirmed COVID-19 case:

- Complete a thorough environmental cleaning of the entire learning centre once all children and Educators have vacated the building using appropriate PPE (face shield, mask, and vinyl gloves) and cleaning and disinfecting products recommended for outbreaks.
- Ensure all internal garbage has been emptied and waste receptacles cleaned and disinfected.

Cook

- Maintain at least 2 metres distance from all other staff and children.
- Practice enhanced hand hygiene practices.
- Wear a mask at all times around the food. A face shield must be worn when a distance of 2 metres cannot be kept from other individuals.
- Restrict all non-essential visitors in the kitchen while the cook is present or during her work shift. Other staff members will need to access the kitchen in the afternoon to complete snack dishes and other duties as required. This staff member will also wear a mask while in the kitchen.
- Ensure to maintain adequate stock of fresh produce while not over purchasing (this will eliminate food waste should site need to shut down).
- Ensure to be cautious while receiving food and maintain physical distancing while verifying and signing for the order, paying attention not to touch your face and to wash your hands immediately following receiving the order.
- Ensure all non-essential visitors remain outside therefore; all receiving orders should be received outside.
- Food trolleys should be delivered just outside the door to each classroom, to avoid staff entering multiple rooms.
- Ensure trolleys are cleaned and sanitized after returning from the classrooms.
- Maintain regular communications and take directions from the Director.
- Complete other tasks as requested by the Director.

In the event of suspected or confirmed COVID-19 case:

- Ensure the kitchen is properly shut down and sanitized.
- Ensure all fresh produce is properly disposed of or freezing when applicable.
- Maintain regular communications and take directions from the Director.

Security: All entry into the site will be through the designated entrance door only. No one will be allowed into the building without going through the screening checkpoint and screening measures.

In addition to the above COVID-19 information, a separate document was created specifically for parents regarding COVID-19.

B. INFLUENZA

The influenza virus is highly contagious. It causes the same symptoms as seasonal flu: fever, cough, shortness of breath, muscle aches, fatigue, severe headache, sore throat, lack of appetite and possibly nausea, vomiting and diarrhea. The influenza may be associated with serious complications such as pneumonia, particularly among infants, seniors, and individuals with existing health problems. Individuals can transmit the virus for a period of up to seven days or more, starting from the day preceding the onset of the first symptoms of the disease. The respiratory route transmits the influenza virus easily from person to person:

1. The coughing and sneezing of an infected person projects virus particles, which become suspended in the air in the form of droplets. These droplets can be breathed in by others within two metres (six feet);
2. The influenza virus penetrates the body via the respiratory passages (nose, mouth and eyes);
3. This virus is also transmitted through hand contact with infected persons and with inert surfaces that they have touched. Droplets can survive for several hours on contaminated objects.

The difference between a cold and influenza?

A cold is a mild infection of the upper respiratory passages caused by a variety of viruses. A cold may last for a week and symptoms include a runny nose, stuffy nose, cough, and sore throat. A person with a cold will not usually have a headache, fever or muscle aches. Symptoms such as nausea, vomiting, and diarrhea do not usually accompany a cold.

Bridlewood Child Learning Centre will follow all the health dictates of the City of Ottawa Public Health Unit – staff will be encouraged to speak with their doctor regarding getting the influenza vaccine as soon as possible.

Children who display flu symptoms (such as a fever over 38C/100.4F, a cough, muscle aches, fatigue, severe headache, sore throat, and lack of appetite) must remain away from the learning centre until they are 24 hours symptom free after symptoms have ended and able to fully participate in the daily program. Children whose only symptom is a cough may remain in care. The staff of Bridlewood Child Learning Centre will do everything in their power to ensure a healthy environment by:

1. Teaching the children how to wash their hands and ensuring the children and staff do so:
 - a. Before preparing food or eating,
 - b. After blowing noses and coughing,
 - c. After using the washroom,
 - d. After changing diapers.
 - e. After being in contact with surfaces that may have been contaminated by others:
2. Teaching the children to sneeze or cough into their sleeves or a tissue,
3. Encouraging the children to wash their hands after all incidents of sneezing or coughing.

4. Educating the parents on when to keep their children home,
5. Ensuring emergency phone numbers are as up to date as possible to be able to contact a responsible adult to pick up a sick child.
6. Cleaning toys, hard surfaces, door knobs, light switches, sinks, handrails and office surfaces at least once a day once there is confirmed influenza,
 - a. The objects will be first washed with soap and water, rinsed well, and then disinfected.
7. Checking all children for symptoms before they are accepted during morning intake – when in doubt the staff will refuse to admit the child – the child will remain excluded until she is 24 hours symptom free after symptoms have ended and able to fully participate in the daily program.

Role of the Director or Designate

1. To communicate daily with the Ministry of Health Communicable Disease Department to track and report any symptoms within the learning centre in children and staff.
2. To monitor and make recommendations on the overall operations of the learning centre building on a daily basis.
3. To make a clear and complete assessment of situations that may arise in the learning centre.
4. To act as a resource to the Board of Directors.
5. To put in place any Ministry of Health recommendations including enforcing any exclusion put in place (ie. not returning for 48 hours or 72 hours etc.) and also the closure of the centre.
6. To determine the appropriate communication strategies to parents, staff and Ministry of Health and the Ministry of Children and Youth Services.

Report form: suspected case of influenza

Daily Absentee Record – Suspected Cases of Influenza

Date Name Room Fever Cough Headache Respiratory Fatigue Diarrhea Vomiting Hospitalization

Parent Information

Bridlewood Child Learning Centre understands that parents require our services to go to school or work. The learning centre will do everything in its power to remain open. If health and safety becomes a concern, the Director and the Board of Directors, based on consultation, guidance and advice from Ottawa Public Health, will consider the closure of the learning centre. We reserve the right to close if Ottawa Public Health recommends closure or we do not have sufficient staff to ensure the safety of the children. It should be noted that while the learning centre and building are open during a declared pandemic, it may not be possible to meet all normal program expectations and service levels. The hours of operation may have to be reduced in order to maintain ratios. Staff may be moved to another classroom in order to maintain ratios. The learning centre may close during a declared State of Emergency.

In order to keep parents informed, announcements regarding a closure and a reopening will be made through the local media. We will also place information on our voice mail, our website and post notices at the entrance to the learning centre.

Parents will continue to pay for the learning centre if their child is away due to illness or based on parents decision if the learning centre is open for children. If the learning centre closes down the parents will be

charged for the first two (2) weeks following the closure.

It is vital to recognize that nothing is more important to parents than the well-being of their children. Parents will decide whether or not to keep their children home from the learning centre if they perceive a possible threat to their children's health during an outbreak emergency. No credit or refund will be given for missed days. Parent should seek alternate sources of information to make informed decisions based on as much information as possible. They should also ensure that they are proactive in arranging for alternate child care in the event that the learning centre does need to close or reduce hours. Our goal is to make sure our parents and staff are informed about our plan and our contingency actions. This information sharing needs to be based on open and informed dialogue.

Information will be shared with parents of all enrolled children in the learning centre telling them about the potential exposure and explaining the symptoms to watch for. All confirmed cases will be reported to Ottawa Public Health as will 10% absenteeism in order to help establish if we are in pandemic mode.

It is impossible to contemplate or resolve in advance all of the issues which may arise during a pandemic emergency. Therefore, in the event of an emergency, this policy will be followed with the understanding that last minute changes and updates may be required and made by the learning centre in conjunction with the Board of Directors and Ottawa Public Health.

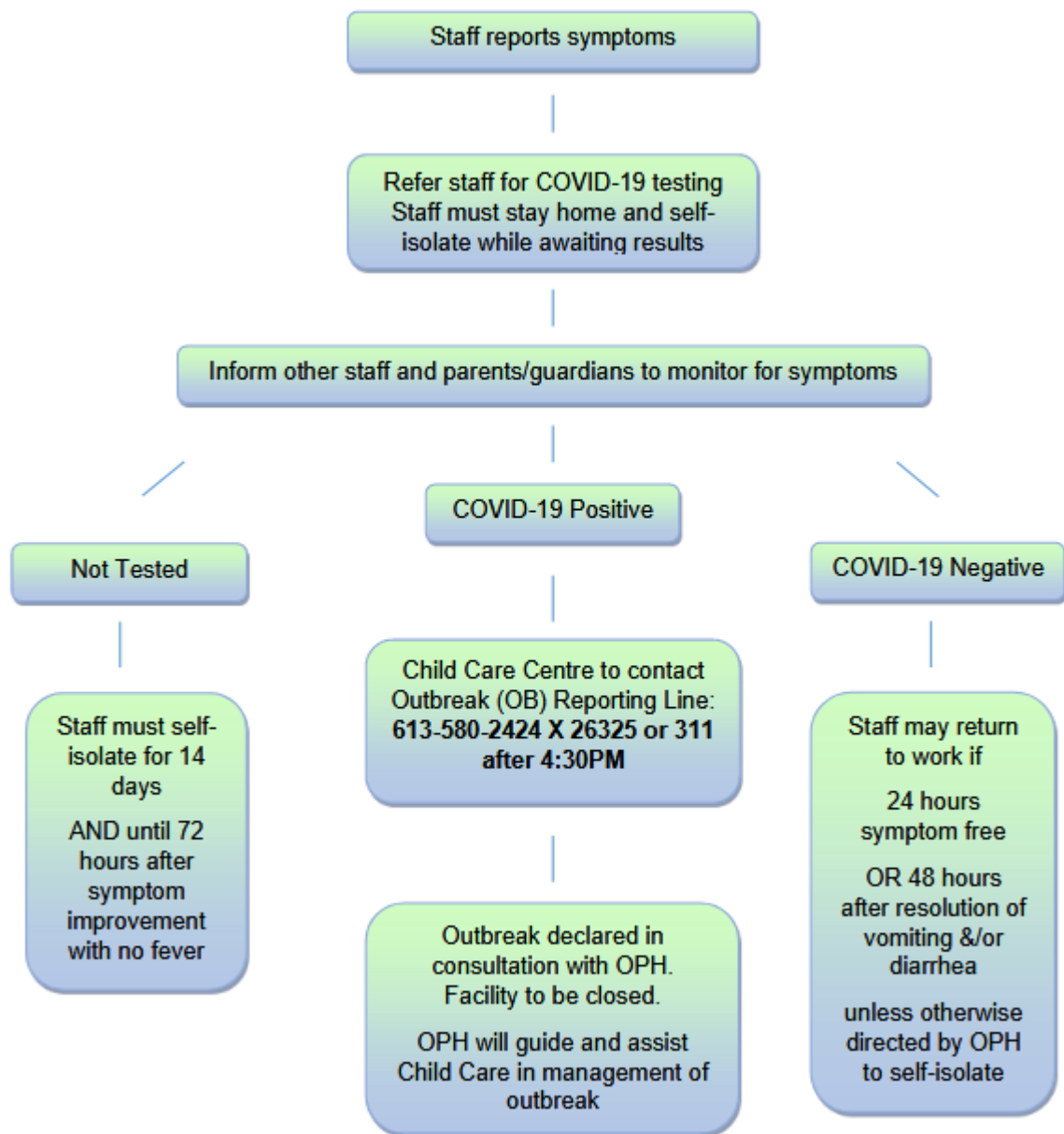


Appendix A - Notice of Risk

When children from multiple families attend a single child care centre, there is an increased risk of the COVID-19 virus coming into the centre. Children who are infected with the COVID-19 virus are more likely than adults to have very mild infections or to have no symptoms at all, but these children can still transmit the infection to other children and to adults in the centre. This means that there is a higher risk of centre acquired infection that can be transmitted on to families of children attending daycare. This child care centre has a screening process to help detect infections when there are symptoms; however, this screening process will not detect children or adults who are infected and who do not have symptoms at the time of screening.

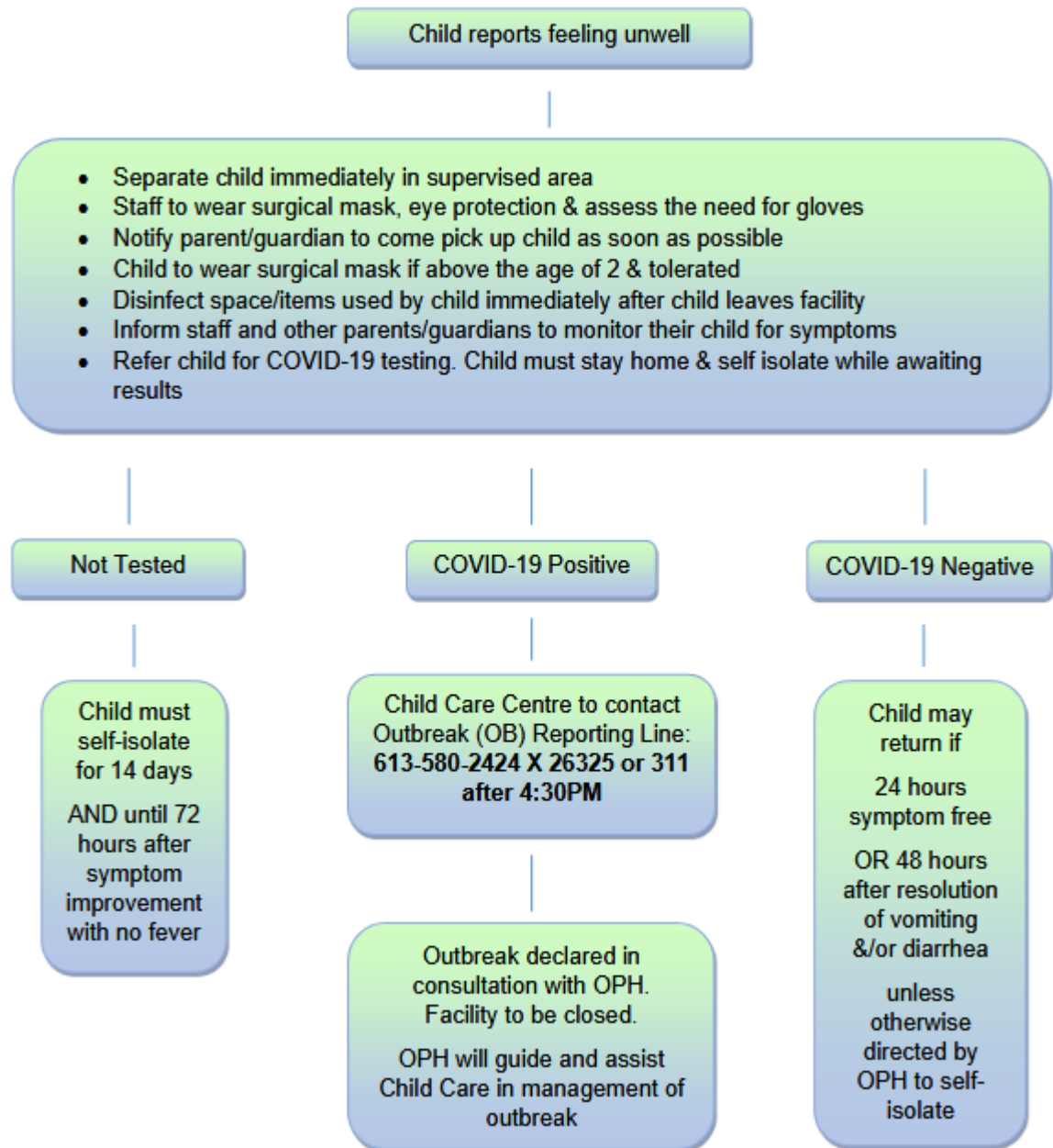
The risk of serious COVID-19 infection increases with age, which older child care providers (and those with [certain underlying medical conditions](#)) should consider in terms of the risk to themselves personally, particularly if working in child care centres with children from multiple families.

Appendix B – Process for Staff Reporting Symptoms Diagram



*Refer to **OPH Guidance for Childcare Centres** document for more details

Appendix C – Process for When Child Reports Symptoms Diagram



*Refer to OPH Guidance for Childcare Centres document for more details

WORKPLACE HARASSMENT AND DISCRIMINATION

GENERAL STATEMENT OF PURPOSE: Bridlewood Child Learning Centre is committed to providing a work environment free from harassment, discrimination and violence based on race, creed, color, national origin, political or religious affiliation, sexual orientation, social-economic status or background, age, marital status, family relationship, and disability.

Harassment and discrimination are also prohibited on other personal characteristics or circumstances that are clearly unrelated to a person's ability to do the job (personal harassment).

Harassment may result from one severe incident (i.e., assault) or series of incidents. It may be directed at specific individuals or groups but may also include any comments or conducts which create an environment that is hostile, intimidating or offensive.

The workplace includes all locations where business or social activities of the organization are conducted. Workplace harassment can also include incidents that happen away from work (i.e., unwelcome phone calls, unwelcome visits to a person's home, unwelcome comments or encounters made in public, comments made about a person to others which are intended to undermine or create a hostile environment for a person in the performance of their work or duties).

The Centre is also obligated to protect their employees/volunteers from harassment by Board members, other staff members and users of the program.

DEFINITION:

The definition of harassment is engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome.

Harassment can include, but is not limited to, the following examples:

- ☐ Racial or ethnic slurs
- ☐ Demeaning statements, shouting, raised voices, profanity
- ☐ Written or verbal abuse or threats
- ☐ Unwelcome sexual remarks, invitations or request
- ☐ Unwelcome remarks, jokes, taunts, sarcasm, suggestions about a person's body, attire, age, marital status, ethnic or racial origin, religion, sexual orientation, social-economic background, ability, etc.
- ☐ Displays of pornographic, sexist, racist or other offensive or derogatory material (e.g. graffiti or pictures)
- ☐ Practical jokes which result in embarrassment or insult
- ☐ Leering (suggestive staring) or other offensive gestures
- ☐ Unnecessary physical contact
- ☐ Vandalism of personal property or work
- ☐ Patronizing or condescending behaviour
- ☐ Abuse of authority which undermines performance or threatens career or participation in the organization
- ☐ Physical or sexual assault

MANAGEMENT RESPONSIBILITIES:

Management is responsible to provide a workplace free from discrimination, harassment and violence and for intervening when these problems occur. Management is also responsible for its own actions and for dealing with the actions of employees/volunteers. Management does this by:

- ☐ Setting a good example. Being proactive by approaching an employee/volunteer who may be a victim of harassment and offering support and assistance.
- ☐ Discussing the situation with the alleged harasser. She / he may not be aware that the behaviour is offensive. Even if the allegations are denied, the discussion should be treated in a serious manner.
- ☐ The alleged harasser will be told that inappropriate workplace behaviour will not be tolerated and that any future behaviour may be grounds for discipline up to and including dismissal.
- ☐ Keeping a record of all incidents of harassment and the action taken.
- ☐ Facilitating assistance for the victim.
- ☐ Facilitating educational opportunities for the harasser.
- ☐ Reporting incidents of a criminal nature to police.

EMPLOYEE/VOLUNTEER RESPONSIBILITIES:

Employees/volunteers are responsible to:

- Act respectfully towards other individuals while at work and while participating in any work-related activity.
- Report any incident of workplace harassment that they have knowledge of.
- Understand and comply with this Policy and all related procedures.
- Cooperate with any efforts to investigate and resolve matters arising under this Policy and participate in education and training programs.

CONFIDENTIALITY:

Strict confidentiality is required to properly investigate an incident and to offer appropriate support to all parties involved. Any individual who becomes aware of an incident of harassment should not disclose the details of the incident to any third party. Gossiping about an incident seriously undermines the privacy of all parties involved and will not be tolerated. Those with questions or concerns about an incident should speak to the Director.

CONSEQUENCES:

No employee/volunteer or any other individual affiliated with B.C.L.C. shall subject any other person to workplace harassment or allow or create conditions that support workplace harassment. An employee/volunteer of B.C.L.C. that subjects another employee/volunteer, student, client, or business associate of the Centre to workplace harassment may be subject to disciplinary action, up to and including immediate dismissal for just cause.

Additionally, discipline, up to and including immediate dismissal for just cause, may be imposed on the following individuals in the following circumstances:

- On managers who were aware of harassment and permitted it to take place;
- On employees/volunteers who bring forward complaints in bad faith or for vexatious reasons; and
- On employees/volunteers who have made a false accusation of harassment, knowingly or in a malicious manner.

REPRISALS:

B.C.L.C. will not tolerate reprisals or retaliatory measures against any employee/volunteer, who in good faith, raises a complaint of workplace harassment within the meaning of this Policy. These protections apply to anyone who cooperates in the investigation of the complaint. Disciplinary action may be taken against any person who takes any reprisal against a person who reports workplace harassment.

EMPLOYEE/VOLUNTEER OPTIONS:

Employees/volunteers who have been harassed or who have witnessed harassment have these options as follows:

- ☐ Tell the harasser to stop.
 - ☐ Be clear - Use statement such as:
 - ☐ (name action) is harassment.
 - ☐ When you (name action) you are harassing me.
 - ☐ Inform the person that the behaviour will be reported if it does not cease. If it would help, bring a support person with you when you speak to the person.
 - ☐ Document the incident in writing. Include date, time, witnesses, and details of the incident, the approach of the person, how you responded and the reaction received. It is advisable to do this even if you do not plan to proceed with a formal complaint at this time.

When an incident of harassment has been raised, either party is free to request an investigation. Tell your Director, or if the harasser is the Director inform the Chair of the Board.

All employees have the right to after exhausting the above guidelines:

- ☐ File a formal complaint
- ☐ Contact the Human Rights Commission

PROCESS:

Formal complaint process

In order to resolve general concerns, staff must first use the informal procedure.

Informal Procedure:

- ☐ Any concerns should be initially raised with the Director. If it is not resolved, the concern may be submitted to the Board of Directors in writing within five (5) working days from the discussion with the Director and the response. All meetings will be recorded and copies given to Staff in question.
- ☐ The final decision rests with the Director and / or Board of Directors and is conveyed in writing, within five (5) working days, to all parties involved.

Formal Appeal Procedure (in the event one party does not feel the issue is resolved)

- ☐ All formal appeals must be submitted in writing and decisions must be documented.
- ☐ In the case of unresolved differences, which may arise between staff and management as to:
 - ☐ The interpretation, application or violation of the Staff Handbook.
 - ☐ Charges or allegations that a staff or group of staff has been treated unfairly or discriminatory by Bridlewood Child Learning Centre concerning conditions in the Staff Handbook.

The Executive of the Board of Directors will be the committee designated to hear appealable concerns:

- ☐ The appellant may choose one member of the Board to act on his / her behalf.
- ☐ The Secretary will act on behalf of the management.
- ☐ One member of the Board will act on behalf of the Board.
- ☐ The Chair will act as Chair.

The committee shall follow the process outlined below:

- ☐ The appeal is to be submitted in writing within five (5) working days of the informal appeal procedure being terminated. At the same time, should the appeal involve the Director, this person must receive a copy of the appeal. All parties will be heard at the appeal. Other parties may appear before the appeal committee.

- ☐ If the issue is not resolved to everyone's satisfaction a written request to the full Board of Directors to consider and rule on the concern. This request must be made within five (5) working days of receiving the results from the Executive appeal.
- ☐ The issue will be dealt with at the next regularly scheduled Board meeting. The decision of the full Board will be deemed final.

COUNSELING SERVICES:

Employees/volunteers who have been victims of workplace violence will be referred to B.C.L.C.'s Insurance Plan for counseling services. If the employee/volunteer is not eligible, B.C.L.C. will pay for any appropriate counseling as required for a defined period of time upon professional recommendation. Use of such services will be at the employee/volunteer's sole discretion.

MONITOR AND REVIEW POLICY REGULARLY:

B.C.L.C. will review this Policy and the effectiveness of its workplace violence prevention measures at least every year and after any critical incident of violence in the workplace. B.C.L.C. will provide employees/volunteers with information and training regarding workplace violence at least once every three years.

VIOLENCE PREVENTION

GENERAL STATEMENT OF PURPOSE: Bridlewood Child Learning Centre believes in the prevention of violence in the workplace and promotes a violence free working environment in which all people respect one another and work together to achieve common goals. Any threat or act of violence committed by or against any employee/volunteer or member of the public is unacceptable conduct that will not be tolerated. B.C.L.C. will take all reasonable and practical measures to prevent and protect employee/volunteer from acts of violence. B.C.L.C. will assess the workplace for violence on an ongoing basis and identify factors that contribute to workplace violence.

APPLICABILITY: This policy applies to all employees/volunteers of B.C.L.C. and all activities that occur while on agency premises or while engaging in agency business, activities, or social events.

AGENCY COMMITMENT:

B.C.L.C. is committed to:

1. Promoting a violence free workplace
2. Investigating reported incidents of workplace violence in an objective and timely manner
3. Taking necessary action to respond to those incidents
4. Providing support for complainants

DEFINITIONS:

Complainant: the person who files a formal complaint in writing pursuant to this Policy

Employee/volunteer: an individual in an employment relationship with B.C.L.C.

Respondent: the individual against whom allegations that could constitute a violation of this Policy have been made

Workplace: any place where business or work-related activities are conducted. It includes, but is not limited to, the physical work premises, work-related social functions, and work assignments outside B.C.L.C. work premises, work-related conferences, or training

sessions.

Workplace violence: the threat, exercise, or attempted exercise, of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker. Examples of workplace violence include, but are not limited to:

- Threatening behaviour such as shaking fists, destroying property or throwing objects;
- Verbal or written threats that express an intent to inflict harm;
- Physical attacks;
- Any other act that would arouse fear in a reasonable person in the circumstances.

Managing and/or coaching that includes counselling, performance appraisal, work assignment, and the implementation of disciplinary actions, is not a form of personal harassment, and the policy does not restrict a manager's responsibilities in these areas.

SECURITY MEASURES:

B.C.L.C. has instituted these security measures to minimize the risk of violence in the Centre.

- The Centre property shall be accessed by employees, clients and visitors conducting legitimate business activities.
- Criminal reference checks are required by all employees/volunteers to reduce the risk of hiring individuals with a history of violent behaviour.
- B.C.L.C. shall be allowed to conduct searches and inspections of any company property without prior notice given.
- B.C.L.C. maintains a full and total ban on the possession of weapons on B.C.L.C. premises or while conducting B.C.L.C. business off-site. This includes weapons either kept or transported in any vehicle on B.C.L.C. premises. Weapons shall be defined as, but not limited to: any item held with intent to cause bodily harm to any employee/volunteer.

REPORTING INCIDENTS OF WORKPLACE VIOLENCE:

1. An employee/volunteer who believes that he or she has been subjected to, has witnessed, has knowledge of, or has a reason to believe workplace violence may occur, shall immediately report such information to their Director.
2. Emergencies that require immediate response should be reported to the employee/volunteer's Director. If there is a serious and immediate threat, employee/volunteer will receive information and instructions from management and, depending on the nature of the workplace violence, the appropriate law enforcement agency may be summoned.
3. Non-emergencies such as threats or threatening behaviours must also be reported immediately to the employee/volunteer's Director.
4. The Director will immediately notified the Chair of the Board of Directors of any incidence of workplace violence and the Director or the Chair of the Board of Directors shall review and develop recommendations to eliminate potential risks and hazards.

If an allegation of workplace violence is made against a non-employee/volunteer, the Director shall contact the authorized representatives and inform them of the allegations made against their employee/volunteer and take appropriate action to ensure that employee/volunteer are not subjected to further violence. If the allegation is made against a guardian or a representative of a guardian, the Director will deal with the issue appropriately, including investigation of the allegation up to termination of services.

CONFIDENTIALITY:

Strict confidentiality is required to properly investigate an incident and to offer appropriate support to all

parties involved. Any individual who becomes aware of an incident of violence should not disclose the details of the incident to any third party. Gossiping about an incident seriously undermines the privacy of all parties involved and will not be tolerated. Those with questions or concerns about an incident should speak to the Director.

INVESTIGATION OF COMPLAINTS:

All reports of workplace violence or potential incidents will be taken seriously and will be documented and investigated. The form of investigation will depend on the circumstances and may involve appropriate law enforcement or other competent person as determined by the Centre, taking into consideration the nature of the workplace violence and the concerns of the employee/volunteer who experienced the workplace violence.

1. Upon receipt of a formal complaint of workplace violence, the Director will assign the investigation to an internal or external person to investigate.
2. The investigation may include the following:
 - a. Interviewing the complainant and the respondent as soon as possible
 - b. Interviewing any witnesses
 - c. Advising all persons interviewed to refrain from discussing the complaint as well as the possible consequences
3. The investigator may make a finding of
 - a. Sufficient evidence to support a finding of violation of this Policy
 - b. Insufficient evidence to support a finding of violation of this Policy, or
 - c. No violation of this Policy
4. The investigator will prepare a written report of their findings, and forward that report to Management
5. Management will make a decision whether to dismiss or act upon the report from the investigator and will advise the Complainant and Respondent in writing of the outcome.

RECORD KEEPING:

The documents corresponding to any investigation will be kept on file in a secured location, separate from any employee/volunteer's personnel files, for two years from the date of the incident to be readily available for inspection by anyone directly affected by the incident, or an Occupational Health and Safety Officer. Records of any remedial action taken will be placed in the appropriate employee/volunteer's personnel file.

EMPLOYEE/VOLUNTEER RESPONSIBILITIES:

Employees/volunteers are expected to:

- Act respectfully towards other individuals while at work and while participating in any work-related activity
- Ensure their own immediate physical safety in the event of workplace violence, then to report the incident to the Director and / or police as the situation warrants
- Understand and comply with this Policy and all related procedures
- Co-operate with any efforts to investigate and resolve matters arising under this Policy
- Participate in education and training programs and be able to respond appropriately to any incident of workplace violence

MANAGEMENT RESPONSIBILITIES:

Management employees/volunteers are expected to:

- Ensure training and education of all employees/volunteers with respect to this Policy
- Promote a violence free working environment
- Conduct a risk assessment of the workplace to determine the potential for the risk of violent situations. The assessment will take into consideration circumstances that would be common to similar workplaces and circumstances that are specific to the different working environments of B.C.L.C. The Director and the Board of Directors will be advised of the results of the assessment.
 - B.C.L.C. will reassess the risks of workplace violence as often as is necessary to ensure the continued protection of the employee/volunteer from workplace violence. Results of the initial assessment and all consecutive reassessments will be provided to the employee/volunteer.
- Provide the employee/volunteer with information, including personal information, about a person with a history of violent behaviour if the employee/volunteer can be expected to encounter such a person in the course of her or his work and the risk of workplace violence is likely to expose the employee/volunteer to physical injury;
- Take all reasonable precautions in the circumstances for the protection of an employee/volunteer if B.C.L.C. becomes aware of a domestic violence situation that would likely expose an employee/volunteer to injury in the workplace;
- Designate an employee/volunteer to act as a Workplace Co-ordinator with respect to workplace violence issues and to ensure compliance with this Policy
- Review all reports of workplace violence in a prompt, objective and sensitive manner; and
- Facilitate medical attention and appropriate support for all those either directly or indirectly involved in a workplace incident.

CONSEQUENCES:

No employee/volunteer or any other individual affiliated with B.C.L.C. shall subject any other person to workplace violence or allow or create conditions that support workplace violence. An employee/volunteer of B.C.L.C. that subjects another employee/volunteer, client, or business associate of the Centre to workplace violence may be subject to disciplinary action, up to and including immediate dismissal for just cause.

Additionally, discipline, up to and including immediate dismissal for just cause may be imposed on the following individuals in the following circumstances:

- On employees/volunteers who bring forward complaints in bad faith or for vexatious reasons; and
- On employees/volunteers who have made a false accusation under this Policy, knowingly or in a malicious manner.

REPRISALS:

B.C.L.C. will not tolerate reprisals or retaliatory measures against any employee/volunteer, who in good faith raises a complaint of workplace violence within the meaning of this Policy. These protections apply to anyone who cooperates in the investigation of the complaint. Disciplinary action may be taken against any person who takes any reprisal against a person who reports workplace violence.

COUNSELING SERVICES:

Employees/volunteers who have been victims of workplace violence will be referred to B.C.L.C.'s Insurance Plan for counseling services. If the employee/volunteer is not eligible, B.C.L.C. will pay for any appropriate counseling as required for a defined period of time upon professional recommendation. Use of such services will be at the employee/volunteer's sole discretion.

MONITOR AND REVIEW POLICY REGULARLY:

B.C.L.C. will review this Policy and the effectiveness of its workplace violence prevention measures at least every year and after any critical incident of violence in the workplace. B.C.L.C. will provide the employee/volunteer with information and training regarding workplace violence at least once every three years.

CONCERNS OR ISSUES POLICY AND PROCEDURE

In order to help all those that deal with Bridlewood Child Learning Centre (B.C.L.C.), and to present opportunities for their input regarding the quality of services offered to children and to encourage their collaboration, B.C.L.C. has a concerns or issues procedure that applies to parents, staff and volunteers that deal with our child care centre. Issues brought up can be program related, staff related, operational or any other concerns and/or issues regarding B.C.L.C.'s services.

B.C.L.C. wants to ensure that all issues or concerns raised are taken seriously and will be addressed by the Director. Every effort will be made to address and resolve the concerns or issues to the satisfaction of all parties. All concerns or issues are important. Some may be received verbally and others may be written. All concerns or issues will be followed up on within ten (10) business days. The level of detail provided to the complainant and the respondent will respect and maintain the confidentiality of all parties involved.

As part of a conflict resolution approach, to determine if the conflict will be recognized as a formal concern or issue, here are some criteria to consider. Is the information that you are transmitting truthful, useful, does it do any good, and is it constructive? If you answer no to one of these criteria, you may not have concerns or issues on your hands.

A) Guiding Principles for the processing of a concerns or issues

B.C.L.C. collects and processes concerns or issues from a parent, employee or volunteer of the child care centre concerning a staff member, parent or volunteer of the child care centre. The complainant is the person making the concern or issue and the respondent is the person who is the subject of the concern or issue.

A parent, employee or volunteer may lodge concerns or issues regarding an act or situation in the child care centre that leads to the conclusion that there is a breach of an obligation imposed by the *Child Care and Early Years Act*, or if they find any fact or situation that threatens the health, safety or welfare of the children who are under our care.

B) How to forward your concerns or issues

B.C.L.C. ensures the availability of a concern or issue handling service during its business hours. To this end, the Director, or their alternate are the persons designated to receive a concern or issue.

C) How your concerns or issues will be processed

The Director or their alternate will deal with and diligently pursue the concern or issue. The person who receives the concern or issue allows the complainant to explain the nature of their concern or issue, provides the required information or documents, and if necessary, directs the complainant to the appropriate contact person or organization, and verifies the validity of the concern or issue with the persons involved.

D) How to file your concerns or issues

A complainant may present a concern or issue verbally or in writing. A complainant cannot present a concern or issue on behalf of another person, unless it is in the name of a child. The complainant is required to identify himself; no anonymous concern or issue will be considered. The designated

person who receives the concern or issue reassures him or her of the confidentiality of the concern or issue. Only those directly involved will be informed of the concern or issue.

For any concern or issue received, whether verbal or written, the designated person completes a file using the *Registration and Follow-up of Concerns or Issues Form* to collect all relevant information. In all cases, they note the complainant's concerns.

E) How your concerns or issues will be reviewed and processed

As a first step, the complainant must discuss his concern or issue with the Director or their alternate. The follow-up of a conflict resolution process with the persons concerned could be used. It is expected that most of the concerns or issues can be resolved satisfactorily through this informal process.

If, after the initial meeting, the complainant believes their concern or issue has not been resolved satisfactorily, they may, within seven (7) working days of the informal discussion with the Director or their alternate, submit their concern or issue in writing using the form for *Registration and Follow-up of Concerns or Issues*. To be heard, a meeting for this purpose with a member of the Board of Directors shall be convened within ten (10) working days thereafter. The respondent is advised that there is a concern or issue against them and they are asked to present their version of the facts. For any concern or issue received, the Director or their alternate will review the facts presented by the complainant and the respondent.

If the concern or issue is not resolved, at the second meeting, the Director or their alternate will carefully review the concern or issue, reflect on the file and consider all the elements that make up the concern or issue, and make a final, binding decision, without appeal, and shall deliver it to the complainant and the respondent in writing within ten (10) working days of such meeting.

For concerns or issues of abuse, mistreatment, assault or other similar occurrence of a child, the person directly testifying to a breach of this nature must promptly report the incident to B.C.L.C.'s Director and to the Children's Aid Society (613-747-7800).

F) Report on the Concerns or issues process

The Director shall inform the Chair of the Board of Directors of all concerns or issues received. They will present the concerns or issues in detail and specify the actions taken to resolve it.

G) Record keeping

All concerns or issues files collected by B.C.L.C. and documents showing their follow-up are confidential and kept under lock and key at the child care centre's place of business. Only the Director and the Chair of the Board of Directors will have access to these documents when necessary, for the purposes of the responsibilities entrusted to them by the *Ontario Corporations Act*, without contravening the *Freedom of Information and Protection of Privacy Act of Ontario*. The only exception to this is when information must be disclosed for legal reasons; ie. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities or Children's Aid Society.

H) External agencies

If your concerns and/or issues are regarding agencies external to B.C.L.C., you can contact:

Ministry of Education: Program Advisor, Ottawa Region, Child Care Quality Assurance and Licensing, Early Years and Child Care Division, 613-787-5278 (local number)1-800-267-5111 ext 5278

Public Health Ottawa: Call 3-1-1, 613-580-2400 (local number) 1 866-261-9799-(toll free)

REGISTRATION AND FOLLOW-UP OF CONCERNS OR ISSUES FORM

Date of concern or issue: _____Time: _____

Concern or issue received by: _____

Name of complainant: _____

Address: _____

1. Details of the concern or issue:

2. Next steps to be taken (ie. investigation):

3. Follow-up:

Staff Signature: _____

Name (print please): _____

Date: _____