

CANADA PLACE CHILD CARE SOCIETY

POLICIES AND PROCEDURES

REVISED JANUARY 2009

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CANADA PLACE CHILD CARE SOCIETY

POLICIES AND PROCEDURES

Edited January 2009

A. GENERAL ISSUES

1 PHILOSOPHY

1.0.1 The philosophy of Canada Place Child Care Society (CPCCS) is based upon the recognition of the interdependence of the child's physical, emotional, intellectual, creative and social growth, and the importance of the interrelationship between the family and the Centre.

1.0.2 Children differ widely in learning style, ability, achievement and interests. They learn in their own sequence and in their own time schedule. Children should have the time and resources to immerse themselves fully in the play that interests them now. As well, our children need to take their rightful place in the emerging global society. The Centre will help children be free from prejudice - whether of race, class, colour, creed, nation, gender, religion, degree of ability or of material wealth.

1.1 IMPLEMENTATION

1.1.1. The Centre will promote a play-based program, based on the principle of unity in diversity, through:

1.1.1.1 maximum group sizes flexible enough to meet individual needs;

1.1.1.2 trained staff and rooms designed for the comfort of the children, parents and staff.

1.1.2 Gender Equality - A non-sexist environment will be encouraged by:

1.1.2.1 parental, particularly fathers, involvement in the Centre (e.g.: field trips, storytelling);

1.1.2.2 hiring male child care worker(s), if possible;

1.1.2.3 use of appropriate material resources;

1.1.2.4 showing women and men in non-traditional roles whenever possible (e.g.: guest speakers, resource materials), and validating all career choices.

1.1.3 Cultural and Religious Equality - A non-racist environment will be encouraged by,

1.1.3.1 hiring will represent the best-qualified persons;

1.1.3.2 offering programming that unifies rather than divides, that is, based on finding points of commonality, capacities, talents and concerns, which all human beings share;

1.1.3.3 teaching children to play, and function in general, as unifiers and peacemakers;

1.1.3.4 instilling in the children an appreciation of the rich diversity of humanity and encouraging them to value the good in cultures that differs from their own;

1.1.3.5 in partnership with families, in the required atmosphere of harmony and freedom from prejudice and fanaticism, various religious and ethnic celebrations will be recognized, at the discretion of the Director and staff. Emphasis will be on the common underlying spiritual principals, in order to promote higher levels of unity and cooperation, and to inspire the children to inquire and listen with discernment and respect rather than regard others with contempt or disdain.

1.1.4 We have an open-door policy; maximum parental involvement will be encouraged by:

1.1.4.1 encouraging the parent(s) to enter the Centre frequently and freely;

1.1.4.2 asking each parent to regularly participate in activities at the Centre (e.g.: storytelling, playing a game, going on a field trip);

1.1.4.3 ensuring frequent, willing, friendly and positive verbal interactions between parent(s) and staff;

1.1.4.4 ensuring that parent(s) feel equal to staff in respect to the significance of their knowledge and input for their child;

1.1.4.5 ensuring respective, friendly, and low-key interactions between parent(s) and staff;

1.1.4.6 promoting supportive and prompt responses by staff to parents' questions or needs for

- discussion, meetings, etc.;
- 1.1.4.7 ensuring all parties perceive the parent-Centre relationship as a partnership, with two-way communication;
- 1.1.4.8 providing parent(s) with information regarding the Centre through various media (e.g. newsletter, poster, bulletin board);
- 1.1.4.9 promoting resources available through the Centre to parent(s), and encouraging their use.
- 1.1.5 Language, communication, critical thinking and problem solving, and development of positive self-esteem will be emphasized.
- 1.1.6 Adults will assist children to make choices and work with children on the consequences of their choices.
- 1.1.7 Independence amongst boys and girls will be encouraged equally (responsibility for their belongings, creations, and maintenance of playroom materials). Children should learn to foresee the consequences of their choices/actions and share in responsibilities.
- 1.1.8 As part of a child's development, the values of food conservation and the development of table skills and manners are introduced (i.e.. independent serving, tasting of all foods presented, consumption of portions taken, and clearing of personal utensils).
- 1.1.9 Video and Computers are only to be used as an educational tool and time is allotted to the children on a scheduled basis. Each room is allowed one movie a week. The Computer center is open for a period of time twice a day.

2 ADMISSION

2.1 POLICIES

- 2.1.1 There will be no discrimination on the basis of race, religion, colour, creed, or national origin.
- 2.1.2 Full-time/part-time. Children will be accepted on a full-time basis and an attempt will be made to place part-time children when possible.
- 2.1.3 Federal employees have first priority for spaces.
- 2.1.4 Children with special needs will be accommodated subject to operational constraints.

2.2 ADMISSIONS PROCEDURES

- 2.2.1 Before a child can be admitted to the Centre, the parent(s) shall:
 - 2.2.1.1 participate in an interview with the Executive Director to determine their child's eligibility for the Centre;
 - 2.2.1.2 consider completing an application for subsidy with the Provincial Day Care Subsidy Unit (427-0958). In the case that parent(s) do not qualify for provincial day-care subsidy they will be required to pay the full fee as established by the Board of Directors;
 - 2.2.1.3 complete the application, registration, medical information forms, and admissions agreement;
 - 2.2.1.4 have the child's immunizations updated;
 - 2.2.1.5 arrange for visits with the child to the homeroom prior to the child's starting date.
 - 2.2.1.6 one month's written notice must be given upon leaving the Centre. The initial deposit can be donated to the Centre or refunded to the parent(s).

3 HOME-ROOMS

3.1 POLICIES

- 3.1.1 The Centre is licensed for a maximum total of 70 full-time spaces.
- 3.1.2 Each child is assigned to a peer group with a homeroom.

- 3.1.3 Each maximum group of children is housed in homerooms with adjacent, developmentally appropriate washrooms.
- 3.1.4 Each room is assigned 2 primary caregivers.
- 3.1.5 Primary caregivers will also be responsible for maintaining close two way contact between the Centre and family, through personal contact, daily logs, and conferences as necessary.
- 3.1.6 Homeroom **maximum** capacities are:
 - 3.1.6.1 Room 1 (0-18 months): 8 children and 2 caregivers
 - 3.1.6.2 Room 2 (0-18 months): 10 children and 2 caregivers
 - 3.1.6.3 Room 3 (12-30 months): 12 children and 2 caregivers
 - 3.1.6.4 Room 4 (19-36 months): 12 children and 2 caregivers
 - 3.1.6.5 Room 5 (2.5-6 years): 20 children and 2 caregivers
 - 3.1.6.6 Room 6 (2.5-6 years): 20 children and 2 caregivers
- 3.1.7 With the exception of Room 1, any homeroom may adjust the number of children upward by one child so long as the total number of children in the Centre does not exceed its licensed maximum.
- 3.2 PROCEDURES
 - 3.2.1 Children will eat, sleep, and play in their homerooms throughout the day. There is scheduled gym time for each room. All rooms will have out of Centre time (playground or walks) at least once per day as weather permits.
 - 3.2.2 During playtimes children will choose their play, while the primary caregivers are responsible for supervising specific areas of the homerooms.

B. PSYCHOLOGICAL WELL-BEING

4 CHILD GUIDANCE POLICY

4.1 POLICIES

- 4.1.1 Canada Place Child Care Society promotes an environment, which fosters child guidance.
- 4.1.2 Staff will be informed of and required to sign the child guidance policies and procedures at the time of employment. Frequent reviews and discussions of these policies and procedures will take place during planning and staff meetings.
- 4.1.3 At the time of intake, the Executive Director will make the parent(s) aware of the child guidance policy, management policies and procedures of the Society.
- 4.1.4 These policies will be included in the parent package, which is distributed to all families at intake.

4.2 CHILD GUIDANCE PHILOSOPHY

- 4.2.1 Infants/Toddlers (0 to 24 months).
Managing this age group will focus on meeting the needs of the individual child promptly, including the need to be held and cuddled, and on providing interesting activities in a warm, inviting environment.
- 4.2.2 24 months and over.
To teach children appropriate behaviors through the following approaches:
 - 4.2.2.1 child guidance will be firm, caring and consistent.
 - 4.2.2.2 praise appropriate behaviors.
 - 4.2.2.3 explain why certain behaviors are inappropriate.
 - 4.2.2.4 show and encourage problem solving.
 - 4.2.2.5 use natural consequences with loving/helpful attitude.
 - 4.2.2.6 give children choices.
 - 4.2.2.7 consequences of inappropriate behaviors must respect the child's spiritual, emotional and physical well-being.
 - 4.2.2.8 consequences should be immediate, predictable, reasonable and consistent.
 - 4.2.2.9 acceptable consequences are redirecting and providing alternatives.
 - 4.2.2.10 staff will recognize children's need for individual attention, quiet one to one activities and observe children's moods, problems etc.
 - 4.2.2.11 staff will provide a stimulating environment.
 - 4.2.2.12 children will be taught to express feelings verbally.

4.3 CHILD GUIDANCE PROCEDURE

- 4.3.1 Infants/Toddlers (0 to 24 months).
 - 4.3.1.1 Adults will model acceptable behavior
 - 4.3.1.2 Although biting is a normal behavior at this age, if it does become extensive and problematic, staff will involve parents in problem solving.
 - 4.3.1.3 Inappropriate behaviors such as biting or hitting will be redirected.
- 4.3.2 24 months and over.
 - 4.3.2.1 Observe and listen.
 - 4.3.2.2 Respond to needs promptly by encouragement, comfort, new props, additional space, etc.
 - 4.3.2.3 Speak directly to the child (ren) requesting specific behavior.
 - 4.3.2.4 Allow the child an opportunity to respond appropriately. Give support if necessary.
 - 4.3.2.5 Use a variety of techniques as previously indicated.
 - 4.3.2.6 Set limits and expectations
 - 4.3.2.7 Situations where the behavior continues such as aggression and/or non-co-operative behavior, the child may be removed from the situation and sit with staff.

- 4.3.2.8 The child will be encouraged to return to the situation when he/she is ready. Monitor the situation and involve and advise parents if further action is warranted.
- 4.3.2.9 Biting and hitting are normal behaviors in this age group, and staff will involve parent(s) in problem solving.
- 4.3.3 Approaches not used.
 - 4.3.3.1 Physical punishment: striking, shaking, shoving, spanking or any other form of aggressive contact.
 - 4.3.3.2 Withdrawal of needs such as food, clothing, shelter or activity.
 - 4.3.3.3 Belittling and degrading statements or any other form of verbal abuse.
 - 4.3.3.4 Time outs.

C. PHYSICAL WELL BEING

5 NUTRITION

5.1 POLICIES

- 5.1.1 The Society recognizes the importance of nutrition for proper growth, energy, and health.
- 5.1.2 Efforts will be made to accommodate special dietary requirements, only for allergies or religious reasons.

5.2 PROCEDURES

- 5.2.1 The Centre provides two snacks and a hot lunch daily. A weekly menu prepared in accordance with the Canada Food Guide will be posted on the bulletin board near the main kitchen for inspection. Menus are reviewed at least once every three years by a dietician to ensure that they meet the changing nutritional guidelines of research and Canada's Food Guide to support children's healthy development.
- 5.2.2 Children under thirteen (13) months of age shall be fed in accordance with the instructions of the parent(s) regarding the amount, type and scheduling of feeding.
- 5.2.3 Children under 1 year of age will be held during feeding with a bottle. Holding promotes feelings of security and attachment and provides an opportunity for infant-adult interaction.
- 5.2.4 When infants are being introduced to solid foods, they should be placed in a high chair or infant seat to be fed. Infant seats and high chairs shall be equipped with safety straps which must be used at all times.
- 5.2.5 The cook will prepare, blended foods for babies and appropriate finger foods will be introduced when the child is ready, and with the parents consent.
- 5.2.6 All infant formulas are to be provided and prepared by the parent(s) along with appropriate equipment. items must be properly labeled and given directly to staff for refrigeration. Parent(s) are responsible for washing bottles.
- 5.2.7 Children will be fed in a manner that is appropriate to their age and level of development. Children will be seated while eating and drinking. No beverages are provided to children while they are napping.
- 5.2.8 The Center will follow Alberta Family and Social Services policies regarding meals and snacks which lists foods not to be served
- 5.2.8.1 Foods not to be served:
- 5.2.7.1.1 nuts and seeds
 - 5.2.7.1.2 hard candy, caramels/toffee, chewing gum, popcorn (under 4 yrs), gumdrops, jellybeans
 - 5.2.7.1.3 snacks made with toothpicks or skewers
- 5.2.8.2 Caution Foods. The following are guidelines for modifying caution foods to make them less hazardous:
- 5.2.7.2.1 whole grapes - slice lengthways
 - 5.2.7.2.2 hot dogs - slice lengthways
 - 5.2.7.2.3 hard vegetable pieces - shred or chop vegetables
 - 5.2.7.2.4 fruits with pits - remove pits before serving (e.g., peaches, cherries, and plums)
 - 5.2.7.2.5 hard fruit pieces - shred or chop
 - 5.2.7.2.6 fish with bones - remove bones
- 5.2.9 Special diets/food allergies. If a child has any special dietary requirements, alternative menus may be discussed with the Executive Director.

- 5.2.9.1 Parent(s) wanting alternate menus for medical, or religious reasons must have a certificate from a physician or a nutritionist or parental written consent.
 - 5.2.9.1 In cases where families bring food into the daycare, the families will be encouraged to follow the recommendations of the Canada Food Guide. The centre will supplement the child's meals and snacks when the food provided by the family does not meet the Canada Food Guide.
 - 5.2.9.1 The names of children and their respective special diets or food allergies shall be posted in the main kitchen and in all rooms.
- 5.2.10 Allergenic food ban. When severe allergies warrant it, the allergenic food will be totally banned from the Centre; all parents from the centre will be informed of the ban, which will be enforced.

6 HYGIENE

6.1 POLICIES

- 6.1.1 Staff is responsible for maintaining the hygiene of the children while in the Centre.
- 6.1.2 Parents are responsible for the hygiene of their children while outside of the Centre.
- 6.1.3 Children will be encouraged to learn and practice hygiene appropriate to their development.
- 6.1.4 Parent(s) will be informed in advance when visits by animals are planned and parent(s) have the responsibility of informing the Centre of any allergies their child has to animals.

6.2 PROCEDURES

- 6.2.1 Tooth brushing. The safety hazards outweigh the health benefits. Children will not brush teeth at the Centre, either alone or with the assistance of staff.
- 6.2.2 The children will eventually be encouraged to be independent in the washroom, to learn to dress, undress, wash hands and face, on their own.
- 6.2.3 Children hand washing. Children's hands will be washed, before and after meals, after toileting, as well as after touching any animal, playing in the sand, after wiping noses, sneezing or coughing or whenever soiled.
- 6.2.4 Paper towels and soap will be kept in dispensers near the sink in each homeroom.
- 6.2.5 Toilet training. The toilet training program may be introduced when the child enters the toddler group at 19 months according to the child's developmental readiness and parents agreement.
- 6.2.6 Parents are required to supply diapers, wet ones, training pants/underwear, a labeled change of clothing and appropriate indoor footwear.
- 6.2.7 Staff will, as far as is practicable, ensure that the children and their clothes are kept clean and dry. Soiled or wet clothing will be sent home for laundering in plastic bags.
- 6.2.8 Staff hand washing. Staff will wash their hands before handling food, giving medication, after toileting, and after assisting children with toileting. As well, hands will be washed after contact with potentially infectious materials such as nasal discharge, vomit, feces, wounds, infected eyes, and after contact with animals. Hands will also be washed after handling toxic materials.
- 6.2.9 Toys will be removed from the room and disinfected with a mild bleach solution and/or sanitized in the dishwasher by the child care staff according to the following schedule:
 - 6.2.9.1 Room 1: daily.
 - 6.2.9.2 Room 2: daily.
 - 6.2.9.3 Room 3, 4, 5 and 6: every week.

- 6.2.10 Equipment (other than toys) will be disinfected monthly or as per room schedule.
- 6.2.11 The center is cleaned thoroughly after hours by Bee Clean provided by Public Works.
6.2.11.1 The center has janitorial service provided by Bee Clean between the hours of 1:00-2:00 pm to clean washrooms, empty garbages, and washes bathroom floors and hallways.
- 7 HEALTH
- 7.1 POLICY
- 7.1.1 The Centre aims to protect, maintain and improve the health of each child.
- 7.1.2 Neither the license holder, parents nor childcare providers shall smoke at any time or place where childcare is being provided.
- 7.2 PROCEDURES
- 7.2.1 Room staff will greet each child and discuss with the parent(s) any health problems or symptoms. The parent(s) are responsible for informing the staff of any medications being administered at home in case of any reaction during the day.
- 7.2.2 Parent(s) are responsible for keeping their child at home if they are displaying any of the following symptoms:
- 7.2.2.1 fever (38 degrees Celsius and higher), especially if the temperature is high or persistent
 - 7.2.2.2 diarrhea or vomiting (2-3 times per 3-4 hours)
 - 7.2.2.3 undiagnosed rash/skin condition
 - 7.2.2.4 communicable disease (other than upper respiratory tract infection)
 - 7.2.2.5 obviously infected discharge (thick and coloured i.e.: brown, red, green)
 - 7.2.2.6 lethargy and irritability
 - 7.2.2.7 persistent pain
 - 7.2.2.8 cough (frequent bouts: 2-3 times/hour) especially if choking or vomiting.
 - 7.2.2.9 eye discharge.
- 7.2.3 A receiving staff member who notices any of these symptoms when a child arrives will ask that the child be taken home or to a doctor for a note confirming that the child is healthy and not infectious, given the group care situation.
- 7.2.4 If a child begins displaying any of the above symptoms at the Centre, the child may be isolated from the other children and may be taken to the Directors office so that the parent(s) or emergency contact can be called to remove the child within one hour of the call.
- 7.2.5 If a child displays recurrent or long lasting symptoms, the Executive Director reserves the right to request a signed note from a doctor. A form letter will be provided to the parent(s) for completion by a physician before returning to the Centre.
- 8 MEDICATION AND HERBAL REMEDIES
- 8.1 POLICY
- 8.1.1 Medication and herbal remedies are to be administered properly to the correct child.
- 8.1.2 Medication and herbal remedies will be stored in an appropriate environment (refrigerated or room temperature).
- 8.1.3 Medication and herbal remedies will be kept inaccessible to children.

- 8.1.4 Emergency medication will be easily accessible by all staff. Normally kept in room backpack as backpack travels everywhere the room goes.
- 8.2 GENERAL PROCEDURES
- 8.2.1 Medication and herbal remedies will only be administered with the written consent of the parent(s).
- 8.2.2 Primary staff that have a valid first aid certificate will only administer medication and herbal remedies.
- 8.2.3 Childcare personnel can refuse to give medications, herbal remedies or do a procedure for which clear instructions have not been provided or for which they are not trained.
- 8.2.4 All medication must come in its original container, labeled with the child's name.
- 8.2.5 Medication will only be administered according to the labeled directions.
- 8.2.6 Medication must not be mixed with any food or drink.
- 8.2.7 Prescription medication must also show the name of the physician, patient's name, date of issue, instructions and time period.
- 8.2.8 No medication will be administered for more than five days without a physician's order.
- 8.2.9 Aspirin (or generic ASA) will not be administered to children due to the risk of Reye's Syndrome.
- 8.2.10 Medication record. The primary staff that administers the medication shall complete the medication record. Include the date and time the medication was actually administered and signature each time medication is administered.
- 8.2.11 Side effects. Information regarding the potential side effects of medication must be given in writing to the primary caregiver administering the medication. This includes medication that has been administered by the parent before the child arrives at the Centre, medication during the day, and medication administered at the Centre just prior to the child leaving the Centre.
- 8.2.12 Storage of medication. All non-emergency medications will be stored in a manner appropriate to the medication (i.e.: refrigerated or room temperature) in locked boxes in the rooms or in the main kitchen refrigerator. This is ONLY for the duration of time the child is on medication.
- 8.2.13 Storage-emergency medication. Medication for emergency situations shall be stored in a backpack in the child's homeroom. This is in a location that is inaccessible to children, but not locked. Such medications include Epi-pen, Ventoin, Acupen and adrenaline-based medication (anaphylactic kit).
- 8.2.14 Please ensure all medications are taken home after the duration of the prescribed course. For the safety of all children, DO NOT leave any form of medication in child's nap sack or diaper bag.
- 9 COMMUNICABLE DISEASES
- 9.1 POLICES
- 9.1.1 The Centre will follow public health procedures for control of communicable diseases.
- 9.1.2 HIV infection and Aids. Based on the principles outlines in the Individual Rights Protection Act of Alberta and the March 1995 Guidelines for Handling HIV Infection and AIDS in Day Care Services, prepared by Day Care Programs in Alberta Family and Social Services, it is the policy of the Centre that:
- 9.1.2.1 There will not be discrimination against a child, childcare worker or family who has HIV infection/AIDS.
- 9.1.2.2 The Centre will follow the guidelines for handling HIV infections/AIDS as outlined in the

above-mentioned Day Care Programs document.

9.2 PROCEDURES

- 9.2.1 Parent(s) are required to remove their child from the premises immediately if the child is suffering from a Communicable Disease, as listed in 9.2.6.
- 9.2.2 Definition of outbreak: For the purpose of this policy, an outbreak will be defined as an occurrence of any of the diseases mentioned in 9.2.5 or a situation that is classified as such by public health practice.
- 9.2.3 In the event of an outbreak, the Capital Health Authority Eastwood Health Centre will be informed. The Executive Director, in conjunction with the Health Authority will devise a plan for the management of the outbreak. This may include grouping infected children separately from healthy children, or closing the Centre for a period of 24 to 72 hours.
- 9.2.4 The Capital Health Authority Eastwood Health Centre will be notified in any case where the staff knows, or has reason to suspect, that a child is suffering from any of the communicable diseases listed below and the parent(s) of such child will be required to remove the child until the Centre is provided with a note from a doctor confirming that the child is healthy and not infectious.
- 9.2.5 The Centre will cooperate with procedures by the Capital Health Authority Eastwood Health Centre regarding the testing of stool, blood or urine samples, or administration of prophylaxis medication for meningitis, hepatitis, etc.
- 9.2.6 Communicable Diseases include: Chicken Pox, Diphtheria, Gastrointestinal infections (diarrhea) e.g. Salmonella, Shingles, Hemophilus influenza, Hepatitis, Meningitis, Mumps, Polio, Rubella (German Measles), Tuberculosis, Whooping Cough (Pertussis). Scabies, lice, ringworm, and influenza are also included.

D. EMERGENCIES

10 EMERGENCIES

10.1 POLICIES

- 10.1.1 All staff are responsible for familiarizing themselves with the facilities and specifically with the location and proper usage of the first aid kits, telephones, fire alarms, exits, fire extinguishers, etc.
- 10.1.2 All emergency phone numbers and procedures must be posted beside each telephone in the Centre.
- 10.1.3 At intake, the Centre will require an emergency information sheet for each child, as required by Alberta Family and Social Services.

10.2 PROCEDURES

- 10.2.1 Emergency phone numbers include those of the police department, fire department, ambulance, hospital, poison centre, Emergency Social Services (Child Protective Services), Capital Health Authority Eastwood Health Centre, taxi and Canada Place security.
- 10.2.2 It is the staff's duty to be familiar with the common accidents or injuries and their first aid treatment. They must not diagnose; their training does not allow them to assume the competencies of a trained medical person. In cases of uncertainty, their task is simply to recommend professional medical treatment or to ensure treatment if the injury is judged to be serious.
- 10.2.3 Staff members rendering assistance to an injured or distressed child will be protected by the "Medical Waiver" signed by the parents upon intake.
- 10.2.4 Primary caregivers will carry emergency information sheets for each child on field trips, and other such outings. The forms will be with the child(ren) at all times.
- 10.2.5 It is the responsibility of the Parent(s) to update the changes in information. The Executive Director, and the primary caregiver will ensure that the emergency sheet for each child is up-to-date. (Done at 6 months intervals.)

11 ACCIDENTS AND FIRST AID

11.1 POLICIES

- 11.1.1 Caregivers are responsible for rendering first aid.
- 11.1.2 Serious injuries/illness will be transported to hospital by ambulance.
- 11.1.3 All incidents will be reported and reviewed.

11.2 PROCEDURES

- 11.2.1 First aid certification. At a facility to be identified by the Executive Director, all childcare workers will be certified in Infant Cardio-Pulmonary Resuscitation and have had a Standard First Aid Child Care course.
- 11.2.2 First aid re-certification. The childcare workers will be re-certified as required by Social Services.
- 11.2.3 Certification status. It is the Executive Director's responsibility to ensure all childcare workers' certification status is current.

11.3 ACCIDENTS PROCEDURES

- 11.3.1 The following illness/injuries are serious and require immediate first aid treatment and transportation to the hospital:
- 11.3.1.1 uncontrollable bleeding,
 - 11.3.1.2 seizures,
 - 11.3.1.3 shock (respiratory and/or cardiac),
 - 11.3.1.4 second degree burns, covering any significant area,
 - 11.3.1.5 any third degree burns,
 - 11.3.1.6 fractured bones,
 - 11.3.1.7 after CPR or Heimlich maneuvers performed,
 - 11.3.1.8 head injury, suspected internal injury, and
 - 11.3.1.9 other severe conditions as necessary.
- 11.3.2 Outdoor play area. In the case of incidents in the outdoor play area, one staff member will remain with the children while the other goes into the building to notify security that assistance is required.
- 11.3.3 Staff members will take the cell phone to the playground and on field trip outings.
- 11.3.4 Staff members shall complete the following steps in the event of an accident:
- 11.3.4.1 Immediately apply necessary first aid and comfort the child. Control panic, being as supportive and comforting as possible.
 - 11.3.4.2 Ensure the safety of the remainder of the group. Children should never be left unattended. Seek attendance from other staff, parents, or bystanders. Take the injured child away from the other children when possible.
 - 11.3.4.3 Notify the Executive Director of the accident's occurrence and of the steps taken.
 - 11.3.4.4 If necessary, arrange for transportation by ambulance to the Pediatric Emergency Unit at the University Hospital 8440 - 112 St.
 - 11.3.4.5 Accompany child in the ambulance.
 - 11.3.4.6 Take the child's emergency sheet and file to the hospital. It contains important information, which will be needed, (i.e. Alberta Personal Health Card number, emergency contacts, allergies, etc.).
 - 11.3.4.7 Phone parent(s), or alternate emergency contact. Inform them of the accident, the extent of the injury, the treatment and aid being administered, and where to meet the child and accompanying staff.
 - 11.3.4.8 Do not give details of the accident to anyone but staff, the parent(s) of the child concerned, or the emergency contact person.
- 11.3.5 ACCIDENT REVIEW PROCEDURES.
- 11.3.5.1 Check the source of the accident. Examine steps that will be taken to prevent a reoccurrence.
 - 11.3.5.2 Complete an "Accident Report" form with the Executive Director and ask parents to sign it. Provide a copy for parent(s).
 - 11.3.5.3 Indicate repairs needed or recommend changes in procedure and/or policy.
- 11.3.6 Ambulance. Parent(s) will be responsible for reimbursing the Society for ambulance costs.

12 EVACUATION

12.1 POLICIES

- 12.1.1 Fire Warden. The Executive Director, and in her absence the Assistant Director, is the Fire Warden for the Centre in cases of emergencies.
- 12.1.2 There shall be a Fire Warden on site at all times.
- 12.1.3 Monthly drills will be conducted to familiarize children and staff with evacuation procedures.

- 12.1.4 Priority during evacuation is on speed and safety.
- 12.1.5 Parent(s) are responsible for being familiar with evacuation procedures and sites.
- 12.2 PROCEDURES
- 12.2.1 Evacuation sites.
- 12.2.1.1 First choice: The Citadel Theatre, by the box office. 9828-101A. Phone 425-1820
- 12.2.1.2 If the evacuation occurs before 8:00 a.m. or as a second choice, the lobby of the Sunlife Building will be used. 10123-99st.
- 12.2.1.3 In cases where evacuation out of the downtown core is necessary, the Garneau University Child Care Centre, 10925 - 87 Avenue will be used.
- 12.2.2 At intake, parent(s) will be issued two wallet-sized cards, with the names and addresses of the above-named locations, to keep with them at all times.
- 12.2.3 Fire: Childcare workers' and Executive Director's responsibilities:
- 12.2.3.1 Upon sight of fire, the fire alarm will be sounded.
- 12.2.3.2 The Fire Warden will telephone the fire department.
- 12.2.3.3 Primary staff in each room will gather their particular group together in an orderly manner. One primary staff member shall quickly check his or her room to ensure no one is left behind. A head count shall be made of each age group before children begin to use the emergency exits. Primary staff will bring emergency books, attendance forms, turn on lights and close doors.
- 12.2.3.4 Rooms will use the closest emergency exit. Ordinarily, Rooms 1,2, and 3 will use the exit in Room 1. Rooms 4, 5, and 6 will use the exit by the main kitchen.
- 12.2.3.5 The cook will assist Room 4 toddlers to exit.
- 12.2.3.6 The Assistant Director will assist Room 3 toddlers to exit.
- 12.2.3.7 Babies will be placed in cribs and rolled to the landing inside the fire exit by back door of Room 1 where they will evacuate.
- 12.2.3.8 Order of exit. The first group to arrive at exit points will leave first, and other groups in order of arrival. If all arrive at the exist point simultaneously, preschooler will exit first followed by toddlers.
- 12.2.3.9 The Fire Warden will take the red emergency book and do a complete check of the Centre, and exit last.
- 12.2.4.10 The Staff will take attendance records.
- 12.2.4.11 Supplies (including diapers, bottles, soothers, clothes, boots, etc.) will not be removed from the Centre during evacuation.
- 12.2.3.12 Once children and staff have reached their destination, roll call will be taken by the Fire Warden.
- 12.2.3.13 If the evacuation is for a prolonged period, and the Centre cannot be reoccupied for the remainder of the day, staff shall purchase the necessary supplies for subsistence (e.g. diapers, food, etc.).
- 12.2.4.14 In the event that the Centre cannot be reoccupied, parents or the alternate emergency contact will be notified and children will be picked up from the relocation point as soon as possible.

E. ACTIVITIES OUTSIDE THE CENTRE

13 OUTSIDE ACTIVITIES

13.1 POLICY

13.1.1 Children will be exposed to a variety of activities outside the Centre.

13.2 OUTDOOR PLAY POLICY

13.2.1 The Centre aims to provide 90 minutes of outdoor play per day for all children, weather permitting.

13.3 OUTDOOR PLAY PROCEDURES

13.3.1 Children from Rooms 3, 4, 5 and 6 will use the playground adjacent to Canada Place, at least once daily, weather permitting, while children from Rooms 1 and 2 will be put in strollers and taken out for walks.

13.3.2 The river valley and other green spaces in the area will be used frequently to supplement the playground's outdoor play activities.

13.4 OUTING POLICIES

13.4.1 Outings are an integral part of the Centre's programming, and include activities such as walks around the building, to playgrounds, to the library, etc.

13.4.2 As required by Alberta Family and Social Services, parent(s) are asked to sign, upon intake and every six months, an "Outing Waiver" giving permission for the regular outings.

13.5 OUTING PROCEDURES

13.5.1 Staff is responsible for ensuring that the "Outing Waiver" is signed by all parent(s) every six months.

13.6 FIELD TRIP POLICIES

13.6.1 Field trips are activities that require transportation.

13.6.1.1 Field trips are an integral part of the Centre's programming and all children in Rooms 4, 5, and 6 are expected to participate with the field trips.

13.6.1.2 Infants (0-18 Months) will be expected to participate in age appropriate field trips. A maximum of 12 field trips per year will be undertaken for this age group.

13.6.1.3 Field trips for infants (0-18 Months) will take place only in the City of Edmonton and St. Albert.

13.6.1.4 Only wheelchair accessible buses will be used to transport infants (0-18 Months). Infants seated in strollers must be secured in the wheelchair safety mounts.

13.6.1.5 If a parent doesn't want a child to participate on a field trip, the parent needs to advise the Director and find alternative care.

13.6.2 Parent(s) will be asked to fill a "Field Trip Waiver" for each specific field trip.

13.6.3 Each field trip requires the parent(s) to sign a Field Trip Waiver form.

13.6.4 Field trip costs: As often as financially feasible, field trips will not require parent(s) to make an additional financial contribution. When this is not feasible, a small fee may be asked from the parent(s).

13.7 FIELD TRIP PROCEDURES

13.7.1 Primary staff members will ensure that the parent(s) have signed the Field Trip Waiver. The Field Trip Waiver will be posted for the parent(s)' consent with at least a week's notice of the said field trip. Each signed field trip form will be kept on file for a 2-month period, as required by Alberta Family and Social Services.

- 13.7.2 Children will be returned to the Centre at the end of the field trip. They will not be left at any other locations.
- 13.7.3 Admission for one parent or guardian will be the Centre's responsibility when parent volunteers are needed.
- 13.7.4 Siblings are not encouraged to go on field trips as adequate supervision is required for the children in the daycare.
- 13.7.4.1 If siblings need to come, parent(s) are responsible for the cost.
- 13.7.5 Volunteer parents are expected to stay with the room throughout the field trip and follow the rules.
- 13.7.6 Adult to child ratios for field trips involving water:
- | | |
|-------------------|-------------------------|
| 0-36 months | One adult to one child |
| 3 yrs - 4 1/2 yrs | One adult to 3 children |
| 4 1/2 yrs-6 yrs | One adult to 6 children |

F. SAFETY AND SECURITY

14 CRITICAL INCIDENTS

14.1 POLICY

14.1.1 Definition. Critical incidents are defined as events or circumstances that could result in legal or civil actions against the Society, the possibility of adverse public relations, closure of the Centre, where health and/or safety of children and/or staff are in jeopardy and other situations at the discretion of the Executive Director.

14.2 PROCEDURES

14.2.1 The following steps will be completed in the event of a critical incident:

14.2.2 The Executive Director shall obtain medical or security assistance as described in the EMERGENCIES policies and ensure the immediate safety of staff and children.

14.2.3 The Executive Director shall notify the President of the Society. In the event that the President cannot be reached, at least one of the following, Vice-President, Secretary or Treasurer will be contacted.

14.2.4 The member of the Executive contacted will decide what further action and information exchange will occur.

14.2.5 A report on the incident and consequences will be provided to the Board of Directors at the next scheduled Board meeting.

14.2.6 The Executive Director will report any critical incidents to Daycare Licensing within 2 working days of the incident.

15 ENVIRONMENTAL SAFETY

15.1 POLICIES

15.1.1 All staff is responsible for reporting any safety hazards or problems.

15.1.2 The Executive Director is responsible for assessing and correcting problems

15.1.3 Public Works, Maple Leaf Property Management and Government Services Canada have the responsibility for ensuring the proper state of the site both within Canada Place and the playground.

15.2 PROCEDURES

15.2.1 Room staff will report any safety hazards or problems with heat, light, ventilation, or other maintenance problems to the Executive Director, who will take appropriate action.

15.2.2 The playground will be inspected daily by room staff for safety hazards (broken glass or equipment). These will be eliminated or reported.

15.2.3 All toxic materials will be clearly labeled and marked 'TOXIC', marked with appropriate hazardous materials symbol, and will be stored in a locked cabinet.

15.2.4 A Health Inspector and Fire Inspector will inspect the Centre as necessary for licensing renewal purposes

15.2.5 Outlet guards will protect electrical outlets when not in use.

- 15.2.6 Hot liquids, utensils and appliances will not be left unsupervised in the presence of children. The temperature of the hot water in the play rooms is controlled by regulators affixed to the pipes, so that it will not exceed 43 degrees Celsius.
- 15.2.7 the room staff is responsible to ensure that any broken or unsafe toys or equipment are removed immediately for repair and notify the Director.
- 15.2.8 The kitchens will not be used as playrooms, and children will be permitted entrance only under supervision of a staff member.
- 15.2.9 Garbage will be kept in fly proof and waterproof containers. It will be disposed of daily.

16 FAMILY ACCESS

16.1 POLICY

- 16.1.1 Children will be released only to parent(s) or persons designated by the parent(s), upon authentication, if required.

16.2 PROCEDURES

- 16.2.1 Release. The parent(s) upon admission to the Centre must complete a release form. Only those listed on the release form may pick up the child. In special circumstances, parent(s) can delegate a person other than those listed on this form to pick up a child. Delegation can be done verbally in person, or verbal consent over the phone. The delegate should have a written notification and identification will be required.
- 16.2.2 Visitors. Verbal, or if possibly, written consent must be received from the parent(s) if there are to be any visitors to the Centre that are not in the company of the parent(s).
- 16.2.3 Custody disputes. In the case of custody disputes, each parent will be granted access to the child, except when a copy of a court order indicating limited access is on the child's file. Such information will be included on the child's emergency card.
- 16.2.4 Court orders. It is the responsibility of the parent(s) to produce a copy of a court order indicating limited access.

17. LATE PICK-UP

17.1 POLICIES

- 17.1.1 Children must be picked up by closing time or parent(s) will be charged a late fee. It is advisable to be in the daycare by 5:50pm enabling you to be out by 6:00pm.
- 17.1.2 The late fee is established by the Board of Directors and periodically reviewed.
- 17.1.3 Repeated failure to comply with the late pick-up policy could result in termination of membership in the Society, at the discretion of the Board of Directors.

17.2 PROCEDURES

- 17.2.1 Hours of operation. The hours of the Centre are 7:00 a.m. through 6:00 p.m.
- 17.2.2 Parent(s) who arrive after closing time will be given a letter, signed by the Executive Director, which clearly states the time of arrival and the late fee charged.
- 17.2.3 The late fee (\$10/half an hour or portion thereof) is payable directly to the staff who is working late to stay with the child.

- 17.2.4 If children have not been picked-up by 6:05 p.m. and the Centre has not been advised of the parent's tardiness, the following procedure will be employed:
 - 17.2.4.1 Parent(s) will be phoned at home and at work, and asked to pick-up the child.
 - 17.2.4.2 In the event that the parent(s) cannot be located, the emergency contact(s) named on the registration form will be phoned and asked to claim the child.
 - 17.2.4.3 If neither the parent(s) or the emergency contact can be reached:
 - 17.2.4.3.1 Emergency Social Services (Child Protective Services) will be phoned and asked to take custody of the child.
 - 17.2.4.3.2 Staff will not take legal responsibility for the child or shelter him/her outside the Centre for reasons of legal liability.
 - 17.2.4.3.3 Should it be necessary to contact Emergency Social Services, parent(s) will be informed that their child can be located through Emergency Social Services and/or the City Police.

18 PHOTOGRAPHY

18.1 POLICES

- 18.1.1 The Executive Director, shall entertain requests for photographs of the Centre and its staff and children from private individuals, the printed or visual media, public agencies, or other parties.
- 18.1.2 Parent(s) will signify upon intake whether their child (ren) can be photographed while at the Centre, by signing a generic photographic waiver.
- 18.1.3 For specific photo opportunities, A "Photographic Waiver" will go to the parent(s) giving details of the event and its use by another agency.

18.2 PROCEDURES

- 18.2.1 For those children who cannot be photographed, staff shall take precautions to ensure that they are not inadvertently photographed when photo sessions are going on by:
 - 18.2.1.1 reviewing the list of children who cannot be photographed before each pre-arranged or spontaneous session;
 - 18.2.1.2 removing those children from the areas being photographed for the duration of the photographic session.
- 18.2.2 It is the responsibility of the parent(s) to inform the Centre when the circumstances regarding photography of their child changes. In this event, the Centre shall destroy the signed "Photography Waiver" and all copies at the request of the parent(s), or ask that the parent(s) to sign such a waiver, if photography of the child becomes permissible.

G. ADMINISTRATION

19 FINANCES

19.1 POLICIES

The purpose of this policy is to establish and document firm financial guidelines, which the Society's management can confidently use to efficiently manage current operations and to realistically plan future operations.

19.1.1 The Centre will provide a level of service acceptable to its clients and the Board of Directors that meets or exceeds industry standards at competitive fees while achieving self-sufficient status.

19.1.2 Fee structure. The child care fee structure shall be reviewed and amounts set by the Board of Directors on an annual basis, during the budget approval process (October-November).

19.2 DEFINITIONS

19.2.1 Board of Directors: Those individuals that have been elected by the Society general membership or appointed by the Board of Directors to serve in a specified capacity in accordance with the Canada Place Child Care Society's bylaws.

19.2.2 Net Income (Loss): This is the profit or (loss) from the operations of the Centre after providing for all operating costs including depreciation.

19.2.3 Depreciation: This is the charging to financial operations of the cost, net of salvage value, of all tangible assets over its estimated useful life.

19.2.4 Fiscal Year: The calendar year is from January 1st to December 31st.

19.3 PROCEDURES

19.3.1 Board of Directors has the responsibility to:

19.3.1.1 Approve all changes to the child care fee structure and annual operating budget to assure long-term financial stability.

19.3.1.2 Approve all requests for expenditures not contemplated in the current year's operating budget

19.3.1.3 Approve all changes to this fiscal policy.

19.3.2 The Executive Director has the responsibility to:

19.3.2.1 Operate and manage the Centre within the current year's operating budget unless specifically approved otherwise by the Board of Directors.

19.3.2.2 Submit to the Board of Directors requests for expenditures not contemplated in the current operating budget.

19.3.2.3 Advise the Board of Directors at their next scheduled meeting, or immediately, if considered urgent, of any incident that may have financial implications.

19.4 GENERAL ACCOUNTING PROCEDURES

19.4.1 The annual depreciation charge will be calculated over the asset's useful life on the straight-line method, based on the total cost of the asset in service net of an estimated salvage and including an estimated removal cost, if any.

19.4.2 Assets acquired through contributions will be recorded in the accounting records at their gross cost, with the offsetting entry made to contributions for asset acquisition.

19.4.3 Contributions for asset acquisition will be amortized to "other income" on the same basis and over the same period as the related assets are depreciated.

- 19.4.4 All assets purchased with a value of \$300.00 or less will be expended and charged against the revenue of the current period. Assets donated will be recorded in accordance with items 19.4.2 and 19.4.3 above.

20 FUNDRAISING AND VOLUNTEERING

20.1 POLICIES

- 20.1.1 All families must agree to the Fundraising and Volunteering Agreement as part of the Admissions Agreement.

- 20.1.2 The Board is to actively direct and participate in all fundraising and volunteer activities.

- 20.1.3 Failure to comply with the Fundraising and Volunteering Policy may result in the termination of membership in the Society at the discretion of the Review committee.

- 20.1.4 All families will provide an annual cheque at the beginning of the contract year (January 1). See fundraising and volunteering contract for current rate. These monies will be reimbursed after the end of the contract year (December 31) based on the family's fulfillment of their volunteer/fundraising requirement (see point 20.1.5), with partial reimbursement to be done based on the family's prorated fulfillment of the requirement. For example, if the family has met one half of the requirement, they will be reimbursed one half of their monies. If the family leaves the daycare prior to the end of the contract year, they will be fully or partially reimbursed at the discretion of the Board of Directors and the Executive Director.

- 20.1.5 All families are required to volunteer and/or fundraise for a minimum of 24 hours per year.

20.2 PROCEDURES

- 20.2.1 Exceptions to the Fundraising Agreement due to special needs will be dealt with in confidence on a case by case basis by the Board of Directors and the Executive Director.

- 20.2.2 There will be a number of fundraising activities throughout the year and the Board will set them.

Canada Place Child Care Society Enrollment Agreement

The Policies and Procedures govern the Terms and the condition of enrollment at Canada Place Child Care Society. We ask that you indicate that you have read, understand and are in agreement to these policies by signing as indicated below.

I have read the Policies and Procedures and accept and agree to these policies.

Parent Signature

Director

Date

Canada Place Child Care Society
Staff Agreement

The Policies and Procedures govern the terms and the condition of employment Canada Place Child Care Society. We ask that you indicate that you have read, understand and are in agreement to these policies by signing as indicated below.

I have read the Policies and Procedures and accept and agree to these policies.

Staff Signature

Director

Date