

# Operator Manual Early Learning and Childcare Homes





# **Operator Manual**

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# Operator Manual Early Learning and Childcare Homes Education and Early Childhood Development

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Throughout this manual, the word "parent" includes parents and guardians.

# **Acknowledgement**

We would like to acknowledge the many resource materials and manuals from across Canada that were consulted and referenced during the development of this manual.

# **Section 1: Definitions**

**Administrator**: an individual appointed by an operator to provide on-site supervision of the day-to-day activities of a facility, and includes an operator who carries out these duties

**Alternate care provider:** an individual chosen by the operator to provide care for children in an ELC home in the absence of the operator. This person may also be referred to as a staff member

**Applicant:** an individual or corporation that submits an application to operate a facility under the *Early Childhood Services Act* 

**Associated person**: a person who is at least 18 years of age and resides in a facility but excludes an operator

**Child**: a person who is 12 years of age or under

**Early Childhood Services Act (ECS Act or Act):** the legislation that regulates licensed early learning and childcare in New Brunswick

**Early learning and childcare home (ELC Home)**: a licensed facility at which services are provided in a home setting for more than four continuous hours per day and three or more days per week to a group of children under subsection 7(4) of the *Licensing* 

Regulation – Early Childhood Services Act

**Early learning and childcare licensing staff (ELC licensing staff):** an employee of the Department of Education and Early Childhood Development who is authorized under the *Early Childhood Services Act* to inspect licensed early learning and childcare facilities. ELC licensing staff support licensees and applicants to achieve and maintain compliance with licensing requirements and respond to complaints and serious incidents reported about and by childcare facilities.

**Educator**: an operator or a staff member of a full-time or part-time early learning and childcare centre who is at least 16 years of age and who works directly with children

**Educator assistant or support personnel:** a staff member aiding in the integration of children with additional support needs who may require assistance to participate in activities at the early learning and child care facility

**Extended hour services**: services provided at a licensed facility after 12 consecutive hours of services have been provided or after services have been provided for five days in a week.

**Facility**: an early learning and childcare facility at which services are provided (includes both ELC centres and ELC homes)

**Full-time early learning and childcare centre** (**full-time ELC centre**): a licensed facility at which services are provided for more than four continuous hours per day and three or more days per week to a group of children under subsection 7(2) of the *Licensing Regulation – Early Childhood Services Act* 

**Infant**: a child who is under 2 years of age.

**Licence**: a licence issued under section 6 of the Act or renewed under section 12

**Licensee**: an individual or corporation that operates a facility under the *Early Childhood Services Act* and may be referred to as operator

**Licensed facility**: a facility for which its operator holds a licence or a probationary licence

**Minister**: the Minister of Education and Early Childhood Development and includes any person designated by the Minister to act on the Minister's behalf

**Operator:** an individual or corporation that operates a facility

**Overnight services:** services provided at a licensed facility between 8 p.m. and 6 a.m.

Part-time early learning and childcare centre (parttime ELC centre): a licensed facility at which services are provided to one of the following groups:

- a group of children under subsection 7(3)(a)
   of the *Licensing Regulation* for four
   consecutive hours per day or fewer or for
   fewer than three days per week, or
- (b) a group of children under subsection 7(3)(b) of the *Licensing Regulation*.

**Preschool child**: a child who is 2 years of age or over and who is not yet attending school.

**School-age child**: a child who is attending school

**Services:** services related to the care, supervision or development of a child which are provided by a person other than the child's parent or guardian

**Staff member**: a person who is employed in a facility, and includes an administrator and a volunteer

**Traffic area**: hallways, entrances and other clearly delineated spaces that link the rooms or that lead outdoors

# **Section 2: General Information**

# 2.1 Introduction

All early learning and childcare (ELC) facilities in New Brunswick must be licensed under the authority of sections 3 and 4(1) of the *Early Childhood Services Act*. It is an offence to operate an ELC facility without a licence issued by the Minister of Education and Early Childhood Development. The department is responsible for the licensing, inspecting, ongoing monitoring, and investigating of ELC facilities.

# 2.2 It is the law: what you need to know about the Early Childhood Services Act and Licensing Regulation - Early Childhood Services Act

The Department of Education and Early Childhood Development is responsible for the *Early Childhood Services Act* which is enforced through the following three regulations;

- Licensing Regulation Early Childhood Services Act,
- Childcare Subsidies Regulation Early Childhood Services Act, and
- Programs for Children with Autism Spectrum Disorder Regulation Early Childhood Services Act.

The Early Childhood Services Act and the Licensing Regulation – Early Childhood Services Act prescribe the requirements that operators must follow in operating an early learning and childcare facility.

Together, the Act, regulation, policies and guidelines establish the mandatory rules of operation for all licensed ELC facilities.

Operators are responsible for understanding their legal responsibility in operating an ELC facility. They are required to ensure that the facility, as well as staff members (including volunteers), comply with the Act and the regulations.

# 2.3 The purpose of the Operator's Manual

This Manual is designed to help applicants and operators of ELC homes. When used in conjunction with the Act and the regulations, this Manual will be an important point of reference. It should be noted that it does not replace the Act or the regulations which set out the legal requirements for licensing. It provides information about terms used in the Act and the regulations, how to apply for or renew an ELC facility licence, as well as what is involved in the inspection and monitoring of ELC facilities.

### This Manual will:

- inform operators of ELC facilities of their legal obligations under the *Early Childhood Services Act* and *Licensing Regulation Early Childhood Services Act*: http://laws.gnb.ca/en/ShowPdf/cs/E-0.5.pdf;
- inform operators of their responsibility to comply with the requirements of the *Early Childhood Services Act* and *Licensing Regulation Early Childhood Services Act* : http://laws.gnb.ca/en/ShowPdf/cr/2018-11.pdf
- provide clarity on the intent of the Act and the Licensing Regulation Early Childhood Services Act; and
- inform operators of required forms, guidelines and resources.

# 2.4 How changes are made to the manual

With regulatory changes and as our knowledge and understanding of best practices in early childhood education continuously grows, this manual will require updates. They will be posted on the website of the Department of Education and Early Childhood Development:

www2.gnb.ca/content/gnb/biling/eecd-edpe.html

Operators will be advised of any updates made to the manual and will be required to ensure their copy is always the most current one available.

# 2.5 How the manual works

The Manual is laid out in the following manner:

# Legislation

 According to the topic of the section, segments of the Act and/or the Licensing Regulation – Early Childhood Services Act are stated.

### Intent

• Describes the purpose of the section of the Act and the regulations.

### **Indicators**

- Identifies specific indicators of compliance to assist operators and applicants comply with regulatory requirements in operating a licensed early learning and childcare facility. Indicators are confirmed during inspections by three methods:
  - · Observation situations observed by ELC licensing staff during a site visit.
  - · Documentation information gathered by reviewing written documents (e.g., reviewing policies and procedures, reviewing files and records).
  - · Dialogue confirmation of compliance obtained through discussion with operators.

# What you need to know

- Provides information to enhance understanding of specific regulations.
- Describes the essential action and practice to assist operators to accomplish the requirements of the regulation.
- Provides ideas and practices that are part of a quality ELC program.

# **Appendices**

• Relevant appendices are located at the end of the manual and referenced in each section.

# 2.6 Operator responsibilities

An operator of an ELC home is responsible for the following:

- comply with the Act, the regulations and any other policies and guidelines as prescribed by the Minister;
- develop and implement operational policies, which must comply with the Act and the regulations;
- if using an alternate care provider, develop written personnel policies, including job descriptions, job responsibilities and requirements;
- report suspected abuse and/or neglect directly to the Department of Social Development;
- ensure all information pertaining to checks with the Department of Social Development and criminal record checks/vulnerable sector checks is kept confidential as required by section 55 of the Act;
- during hours of operation considers the home to be a business and agrees to follow regulatory requirements that may not apply outside of childcare hours;
- ensure parents have the opportunity to visit the childcare facility any time during the hours of operation
  to observe their child, program activities, the building, the grounds, and equipment without having
  to secure prior approval; and
- ensure a variety of early learning opportunities are offered that value each child individually while ensuring quality inclusive childcare practices which meet the needs of children and their parents.

# 2.7 Child abuse and neglect

In a suspected case of child abuse or neglect, operators must **immediately inform** the Department of Social Development by calling 1-888-99-ABUSE (1-888-992-2873, in-province calls only), or After Hours Emergency Services at 1-800-442-9799.

Operators do not need to prove that abuse or neglect has taken place, only that there is a suspicion. The Department of Social Development will investigate as required. If operators are not sure of a situation, the Department of Social Development may be contacted for direction.

### Operators:

- know their responsibility to report under the Child and Youth Well-being Act;
- are familiar with the facility's procedure and protocol for reporting suspected abuse or neglect;
- are aware of indicators of abuse or neglect;
- · know what information to document;
- document any suspected abuse or disclosure in a factual, organized fashion;
- maintain confidentiality regarding disclosure;
- listen to the child, avoid asking leading questions do not interview the child;
- report any suspected abuse to the Department of Social Development; and
- cooperate with investigation personnel.

# Section 3: Inspections and Enforcement

# 3.1 Legislative authority

Section 2.01 of the Act provides the Minister the authority to establish policies and guidelines and section 63 provides the authority to make regulations governing the licensing and operation of ELC facilities.

# 3.2 Responsibilities of early learning and childcare licensing staff

Under section 27(1) of the Act, the Minister appoints inspectors (ELC licensing staff) to enforce the Act and *Licensing Regulation – Early Childhood Services Act*.

ELC licensing staff are comprised of the following three positions:

- Quality Assurance Monitor
- Inspector
- Investigator

# ELC licensing staff:

- · licence, inspect, monitor and investigate ELC facilities;
- · assist applicants when applying to operate an ELC facility;
- · provide consultation, guidance and support to operators; and
- respond to inquiries from the public.

# 3.3 Inspections

Section 22 of the Act establishes the legal authority to conduct inspections.

Inspections are conducted to prevent risk to and provide for the safety and security of children. During inspections, relevant sections of the Act and the regulations are evaluated for compliance.

Once the inspection has been completed, ELC licensing staff will issue an Inspection Report, which provides the results and details any non-compliance items. ELC licensing staff will review the report with the operator. The inspection report is to be posted at the facility.

# 3.3.1 Initial licensing inspection

This inspection occurs when an application is made for the initial licence to operate an ELC facility. Its purpose is to ensure compliance with the Act and the regulations. The inspection will be scheduled in advance by ECS licensing staff. Before a licence is issued, several inspections of the premises are made to ensure compliance with the Act and the regulations.

# 3.3.2 Annual licensing inspection

Unannounced licensing inspections occur annually prior to the expiry of the facility licence. An application for the renewal of a licence must be received at least 90 days prior to the expiry of the current licence to indicate the operators' intent to renew. If non-compliance items are identified, follow-up inspections may be conducted and a licence is not issued until the ELC facility is in compliance with the Act and regulations.

# 3.3.3 Monitoring inspection

A monitoring inspection is an unannounced inspection to the ELC facility made throughout the year to assess the facility's compliance with the Act and the regulations. The length and detail of the inspection will vary depending on the focus of the inspection and the facility's compliance history. The number of inspections within a 12-month period is based on the amount of follow-up necessary to achieve and maintain compliance.

# 3.3.4 Complaint and incident inspection

ELC licensing staff investigate complaints and incident reports received by the Department of Education and Early Childhood Development. An unscheduled inspection may be conducted by an ECS coordinator, who will gather information in regard to a complaint or incident that has been received.

ELC licensing staff may:

- · review the facilities' records and documents;
- take photographs; and/or
- interview parents, children or other relevant people.

ELC licensing staff must inform the operator of the allegations and may conduct investigations as considered necessary without the consent of the operator.

ELC licensing staff will document the details of the investigation. If ELC licensing staff remove records, a signed form outlining what has been removed and when it will be returned will be left with the operator. The operator will be notified in writing of the outcome of the complaint or incident investigation and will be provided with an opportunity to respond.

If the operator is required to take measures to remedy the non-compliance(s) as a result of the investigation, ELC licensing staff will complete follow-up inspection(s) to confirm that the non-compliance(s) have been remedied.

Depending on the nature of the incident, complaint or non-compliance, it may be necessary to notify parents of the investigation. At the conclusion of the investigation, a final written report will be provided to the operator. A letter will be sent to parents of the outcome.

Depending on the nature of the report, other departments, such as the Department of Social Development, the local policing authority, Department of Health or Office of the Fire Marshal, may be involved in the investigation.

# 3.4 Issuance of licence

Section 6 of the Act describes the issuance of a licence.

No person shall operate an ELC facility unless that person holds a licence.

Where an application has been received and the Minister is satisfied that the applicant or licensee, the premises and the services are all in compliance with the Act and the regulations, a licence is issued for up to one year.

The licence specifies:

- the operator and location of the facility;
- · the class of licence;
- the maximum number and ages of children permitted;
- the expiry date; and
- any terms or conditions imposed on the licence.

# 3.5 Order for compliance

Section 28 of the Act provides the authority to the Minister to issue an order for compliance when an inspection determines that the facility is not being operated or maintained in compliance with the Act, regulation or its licence.

An order for compliance is issued as part of the inspection report and contains the following:

- details as to the facility's lack of compliance with the relevant sections of the Act and regulations;
- the regulation number, the regulation wording, the details of the violation;
- the changes required to bring the facility into compliance with the Act and regulation; and
- compliance dates based on the nature and severity of the non-compliances.

As part of the inspection report, the order for compliance is posted at the facility entrance for parents and visitors to see.

Failure to comply with the compliance order may result in the suspension or a recommendation for the removal of the facility's licence.

ELC licensing staff verify compliance with the order by conducting monitoring inspections to the facility.

# 3.6 Probationary licence

Section 29 of the Act gives the Minister the authority to suspend the licence and issue a probationary licence to the operator in the following circumstances:

29(1)(a) the Minister is of the opinion the facility is not being operated or maintained in compliance with this Act, the regulations, its licence or a provision of any other Act prescribed by regulation; or

29(1)(b) the Minister has reasonable grounds to believe that the operator knowingly made a false statement in an application under section 5 or 11 or in a document or record required to be maintained or filed under this Act or the regulations.

# A probationary licence:

- indicates there are significant areas of non-compliance in meeting the requirements of the Act and the regulations;
- is valid for no more than three months and cannot exceed the unexpired term of the suspended licence. For example, if the suspended licence expires in two months, the probationary licence would expire in two months as well.

In addition to the items shown on a licence, the probationary licence details:

- the non-compliance(s) resulting in the probationary licence;
- the corrective measures the operator must take to remedy the non-compliance(s); and
- the time within which the operator must comply.

Once a facility has met the conditions of the probationary licence, the licence will be reinstated, not to exceed the remainder of the term of the reinstated licence. This means that, for example, if the reinstated licence expires on June 30, the expiry date remains June 30.

If an operator fails to complete the corrective measures indicated on the probationary licence, the Minister may:

- · refuse to reinstate the suspended licence; or
- renew the probationary licence for one additional period of no more than three months if the failure to comply was due to reasons beyond the operator's control.

# 3.7 Review of decision

Sections 33, 34, 35 and 36 of the Act provide the authority for a licensee or applicant to request a review of a decision. It is stated that where an operator disagrees with a licensing decision or action, a request for the review of the decision is made on a form provided by the Minister. The following decisions are eligible for review:

- the refusal of an application for a licence;
- the refusal of an application for the renewal of a licence;
- a decision to issue a probationary licence; and
- a decision to refuse to reinstate a suspended licence.

Requests for review must be received by the Minister within 10 days of issuance of the decision. The Minister shall complete the review of a decision within 15 days after the request for the review is received by the Minister.

In the case of a licensed facility, the facility may continue to operate while the request for review is being evaluated.

# 3.8 Waiting period after refusal or revocation

Section 15 of the Act states there is a length of time a person must wait before they may reapply for a licence when one has been refused or revoked. Section 19 of the *Licensing Regulation – Early Childhood Services Act* establishes this period as three years.

# 3.9 Excluded services

Section 2.4 of the Act outlines services that do not require a licence to operate. Examples of excluded services:

- drop-in programs where parents are present onsite, such as those offered by family resource centres, fitness centres and multi-cultural associations;
- a recreational, sports, artistic or other single-focus program that does not have a care component;
- services that are provided on a seasonal basis or for not more than ten weeks in a calendar year.

# Section 4: Licensing

# 4.1 Classes of licensed facilities

# Licensing Regulation – Early Childhood Services Act

- **7**(1) The classes of licensed facilities are as follows:
  - (a) a full-time early learning and childcare centre;
  - (b) a part-time early learning and childcare centre; and
  - (c) an early learning and childcare home.
- **7**(2) Only one of the following groups of children shall receive services at a full-time early learning and childcare centre:
  - (a) more than three infants, including the children of the operator;
  - (b) more than five preschool children, including the children of the operator; or
  - (c) more than six children, including the children of the operator, if the children are from more than one of the following groups:
    - (i) the group described in paragraph (a);
    - (ii) the group described in paragraph (b); and
    - (iii) school-age children.
- **7**(3) Only one of the following groups of children shall receive services at a part-time early learning and childcare centre:
  - (a) more than five preschool children, including the children of the operator; or
  - (b) more than nine school-age children, including the children of the operator.
- **7**(4) Only one of the following groups of children shall receive services at an early learning and childcare home:
  - (a) three infants, including the children of the operator;
  - (b) five preschool children, including the children of the operator;
  - (c) nine school-age children, including the children of the operator; or
  - (d) six children, including the children of the operator, if the children are from more than one of the groups described in paragraphs (a) to (c).
- **7**(5) The group referred to in paragraph (4)(d) shall include at least one school-age child and shall not include more than two infants.
- **7**(6) The number of children under subsections (2) to (4) means the number of children receiving services at any one time during operating hours.

To distinguish the different classes of licensed facilities, based on services provided, the ages of the children and the hours of the service.

# What you need to know

The term "licensed facility" refers to the following types of classes:

A full-time early learning and childcare centre (full-time ELC centre):

- provides childcare services for:
  - · four or more infants:
  - · six or more children of the ages two to five; or
  - · seven or more children where the children are a mix of infants, preschool and school-age.
- operates more than four continuous hours per day;
- operates three or more days per week.

A part-time early learning and childcare centre (part-time ELC centre):

- providing services to preschool children:
  - · operates four or less continuous hours per day or fewer than three days per week;
  - · may offer two sessions, each less than four continuous hours, within the same day, to different groups of children; and
  - · may be known as preschools or pre-kindergarten programs.
- providing services to school-age children:
- operates before and after regular school operating hours, or when schools are closed temporarily, or as per the school calendar.

An early learning and childcare home (ELC home) operates:

- in an individual's home.
- more than four continuous hours per day.
- three or more days per week.

Regulatory requirements depend on the class of licensed facility. Examples:

- ELC centres are measured for usable indoor and outdoor play areas.
- requirement for annual fire and health inspections apply to ELC centres.
- ELC homes do not require a fenced outdoor play area.
- ELC homes operate their services within the family living space.

# 4.2 Maximum number of children

# Licensing Regulation – Early Childhood Services Act

**8(1)** The maximum number of children who may receive services at a facility as indicated on the licence of the facility under paragraph 6(4)(d) of the Act means the maximum number of children receiving services at any one time during operator hours.

Establishing a maximum number of children permitted per licence helps to ensure the health and safety of children.

### **Indicators**

1. The number of children in attendance is at no time greater than the number stated on the licence.

# What you need to know

The maximum number of children who may be present at the ELC home at any given time is recorded on the licence.

Two or more part-time children may share the same licensed space, as long as they are not present or in attendance at the facility at the same time.

The maximum number of children permitted includes those of the operator who are under 12 years of age.

# 4.3 Application for a licence

# Licensing Regulation – Early Childhood Services Act

- **4**(1) For the purposes of subsection 5(2) of the Act, an application for a licence shall be accompanied by the following documents:
  - (a) a copy of the articles of incorporation under section 3 of the Business Corporations Act, if applicable;
  - (b) proof of compliance with the applicable municipal by-laws;
  - (c) a copy of the Certificate of Insurance as proof of the insurance policy referred to in section 15 or a statement from an insurer of an intention to provide the Certificate of Insurance;
  - (d) an operational plan consisting of
    - (i) a description of the services that will be provided and the measures that will be taken to implement those services,
    - (ii) a statement of services for a parent or quardian of a child who will receive services; and
    - (iii) weekly menus;
  - (e) a criminal record check or vulnerable sector check, as the case may be, conducted on the applicant and a criminal record check conducted on any associated persons, issued during the previous three months;
  - (f) a check with the Department of Social Development conducted on the applicant and any associated persons and issued during the previous three months;
  - (h) if the facility is an early learning and childcare home,
    - (i) an unofficial plan of the premises, including the outdoor play area, and
    - (ii) a copy of the well water inspection certificate, if applicable.
- **4**(2) For the purposes of subsection 5(2) of the Act, the fees are as follows:
  - (a) \$100 for a licence to provide services at an early learning and childcare home;

An application for an ELC facility licence is used to determine if the applicant, the premises, and the services meet the requirements of the *Early Childhood Services Act* and *Licensing Regulation – Early Childhood Services Act*.

# **Indicators**

- 1. The completed application contains all required documents as listed in regulation 4(1).
- 2. The application is signed.
- 3. The application fee is paid.

# What you need to know

The licensing process is not initiated until all forms are completed and all documents are received.

Applicants should carefully review the application form and all required documentation prior to submission. Incomplete application forms will be returned, impacting the time required for completion of the licensing process.

ELC licensing staff reviews the documents once the application is received, and works with the applicant until all licensing requirements are met.

An ELC facility application package is available at the Department of Education and Early Childhood Development's website.

No person under the age of 19 can apply for a licence to operate an ELC facility.

Operators of licensed ELC facilities must comply with all relevant municipal by-laws, including zoning by-laws. Applicants must check what other by-laws are applicable to their facility (for example, building inspections and parking requirements).

Applicants must provide proof of liability insurance stating they have the appropriate insurance to operate an early learning and childcare home in their residence.

The Department of Health states the following for well water inspection requirements:

Bacteriological testing
 Water from private water supplies should be routinely tested twice a year for Total Coliform and E.coli when the water supply is most at risk- after the spring thaw and during the autumn rainy season.
 Testing should be done even if there are water treatment devices installed on the water system.

Water should be re-tested after any event that could have affected the microbial safety of the water supply, for example a sewage back-flow in the area of the well, or a flood. The water should also be re-tested if there is a change in the appearance, taste or odour of the water.

Inorganic testing
 Private water supplies should also be tested for inorganic compounds such as arsenic, uranium,
 fluoride and nitrates. Rock formations that make up the earth's crust are rich in natural deposits

of such compounds. Ground water that has traveled through these rock formations could have high levels of these compounds.

Inorganic analysis on private water supplies should preferably be done every two to three years, or more often if previous sampling of water showed levels of compounds near the health advisory levels.

More information on well water requirements is available at: http://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy\_environments/content/testing\_private\_watersupplies.html

Plans of ELC homes are not required to be drawn to scale however, they are to provide a clear floor plan of the individual's home and the outdoor play space indicating the areas that will be used by the children.

Fees are submitted with the application, payable to the Minister of Finance and are non-refundable. Cash is not accepted as a form of payment.

Names of ELC facilities must be confirmed by ELC licensing staff prior to operators using. Names chosen must not be the same as an existing facility operating within the province.

Operators may also verify their business name with the Corporate Registry at Service New Brunswick to ensure that no other business has the same name. Names can only be registered with SNB once they have been approved by the Department of Education and Early Childhood Development.

No advertising for childcare registration occurs during the licensing process unless the advertisement states that an application for a licence has been made to the Department of Education and Early Childhood Development. An application is inactive when the applicant has had no contact with departmental staff for six months or longer. If this occurs, the file is closed. To re-activate the file, the applicant is required to submit a new application.

ELC licensing staff contacts the applicant to schedule the licensing inspections. This is the only time that visits are scheduled; once a facility is licensed, all inspections are unannounced.

A licence may be issued with terms and conditions detailing operating requirements, such as being approved for extended hours.

# 4.4 Application to renew a licence

# Licensing Regulation - Early Childhood Services Act

- **6**(1) An application for the renewal of a licence shall be made at least 90 days before the expiration date of the licence.
- **6**(2) For the purposes of subsection 11(2) of the Act, an application for the renewal of a licence shall be accompanied by the following documents:
  - (a) a copy of the Certificate of Insurance as proof of the insurance policy referred to in section 15;
  - (b) if the facility is an early learning and childcare home, a copy of the well water inspection certificate, if applicable.

- 6(3) For the purposes of subsection 11(2) of the Act, the fees are as follows:
  - (a) \$75 for a licence to provide services to up to 25 children;

An application to renew a licence for an ELC facility is used to determine if the licensee, the premises and the services meet the requirements of the *Early Childhood Services Act* and *Licensing Regulation – Early Childhood Services Act*.

### **Indicators**

- 1. The completed renewal application contains all required documents as listed in regulation 6.
- 2. The application is signed.
- 3. The licensing fee is paid.

# What you need to know

At least 120 days before a licence expires, operators receive a renewal application form which must be submitted to the Quality Assurance Monitor at least 90 days prior to the expiry of the current licence. This is the operator's formal request to renew their licence.

If the submitted renewal application is incomplete or the required documentation is missing, the renewal process will be delayed. The licensing process will not be initiated until all forms are complete and all documents are received.

ELC licensing staff reviews the documents once the application is received, conducts unannounced inspection visits and works with the licensee until all licensing requirements have been met.

The operational plan is reviewed yearly, and any changes are submitted with the renewal application.

Fees are payable to the Minister of Finance and are non-refundable. Cash is not accepted as a form of payment.

To ensure compliance to the *Early Childhood Services Act* and the *Licensing Regulation – Early Childhood Services Act*, several inspection visits may be conducted before a licence is issued. The licence is renewed if the licensee, premises and services meet the requirements of the *Early Childhood Services Act* and *Licensing Regulation – Early Childhood Services Act*.

A licence may be issued with terms and conditions detailing operating requirements, such as being approved for extended hours.

# 4.5 Insurance

# Licensing Regulation – Early Childhood Services Act

- 15 An applicant for a licence or a licensee shall obtain and maintain insurance that includes the following:
  - (a) general liability insurance for the benefit of the operator and staff members; and
  - (b) motor vehicle insurance if children receiving services at the licensed facility will be transported in a motor vehicle by or on behalf of the operator.

Applicants and licensees have appropriate and adequate insurance coverage that protects the business, the operator, and public.

### **Indicators**

- 1. There is a current insurance policy that includes general liability coverage.
- 2. The insurance policy shows coverage for all vehicles owned by the operator and used to transport children.

# What you need to know

A minimum of \$2 million in comprehensive general liability coverage is recommended.

Insurance coverage protects against legal action brought by third parties where bodily injury or property damage is alleged to have occurred, including coverage for excursions away from the facility.

Operators must provide proof of liability insurance stating they have the appropriate insurance to operate an early learning and childcare home in their residence. Insurance must be reviewed and updated annually or as required (ex: if the operator relocates).

Operators ensure that liability coverage is in place for:

- walks and/or other outings off the property; and
- times when children are under the care of an alternate care provider.

If operators are transporting children in their own personal vehicles, proof of appropriate and adequate automobile insurance is required. If parents are transporting children other than their own, proof of appropriate and adequate automobile insurance should be verified.

In consultation with an insurance carrier, appropriate coverage is to be obtained before any outings out of the ordinary; for example, a trip out of the local area, or an outing on a recreational vehicle, such as a boat.

# 4.6 Changes to a facility

# Licensing Regulation – Early Childhood Services Act

**28(1)** An operator of a licensed facility shall not change the allocation of space used to provide services or add to or alter any building or facility or any part of them unless the Minister has approved the changes in writing.

### Intent

To ensure that children are safe, no changes are made to the use of any space at the facility without approval of the Minister.

### **Indicators**

1. There are no changes to the approved indoor and outdoor play areas since the last inspection.

# What you need to know

Only approved space, indoors and outdoors, is used for regular activities.

Any change to services offered or premise use must be approved by ELC licensing staff. For example, when:

- adding a new age group;
- · changing infant rest area, etc.

An Application for Changes form must be completed and forwarded to the Quality Assurance Monitor prior to any changes to the facility.

Parents are notified prior to any changes being made to the facility.

# Renovations

ELC licensing staff is advised of any physical or structural changes to the premises prior to renovation.

ELC licensing staff determine how the renovation will affect the childcare operation and if service and/or licensing changes need to be made during renovations.

Parents are informed 30 days prior to the start of renovations to allow them to deal with concerns such as allergies and disruption of services.

# 4.7 Relocation of an ELC home

# **Early Childhood Services Act**

A licensed facility may be operated only at the premises specified in the licence issued to its operator.

### Intent

Services may only be provided at the location as identified on the licence.

# What you need to know

Licences are not transferable to another location. For example:

• If a licensed ELC home wishes to relocate, an application must be received for a new location as the existing licence is only for the current address.

To relocate a licensed ELC home, the operator must submit:

- an application for changes form at least 60 days in advance;
- proof of compliance with the applicable municipal bylaws;
- an unofficial plan of the premises including the outdoor play area; and
- a copy of the well water inspection certificate, if applicable.

Parents are advised in writing (email or letter) 30 days in advance of the relocation.

Prior to operating in the new location, ELC licensing staff conducts an inspection.

Based on the suitability of the new premises, licensing at a new location is not guaranteed.

In the event of an unforeseen circumstance, such as fire or flood, operators are to consult immediately with ELC licensing staff.

# 4.8 Sale and closure of an ELC home

# **Early Childhood Services Act**

**8** A licensee may not transfer or assign a licence to another person.

### Intent

As each applicant must be verified suitable to operate a licensed facility, licences cannot be transferred to another person.

# What you need to know

Licences are not transferable from one operator to another.

When an ELC home is sold and the new owner intends to operate a licensed facility, the new homeowner must submit an application as per section 4 of the *Licensing Regulation – Early Childhood Services Act*. Prior to a licence being issued, the applicant must meet all requirements of the *Early Childhood Services Act* and *Licensing Regulation – Early Childhood Services Act*.

ELC licensing staff is advised by submitting the Application for Changes form a minimum of 60 days prior to the sale of the facility.

Parents of children enrolled at the facility are informed of the change 30 days in advance.

When a facility is closing permanently, an Application for Changes form must be submitted to ELC licensing staff and parents notified at least 30 days in advance.

# 4.9 Requirements of licensing partners

# Licensing Regulation – Early Childhood Services Act

- **28**(3) The premises of a licensed facility shall comply with
  - (a) lighting, ventilation and other general health standards under the Public Health Act; and
  - (b) codes and standards under the Fire Prevention Act.

# Intent

The *Public Health Act* and the *Fire Prevention Act* and their respective standards and regulations are followed to ensure the health, safety and security of the operator and children.

# **Indicators**

- 1. At initial licensing, a statement of compliance from a fire prevention officer has been received.
- 2. Facility complies with applicable standards under the Public Health Act and the Fire Prevention Act.

# What you need to know

Prior to receiving an initial licence to operate an ELC home, the Office of the Fire Marshal, or designate, will conduct an inspection of the home. This will be a one-time inspection prior to licensing.

It is important for operators of early learning and childcare homes to be aware of fire and life safety issues and this inspection process will help operators provide a safe environment for children.

While all licensed operators are required to comply with the *Fire Prevention Act*, this inspection will ensure the safety of the premises, equipment is intact and operators are prepared and understand their role in fire prevention.

Upon application for an early learning and childcare home licence, once suitability of the applicant has been confirmed by EECD (in accordance with the *Licensing Regulation – Early Childhood Services Act*), the Office of the Fire Marshal, or designate, will be advised in writing by ELC licensing staff regarding a request to inspect the home.

The early learning and childcare home operator is required to comply with the requirements determined at inspection and a written recommendation for licensing will be shared with EECD. Until this recommendation is received, licensing cannot proceed.

The following is a list of requirements an early learning and childcare home must meet at initial licensing:

- interconnected smoke alarms (hardwired or wireless) on each floor level and any rooms where infants are located;
- 2A-10BC fire extinguisher on any level where children may be located;
- fire safety plan including an off-site location where children can be taken in the event of a fire;
- flame spread ratings of interior wall and ceiling finishes shall not exceed 150. Gypsum board, plaster
  or similar fire rated material meets this requirement;
- at least two means of escape must be provided, one of which needs to be a door or stairway providing travel to the outside of the building at grade level. The second means of escape is permitted to be
- spaces used below the exit discharge (basement) must have two means of escape, at least one means of escape that discharges directly to the exterior from the floor level or by a stairway with a vertical travel not more than 2.44 m. The second means of escape may be a window.
- windows used as the second means of escape shall provide an unobstructed opening of not less than 0.35 m<sup>2</sup> in area, with no dimension less than 380 mm. A structure must be provided to allow access from the floor to the window.
- step stools are an acceptable option to gain access to escape windows. Ladders of any kind however are
  not acceptable. The step stool provides a wide secure platform which gives the person a good secure
  platform to step onto. Important to note step stools would have to be secured to the floor or wall in
  a way to prevent them from moving while they are being used. The manufacturer's recommendations
  would have to be respected in the use of the step stool.

• hard wired or plug in emergency lighting with battery backup, in the area the facility operates.

Public Health Inspectors from Health Protection Services are not required to conduct an inspection of an ELC home for licensing. However, they may be asked to conduct an inspection where ELC licensing staff request one.

# Section 5: Staff Requirements

# 5.1 Qualifications and training

# Licensing Regulation – Early Childhood Services Act

- 11 The qualifications and training requirements for administrators and educators are as follows:
  - (a) an administrator or an educator must hold a valid first aid certificate and a valid cardiopulmonary resuscitation certificate;
  - (b) an administrator or an educator who does not hold a one-year Early Childhood Education Certificate, or training that is equivalent in the opinion of the Minister, must have successfully completed the Introduction to Early Childhood Education course;

# Intent

Trained and qualified operators and alternate care providers help to ensure quality services for the safety, security, learning and development of children.

# **Indicators**

- 1. Operator and alternate care provider's records include a copy of a valid first aid certificate and a valid cardiopulmonary resuscitation (CPR) certificate.
- 2. First aid certificates are not expired.
- 3. All operators have successfully completed the Introduction to Early Childhood Education Certificate or hold an Early Childhood Education Certificate.

# What you need to know

A copy of the operator and alternate care provider's qualification certificates are retained in their staff file. Operators may choose to post a copy of their training certificates, diplomas or degrees.

### First Aid and CPR

For the purpose of 11(a) of the *Licensing Regulation – Early Childhood Services Act*, a valid first aid certificate is from a course recognized by WorkSafeNB and includes:

- A 16-hour Standard First Aid with CPR Level C certificate issued from a recognized provider such as:
  - · Work Place Standard First Aid and CPR Level C; or
  - · Standard Childcare First Aid and CPR Level C.

A 16-hour first aid course is taken every three years to renew.

Recognized first aid providers:

Link Worksafe

### **Early Childhood Education (ECE)**

For a list of educational institutions with recognized ECE programs please see Appendix 23.

# **Introduction to Early Childhood Education On-line Course**

Educators without formal post-secondary Early Childhood Education training are required to register for the Introduction to Early Childhood Education on-line course. The course is provided at no cost to educators and is monitored by an EECD facilitator.

Operators register as soon as they are licensed, operators may contact the quality assurance monitor for more information. A confirmation email will then be sent and is to be placed in their staff file for verification that the operator is waiting for a vacancy in the online course.

During inspections, ELC licensing staff will verify that the operator has registered for the training and is waiting for a vacancy in the online course.

Operators are notified as soon as a vacancy becomes available. Once formally enrolled, operators are provided with on-line access information as well as a user name and password connecting them to the course content.

# 5.2 Checks and employability

# Licensing Regulation – Early Childhood Services Act

- **12**(1) An operator of a licensed facility shall obtain a criminal record check or a vulnerable sector check, as the case may be, and a check with the Department of Social Development at least every five years.
- **12**(2) An operator of a licensed facility shall ensure that a criminal record check or a vulnerable sector check, as the case may be, and a check with the Department of Social Development is conducted on each individual before he or she becomes a staff member.
- **12**(3) An operator of a licensed facility shall ensure that a criminal record check or a vulnerable sector check, as the case may be, and a check with the Department of Social Development is conducted on each staff member and associated person at least every five years.
- **12**(4) A check with the Department of Social Development in respect of an individual shall contain the following information:
  - (a) if a court has made an order based on a finding that the individual has endangered the well-being of a child or youth under paragraphs 34(a) to (n) of the *Child and Youth Well-Being Act*;
  - (b) if a court has made an order based on a finding that the individual has endangered the security of another person as described in paragraphs 37.1(1)(a) to (g) of the Family Services Act;
  - (c) if the Minister of Families and Children has made a finding as a result of an investigation under the *Child and Youth Well-being Act* that the individual has endangered the well-being of a child or youth under paragraphs 34(a) to (n) of the *Child and Youth Well-Being Act*; and

- (d) if the Minister of Families and Children or the Minister of Seniors and Long-Term Care, as the case may be, has made a finding as a result of an investigation under the *Family Services Act* that the individual has endangered the security of another person as described in paragraphs 37.1(1)(*a*) to (*g*) of that Act.
- **12**(5) An operator of a licensed facility shall maintain a copy of the checks under subsections (1), (2) and (3) at the licensed facility.
- **13**(1) An operator of a licensed facility may employ or otherwise engage a person as a staff member if the person has been convicted of an offence under section 253 of the *Criminal Code* (Canada) but that staff member shall not transport any child in a motor vehicle while acting in the course of his or her employment for five years after the date of his or her conviction.
- **13**(2) An operator of a licensed facility shall not employ or otherwise engage a person as a staff member if the person
  - (a) has been convicted of an offence listed in Schedule B for which a pardon has not been granted or in respect of which a record suspension has not been ordered, or
  - (b) has been identified by a check with the Department of Social Development under paragraphs 12(4)(a) to (d).

Protection of children from persons who may have a criminal record as listed in Schedule B of the licensing regulation, or a contravention with the Department of Social Development is critical.

Verifying the results of operators, alternate care providers and any individual 18 years and older living in the home, criminal record checks/vulnerable sector checks and checks with the Department of Social Development helps to ensure the safety and security of children.

### **Indicators**

- 1. Operators, alternate care providers and any individual 18 years and older living in the home, have files which contain a copy of an initial check with the Department of Social Development and a criminal record check/vulnerable sector check which are renewed at least every five years.
- 2. Checks with the Department of Social Development and criminal record checks/vulnerable sector checks verify that alternate care providers are not hired with contraventions or convictions.

# What you need to know

A staff member means an operator, alternate care provider and volunteer.

Students on practicum placements and parents who are volunteering at the facility attended by their children:

- are not required to have a check with the Department of Social Development or a criminal record check/vulnerable sector check; and
- must never be left alone with children.

Before operators are granted a licence to operate, they must have completed a check with the Department of Social Development and a criminal record check/vulnerable sector check.

A check with the Department of Social Development may also be referred to as "SD Record Check."

Any adult 18 years and over living in the home must complete the following checks:

- criminal record check
- check with the Department of Social Development

All required checks must be completed before any new resident moves into the licensed ELC home.

Any regular visitors/volunteers at the ELC home may be required to have completed a criminal record check and/or check with Social Development.

The procedure for obtaining an Social Development (SD) Record Check is as follows:

- operators must complete the SD Record Check Consent Form (Appendix 18). Forms which are not completed properly will not be processed. Forms that are not clear will be returned;
- the completed form is forwarded to the Department of Social Development to the address on the top of the form;
- generally, the results will be returned to the operator within two weeks or sooner if possible;
- the results of the SD Record Check must be maintained in the operators file;
- if a contravention is indicated, an operator may request a review of the decision through the Department of Social Development if at least three years have passed since the most recent contravention;
- Social Development record checks are to be done at least every five years.
- The process is slightly different when applying for a licence and it is explained in the Licence Application Guide.

## How to complete the form:

- The form must be completed in full.
- In the field "Return to", indicate the email address or fax number where the results should be sent.
- Complete the box at the top right of the form indicating the reason for the request. The following boxes must be chosen when requesting an initial check or renewal check (after 5 years).

	Initial check	Renewal check
For operators	<ul><li>Initial check</li><li>Owner/Operator</li></ul>	<ul><li>Five year renewal</li><li>Owner/Operator</li></ul>
For residents 18 years and over	<ul><li>Initial check</li><li>Other</li></ul>	<ul><li>Five year renewal</li><li>Other</li></ul>
For alternate care providers/volunteers	O Initial check	• Five year renewal

- Complete the information about the facility: name of agency/service (facility), fax number, address and telephone number.
- Complete the required information regarding the applicant (person requesting the check): name, date of birth, address, etc.
- Sign and date the bottom of the consent form.

The procedure for obtaining a criminal record check/vulnerable sector check is as follows:

- operators are responsible to obtain a criminal record check/vulnerable sector check from the local police agency;
- some police agencies require a letter requesting a criminal record check/vulnerable sector check be completed. In the case of an operator or new applicant this can be obtained from the regional office of Early Learning and Childcare,
- Once the ELC home is operating, in the case where an associated person, alternate care provider or volunteer requires a check, the operator may provide the letter. See Appendix 19 for an example.

Operators should request their updated check with the Department of Social Development and criminal record check/vulnerable sector check **four to six months** prior to the expiration date of the current checks.

Staffing information is available for review by departmental staff at all inspection visits.

# 5.3 Alternate care provider

Operators of ELC homes are responsible for the ELC home and its services; they may, however, delegate their authority to an alternate care provider in their absence but the responsibility still rests with the operator.

An alternate care provider is anyone other than the operator who provides direct care for children in the early learning and childcare home. By definition, anyone providing direct care to the children is a staff member and must meet all staff requirements including current first aid and CPR training and the required checks.

Alternate care is intended to be used in the following situations:

- · operator vacation
- operator or family medical/dental appointments that can't be scheduled outside of operating hours
- operator illness
- professional development
- · operator or family emergencies
- operator or family responsibilities (e.g. school functions of operator's children)

### Operators must:

- ensure alternate care providers are at least 19 years of age;
- leave written instructions about each child's eating and sleeping habits;
- provide written information on each child's medication, food allergies and medical conditions;
- ensure alternate care provider is aware of any parental custody arrangements;
- · maintain a written record of each time an alternate care provider is used;
- · when possible, notify parents in advance of the use of an alternate care provider; and
- use a consistent alternate care provider whenever possible.

Operators should provide an Alternate Care Provider Handbook which includes the following:

- layout of the home, including any areas that are not accessible to children
- how to use safety locks and gates
- · daily routine and activity plans
- · required forms

- child guidance policy
- confidentiality policy
- general health policies
- · emergency evacuation and fire drill procedures
- location of fire extinguishers
- policy for children who are ill
- · emergency numbers and procedures, including the children's information files

### Alternate care providers must:

- be aware of the children's needs and routines such as feeding, toileting, and diapering.
- know the operator's return time and how to contact the operator if necessary.
- be informed about children's food allergies before preparing and serving their food.

The alternate care provider should visit the ELC home when the operator is there to have an opportunity to become familiar with the children, parents and routines.

Signed statements indicate that alternate care providers have read and understand their responsibility in respect of the:

- · Early Childhood Services Act; and
- Licensing Regulation Early Childhood Services Act.

# **5.4 Confidentiality**

# **Early Childhood Services Act**

- 55(1) Despite the Right to Information and Protection of Privacy Act, other than the provisions of that Act relating to the collection, use or disclosure of personal information in the context of an integrated service, program or activity of a public body, all information acquired by the Minister or another person in relation to any person or matter under this Act, whether of a documentary nature or otherwise, is confidential to the extent that its release would tend to reveal personal information about a person identifiable from the release of the information.
- Except as otherwise provided in this Act or in accordance with section 30 of the *Child and Youth Well Being Act*, an operator, an owner of an agency, a person in charge of an agency, a staff member of a facility and an employee of an agency shall not release, or permit or cause to be released, confidential information without the consent of the person from whom the information was obtained and the person to whom the information relates.

### Intent

Confidentiality is maintained to protect the child, family and operator.

### **Indicators**

1. A confidentiality policy is in place and in discussions it is evident that the operator understands their responsibilities in maintaining privacy.

2. Informed written consent is obtained before releasing to third parties any identifiable information on the child or family, including social media (for example, posting pictures to Facebook).

# What you need to know

### Operators must:

- treat child records confidentially;
- require written consent from the person involved or, in the case of a child their parents, before releasing personal identifying information pertaining to, children attending the facility or their family;
- make all records available to authorized departmental staff, on request; and
- develop clear written policies about confidentiality.

## Considerations for confidentiality policy:

- Discussions regarding confidentiality policies take place with parents prior to the child's enrolment.
- Questions from parents concerning other parents, including those who may have separated, or other children are not encouraged or answered.
- Speaking about a child, in the presence of other children, is never appropriate. Pick the right time and place for this kind of conversation to avoid being heard.
- Children's records are only accessible to authorized persons.

Alternate care providers must sign the written confidentiality policy and only have access to information they need to care for a child.

Family members (16 years of age and over), students on practicum placements and regular visitors to the home, should know, understand and sign the written confidentiality policy, indicating that they will follow the policy.

Pictures and videos of children are **not** stored on operators' personal recording devices, such as telephones, electronic tablets and cameras. Operators are encouraged to purchase cameras for use within the facility.

Non-payment of childcare fees is not personal-identifying information. Information about payment patterns of a family may be released to the operator of another facility.

The Personal Information Protection and Electronic Documents Act (PIPEDA) should be consulted as it is a federal act that applies to the private sector.

### For further information:

Office of the Privacy Commissioner of Canada (*The Personal Information Protection and Electronic Documents Act*): https://www.priv.gc.ca/leg\_c/leg\_c\_p\_e.asp

If an operator chooses to use video monitoring, consult Appendix 25 for guidance.

# Section 6: Administration

# **6.1 Posting**

### **Early Childhood Services Act**

- A licensee shall post the following documents in a clearly visible and prominent place in the facility associated with the licence:
  - (a) the licence;
  - (b) a report provided under section 23;
  - (c) an order issued under section 28; and
  - (d) a probationary licence issued under section 29.
- 23 An inspector shall provide an operator with a copy of the inspector's report.

# Licensing Regulation - Early Childhood Services Act

- An operator of a licensed facility shall post in a clearly visible and prominent place on the premises:
  - (a) the daily routine;
  - (b) the weekly menus;
  - (c) instructions regarding evacuation in case of a fire as approved by the fire marshal, deputy fire marshal or fire prevention officer;
  - (d) the name of the administrator;
  - (e) the name and telephone number of the inspector;
  - (g) whether a child receiving services at the licensed facility has a life threatening allergy and a description of that allergy; and
  - (h) if a child has or may be affected by a disease that is required to be reported under the *Public Health Act* and the regulations under that Act by the operator of the licensed facility, the disease that has been reported.
- **48**(6) An operator of a licensed facility shall post information relating to any allergies of the children in the food preparation area.

### Intent

Parents and anyone entering the facility are aware of the licence status and any terms and/or conditions of that licence.

Posting provides parents and members of the public, information on the facility's compliance with the licensing regulation.

Parents are well informed of important information regarding the operation of the facility.

### **Indicators**

- 1. The following are posted in a visible and prominent place.
  - (a) the licence;
  - (b) the annual inspection report and the most recent monitoring inspection report;
  - (c) orders for compliance, if applicable; and
  - (d) the probationary licence, if applicable.
- 2. Items listed in licensing regulation 25 and 48(6) are posted in a visible and prominent place.

# What you need to know

Postings are:

- · visible, preferably on a parent information board at the facility entrance; and
- kept updated.

Annual inspection reports are to remain posted until the next annual inspection is completed.

Monitoring inspection reports are to be posted until the next monitoring inspection is conducted.

Only the most current licence for the facility is posted.

Probationary licences are posted until all orders for compliance are met and ELC licensing staff have reinstated the suspended licence.

Required postings are available to parents and the public during hours of operation.

The planned menu is posted and any substitutions are noted as they occur. Posting of planned menus allows parents to know what the child has been offered to eat during the day.

Allergy lists posted for operators' viewing are to contain child names and are located in an area that is not viewable by parents. Alternate care providers are made aware of the location of the allergy list.

Information about a child's life-threatening allergy should still be prominently displayed without identifying the child. However, parents may choose to provide written consent so that the child's name may be posted.

# **6.2 Records and documents**

### 6.2.1 Access and retention

### **Early Childhood Services Act**

- **20**(1) The operator of a licensed facility shall maintain those records and documents prescribed by regulation.
- **20**(2) The operator of a licensed facility shall file with the Minister those records and documents requested by the Minister within the time specified by the Minister.

# Licensing Regulation – Early Childhood Services Act

- **24**(2) The records and documents referred to in sub section (1) shall be maintained for at least one year after the record or document is made
- **24**(3) Despite subsection (2), the records and documents referred to in paragraph (1)(b) shall be maintained for at least three years after a child is no longer receiving services at the licensed facility.

### Intent

Operators maintain accurate and updated information on-site for assessment by departmental staff.

To assist in the investigation of an outbreak, attendance records, daily information sheets and management of potential illness forms are available to the local medical officer of health on request.

Records are available for a minimum amount of time in the event they are required for effective licensing and enforcement.

## **Indicators**

1. Records and documents are retained according to regulation 24(2) and 24(3).

# What you need to know

Records and documents are accessible to authorized government representatives at all times.

The inability to produce a record during an inspection visit, or within a requested period, may result in a finding of non-compliance and be noted in the inspection report.

Records and documents are maintained in an organized manner allowing for easy access and timely review.

Each child, operator, alternate care provider and associated person has their own file.

Any outdated record or document (for example, outdated immunization record or record for child no longer enrolled in the facility) is disposed of in a manner that ensures confidentiality, such as shredding.

### 6.2.2 Financial records

# Licensing Regulation – Early Childhood Services Act

- 24(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility:
  - (a) financial records.

### Intent

Accurate financial records are maintained to plan for a successful operation. They are used to demonstrate that funding is spent according to the Government of New Brunswick program guidelines.

### **Indicators**

1. Financial records are maintained on-site.

### What you need to know

Financial records are available as needed to auditors and departmental staff, including records as stated in the Childcare Subsidies Regulation – *Early Childhood Services Act*.

To be successful, operators should have a financial plan in place. A budget is established and acceptable financial records are maintained.

Operators should have a separate business bank account.

ELC home operators are considered self-employed for tax purposes and should have good financial record-keeping to file federal income tax. Supporting documentation, such as invoices and receipts, are maintained in accordance with Canada Revenue Agency's (CRA) requirements.

Standard accounting procedures are used to record all financial transactions. There are many readily available computer programs to assist in financial record-keeping or an outside bookkeeper can be hired to do this task.

Operators should contact CRA for more information on how to report income, claim expenses and issue receipts. http://www.cra-arc.gc.ca/tx/bsnss/tpcs/dycr/menu-eng.html

Operators are expected to provide receipts to the parents of the children attending the ELC home. This should be done as soon as possible to give parents time to file their income tax return.

According to CRA, operators must issue receipts that include all of the following information:

- the name of the person receiving the receipt
- · the name of the child
- amount of payment, in written and numerical form (ex: fifty five dollars, \$55.00)
- the period of services (from and to dates)
- operator name
- operator address
- operator's social insurance number (parents need to include a provider's social insurance number when they claim child care expenses on Canada Revenue Agency's Child Care Expense Deduction form)
- · operator's signature
- the date receipt was signed

If a family has more than one child at the ELC home, a separate receipt must be issued for each child.

#### 6.2.3 Child records

# Licensing Regulation – Early Childhood Services Act

- 24(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility:
  - (b) child records that include

- (i) the child's name, address, birth date and Medicare number,
- (ii) the name, address and telephone number of the child's medical practitioner,
- (iii) the name, address and home and work telephone numbers of the child's parent orguardian,
- (iv) the name, address and telephone number of at least two individuals authorized by the child's parent or guardian to pick up the child and to be contacted in case of an emergency if the parent or guardian cannot be reached,
- (v) the child's health history and a copy of the record of immunizations or a copy of an exemption,
- (vi) daily information sheets on forms provided by the Minister for each child under the age of 24 months,
- (vii) documentary evidence of the child's learning, and
- (viii) any written consent given by the child's parent or guardian.
- **26**(2) The operator of a licensed facility shall require the parent or guardian referred to in subsection (1) to sign a declaration confirming that he or she has read and understood the content of the handbook.

### Intent

Operators have access to up-to-date information about the children in their care to provide appropriate and responsive services.

### **Indicators**

- 1. Operators use a standard child registration form that contains all the required information listed in regulation 24(1) or uses the suggested Child Profile form.
- 2. Each child's file contains:
  - the registration/child profile form;
  - a copy of the immunization record or a medical exemption form from the Minister of Health;
  - consent forms signed by parents; and
  - a signed statement from parents confirming they have read and understood the parent handbook.
- 3. Daily information sheets are present, complete and filed by date for each child younger than 24 months of age.

# What you need to know

The Child Profile form as found in Appendix 1 is one example of a child record that meets the requirement of regulation 24(1). Operators are not required to use the Child Profile form, and may create their own registration form that meets regulation.

Child records are completed prior to the child's first day of care.

Records of children should be stored securely in a locked drawer or cabinet but are still accessible to departmental staff when required.

The Child Profile or registration forms and any medical forms are updated whenever there are any changes, and are reviewed annually by parents.

Under the *Public Health Act*, infants and preschool children who attend a licensed ELC facility demonstrate proof of immunization against specific diseases cited in the Reporting and Diseases Regulation 2009-136. Parents provide a record of immunizations or a signed document indicating exemptions/objections.

Operators are responsible for verifying that proof of immunization has been received.

Daily information sheets, Appendix 9, are to be maintained and should be shared with parents to update them on their child's day.

In the event of parental separation and/or where visitation restrictions are in place, the custodial parent/guardian should notify the operator of the custody and access arrangements. A copy of the custody agreement or court orders, if applicable, should be provided for the child's records. A Denial of Access form located in Appendix 3 may be used.

# **6.2.4 Staff and associated persons records**

# Licensing Regulation – Early Childhood Services Act

- 24(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility:
  - (c) staff member records that include
    - (i) the staff member's name, address and birth date,
    - (ii) the staff member's qualifications including the certificates or training referred to in paragraph 11(b) or (c),
    - (iii) a description of the staff member's duties and responsibilities,
    - (iv) a signed declaration confirming that the staff member has read and understood his or her obligations under the Act and this Regulation,
    - (v) a copy of a criminal record check or vulnerable sector check, as the case may be,
    - (vi) a copy of a check with the Department of Social Development, and
    - (vii) a copy of a valid first aid certificate and a valid cardiopulmonary resuscitation certificate for each administrator and educator.
  - (d) associated person records that include
    - (i) a copy of a criminal record check, and
    - (ii) a copy of a check with the Department of Social Development;

### Intent

Having the operator, alternate care provider and associated persons' information in one place ensures that it is easily accessible for assessing requirements.

### **Indicators**

- 1. A file exists for the operator, each staff member and associated person.
- 2. All required information and documents as stated in regulation 24(1)(c) and 24(1)(d) are in each file, where applicable.

# What you need to know

Records for the operator, each staff member and associated person should be stored securely in a locked drawer or cabinet but are still accessible to authorized departmental staff when required.

#### 6.2.5 Administrative records

# Licensing Regulation – Early Childhood Services Act

- 24(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility:
  - (e) administration of medication records;
  - (f) daily attendance records of the children on forms provided by the Minister;
  - (g) attendance records of staff members;
  - (h) incident reports on forms provided by the Minister;
  - (i) menu plans and any substitutions;
  - (j) smoke alarm, smoke detector and fire extinguisher inspection and maintenance records;
  - (k) emergency evacuation and fire drill records; and
  - (I) management of potential illness forms provided by the Minister.

### Intent

Having all of the administrative records in one place ensures they are easily accessible for review by departmental staff.

### **Indicators**

1. Records are provided to departmental staff on request.

## What you need to know

In the event of a communicable disease outbreak at the facility, the Department of Health may ask to see all attendance records, menus, daily information sheets (where applicable), management of potential illness forms and any other relevant documentation regarding illnesses within the facility. These documents must be available at all times.

Attendance records are:

- mandatory;
- recorded using the attendance form provided by the department (Appendix 10);
- only completed by operators;
- confidential and not posted or viewed by parents;
- completed each time a child arrives and leaves;
- · accurate and reflect all children present at any given time;
- complete, showing all absences and detailing the reason; and
- taken out of the facility whenever children leave the building.

Children are only signed out when they have left the facility.

When children are in the outdoor play area or on outings, operators have copies of the attendance records with them as well as emergency contact information.

# 6.3 Parent and guardian handbook

For the purpose of this manual the "parent/guardian handbook" is referred to as "the handbook."

# Licensing Regulation – Early Childhood Services Act

- **26**(1) An operator of a licensed facility shall provide a handbook to a parent or guardian of a child receiving services at the licensed facility with the following information:
  - (a) the hours of operation;
  - (b) the enrolment and discharge procedures;
  - (c) the fee and payment schedules;
  - (d) whether the licensed facility offers transportation services;
  - (e) whether the children will participate in outings and the method of transportation for each trip;
  - (f) the types of organized activities that take place off premises;
  - (g) the administration of medication policy;
  - (h) the policy in the case of child illness including exclusion criteria;
  - (i) the policy with respect to child absences;
  - (j) the emergency evacuation plan;
  - (k) the child guidance policy;
  - (I) the child abuse and neglect protocol;
  - (m) parental involvement;
  - (n) the personal belongings that the child is permitted to bring to the licensed facility;
  - (o) a description of the learning principles and goals and the measures that will be taken to reach those goals;
  - (p) if the licensed facility is located in a family dwelling, whether the home environment is smoking or non-smoking;
- **26**(2) The operator of a licensed facility shall require the parent or guardian referred to in subsection (1) to sign a declaration confirming that he or she has read and understood the content of the handbook.

### Intent

Operators have clear and consistent policies and procedures informing parents of their obligations.

Parents are provided with a copy of the handbook so they have a record of the contract they have made with the facility.

Having parents sign a statement helps to ensure they have read and understood the contents of the handbook.

### **Indicators**

- 1. The handbook includes all items as listed in the licensing regulation 26 (1) (a) to (p).
- 2. A signed statement from parents confirming they have read and understood the handbook is evident in each child's file.

# What you need to know

The Parent and Guardian Handbook template, found in Appendix 20 identifies what is minimally required. Content specific to each facility, such as the use of social media, should be added to the handbook.

The handbook is easiest to understand if it is clear, brief and to the point.

The handbook provides each family with a welcome, introduction and orientation to the facility. The handbook contains responsibilities and expectations for both parties and contributes to a positive childcare experience.

Parents and their children should be encouraged to visit the facility prior to enrolment.

If the operator is not planning to use an alternate care provider, parents are advised in the parent handbook that the ELC home will be closed in the event that the operator cannot provide childcare.

Parents are advised that the operator has a duty to report suspected child abuse or neglect as found in the *Child and Youth Well-being Act*.

Participation and involvement of parents are encouraged to build relationships and to better support the child. This may be done through:

- information bulletins;
- potluck dinners;
- · family picnics; and
- special event days.

Information about how to contact ELC licensing staff to report any complaints or share any concerns is included in the handbook. Parents are directed to find ELC licensing staff contact information on the parent information board.

The parental signed statement is necessary to protect the facility's and the family's interests. It can be located on the consent form, or operators can design their own. This signed statement is placed in the child's file.

When the handbook is printed, the information that changes frequently (for example, fees and holidays observed) should be placed on the last page. This will minimize the cost of printing when revisions are made and will ensure that parents are informed of the revisions at the time they are made.

Posting the handbook online and making it available to the public may be considered if the operator has a website.

### 6.4 Consent

# Licensing Regulation - Early Childhood Services Act

- An operator of a licensed facility shall obtain the written consent of a parent or guardian of a child receiving services at the licensed facility before doing any of the following:
  - (a) permitting the child access to a pool under in the circumstances set out in subsection 34(2);
  - (b) permitting, in the case of illness or soiled clothing, the child to shower or bathe or showering or bathing the child;
  - (c) permitting the administration of medication in the circumstances set out in section 46;
  - (d) permitting the administration of emergency care to the child;
  - (e) permitting the child to leave the licensed facility with a person authorized by the parent or guardian;
  - (f) permitting the child to participate in an outing;
  - (g) transporting or providing for the transportation of the child;
  - (h) permitting the child to participate in testing or research projects;
  - (i) releasing information about the child to an outside organization;
  - (j) permitting photographs and videos to be taken of the child for publication or social media; or
  - (k) posting photographs of the child at the licensed facility to illustrate the child's learning.

### Intent

Parental consent is documented to ensure parents are fully informed and in agreement with policies and procedures of the facility.

### **Indicators**

1. Where applicable, all required consents are present and signed in each child's file.

### What you need to know

A consent form template provided in Appendix 2 may be used or one may be created, ensuring that all required information is obtained.

Parents are asked to sign separate consent forms for field trips, such as when children are taking public transit or leaving the neighbourhood (for example, a summer trip to the beach or a field trip). These consent forms should outline the date, time of departure and return, destination and purpose of trip and any special considerations.

Walking children to and from school is considered transporting and requires consent from the parents. When a school-age child walks or bicycles unsupervised between the facility and the school or bus stop, the parents must give written consent.

Before a child can be observed, interviewed, assessed, photographed or recorded as a part of a research project or other activities in the facility, an operator must have consent forms signed by parents. These events are voluntary and parents may choose for the child not to participate.

Students on practicum placements may observe and record notes while at the facility without parental permission, with the understanding that no identifiable information about the child/family is released or used.

Consent from parents must be obtained prior to posting pictures of children on social media such as Facebook, Twitter, Instagram or Snapchat, etc.

Parents cannot provide permission for activities that are in contravention of the *Early Childhood Services Act* and licensing regulation.

Parents are consulted and provide written consent prior to introducing any animals into the facility. They are informed of the benefits of engaging and interacting with animals, as well as the risks (for example, allergies, infectious disease transmission and injury) and how the facility plans to lessen those risks.

Facility specific parental consents obtained by the operator are to be maintained in each child's file.

### 6.5 Incidents

### 6.5.1 Incident log

# Licensing Regulation – Early Childhood Services Act

- **50**(1) An operator of a licensed facility shall maintain a chronologically filed daily incident log relating to the health, security and well-being of the children receiving services at the licensed facility.
- **50**(2) The operator of a licensed facility shall inform the parent/guardian of a child involved in an incident on the day the incident takes place and shall ensure that the parent or guardian signs the daily log to confirm their awareness.

### Intent

All minor incidents are properly recorded, documented and signed by parents so that they are well informed of any incidents that may have involved the child while at the facility.

### **Indicators**

- 1. A daily incident log is maintained, showing child's name, date, time and record of event.
- 2. The parent has signed the daily log of non-reportable incidents.

### What you need to know

A daily incident log is required for incidents that do not need emergency medical attention but may require minor First Aid (for example, bumps, scrapes, minor cuts and bites).

The incident log shows the following information:

- · child's name
- date:
- time:
- injury that occurred and care that was provided;
- what happened; and
- parent's signature.

Incident logs are kept confidential and are individualized for each child. To protect confidentiality, parents do not see the records of other children.

Incident logs are to be filed chronologically by date in a folder or binder so that ELC licensing staff can easily access the information.

### **6.5.2 Incident reports**

# Licensing Regulation – Early Childhood Services Act

- **51**(1) An operator of a licensed facility shall complete an incident report on a form provided by the Minister if one of the following incidents occurs while a child is receiving services at the licensed facility:
  - (a) the child is missing or temporarily unsupervised;
  - (b) a fire or other disaster occurs at the facility;
  - (c) a motor vehicle accident or an injury occurs during the transit of the child;
  - (d) an illness or injury requires the transfer of the child to a hospital; or
  - (e) the child dies.
- **51**(2) The operator of a licensed facility shall inform the Minister and the parent or guardian of the child involved in an incident under subsection (1) as soon as the circumstances permit and shall ensure that the parent or guardian signs the incident report to confirm their awareness.
- **51**(3) The operator of a licensed facility shall:
  - (a) maintain a copy of the report for the child's file,
  - (b) provide a copy to the parent or guardian, and
  - (c) forward the original to the Minister within 24 hours of the incident.

### Intent

Reportable incidents are properly recorded, documented and signed by parents. Incident Report forms are forwarded to the department to ensure departmental staff is immediately informed of any significant incidents.

### **Indicators**

- 1. Incident Report forms, provided by the Minister, are documented in the event of reportable incidents.
- 2. Parents of the child are informed of a reportable incident as soon as possible, and documentation demonstrates that parents signed the Incident Report form.
- 3. A copy of the Incident Report form is provided to the parent.
- 4. Incident Report forms are submitted within 24 hours of occurrence.

## What you need to know

Reportable incidents involving a child include:

· child wanders off and is missing;

- a child is abducted;
- a child is removed from the program by a non-custodial parent;
- a child is left outside unattended;
- a child is left on the school bus:
- a motor vehicle accident:
- unexpected illness or injury where a child requires immediate transfer to a hospital or seeks medical attention;
- poisoning of a child;
- · an error in the administration of medication;
- death of a child; or
- an allegation of physical, sexual, emotional abuse and/or neglect of a child by an operator, alternate care provider or associated person.

Reportable incidents involving the facility include:

- unexpected facility closure;
- · illness outbreaks; or
- other serious incidents, such as:
  - · flood;
  - · fire;
  - · intruder; or
  - · an emergency evacuation.

In the event of a reportable incident that involves a specific child or multiple children, a copy of the report is present in each child's file.

If the incident is not child-specific, for example illness outbreak, intruder, flood, an Incident Report form is not required for each child.

As soon as possible, an initial report is made by telephone or email to ELC licensing staff so staff:

- are aware of the situation, actions taken, etc.;
- can provide support, information or other help; and
- are prepared in the case of a complaint or inquiry.

Within 24 hours of the incident's occurrence, a mandatory Incident Report form as found in Appendix 15 is completed and submitted to ECS licensing staff. The operator may forward the report form via fax or email a scanned copy of the report. The original report is sent via mail or taken directly to ECS licensing staff's office.

The operator assesses the incident and makes changes, if necessary, to routines, floor plans, or any aspect of the program to ensure, wherever possible, that a similar incident does not happen.

ELC licensing staff reviews the Incident Report form and in response may conduct an investigation, which may include an inspection of the premises. ELC licensing staff will inform operators of what action will be taken in response to the incident report.

If the serious occurrence is a case of parental suspected child abuse, an Incident Report form is not to be completed, but rather a report is to be made to the Department of Social Development. Without providing details, ELC licensing staff is informed that a case of suspected child abuse has been reported.

# Section 7: Programming and Daily Routine

# 7.1 Daily activities

# Licensing Regulation - Early Childhood Services Act

- The daily activities of a licensed facility shall be purposely planned in advance and documented and shall respond to the capabilities, needs and interests of each child and shall include
  - (a) time and space for and a free choice of play experiences for exploration and discovery,
  - (b) indoor and outdoor opportunities for physical activity, and
  - (c) opportunities
    - (i) for group and individual experiences,
    - (ii) to explore various forms of literacy,
    - (iii) to express creativity and interests,
    - (iv) to explore the arts and sciences,
    - (v) to experience accomplishment and success,
    - (vi) to problem-solve, and
    - (vii) to develop trusting, respectful and supportive relationships with educators and children.

### Intent

To provide a quality childcare service for children, the daily program should include a variety of activities purposely planned according to the ages and development of the children.

### **Indicators**

1. The facility implements an inclusive daily program which contains a variety of purposely planned activities, opportunities and experiences.

## What you need to know

### Operators:

- demonstrate that planning is a process that involves engaging the children and reflecting on the children's interests, passions, strengths and abilities;
- ensure that short and long term plans are flexible and fluid, to accommodate emerging interests and unanticipated events;
- · focus on individuals or small groups of children; and
- emphasize a strength based approach.

The daily program should be flexible to:

- incorporate the interests of the children;
- · allow for spontaneous activities;
- allow for changes in the weather;
- allow for a different pace when needed by either the children or operators;

- allow introduction of a new child into the program;
- accommodate the changing needs of an infant; and
- meet the developmental and inclusion support needs of all children.

### The indoor and outdoor play areas are:

- purposefully planned and encourage playful exploration, problem solving and creativity;
- arranged to allow opportunities for free choice of activities;
- designed in a way that promotes effective supervision;
- · flexible to respond to children's changing interests, abilities and desires;
- · organized into flexible learning centres that:
  - · are well-defined, easy to get to with plenty of space for children to carry out the intended activity;
  - · permit children to play individually, in small groups, and/or in a large group;
  - · accommodate and encourage a variety of activities to support appropriate curriculum implementation; and
  - · minimally include, but are not limited to, the following:
    - a book/reading area;
    - an art area;
    - a dramatic play area;
    - a block construction area;
    - an area for scientific and mathematical investigation and measurement;
    - an area for music and movement;
    - space and equipment to allow for large motor movement; and
    - provisions for play with elemental materials sand, water, mud, clay and snow.

# Children's learning is visible through documentation. For example:

- the use of observations and recordings of children's experiences;
- · group and individual learning stories;
- photographs;
- whiteboards;
- project work;
- collections and samples of children's art /work; and/or
- · portfolios.

Children are part of the planning in the facility, and operators encourage their involvement in the flow of the day.

Children are encouraged to ask questions and share their ideas. They are provided opportunities to initiate discussions, give explanations and be part of demonstrations.

Operators set up the environment in such a way that children are excited about learning, using their creativity to invent imaginary worlds and tell stories.

Quality ELC facilities promote daily routines that provide ample time for children to engage in periods of sustained uninterrupted play in activities of their own choosing, keeping transitions to a minimum.

A daily routine does not mean that the schedule is the same every day. Some activities, such as lunch, snack and rest, may happen around the same time, while others change regularly or periodically while accommodating the children's interests and individual needs.

The day is flexible, allowing children to initiate their own learning, explore at their own pace and follow their individual interests. For example, if children are involved in an activity, they are allowed time to complete their task before moving on to another. Operators are responsive to the needs of the children and adjust their day as required. For example, if children appear restless, the activity is shortened.

### New Brunswick early childhood curriculum framework

A policy for the implementation of the New Brunswick early childhood curriculum framework is being developed. This section will be developed following the implementation of this policy.

### Providing services to school-age children

A wide range of opportunities are offered to school-age children which provide an enriching contrast to the formal school program. The following allows school-age children to explore new interests and relationships:

- team sports;
- · collaborative games;
- cooking;
- · dramatic play;
- art;
- music;
- · games;
- · open time; and
- · quiet time.

School-age children are provided with opportunities to:

- · run, climb, jump, be physically active; and
- develop trusting, supportive relationships with staff members and peers.

Having a written plan ensures there are a variety of opportunities provided for learning and exploration.

This may be demonstrated in many ways, such as:

- · weekly program
- daily activity sheets

"The NB PLAYBOOK" is a comprehensive resource designed for educators in school-age programs. This resource may assist in planning activities and can be found at: https://www.nbplays.ca

Operators and educators are not responsible to provide time for homework as school-age programs are not intended to be an extension of school. However, if time for homework is offered, it should not exceed one hour.

# 7.2 Daily routine

# Licensing Regulation - Early Childhood Services Act

- The daily routine of a licensed facility shall include:
  - (a) outdoor play for at least one hour in each four-hour block of time when the majority of children receiving services are in attendance except in the following circumstances:
    - (i) the wind chill is below -20 °C;
    - (ii) the temperature is below -20 °C; or
    - (iii) the temperature is 33 °C with humidity or above; and
  - (b) a period of rest for a length of time that meets the needs of each infant and preschool child receiving services at the licensed facility but that does not exceed two consecutive hours unless there is a written request from a child's parent or guardian to extend the length of time.

### Intent

As part of the daily routine, children are provided with outdoor time and access to the natural world where they share in the joy of being outside, and benefit from learning about the natural environment.

The need for rest and sleep varies greatly for children; however, since rest is an important part of the day for all children, a period of rest and quiet activities to balance their active play is encouraged.

### **Indicators**

- 1. Outdoor play occurs daily for one hour in each four hour block of time.
- 2. Rest periods do not exceed two consecutive hours.

### What you need to know

# **Outdoor play**

Outdoor play is important to a child's healthy development. All children, including infants, are expected to play outside each day.

While outdoors, operators nurture the child's curiosity about the natural world, and help the child develop respect for the natural environment and what it provides.

Depending on the weather, operators may alter their outdoor play time:

- Summer: time spent outdoors is provided during the cooler parts of the days. For example: outdoor play provided in the morning and indoor/shaded play provided during the hottest part of the day (mid-afternoon).
- Winter: time spent outdoors is provided at any time of the day unless conditions limit visibility or weather advisories indicate conditions that may pose a risk of harm to children (ice pellets, severe wind-chill).

Operators model appropriate outdoor dress and routines for children by wearing sunscreen, sun hats, ski pants, mittens and warm boots.

Parents are requested to provide sunscreen with an SPF (Sun Protection Factor) of at least 15, as well as hats to protect the children from over exposure to the sun.

Children have access to drinking water before, during and after outdoor play, especially in hot weather.

### **Rest period**

Most preschool children attending an ELC facility for a full day benefit from scheduled periods of rest. Rest periods may take the form of a quiet time or a change of pace between activities.

Children who do not nap are not required to rest, but may play quietly.

Children who do not rest the entire time are allowed to get up and play quietly or join other children who are not resting. A separate space is provided for children who do not nap, so they do not disturb resting children.

In discussion with parents, educators establish a flexible rest schedule allowing for individual children's needs.

# 7.3 Digital technologies

Digital technologies and computers have become a basic part of children's daily lives and, when used properly, can be helpful tools within the early learning and childcare setting. Computers can be adapted and used with all children's learning styles and needs. They appeal to children's natural curiosities and can be used to support children's learning.

When using computers appropriately within the early learning and childcare facility, children:

- develop lifelong skills such as the use of a keyboard and basic computer software;
- learn computer concepts;
- · demonstrate increased self-esteem and self-confidence;
- practice cooperative learning and problem solving;
- · learn time management skills and turn taking;
- work together with peers;
- have opportunities for different experiences from around the world; and
- increase language development, learning and exploration.

### Operators should:

- ensure that the use of electronics are balanced with other daily activities
- look for programs that are interactive, engaging and offer opportunities to try many different solutions.

  These help stimulate creativity and problem solving.
- use programs that support open-ended, discovery-oriented learning;
- provide opportunities to use technology as a tool for reading, writing, and math skills;
- · encourage children to work together with peers; and
- be knowledgeable and able to provide assistance to the children.

The biggest concern in using computers in early learning and childcare settings is the increased risk that children may be exposed to inappropriate content. When children are using computers and other electronic devices, operators must take precautions to ensure their safety and well-being.

#### These include:

- place computers in a highly visible area within the room;
- · closely supervise children when using electronic devices;
- limit the amount of time children spend on the computer operators may want to use a timer to signal when time is up as it helps to avoid arguments;
- decide on rules of use, what types of internet sites and programs are permissible;
- balance computer time with other activities;
- · teach children proper computer use;
- if children are accessing the internet, operators are to ensure that they are with them at all times and aware of sites that are being visited;
- if possible, use software that will protect children from inappropriate content; and
- ensure that children are not giving out any personal information.

While the use of televisions is not recommended, if they are used the following is to be applied:

- television viewing is limited and is not used daily;
- they are not used to fill gaps in the day;
- the programs or movies support curriculum, programming and investigating children's areas of interest for example, children want to search out information on a specific area of interest;
- programs or movies are developmentally appropriate;
- viewing the program or movie is one of several choices of activities for the children;
- children are not encouraged to watch television if they would prefer to be involved with other activities;
- with preschool children, operators watch with the children, extend their understanding and promote discussion on the program or movie;
- for school-age children, operators ensure that children are supervised while watching television;
- if possible, televisions are not stored in rooms; and
- infants are not to be watching television.

# Section 8: Supervision and Child Guidance

# 8.1 Number of children and supervision

# **Licensing Regulation – Early Childhood Services Act**

- **7**(4) Only one of the following groups of children shall receive services at an early learning and childcare home:
  - (a) three infants, including the children of the operator;
  - (b) five preschool children, including the children of the operator;
  - (c) nine school-age children, including the children of the operator; or
  - (d) six children, including the children of the operator, if the children are from more than one of the groups described in paragraphs (a) to (c).
- 7(5) The group referred to in paragraph (4)(d) shall include at least one school-age child and shall not include more than two infants.

### Intent

Children are cared for in a small group which helps to maintain an environment that promotes safety and well-being.

### **Indicators**

1. Attendance records and documented observation by ELC licensing staff confirm that the operator does not exceed the number of children that is permitted to be in attendance.

## What you need to know

### 8.1.1 Number of children

One individual is responsible for providing care and supervision for no more than six (6) children of a combination of ages; there must be no more than two (2) children under the age of two (2); at least one of the six (6) must be of school-age.

If an operator provides care solely for infants up to age twenty-four (24) months, the maximum number allowed is three (3) and no other children are permitted.

If an operator provides care solely for preschool age children, the maximum number allowed is five (5) and no other children are permitted.

If an operator provides care solely for school-age children, the maximum number allowed is nine (9) and no other children are permitted.

The operator's own children under the age of twelve are included in the maximum number of children allowed.

An operator is not permitted to hire a staff member to increase the number of children permitted to be cared for in the home.

Examples of ELC home combinations of ages and maximum number of children

Children under 24 months	Children between 2 and 5 (not yet in school)	School-age children
* * *		
* *	* * *	*
*	* * * *	*
	* * * * *	
	* *	* * * *
		* * * * *
		* * * *

# 8.1.2 Supervision

The operator must supervise children, both indoors and outdoors, and is aware of what the children are doing at all times.

Operators should directly supervise nap time for all children. However, when napping children are not directly supervised, a physical check of the children must occur every 15 minutes. These checks are documented with operator signature and the times of the check. Baby monitors are recommended to ensure the safety of children when napping unsupervised.

Health Canada states that playpens are **not** intended to be used for unsupervised sleep as they do not meet the same safety requirements and are not as durable as cribs, therefore playpens are not recommended for unsupervised sleep of children. If using playpens, it is recommended that operators remain on the same floor of the home as the napping infants and keep the door to the child's room open at all times.

Infants must always be placed on their back for sleeping.

Operators familiarize themselves with detailed information regarding Sudden Infant Death Syndrome and ways to minimize the risk.

Children resting on mats or family beds, but remaining awake, must not be required to stay on the mat or bed for longer than 30 minutes and must be closely supervised.

Operators conduct frequent head counts indoors and outdoors to ensure children's safety. While supervising the outdoor play area, operators position themselves throughout and actively engage with the children.

When an operator must attend to personal needs while the children are awake, indirect supervision is limited to one or two minutes. Even during this time, the operator ensures that the children are safe and secure (ex: in playpen or crib, in a safe area within hearing next to the provider).

Visitors to the home are kept at a minimum during operating hours. When visitors are present, the operator continues to supervise and interact with the children at all times.

# 8.1.3 School-age supervision

Operators recognize the need for children to be independent while still safe and secure and adjust supervision for different ages and abilities, activities and environments. For example, some school-age children may be allowed increased freedom and independence by playing a board game in the hallway or adjacent to the room. When supervision is adjusted, operators know at all times where children are and frequently check on them.

If the supervision of a child is not direct, the operator:

- obtains the written approval from the child's parents as to the type of supervision given; and
- maintains this approval on file.

This may include situations such as children walking or biking to and from school, where the operator's responsibility for them does not start until they have arrived at the facility.

# 8.2 Child guidance

# Licensing Regulation – Early Childhood Services Act

- **49**(1) An operator of a licensed facility shall ensure that the guidance of the children receiving services at the licensed facility is positive and includes positive reinforcement, encouraging efforts and recognizing accomplishments.
- **49**(2) An operator of a licensed facility shall ensure that no child receiving services at the licensed facility is subjected to any form of physical punishment or verbal or emotional abuse or is denied physical necessities.

### Intent

Positive child guidance techniques are used to support and encourage children in learning independence and appropriate, acceptable behaviour. These practices help to develop relationships that promote children's well-being and sense of belonging.

### **Indicators**

- 1. Positive child guidance practices are observed or confirmed by operators.
- 2. There are no observations or reports of physical punishment, verbal or emotional abuse or the denial of physical necessities.

# What you need to know

A positive approach in the guidance, care and discipline of children is maintained.

Positive child guidance practices include:

- setting reasonable limits and guidelines that make sense to the children;
- gentle reminders;
- · offering choices and assisting children in decision-making;
- · anticipating children's needs;
- · understanding child development;
- using positive reinforcement and encouragement rather than competition, comparison and criticism;
- redirecting negative energy;
- distracting children from potential problems;
- reflecting with children on incidents by helping them understand the consequences to their actions and words;
- · ignoring behaviour where appropriate; and
- offering children the opportunity for a new activity.

To promote an environment that encourages positive behaviour, operators:

- · arrange the environment so children can move freely between learning centres;
- ensure adequate supply of appropriate equipment, material, books and toys;
- ensure there is a good balance of activities in the program content;
- · have enough time for activities;
- · prepare children for transitions;
- provide appropriate supervision;
- involve children by giving them responsibility and letting them help;
- use positive language when interacting with children;
- model and teach appropriate respect for diversity cultural diversity, diversity of family types and diversity of needs and abilities; and
- respect children's feelings.

It is important to take the time to understand the child's messages (cues) and to respond to them with the encouragement, praise, comfort and independence as needed.

Operators have open discussions with parents regarding their child guidance practices at home.

Parents are provided with documentation (incident reports, incident log) informing them of concerns, situations and/or behaviours. In keeping with child guidance practices, operators have open discussions with parents in the hope of finding solutions.

The following actions are prohibited:

- strike a child;
- shake, shove, spank, pinch or other measures that produce physical pain;
- require the repetition of physical movements (for example, to reinforce not running in the halls by having the child walk up and down 10 times);

- humiliate, belittle or degrade in any way such as name-calling;
- · verbal abuse such as yelling;
- send a child to a cot, mat, time out chair or corner;
- deprive a child of any outing or group activity;
- physically restrain a child; and
- withdraw or threaten to withdraw physical necessities, such as food, bedding, shelter, clothing or toileting opportunities.

Operators are aware that mandatory reporting of child abuse and neglect is required under the *Child* and *Youth Well-being Act* (section 35(1)) and that a report to the Department of Social Development is necessary.

# Section 9: Early Learning and Childcare Environments

# 9.1 Traffic area

# Licensing Regulation - Early Childhood Services Act

An operator of a licensed facility shall ensure that the traffic area and the outdoor walk-ways of the licensed facility are free from obstructions and hazards.

### Intent

Ensure that traffic areas and outdoor walk-ways are maintained to reduce risk of injury for children, families and operators.

### **Indicators**

1. Traffic areas and outdoor walk-ways are free from obstructions and hazards.

# What you need to know

Operators must regularly check traffic areas and outdoor walk-ways for obstructions and hazards, including accumulations of water, ice and snow.

### 9.2 Indoor environments

# 9.2.1 Indoor play area

# Licensing Regulation – Early Childhood Services Act

30(3) An operator shall maintain the indoor play area of a licensed facility to ensure the safety of the children.

### Intent

Each child has an adequate amount of space available for playing, eating and resting.

### **Indicators**

1. The indoor play area is maintained safe and clean.

# What you need to know

An ELC home must provide space for the following:

- rest
- active and quiet play
- · messy play, for example, painting, water play
- individual and group activities

The indoor play area is:

- · safely maintained;
- clean and in good repair; spacious enough to provide space for various types of play;
- · bright, with windows and natural light;
- free of clutter and excess materials and equipment; and
- well arranged to allow opportunities for free choice of activities.

Measurements of usable indoor play space are not required for the licensing of an ELC home.

Children have access to most areas of the home; however, only those areas of the home approved by ELC licensing staff are used for childcare. Those areas not approved (e.g. family bedrooms) are restricted from children by closing the doors to the areas.

Rugs and carpets are securely placed, maintained clean and in a good state of repair.

Areas used by the family outside operating hours may also be used by children attending an ELC home.

Each play area has a good balance of natural light from windows and artificial light. Natural light is preferred as it supports the development and learning in children by providing the opportunities for various sights and sounds from outdoors.

Windows that open to the outside are properly screened.

Heating and ventilation maintains the temperature of the home at an appropriate comfort level. Dehumidifiers are used in basements where humidity is an issue.

Operators include the following in their general housekeeping:

- carpets vacuumed daily;
- floors cleaned daily;
- carpets shampooed/steam cleaned regularly or when required;
- kitchen and bathroom sanitized daily;
- surfaces used by children cleaned and sanitized throughout the day.

### 9.2.2 Indoor play area materials and equipment

## Licensing Regulation – Early Childhood Services Act

- **32**(1) An operator of a licensed facility shall provide indoor play area materials and equipment that are
  - (a) varied and in sufficient quantity for the number and ages of the children receiving services at the licensed facility,
  - (b) arranged on low, open shelves and accessible to the children receiving services at the licensed facility,
  - (c) in compliance with the *Canada Consumer Product Safety Act* (Canada) and the regulations under that Act, and
  - (d) clean and in good repair.

**32**(2) An operator of a licensed facility shall comply with any recalls regarding defective materials and equipment.

### Intent

A sufficient quantity of materials and equipment ensures the availability of enough play resources for each age group served, avoiding excessive competition and long waits for children. New items are added regularly to ensure that children are provided with new learning opportunities.

### **Indicators**

- 1. A visual inspection of the indoor play area material and equipment demonstrates compliance by observing they are:
  - · varied and in sufficient quantity for all children present;
  - easily accessible on low, open shelves;
  - maintained according to the Canada Consumer Product Safety Act and regulations;
  - kept clean and in good repair.
- 2. The operator is aware of any recalls and responds accordingly regarding indoor play area materials and equipment.

# What you need to know

Operators provide low, open shelves for the display and storage of toys, program materials and supplies. These are accessible to children, appropriately labelled and allow for independent selection. Labels have both words and pictures to promote literacy skills.

Open ended play materials and equipment in sufficient quantity and variety for the number and ages of children in attendance at the ELC home and representative of each of the following categories is present, such as:

- art materials and loose parts;
- · blocks and accessories;
- language and literacy;
- dramatic play;
- music and movement:
- large muscle (gross motor);
- manipulative and fine motor;
- sand and water play;
- puzzles and games;
- · materials that support mathematical learning; and
- materials that support learning in science and technology.

For more information regarding play materials and equipment, operators are to consult the curriculum framework used at the facility or Appendix 22, Equipment and Materials for School-age Children.

Materials and equipment are not limited to use in a particular learning centre only – most of the materials relate to more than one area of learning. Children and operators are encouraged to integrate learning as much as possible (for example, place books in the block area).

To ensure the appropriateness of play equipment and materials, consideration is given to the developmental needs, individual interests and ages of the children attending the facility.

There are appropriately sized furnishings such as chairs, tables, cubbies and shelving for the number of children in attendance.

Toys, materials and equipment are approved for the child's age according to CSA standards. When older children are playing with toys and materials that are not suitable for younger children, they are provided a separate, safe place to ensure younger children do not have access.

Toys and equipment are cleaned and properly sanitized. Mouthed toys are cleaned instantly or removed from play. For more information see Appendix 36, Public Health Inspection Standards (Nov. 2015).

Materials, equipment and furnishings are of safe construction, easy to clean and free of sharp and pointed edges. They are in good repair and are repaired or discarded once broken. Routine inspections of toys and equipment help in identifying broken items.

To ensure the health and safety of children, operators are aware of any recalls that pertain to material and equipment used in the facility. Health Canada regularly issues recalls for food and products via email. Operators may sign up for the distribution list to ensure they are advised of recalls.

Scent-reduced environments are encouraged – see Appendix 24 for more information.

Safety Guidelines for Physical Education in New Brunswick is a resource prepared by the Department of Education and Early Childhood Development used in elementary and middle schools to minimize, to the greatest extent possible, the risk of a preventable accident or injury. Although not developed for ELC facilities, these guidelines are helpful in ensuring the safety of all children and will help operators fulfill their responsibility to provide the safest possible environments both indoors and outdoors.

Safety Guidelines for Physical Education in New Brunswick: www2.gnb.ca/content/dam/gnb/Departments/ed/pdf/K12/curric/Health-PhysicalEducation/ SafetyGuidelinesElementaryMiddleCurricular.pdf

Industry Guide to Health Canada's Safety Requirements for Children's Toys and Related Products, 2012: www.hc-sc.gc.ca/cps-spc/pubs/indust/toys-jouets/index-eng.php

Canada Consumer Product Safety Act (Canada) and the regulations: http://hc-sc.gc.ca/cps-spc/legislation/acts-lois/ccpsa-lcspc/index-eng.php

### 9.2.3 Rest area

# Licensing Regulation – Early Childhood Services Act

- **36**(1) A full-time early learning and childcare centre and an early learning and childcare home shall have a rest area.
- **36**(3) The rest area of a full-time early learning and childcare centre and an early learning and childcare home shall be equipped with the following:
  - (a) a crib or portable playpen for each child under 15 months of age in accordance with the Cribs, Cradles and Bassinets Regulations and the Playpens Regulations under the *Canada Consumer Product Safety Act* (Canada); and

- (b) a cot or nap mat appropriate for the height of the child for each child who is at least 15 months of age and under five years of age who takes naps.
- **36**(4) The rest area of a full-time early learning and childcare centre and an early learning and childcare home shall allow for a space of at least 46 cm between each crib, portable playpen, cot or nap mat.
- **36**(5) Despite subsection (3), in the case of an early learning and childcare home, a child may use a bed used by the operator or a member of the operator's family in the following circumstances:
  - (a) the child is at least 15 months of age,
  - (b) the bed is covered with bedding used only for the child, and
  - (c) the bed is not the upper level of a bunk bed.
- **36**(6) A cot, a nap mat or the mattress of a crib or portable playpen shall be washable and non-absorbent or covered with a non-absorbent layer.
- **36**(7) A nap mat shall be at least 5 cm in thickness and stored in a way that avoids contact with the surface of another nap mat or disinfected on both sides after each use.

### Intent

Safe, quiet and secure environments are provided for rest periods during the day that respect the child's individual needs.

### **Indicators**

- 1. The facility has a designated rest area.
- 2. Each child younger than 15 months has a designated crib or playpen that meets the Cribs, Cradles and Bassinets Regulations and the Playpens Regulations under the *Canada Consumer Product Safety Act*.
- 3. If not using a family bed, each child older than 15 months, who naps or rests, has a cot or nap mat that is appropriate for their height.
- 4. The minimum space between rest equipment is at least 46 centimetres except where in contact with a wall.
- 5. All nap equipment is washable and non-absorbent.
- 6. Nap mats are at least 5 cm in thickness and are stored so there is no contact with another nap mat or they are disinfected on both sides after each use.

### What you need to know

ELC homes must provide an area for children to rest that meets the needs of the individual child.

A "rest area" is any location that permits children to rest undisturbed. It is a designated area not used for play activity during the rest period and may be family bedrooms if they are approved.

When developmentally appropriate, operators may use the family beds of the home for preschool children. Operators must ensure that children cannot fall off the bed. The original bed and bedding must be completely covered with a sheet or other covering used only for the child resting.

Upper levels of bunk beds must never be used.

ELC homes must provide, or require that the parent provides, a crib or portable playpen for each child younger than fifteen months, which must comply with the Cribs, Cradles and Bassinettes Regulations and the Playpens Regulations under the *Canada Consumer Product Safety Act* (Canada).

Infants younger than 15 months are not permitted to nap in a swing, car seat or any other equipment not designed for napping.

To reduce the risk of communicable disease, infants use the same crib or portable play pen each day.

Infants who can climb out of a crib by themselves are provided with a cot or mat.

It is recommended that one operable night light be located in each rest area.

Only children who nap or rest, require appropriate rest equipment (including blankets and sheets). When a child who does not usually nap wants to rest, a mat or cot must be provided.

Mats less than 5 centimetres thick and yoga mats are not permitted as rest equipment.

Cots and mats are long enough so that neither the child's feet nor head extend past the ends and wide enough so that the child can easily turn over without falling off.

Duct tape or similar material is not permitted to repair a mat.

It is recommended that cots and mats not be stored in the play area.

Health Canada does not recommend blankets and pillows for children younger than 12 months.

http://www.phac-aspc.gc.ca/hp-ps/dca-dea/stages-etapes/childhood-enfance\_0-2/sids/pdf/sleep-sommeileng.pdf (Health Canada)

http://www.caringforkids.cps.ca/handouts/safe\_sleep\_for\_babies (Canadian Paediatric Society)

Children are provided with sheets and blankets from either the facility or their home and bedding is washed, at minimum, weekly.

### 9.2.4 Washroom

# Licensing Regulation – Early Childhood Services Act

- **38** (1) The children receiving services at a licensed facility shall have access to washrooms that include the following:
  - (a) if one to nine preschool children or school-age children are receiving the services, one toilet and one sink;
- **38**(2) An operator of a licensed facility shall supervise a child while the child is using the washroom if the washrooms are not used exclusively by the children, the operator and staff members at the licensed facility.
- **38**(3) An operator of a licensed facility shall provide one potty chair or training seat for each group of three children who are being toilet-trained.

**38**(4) An operator of a licensed facility shall provide steps or platforms that allow the children to use regular sized toilets and sinks.

### Intent

There are sufficient and safe washroom facilities to meet the needs of the number and ages of children enrolled in the facility.

### **Indicators**

- 1. The facility has the proper number of functioning and available toilets and sinks as per regulation 38(1).
- 2. Children are supervised at all times when using washrooms.
- 3. One potty chair or training seat is provided for each group of three children being toilet trained.
- 4. Steps or platforms are provided to allow children to reach regular-sized toilets or sinks.

## What you need to know

All toileting activities, such as use of potty chairs, take place in designated washroom facilities and not in play areas.

After each use, potty-chairs are emptied into a toilet, cleaned, sanitized and stored in the bathroom.

Liquid soap and paper towels are to be used to wash and dry hands. Children are not to share towels or facecloths.

Bathrooms in ELC homes may be those used by family members of the operator.

The following is a guideline for cleaning and sanitizing the washroom area:

- after each use
  - · change table or change mat
  - · potty chairs
- daily (or when soiled)
  - · hand washing sinks
  - · faucets and handles
  - · surrounding counters
  - · toilets toilet bowl, seats and rim of toilet
  - · flush handle
  - · door knobs
  - · light switches
  - · floors
  - · diaper pails

### 9.2.5 Storage space

### Licensing regulation – Early childhood services Act

- **39**(1) A licensed facility shall have storage space that includes:
  - (a) low, open shelves for the display and storage of toys and supplies;
  - (b) easily accessible space to store the personal belongings of each child receiving services at the licensed facility; and
  - (c) if services are provided to a child who is not toilet-trained, space for diapers, creams and wipes for the child.
- **39**(2) A licensed facility shall have a separate locked storage space that is inaccessible to the children for each of the following:
  - (a) toxic products, chemical products and cleaning supplies;
  - (b) medications; and
  - (c) if the licensed facility is located in a family dwelling, firearms.
- **39**(3) Despite paragraph (2)(b), medications administered in cases of anaphylactic shock shall not be stored in a locked space.

### Intent

Having storage space for play materials and equipment identifies where items belong. Children make their own choices about activities and equipment. Toys and other equipment are stored properly and are not safety hazards when not in use.

Providing each child with a place for personal belongings helps in keeping items separate so that belongings do not get lost or mixed up. Children learn how to take care of their belongings, and the risk of communicable disease is reduced.

Locked inaccessible storage space for dangerous toxic products and firearms ensures the safety of the children.

Proper locked inaccessible storage of medications protects the health and safety of children by ensuring they are kept out of reach to prevent accidental ingestion.

### **Indicators**

- 1. Indoor play area material, equipment and toys are easily accessible on low, open shelves.
- 2. Easily accessible space is provided for personal belongings.
- 3. Individual space is provided for diapers, creams and wipes for each child who is not toilet trained.
- 4. Toxic products, chemical products and cleaning supplies are locked and inaccessible to children.
- 5. Medications are locked and inaccessible to children, except medications used for anaphylactic shock, which are stored safely but accessible.
- 6. Firearms in a family dwelling are locked and inaccessible to children.

### What you need to know

Toys, program materials and supplies are accessible to children, appropriately labelled (to promote literacy) and permit independent selection. They are stored at children's level, and they are able to use them without adult assistance.

There is additional storage space for materials and equipment to permit rotation and excess items are not stored in the play area.

Easily accessible storage space for the personal belongings of each child in attendance is provided.

This may include:

 hangers or hooks with additional provisions, such as plastic containers that can store children's bedding, changes of clothing or individual backpacks

Toxic products do not include the diluted spray bottles used for cleaning table tops, change tables and toys. However, these must be inaccessible to children at all times, and no child can reach them even with climbing or reaching.

Spray bottles are labelled with contents.

Medications and toxic products are locked by either a CSA-approved child safety lock product or by lock and key. Consultation may be required with ELC licensing staff to determine the best locking method.

Medications requiring refrigeration are stored in the refrigerator in a leak-proof locked box clearly labelled "medication storage." A locked box is not required if the kitchen is locked and inaccessible to children.

For information about the storage of firearms:

RCMP (Storing, Transporting and Displaying Firearms): www.rcmp-grc.gc.ca/cfp-pcaf/fs-fd/storage-entreposage-eng.htm

#### 9.3 Outdoor environments

### 9.3.1 Outdoor play area

### Licensing Regulation – Early Childhood Services Act

- **31**(1) A licensed facility shall have an outdoor play area that is less than 350 m from the indoor play area.
- **31**(3) An operator shall maintain the outdoor play area of a licensed facility to ensure the safety of the children.
- **31**(4) An operator shall ensure that the outdoor play area of a licensed facility
  - (a) includes a shaded area that that meets the requirements of subsection (5.1), where applicable
  - (b) consists of more than one surface to permit different types of play
- **31**(5.1) The outdoor play area of a full-time or part-time early learning and childcare centre shall include a shaded area of at least 0.45m<sup>2</sup> for each child that can be accommodated in the outdoor play area as identified under subparagraph 4(1)(g)(ii).

### Intent

Outdoor play areas provide a natural space inviting to children. Children are encouraged to discover, learn, create, move, manipulate, explore, play by themselves, play with others and pursue their fields of interest.

#### **Indicators**

- 1. An outdoor play area is:
  - · less than 350 metres from the premises;
  - maintained safe and free of hazards;
  - at least 0.45m<sup>2</sup> of shade per child;
  - comprised of various types of surfacing to permit different types of play.

### What you need to know

Outside play areas are:

- maintained free of glass, debris and animal litter.
- well drained and free from depressions in which water may stand.
- either directly adjacent to the operator's home or within walking distance, for example, a neighbourhood park or playground.

Outdoor play environments have a layout that permits effective supervision, which means that children are in view at all times and are easily supervised.

The outdoor play area has various types of surfaces such as grass, sand, asphalt, etc. that allow for all kinds of play and promotes natural outdoor play experiences for children. The outdoor play area is accessible to children of all abilities.

The outdoor play area contains natural elements such as trees, flowers, gardens, encouraging children to explore their environment.

A minimum of 0.45m<sup>2</sup> of shade must be provided for each child in the outdoor play area at all times during the day. A shaded area may be from natural shade (for example, trees), or may be created by using large beach umbrellas, tarps or a wooden structure.

A fenced outdoor play area is not required for ELC homes; however, the operator is responsible to ensure the safety of the children. If safety is a concern, for example in a high traffic area, ELC licensing staff may require a fence be installed.

Where a fence is present, gates must be secured using latches so that they cannot be opened by preschool children. They are not locked due to safety concerns as per the Office of the Fire Marshal.

- In the winter:
   outdoor play spaces must be kept accessible;
  - gates and exits must be kept clear of snow and ice and open and close with ease; and
  - stairs, walkways, ramps, porches, parking areas and driveways must be kept free from accumulations of water, ice and snow.

### 9.3.2 Outdoor play area materials and equipment

### Licensing Regulation – Early Childhood Services Act

- **33**(1) An operator of a licensed facility shall provide outdoor play area materials and equipment that are varied and in sufficient quantity for the number and ages of the children receiving services at the licensed facility.
- **33**(2) Stationary equipment in the outdoor play area shall be surrounded by a protective surfacing and installed according to the manufacturer's instructions.
- **33**(3) An operator of a licensed facility shall complete a monthly review and maintenance plan on all stationary equipment that includes the following information:
  - (a) the review and repair dates;
  - (b) the action required and the action taken; and
  - (c) the name of the staff member who conducted the review.
- **33**(4) An operator of a licensed facility shall comply with any recalls regarding defective outdoor play area materials and equipment.

### Intent

Outdoor play area materials and equipment are safe, age appropriate, functional and in sufficient quantity to encourage the children to be active and involved in activities.

### **Indicators**

- 1. Outdoor play area materials and equipment are varied and in sufficient quantity for all children present.
- 2. Stationary equipment is surrounded by protective surfacing of appropriate depth.
- 3. Stationary equipment is installed according to manufacturer's instructions.
- 4. The operator is aware of any recalls and responds accordingly regarding outdoor play area materials and equipment.
- 5. The operator completes monthly review and maintenance plans of the stationary equipment and records are available on-site.

### What you need to know

The outdoor play area is an extension of the indoor play environment, providing many of the same opportunities, including space for creative, quiet, pretend and sensory experiences.

It is understood that ELC homes may not have outdoor play equipment in the same quantity and variety as ELC centres. However, what is present must meet safety requirements.

#### Sandboxes are:

- · equipped with tight-fitting covers;
- kept covered when not in use; and
- protected from animals.

Operators should ensure that outdoor play areas conform, at minimum, with CSA standard CAN/CSA-Z614-14 entitled Children's Playspaces and Equipment, and any subsequent update to this standard. This document specifies safety standards for play areas used by children aged 18 months to 12 years and is available for purchase at www://shop.csa.ca/en/canada/injury-prevention/cancsa-z614-14/invt/27019532014.

**Equipment** refers to all objects/structures (falling within the parameters of the CSA standard) in a play area that are provided to be used for play by children, whether or not they were produced for that purpose.

Stationary equipment includes: climbing structures, swings, slides, rock climbing equipment.

**Protective surfacing** is material to be used as a ground cover within the safety zone of play area equipment as specified by the CSA standard.

Protective surfacing is required for any stationary climbing structures regardless of height. However, it is recommended that all other climbing structures also have protective surfacing. It should be turned over or raked weekly to ensure proper depths are maintained. Grass is not a protective surface.

Equipment is not used if it is unsafe based on the visual inspection.

Toys and materials are accessible year-round.

Outdoor storage space is provided for toys.

Operators are required to create and use an outdoor maintenance checklist, for stationary equipment, to meet the requirements of section 33(3) of the *Licensing Regulation – Early Childhood Services Act*. An example may be found in the CSA standard CAN/CSA-Z614-14 Children's Playspaces and Equipment.

When using municipal playgrounds, operators check for obvious hazards each time they are used and take measures such as increasing supervision and/or not permitting children to use those pieces of equipment deemed to be unsafe. The municipality should be contacted if there are concerns with the equipment.

For further details on the Canadian Consumer Product Safety Act, its requirements and recalls: http://www.hc-sc.gc.ca/cps-spc/legislation/acts-lois/ccpsa-lcspc/index-eng.php

### Loosefill protective surfacing material and critical height range

Loosefill protective surfacing material	Recommended minimum depth of material (compacted)	Critical height
Wood/bark mulch	30 cm	Up to three metres
Engineered wood fibre	30 cm	More than three metres
"Washed", round, pea gravel*	30 cm	Up to 2.5 metres
Specified sand <sup>†</sup>	30 cm	More than 2.5 metres
Shredded tire crumb	20 cm	More than three metres

<sup>\*</sup> Washed, round, pea-type gravel and sand should be clean to help avoid compaction

<sup>†</sup> Specified sand should meet developed particle size analysis envelope test for determined impact-attenuation requirement results Adapted from CSA - Children's Playspaces and Equipment (CAN/CSA-Z614-14), 2014

# Section 10: Safety and Well-being of Children

# 10.1 Access to a licensed facility

### Licensing Regulation – Early Childhood Services Act

The parent or guardian of a child receiving services at a licensed facility shall have access to the licensed facility at any time when the child is present unless the parent or guardian has otherwise lost his or her right of access.

### Intent

Parents have access to the facility and are reasonably assured of the safety and well-being of their children. Parents are made to feel welcome at the facility.

#### **Indicators**

1. Parents of children enrolled at the facility are granted entry at any time.

### What you need to know

Parents are encouraged to visit the facility at any time and are immediately admitted when their child is present. A statement advising parents of this is in the parent handbook.

Although parents have access to the facility, the doors may be locked during operational hours to ensure the safety of the children and the operator.

A secure facility has practices in place to ensure that operators are aware of who is entering and exiting the building at all times.

In the event of parental restrictions on visiting, parents should provide copies of any access orders, court orders or restraining orders to the facility. Copies are kept in the child's file.

For more information about custody and access in New Brunswick: Public Legal Education and Information Service of New Brunswick www.legal-info-legale.nb.ca/en/custody\_and\_access

# **10.2 Personal belongings**

## Licensing Regulation - Early Childhood Services Act

- **40**(1) An operator of a licensed facility shall ensure that personal belongings of a child receiving services at the licensed facility that are brought to the licensed facility, including combs, brushes, toothbrushes, towels, washcloths, bedding, pacifiers and soothers, are
  - (a) labelled with the name of the child,
  - (b) used only for the intended child, and
  - (c) stored separately for each child.

**40**(2) An operator of a licensed facility shall not permit pacifiers or soothers to be used with a neck string.

### Intent

Personal belongings are not shared in order to prevent and control communicable diseases and illness, including the spread of head and body lice.

### **Indicators**

- 1. Personal belongings brought into the facility are labelled with the name of the child, only used for the intended child and stored separately for each child.
- 2. Pacifiers or soothers do not have neck strings.

### What you need to know

Both prohibiting the sharing of personal belongings and storing them separately helps prevent the spread of communicable diseases (respiratory, gastrointestinal), lice and skin infections such as scabies and ringworm.

If used, toothbrushes are stored so that they:

- · do not drip on other toothbrushes;
- are separate from one another;
- · have the bristles turned up;
- · are exposed to the air to dry; and
- · are not in contact with any surface.

Toothpaste is not shared between children.

When the child is not using their pacifier or soother, it is kept in a container labelled with the child's name.

Pacifier or soother clips CSA approved may be used to attach pacifiers or soothers. The clips are removed prior to the child resting.

# 10.3 Diaper changing

## Licensing Regulation – Early Childhood Services Act

- **41**(1) A licensed facility at which services are provided to children who wear diapers shall have a sturdy surface that is
  - (a) equipped with rails or safety straps,
  - (b) covered with a non-absorbent layer,
  - (c) located separate from the food preparation area and not used for serving food, and
  - (d) no more than one metre from a sink.
- **41**(2) Despite subsection (1), a changing mat used exclusively for diaper changing may be used as a surface for diaper changing for children who are at least 15 months of age.

- **41**(3) An operator of a licensed facility shall
  - (a) post diaper changing procedures in diaper changing areas, and
  - (b) ensure that a child is never left unattended during diaper changing.

### Intent

The health and safety of young children are important when diaper changing. Operators must have a good understanding of safe diaper changing practices to ensure the transmission of communicable diseases is reduced.

### **Indicators**

- 1. Individual space is provided for diapers, creams and wipes for each child who is not toilet trained.
- 2. Changing surface is equipped with rails or safety straps and is covered with a non-absorbent layer.
- 3. When a changing mat is used, it is exclusively for diaper changing for children 15 months and older.
- 4. The changing area is located one metre or less from a sink, separated from the food preparation area and not used for serving food.
- 5. Diaper changing procedures are posted in a visible place in the diaper changing area.
- 6. Children are always supervised during diaper changing.

### What you need to know

Hand washing significantly reduces the transmission of infections. It is important for operators and children to wash their hands after toileting or changing diapers.

If the height and weight of a child younger than 15 months raises safety concerns, an operator must consult with ELC licensing staff to discuss alternate diaper changing procedures and be approved to use a changing mat.

Diaper changing procedures are found in Appendix 21.

Diapers must be checked for wetness or feces hourly or whenever a child indicates discomfort or exhibits behaviour that suggests a soiled or wet diaper.

Public Health recommends that disposable non-porous gloves be worn during diapering when:

- the adult has an open cut, sore or cracked skin
- the child has an open area on his/her skin
- the child has a known infection that is spread through feces

Waste baskets used to discard diapers must be tightly covered and lined with a disposable trash bag. Foot operated garbage cans are best for diaper disposal. This will help with eliminating contamination.

Diaper Genies are acceptable to use as long as children do not have access to them.

Diapers must not be disposed of in kitchen garbage containers or in waste baskets in children's play areas.

Operators may need to adapt equipment and diaper changing methods to provide diaper changing for children with additional support needs.

### 10.4 Medication

### Licensing Regulation - Early Childhood Services Act

- **46**(1) An operator of a licensed facility shall only administer medication to a child receiving services at the licensed facility in the following case:
  - (a) the medication is provided by the child's parent or guardian;
  - (b) the parent or guardian of the child gives written consent;
  - (c) if the medication is not prescribed, the medication is
    - (i) in the original container with the original label,
    - (ii) in a container with child protective caps, and
    - (iii) labelled with the child's name and the dosage; and
  - (d) if the medication is prescribed, the medication is labelled with the name of the physician, the instructions for use and the time period for use.
- **46**(2) Despite subsection (1), the operator of a licensed facility may administer acetaminophen to a child if the parent or guardian of the child gives written or oral consent.
- **46**(3) If consent is oral under subsection (2), the operator of a licensed facility shall require the parent or guardian to give a written acknowledgement when the child is picked up at the licensed facility that acetaminophen was administered with their consent.
- **46**(4) An operator of a licensed facility shall maintain a chronologically filed medication record of all medication administered to a child.

### Intent

Clear administration of medication procedures helps to ensure that children are receiving medication properly and safely.

Having parents provide written consent and instructions for administering medication ensures that operators are aware of the correct time(s) and correct dosage.

Medication provided in original containers and clearly labelled with the child's name ensures that it is given to the correct child and operators can also confirm that the medication is not out of date and is stored properly.

### **Indicators**

- 1. Medication is only provided by the child's parents,
- 2. Medication brought into the facility is in the original child safe container with a label showing the child's name and dosage.
- 3. Prescribed medication is labelled with the child's name, doctor's name, instructions for use and the time period for use.
- 4. The operator maintains written records when medications are administered.

### What you need to know

Administering medication requires particular attention to detail, proper record keeping and clear communication between the operator and parents.

In the case of routinely given medications, a parent may provide consent for an extended period of time.

Prior to administering acetaminophen provided by the operator, written parental consent is on file and parents are consulted for correct dosage. Parents sign a written acknowledgement, when picking up the child, that acetaminophen was administered with their oral consent. See Appendix 8.

The common brand name of acetaminophen is Tylenol. Ibuprofen (Advil, Motrin) is not included in the consent for acetaminophen.

Medication cannot be administered at a different dosage, frequency or to a different person than the information provided on the label of the container.

Medications are locked at all times. For further information about medication storage, see section 9.2.5.

EpiPens are the only medication that can be easily accessible to operators and are not required to be locked, however they are not accessible to children.

For further information regarding EpiPens: www.epipen.ca\_

For children with anaphylaxis and other life-threatening allergies, parents may complete an Allergy Management and Emergency Plan.

For children with a medical condition, such as asthma or diabetes, that may require ongoing health-care, parents may complete an Essential Routine Services and Emergency Plan.

If used, the operator and parents should review and update these plans annually. Operators must be well informed of any children in the facility who have medical conditions or significant allergies.

For life threatening allergies:

- Parents provide written consent to post the child's name and allergy information.
- If parents do not give permission to post the child's name, information regarding the life-threatening allergy, without the child's name, must still be visible.
- It may be simplest to eliminate those foods from menus altogether rather than risk exposure to those foods, as even traces of them can be deadly for some children. Where a food is excluded from the facility for example, peanuts a "No Nuts" notice is posted where it can be seen easily and reminds parents regularly.
- Operators must be aware of children who have a life-threatening allergy and their allergy management plan.

Operators must be informed of food allergies, special diet requirements or special feeding arrangements, and this information is clearly posted in any areas where food is prepared or served.

Suggested forms for medications and health plans may be found at:

- Appendix 4 Extreme Allergy Management and Emergency Plan
- Appendix 5 Essential Routine Services and Emergency Plan
- Appendix 6 Administration of Medication Consent and Record Form Ongoing Treatment
- Appendix 7 Administration of Medication Consent and Record Form

Administration of over-the-counter medications, homeopathic and herbal medications, must follow the same practices as any medication provided by parents. It is recommended that if parents request an over-the-counter medication be administered, there should be a written authorization from the health-care professional and the parent is to provide written permission. This is to include the child's name, the correct dosage and administration instructions.

Health Canada has issued the following guidelines for parents and caregivers:

- Do not use over-the-counter cough and cold medicines for children younger than six, as serious harm, including misuse, overdose and side-effects may occur.
- Always check the label first to make sure the medication is suitable for the child.
- Do not give children medications labelled only for adults.
- Do not give children aged six and older more than one kind of cough and cold medicine (unless under the advice of a healthcare practitioner). Combining medicines with the same ingredient(s) may cause side effects.

The following link contains information on cold/cough medication ingredients that are not to be given to children younger than six.

https://www.canada.ca/en/health-canada/services/drugs-medical-devices/concerns-about-children-s-medication.html

### 10.5 Proof of immunization

# Licensing Regulation – Early Childhood Services Act

- **47**(1) An operator of a licensed facility shall refuse admission to a child if satisfactory proof of the immunizations required by the *Public Health Act* or the regulations under that Act is not provided.
- **47**(2) Subsection (1) does not apply if a child's parent or quardian provides one of the following documents:
  - (a) a medical exemption, on a form provided by the Minister of Health, signed by a medical practitioner; or
  - (b) a written statement, signed by the parent or guardian, of the parent or guardian's objection for reasons of conscience or religious belief to the immunizations required by the *Public Health Act* or the regulations under that Act, on a form provided by the Minister of Health.

### Intent

Preventive health-care includes immunizations as outlined in the *Public Health Act*, subject to written objection by parents or medical exemption provided by a medical practitioner.

### **Indicators**

1. Immunization records, medical exemptions, or signed statements of objection from parents are in children's files.

### What you need to know

Operators are responsible to verify they have received proof of immunization, but are not responsible to determine the accuracy of the information.

School-age children have their immunization records verified at the school by the Public Health Nurse, so operators are not required to have immunization records of school-age children.

It is recommended that operators maintain a list of children who are not up to date on their required immunizations or who have not been immunized. It may be necessary to exclude these children from the facility in the event of an outbreak of a vaccine-preventable disease.

# 10.6 Prohibition of smoking

### Licensing Regulation - Early Childhood Services Act

- **42**(1) Smoking, within the meaning of the *Smoke-free Places Act*, is prohibited during operating hours on the premises of a licensed facility, including in the outdoor play area, during outings and while transporting the children receiving services at the licensed facility.
- **42**(2) If a licensed facility is located in a family dwelling, the operator shall advise a parent or guardian of each child receiving services at the licensed facility whether any person smokes outside operating hours at the licensed facility

### Intent

Children are protected from second-hand smoke by prohibiting smoking in those areas frequented by children.

### **Indicators**

- 1. Smoking and/or vaping is prohibited in inside and outside play areas, during outings and while transporting children.
- 2. If the licensed facility is located in a family dwelling, parents are informed if smoking occurs when the facility is closed.
- 3. There is no evidence observed during inspection visits of smoking occurring in the licensed facility or outdoor play area.

## What you need to know

The Smoke-Free Places Act prohibits smoking in public places frequented by children. Smoking is not permitted:

- within nine metres of doorways, windows and air intakes of enclosed public places and indoor workplaces, and;
- · on the grounds of a school;

- in an area of an outdoor public place on which playground equipment is situated, in a sports area of an outdoor public place or within 20 metres of any point on the perimeter of the playground equipment or the sports area; and
- in an indoor workplace.

Parents of children attending childcare facilities operated from the individual's home must be advised at the time of enrolment if the operator or any other individual residing in the home smokes.

E-cigarettes and water pipes are not permitted.

# **10.7 Fire safety**

### Licensing Regulation - Early Childhood Services Act

- **24**(1) For the purposes of subsection 20(1) of the Act, the following records and documents shall be maintained on the premises of a licensed facility:
  - (j) smoke alarm, smoke detector and fire extinguisher inspection and maintenance records;
  - (k) emergency evacuation and fire drill records;
- **28**(2) An operator of a licensed facility shall carry out emergency evacuation and fire drills monthly.
- **28**(4) The premises of an early learning and child care home shall be equipped with a smoke alarm, smoke detector and fire extinguisher as required by the *Fire Prevention Act*.

### Intent

Having an organized, complete evacuation plan and practicing monthly ensures the safety of the children and operator in the event of an emergency evacuation.

### **Indicators**

- 1. A smoke alarm, smoke detector and fire extinguisher are present and functioning, as required by the *Fire Prevention Act*.
- 2. Evidence of monthly emergency evacuation and fire drills is available for review.
- 3. The facility has an emergency evacuation plan that is clearly posted.

### What you need to know

### 10.7.1 Emergency evacuation plan

The local fire prevention officer should be consulted for assistance in developing the emergency evacuation plan.

The posted emergency evacuation plan:

- includes a diagrammed floor plan of the facility:
- shows the evacuation routes, all exits and meeting place outside of facility;
- is posted in a visible location at each exit and on each level;
- is clear enough that a visitor to the facility could easily follow the instructions.

Early learning and childcare home operators must have a written emergency plan that:

- · shows the evacuation routes;
- informs parent(s)/guardian(s) of the location of an alternate accommodation;
- informs parent(s)/guardian(s) of the transportation arrangements to the alternative accommodation;
- lists items to be taken out in an emergency (example, first aid kit, emergency contact information); and
- details how to physically remove children from the building, in particular, how to evacuate infants and children with additional support needs.

Operators should request annual training by fire prevention authorities on the proper use of fire extinguishers.

## 10.7.2 Emergency evacuation and fire drills

Written emergency evacuation and fire drill records, which contain the date and time of each drill and the number of children and adults involved, are maintained on site for at least one year. A suggested Emergency Evacuation and Fire Drill, Smoke Alarm, Smoke Detector and Fire Extinguisher Check form is found at Appendix 16.

Daily attendance records and child emergency contact information are located in an accessible consistent place and are taken out of the facility in an emergency.

Emergency evacuations and fire drills are conducted at various times of the day and throughout the year. The fire prevention officer should be consulted to develop protocols and to obtain best practices in conducting emergency evacuation and fire drills at the facility (such as if the fire alarm has to be sounded, how to conduct fire drills in the winter).

Fire prevention officers emphasise that priority be given to evacuating the building and ensuring the safety of children before attempting to extinguish or control a fire.

Children should wear proper indoor footwear at all times. Footwear may be removed during resting period.

### 10.7.3 General fire safety

Operators practice the following general fire safety precautions:

- where children are younger than five, install protective receptacle covers in electrical outlets or install tamper resistant outlets;
- · do not overload electrical receptacles;
- limit the use of extension cords; however, if used attach extension cords securely to the wall or floor; do not let them hang;
- keep lighters and matches inaccessible to children;
- · halls and stairways are well lit and free of objects;
- provide an operable flashlight for each floor level;
- protect children from access to fireplaces, free standing stoves (woodstoves), furnaces and hot water heaters;
- ensure that woodstoves used as a source of heat are installed according to manufacturer's specifications and installation has been verified by fire prevention officers; and
- check and clean chimneys and wood stoves annually.

# 10.8 First aid kit and telephone

### Licensing Regulation - Early Childhood Services Act

- An operator of a licensed facility shall have a first aid kit that is equipped with the contents prescribed by New Brunswick Regulation 2004-130 under the Occupational Health and Safety Act as a first aid kit that is not a personal, Type P first aid kit, and a telephone in working order
  - (a) on the premises of the licensed facility,
  - (b) at a private pool, if children receiving services at the licensed facility have access to the private pool, and
  - (c) on each outing.

### Intent

Immediate access to a well-stocked first aid kit ensures that care for minor injuries is provided as soon as possible.

A working telephone is required in the event of an emergency.

### **Indicators**

- 1. First aid kit and a working telephone are accessible:
  - · on the premises;
  - · when accessing a private pool; and
  - · on each outing.
- 2. Contents of first aid kits comply with Schedule C of regulation 2004-130 under the *Occupational Health and Safety Act* (O.C. 2004-471).

### What you need to know

First aid kits must:

- be easily accessible to operators, but out of reach of children;
- include up-to-date emergency records for the children in attendance;
- be maintained in a clean, dry and serviceable condition using Schedule C of regulation 2004-130 under the *Occupational Health and Safety Act* (O.C. 2004-471)\*\*;
- be checked regularly, restocked and changed if necessary (Appendix 17 provides a monthly checklist for maintaining the first aid kit);
- accompany operators and children whenever away from the facility, including when transporting children to and from school.

When in the outdoor play area, frequently used first aid supplies are available and easily accessible should an incident occur.

To assist in emergency situations, the facility's name and street address is posted close to each telephone or in an agreed on location. This will ensure correct information is provided to emergency personnel.

\*\*As per Schedule C of regulation 2004-130 under the *Occupational Health and Safety Act* (O.C. 2004-471), supplies for first aid kits includes the following items:

- 1 standard first aid manual (English and French)
- 1 record book and pen or pencil
- 1 pair of stainless steel scissors (140 mm)
- 1 pair of tweezers
- 1 variety pack of safety pins
- 24 sterile adhesive strip bandages (various sizes)
- 12 sterile gauze pads (various sizes)
- 2 rolls of sterile gauze bandage (75 mm x 9 m)
- 2 rolls of elastic bandages (7.5 cm)
- 4 sterile compress dressings (100 mm x 100 mm)
- 6 triangular bandages (1 m)
- 2 rolls of adhesive tape (25 mm x 9 m)
- 4 burn dressings (various sizes)
- 6 abdominal dressings individually wrapped (20 cm x 25 cm)
- 12 antiseptic cleansing towelettes individually wrapped (14 cm x 19 cm)
- 6 individual packages of sugar
- 1 container of antiseptic disinfectant for the skin (not iodine)
- 1 water soluble burn treatment (55 g tube or more)
- 6 pairs of disposable gloves (latex or vinyl)
- 1 face shield with a one-way valve (disposable)
- 1 package of cotton tipped applicators
- 12 hand wipes or 1 bottle of hand cleaner
- 1 shock blanket
- Several puncture resistant plastic bags

# 10.9 Transportation of children

# Licensing Regulation – Early Childhood Services Act

- For the purposes of section 17 of the Act, the requirements with respect to the transportation of children are as follows:
  - (c) the driver of a motor vehicle and the motor vehicle must be in compliance with the *Motor Vehicle*Act and the regulations under that Act; and
  - (d) the motor vehicle must be equipped with
    - (i) a record of emergency contacts for each child receiving services at the licensed facility, and
    - (ii) a first aid kit that is equipped with the contents prescribed by New Brunswick Regulation 2004-130 under the *Occupational Health and Safety Act*, as a first aid kit that is not a personal, Type P first aid kit.

### Intent

Compliance with the *Motor Vehicle Act* increases the safety of children being transported in a vehicle.

A first aid kit and emergency contacts for each child available in every vehicle helps in the event of an emergency.

### **Indicators**

- 1. Drivers are in compliance with the *Motor Vehicle Act* and the regulations under that Act
- 2. Each vehicle is equipped with:
  - · Emergency contacts for each child
  - A first aid kit

# What you need to know

Operators comply with the *Motor Vehicle Act* and its regulations in regard to driver qualifications, use of infant seat, booster seats and/or seat belts and the registration and inspection of the vehicle.

The Motor Vehicle Act: http://laws.gnb.ca/en/ShowTdm/cs/M-17//

For more information about child car seat safety, see the following:

Justice and Public Safety: http://www2.gnb.ca/content/gnb/en/departments/jps/public\_safety/content/drivers\_vehicles/content/booster\_seats.html

Transport Canada: https://www.canada.ca/en/services/transport/road/child-car-seat-safety.html

The *Motor Vehicle Act* Regulation 83-163 says that a child must be properly secured in a child seat until the child reaches at least one of the following:

- 9 years old
- 36 kg
- 145 cm

Operators are to advise their vehicle insurance company if transporting children to ensure adequate coverage.

When planning outings operators are to consider:

- · how children will be transported;
- the distance and time required to transport children to ensure it is developmentally appropriate;
- the risks associated;
- if the outing is appropriate for the ages and development of the children; and
- how the children will be kept safe during the outing.

Parents should transport their own children to activities outside of the facility.

Public transportation may be used when or where available.

Operators develop a transportation policy outlining the point at which the facility assumes responsibility for the child, for example, children walking to and from school unsupervised. Parents sign a consent form regarding their children walking unsupervised.

### **10.10 Pools**

# Licensing Regulation – Early Childhood Services Act

- 34(1) An operator of a licensed facility shall not permit a child receiving services at the licensed facility access to a private pool without a filtration and chlorination system.
- 34(2) Access to a private pool with a filtration and chlorination system by a child receiving services at a licensed facility is permitted in the following circumstances:
  - (b) the pool is enclosed with a fence at least 1.52 m in height in addition to the fence enclosing the outdoor play area;
  - (c) the following equipment is accessible to the educators:
    - (i) an electrically insulated or non-conducting reaching pole;
    - (ii) a throwing line with a buoyant aid; and
    - (iii) a record of emergency contacts for each child; and
  - (d) a sign is posted near the pool indicating the deep and shallow ends.
- 34(3) When access to a private pool is permitted, the Minister shall require that the operator obtain and maintain additional liability insurance and demonstrate this fact to the Minister.
- 34(6) Access to a public pool or a public swimming area by a child receiving services at a licensed facility is permitted if there is a lifeguard on duty.

### Intent

Clear guidelines reduce the risk of drowning and injury to children in and around water.

### **Indicators**

- 1. Private pools have a filtration and chlorination system.
- 2. When accessing a private pool:
  - there is a separate fence of 1.52 metres in height enclosing the pool
  - the operator has access to:
    - · a reaching pole that is insulated or non-conducting;
    - · a throwing line with a buoyant aid; and
    - · the emergency contacts for each child.
  - a sign is posted indicating the deep and shallow ends.
- 3. The operator demonstrates the appropriate liability insurance.
- 4. A lifeguard is on duty when accessing a public pool or public swimming area.

### What you need to know

It is important to understand the risks involved in providing water based activities such as swimming pools, lakes, etc.

When attending a pool with infants and preschool children, operators enter the water and must be positioned so they are at an arm's length of the children at all times.

Portable wading pools are not permitted as stated in the Public Health Inspection Standards (Nov. 2015) - Appendix 36.

# **10.11 Trampolines**

# Licensing Regulation - Early Childhood Services Act

An operator of a licensed facility shall not permit a child receiving services at the licensed facility access to a trampoline.

### Intent

There is a serious risk of injury to children using trampolines and restricting their use helps to keep children safe from injuries.

### **Indicators**

1. Children are not observed using trampolines.

# What you need to know

Trampolines and mini trampolines are not used, both on-site and during outings.

Mini exercise trampolines may be used for the rapeutic purposes for children when used under the direction of a physical or occupational therapist and with proper supervision.

### 10.12 Kitchen

### Licensing Regulation – Early Childhood Services Act

An operator of a licensed facility shall not permit a child receiving services at the licensed facility access to the kitchen unless the child is supervised.

### Intent

The safety of children is to be maintained at all times.

### **Indicators**

1. Children are not observed unsupervised in the kitchen.

# What you need to know

The kitchen space is inaccessible to children, except under supervised conditions such as cooking or special art activities.

The operator must be present with the children at all times.

# **10.13 Hot beverages**

## Licensing Regulation – Early Childhood Services Act

- An operator of a licensed facility shall not permit hot beverages in areas that are occupied by the children receiving services at the licensed facility, including the outdoor play area, unless
  - (a) the beverage is in a spill-proof container, and
  - (b) the container is kept out of the reach of infants and children who are two years of age..

### Intent

When hot beverages are in a spill-proof containers and are kept out of the reach of children, it reduces the likelihood of burns.

### **Indicators**

- 1. Operators ensure hot beverages are in spill-proof containers with secured covers.
- 2. Operators ensure hot beverages are kept out of reach of infants and 2-year-olds.

# 11.1 Management of Illness

### Licensing Regulation - Early Childhood Services Act

- **45**(1) An operator of a licensed facility shall require a parent or guardian of a child receiving services at the licensed facility to
  - (a) notify the licensed facility if the child will be absent, and
  - (b) indicate whether the absence is due to illness or otherwise.
- **45**(2) If a child is ill while receiving services at a licensed facility, an operator shall
  - (a) provide supervised care to the child in an area separate from the other children,
  - (b) notify the child's parent or guardian and require that the child be picked up within one hour of notification, and
  - (c) obtain the necessary medical assistance, if required.
- **45**(3) If a child has or may be affected by a disease that is required to be reported under the *Public Health*Act and the regulations under that Act by the operator of a licensed facility, the operator shall
  - (a) complete the forms provided by the Minister, and
  - (b) inform all parents or quardians of the children that a child has or may be affected by the disease.

### Intent

Containing the potential spread of disease and preventing and/or managing an outbreak is imperative in protecting children and operators.

### **Indicators**

- 1. The parent handbook advises parents to notify the facility if the child is absent and if the absence is due to illness or another reason.
- 2. Children who are ill are:
  - · separated from other children while still being supervised;
  - picked up within one hour of notification, as evidenced on the potential illness form.
- 3. Medical assistance, if required, is obtained for children who become ill.
- 4. Management of potential illness forms are evident in child files.
- 5. Parents are advised when a child has a communicable disease or illness.

### What you need to know

The management of illness in ELC facilities is an important issue for operators. Children, especially those younger than five, are susceptible to many types of communicable or infectious diseases. These illnesses can cause serious side-effects and even death if not managed properly. Operators play an important role in controlling and preventing illnesses in the ELC facility.

The Guidelines for the Prevention and Control of Communicable Diseases in Early Learning and Childcare (ELC) Facilities found in Appendix 37 are used in managing illness.

The following have been developed to assist with the management of illness in ELC facilities:

- Daily Information Sheet (for children 23 months and under) Appendix 9
- ELC Facility Attendance Record Appendix 10
- Potential Illness Report Form Appendix 11
- Return After Exclusion Form Appendix 12
- Notice of Illness Form Appendix 13
- Managing Illness in ELC Facilities Parent's/Guardian's Role Appendix 14
- New Brunswick Guide for Exclusion of Children in Early Learning and Childcare Facilities Appendix
  B of the Guidelines for the Prevention and Control of Communicable Diseases in Early Learning and
  Childcare (ELC) Facilities Appendix 37

Children's absences are recorded on the attendance sheet and illness reasons indicated.

A separate area for isolation may be a place within the play area but away from other children, ensuring that the ill child is supervised. This ensures minimal exposure to other children.

Operators and children follow proper hand washing procedures as found in the Public Health Inspection Standards (November 2015), Appendix 36, and the *Guidelines for the Prevention and Control of Communicable Diseases in Early Learning and Childcare (ELC) Facilities*, Appendix 37.

If a communicable disease is identified, parents are informed and a notice is posted at all entrances to the facility as soon as reasonably possible.

The Department of Health may recommend that the facility close during a communicable disease outbreak.

Hand washing is the most effective way of preventing the spread of infections in childcare settings. Hand washing signs must be posted where ever hands are washed.

Hot and cold running water must be available at hand washing sinks. A supply of liquid soap in a pump or wall mounted dispenser is required at all sinks where hand washing occurs. Paper towel should also be available for drying hands.

To avoid scalding, hot water temperature at sinks where children's wash their hands must not exceed 49° C.

If sinks and soap dispensers are out of reach for children, a secure step must be provided so children can independently access them.

### 11.2 Pets in the ELC home

Pets may be a positive experience for children in an ELC home; however, certain precautions are necessary to keep children safe and secure. Whenever pets are present in the ELC home, the operator should ensure that:

- parents are advised of pets or any intent to add pets to the home
- animals have a friendly temperament for interacting with children
- · children are not frightened by the animals
- children wash their hands after feeding and handling pets
- children handle pets under adult supervision
- · children are taught how to safely interact with the animals
- animals are healthy and free of any diseases
- proof of current vaccinations is provided as verified by a licensed veterinarian
- · dogs and cats are on a program to control worms, fleas and ticks
- cat litter is:
  - changed and scooped regularly
  - · kept out of children's play area
  - · out of reach of children
- the living quarters of caged animals are enclosed and kept clean (e.g. birds, hamsters, gerbils)
- the animal's living quarters are kept away from food areas
- animal food and feeding dishes are out of children's reach
- · fish are kept in covered aquariums
- pets are not permitted in the kitchen area when food is being prepared or children are eating
- to prevent contamination, dogs are not permitted to use the children's outdoor play area for elimination
- any bite, attack or significant scratch by an animal is immediately reported to ELC licensing staff

The following animals are NOT permitted in ELC homes where infants and children under 5 years of age are present:

- reptiles (e.g. turtles, lizards, snakes, and iguanas)
- amphibians (e.g. frogs, toads, newts, and salamanders)
- baby chicks or chickens
- baby ducklings or ducks

Raccoons, skunks, bats, monkeys and other wild animals are not permitted in ELC homes.

# **Section 12: Nutrition**

### Licensing Regulation – Early Childhood Services Act

- **48**(1) An operator of a licensed facility shall serve
  - (a) a snack at least every three hours,
  - (b) a meal at each recognized meal period, and
  - (c) drinking water throughout the day.
- **48**(2) An operator of a licensed facility may supply food to a child receiving services at the licensed facility that a parent or guardian of the child brings from the child's home if the food is labelled with the child's name and refrigerated, as required.
- **48**(3) An operator of a licensed facility shall provide weekly menus to a parent or guardian of a child at least three days in advance of serving the food and shall modify the food served in the case of special nutritional requirements of a child.
- **48**(4) If an infant is receiving services at a licensed facility, the operator shall
  - (a) hold the bottle at all times during the feeding of an infant who is bottle fed unless the infant is able to hold the bottle himself or herself.
  - (b) ensure that an infant who is bottle-fed is not fed in a crib,
  - (c) supervise an infant while he or she eats or drinks, and
  - (d) ensure that each bottle is stored with a cover in the refrigerator.
- **48**(5) If more than one bottle-fed infant is receiving services at a licensed facility, the operator shall ensure that each bottle is
  - (a) labelled with the child's name, and
  - (b) used only for the intended child,
- **48**(6) An operator of a licensed facility shall post information relating to any allergies of the children in the food preparation area.

#### Intent

Parents are aware of the food that is planned for meals and snacks.

### **Indicators**

- 1. Snacks are served at least every three hours and meals at meal times.
- 2. Drinking water is provided throughout the day.
- 3. Food brought from home is labelled with the child's name and refrigerated, as required.
- 4. Weekly menus are given to parents at least three days prior to serving the food.
- 5. Food served is modified for children with special nutritional requirements.

- 6. Infants who cannot hold their own bottles are observed being held during bottle feedings and are supervised at all times when eating or drinking.
- 7. Infant bottles are labelled with the child's name, used for the intended child, stored with a cover and refrigerated.
- 8. Allergy information on any child is posted in the food preparation area.

### What you need to know

A healthy eating policy for licensed early learning and childcare facilities in New Brunswick is under development. Additional information will be added to this section following the implementation of this policy.

### 12.1 General information

Lunches brought from home are stored in refrigerators or contain ice packs from home to ensure that they are kept cold.

A supply of healthy snacks should be available to give to children who are regularly not provided with enough food or the food brought from home does not meet nutritional requirements. For information on Ideas for Healthy Snacks see Appendix 26.

Where food brought from home does not consistently meet either nutritional or food safety requirements, the operator has a responsibility to discuss and resolve the situation with the parent.

Operators maintain a current dated menu plan providing a record of what food items are served each day. Substitutions are documented and maintained on file.

Posting menus in advance informs parents of food their child is eating while at the facility. Posting changes to the menu (meals and snacks) further informs parents.

Tracking of food intake is particularly important during the early years when children may show the first signs of a food allergy.

Labelling bottles and/or food provided by parents ensures children receive what has been brought in for them by their parent(s)/guardian(s).

Parents are advised if their child is consistently not eating or drinking.

# 12.2 Foods and beverages

Food served to children is varied, nutritious and follows the food guide as recognized by Health Canada. For more information on creating menus see:

Appendix 27 Menus and Recipes

Appendix 28 Menu Planning Checklist

Appendix 29 Healthy Substitutions

The % Daily Value (% DV) can help you make informed food choices. You may use the % DV to **compare** two different food products and make a better choice for you. Or you can use the % DV to choose products that are higher in the nutrients you want more of and lower in the nutrients you want less of.

For more information, please refer to the following Health Canada website link. http://www.hc-sc.gc.ca/fn-an/label-etiquet/nutrition/cons/dv-vq/index-eng.php

Serving sizes are appropriate for the needs of the children. See Appendix 30 Serving Sizes for Children.

Children do not need to be offered full size Food Guide servings at one eating occasion, rather Food Guide servings may be divided into smaller portions to be offered throughout the day. For information about appropriate serving sizes and Canada's Food Guide, please follow the links below:

- Eating Well with Canada's Food Guide
- My Food Guide Servings Tracker (2-3 year olds)

Paper copies of the food guide can be ordered, at no cost, from the Health Canada website.

Foods and beverages served are consistent with Foods to Serve Appendix 31, Foods Not to Serve Appendix 32 and Choking Prevention information Appendix 33.

# 12.3 Special dietary considerations

If a child has a life-threatening allergy to specific foods (for example, peanuts or shellfish), the operator has a responsibility to ensure these items are not served or permitted in the facility.

Special dietary considerations, including allergy and anaphylaxis (severe allergy reaction) information specific to an individual child is communicated to the operator and posted in areas where food is prepared and consumed.

# 12.4 Infant feeding and breastfeeding

Infants younger than 12 months are fed on demand and in accordance with written instructions from the parent regarding the amount, type and scheduling of feedings. See Infant Feeding Plan - Appendix 34 for more information.

Operators welcome mothers to breastfeed or express milk at their convenience.

Operators work with families to develop an infant feeding plan to address the storage and feeding of breast milk or infant formula.

Heating breast milk or infant formula in the microwave is not recommended. Studies have shown that microwaves heat baby's milk and food unevenly. This results in "hot spots" that can scald a baby's mouth and throat.

Pasteurized whole cow's milk (i.e., 3.25 % milk fat) may be introduced to infants who are nine to 12 months and continued to 24 months. Children 24 months and older can have lower fat pasteurized cow's milk. Cow's milk is not provided to infants younger than nine months old.

Both the propping of bottles, in cribs, playpens or infants seats, and the carrying of bottles by young children are prohibited.

Infants and children are not permitted to have bottles at nap time or while resting.

### 12.5 Meal and snack time environment

Meals and snacks are served in a relaxing and enjoyable environment and are not hurried. Operators actively engage in conversation with the children during meal times, creating a natural home-like environment.

When eating with children, operators model healthy eating practices.

Infants sit in high chairs, appropriate for the child's development, as the operator helps them learn to feed themselves. They do not sit on laps, in cribs, in car seats, etc. for feeding. There is one high chair or feeding seat for every child.

As toddlers develop gross motor control, and are able to sit and eat at a table with other children they are transitioned out of high chairs.

Tables, chairs and utensils are appropriate and properly sized for the children's ages and abilities.

If children seem to slip in chairs, it may help to place rubber matting in the chair seat. Rubber matting may also help keep plates and bowls from slipping on the table.

Children decide when they are finished eating. They are not forced or coerced to eat and denying food is not permitted. Operators encourage children to respond to feelings of hunger and fullness and do not make them finish eating the food being served. Opportunities for children to learn about food and nutrition are provided (for example, setting the table, planting a garden, composting, trying new foods from different cultures, using local vegetables and fruit, age-appropriate cooking activities).

**CHEFS!** Is a toolkit that helps teach children and youth about healthy eating and physical activity while they learn the fun of cooking. See Appendix 35 for more information.

# 12.6 Information for parents

Parents are often interested in what their children are eating and are looking for information on providing healthy and nutritious options for their families. The following resources may be shared with parents to help them understand how your menus are developed and/or to give them ideas when they pack healthy and safe lunches and snacks for their children.

- Appendix 26: Ideas for Healthy Snacks
- Appendix 28: Menu Planning Checklist
- · Appendix 29: Healthy Substitutions
- Appendix 31 : Foods to Serve
- Appendix 32: Foods Not to Serve
- Appendix 33 : Choking Prevention

New parents should have received a copy of the Loving Care series of books in the hospital when their child was born. Loving Care provides information on child health, growth, development and safety.

- Loving Care Birth-6 months
- Loving Care 6-12 months
- Loving Care 1-3 years

# Section 13: Extended Hour or Overnight Services

### Licensing Regulation – Early Childhood Services Act

- **17**(1) An applicant for a licence or a licensee may apply to the Minister on a form provided by the Minister for an approval to provide extended hour services or overnight services.
- **17**(2) Despite any provision of this Regulation, the approval granted by the Minister under subsection (1) is subject to the following requirements:
  - (b) a child shall not be admitted to a licensed facility after 8 p.m. and shall not receive services for more than 14 consecutive hours in a 24-hour period;
  - (d) the sleep area shall
    - (i) be equipped with the following:
      - (A) a crib for each infant receiving services in accordance with the Cribs, Cradles and Bassinets Regulations under the *Canada Consumer Product Safety Act* (Canada); and
      - (B) a bed or cot with a mattress at least 15.2 cm for each child, other than an infant, receiving services;
    - (ii) be in a separate area; and
    - (iii) allow for a space of at least 46 cm between each crib, bed or cot.

### Intent

Children are provided with a safe and secure environment while requiring childcare outside of traditional hours and/or for overnight services.

### **Indicators**

- 1. An application has been received to provide extended hour or overnight services.
- 2. Children are not allowed entry after 8 p.m.
- 3. Attendance records demonstrate that children are not present more than 14 consecutive hours.
- 4. There is an approved crib for each child younger than two years of age.
- 5. There is a cot or bed with a mattress at least 15.2 cm for each child two years of age and older.
- 6. The rest area is in a separate area.
- 7. The space between each crib, bed or cot is at least 46 cm.

# What you need to know

As overnight childcare requires additional considerations an application is submitted to ELC licensing staff prior to operating. Applicants demonstrate the capacity to provide safe, nurturing and quality overnight services.

Insurance coverage must include coverage for extended hour services and/or overnight services.

The licence clearly states the facility is licensed for extended hour services or overnight services.

Operators providing extended and overnight services must add the following to the parent handbook:

- the extended hours of operation as indicated on the licence;
- children are not admitted to the service after 8 p.m.;
- no child may be in attendance for more than 14 consecutive hours in a 24-hour period;
- the fee schedule for the extended hour services or overnight services;
- if the facility does not prepare an evening meal, a bedtime snack and/or breakfast, parents must agree to provide these for their children.

Menus include a meal at the recognized supper hour, a bedtime snack for all children in attendance and breakfast where overnight services have been provided.

Eating times and schedules are consistent with patterns established in consultation with the parents.

### The evening schedule:

- permits a family atmosphere; allowing siblings to be together;
- ensures that children's bedtimes are scheduled in consultation with their parent;
- ensures that outdoor play time is available to the children during daylight hours;
- permits television and/or movies only with parental permission on the types of shows and movies that are available.

Operators are not required to provide bathing or showering however, when bathing or showering is provided, operators ensure that:

- bathtubs and showers are cleaned and sanitized after each use;
- children are bathed individually;
- children are supervised according to their developmental needs;
- · bathtubs are equipped with a nonskid mat or surface;
- children are not bathed in sinks; and
- · written parental consent is obtained.

### Operators ensure that:

- sleepwear is not shared among children;
- children must sleep in garments provided by their parent;
- bedding is provided by the facility; including blankets and a bottom sheet that must be secured and completely cover the sleeping surface;
- all children have the personal effects needed to clean up and prepare for sleep, including an individual wash cloth, towel, toothbrush, toothpaste.

Operators are not required to be awake during the night, but are available to respond to the needs of children. Operators must not be under the influence of alcohol or drugs while being responsible for children. Monitors are used to alert operators of children who need assistance.

While children are sleeping, lighting is maintained at a level that will enable children to be visible.

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\*\*Mandatory Forms

# **Forms**

# Appendix 1 - Child Profile



Early Learning and Childcare Facility Child Profile

Registration Date		Start Date		
Child's Name	First	Last	Male	Female
Date of Birth	Medicare #	Expiry Date	<u> </u>	
Address Street	t Apt#	City/Town	Prov	Postal Code
Parent/Guardian Name		Email Address	Home	Telephone Number
Address Street (if different from child's)	t Apt#	City/Town	Prov	Postal Code
Place of Work		Work Telephone Number	Cell To	elephone Number
Parent/Guardian Name		Email Address	Home	Telephone Number
Address Street (if different from child's)	Apt#	City/Town	Prov	Postal Code
Place of Work		Work Telephone Number	Cell To	elephone Number
Child's Living Arrangement	nt			
Other than you, who has	permission to pick up yo	our child?		
Name	Relationship	Address		Daytime Telephone Number

If changing pick up arrangements parents must inform the facility prior to the child being picked up.

Name  Name  Name  Appropriate paperwork such as custody papers must be attached if a parent is not permitted to have contact with the child. Please discuss with the operator/administrator.  Two emergency contacts (other than parents/guardians)  Must be able to respond within one hour if parent(s)/guardian(s) cannot be reached  Relationship  Relationship  Address  Daytime Telephone Number  Altergy Alert:  Please list any serious allergies  Are any of the above allergies severe enough to require Epipen, medications, or emergency treatment?  Yes   No    If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes   No    If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner  Telephone Number	
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Are any of the above allergies severe enough to require Epipen, medications, or emergency treatment?  Yes  No    If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes  No    If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
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Are any of the above allergies severe enough to require Epipen, medications, or emergency treatment?  Yes  No    If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes  No    If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	Child's health record
Are any of the above allergies severe enough to require Epipen, medications, or emergency treatment?  Yes	
Yes □ No □  If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	ALLERGY ALERT: Please list any serious allergies
Yes □ No □  If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
Yes □ No □  If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
Yes □ No □  If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	<del></del>
If yes, please complete an Allergy Management and Emergency Plan available from the operator.  Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	Are any of the above allergies severe enough to require Epipen, medications, or emergency treatment?
Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	Yes □ No □
Please list any food, medication or contact allergies (non-life threatening)  Does your child require any essential routine services on a regular basis as part of a daily routine such as, catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	If yes, please complete an Allergy Management and Emergency Plan available from the operator.
catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
catheterization, special hygiene procedures, on-going administration of medication, or ongoing observation of certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
certain health conditions, such as diabetes, to determine when intervention is needed?  Yes □ No □  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
Yes D No D  If yes, please complete an Essential Routine Services and Emergency Plan available from the operator.  Name of Medical Practitioner	
Name of Medical Practitioner	
Name of Medical Practitioner	If was inlease complete an Essential Poutine Services and Emergency Dian available from the energics
releptione number	
	relephone number
Address	Address

Page **2** of **4** 

Medical History: Please indicate if your ch	nild has	s <b>had</b> a	any of the following:	Medical History: Please indicate if your child has had any of the following:					
·	Yes	No	•	Yes	No				
Measles			Rubella						
Mumps			Chicken Pox						
Meningitis			Pertussis (Whooping Cough)						
Health Status: Indicate if your child has a	ny of t	he follo		Jan Barrier Ba					
•	Yes	No		Yes	No				
Asthma			Diabetes						
Eczema/Psoriasis			Epilepsy/Seizures						
Other:			Other:						
Ongoing Medical Treatment: Please indic	ate an	y ongo	ing medical treatment your child may need	Í					
(you will be required to complete an Admini	stratio	n of Me	edication form)						
Name of medication			Dosage						
Condition being treated									
Name of medication			Dosage						
Condition being treated									
Immunizations: In accordance with subs					ublic				
Health Act, proof of immunization must	be pro	vided	for each child attending an early learning	ig and					
childcare facility for the following:									
diptheria rubella			mumps						
tetanus varicella			measles						
polio meningococca			Haemophilus influenza type B						
pertussis pneumococca	pneumococcal disease								
Where proof is not provided you must ha									
	ed by t	he Min	ister of Health, that is signed by a medica	i practi	tioner				
or nurse practitioner, or									
- a written statement, on a form provided by the Minister of Health, signed by the parent or legal guardian of									
his or her objections to the immunizations required by the Minister.									
Note: Dublic Health will periodically review shild files to answer immunications are consulate as well-									
Note: Public Health will periodically review child files to ensure immunizations are complete or waivers are present.									
Are there any activities in which your child cannot medically participate?									
Are there any activities in which your child cannot medically participate?									
Please list any dietary restrictions (including those for medical, cultural, religious reasons):									
Thease list arry dictary restrictions (including	, 111036	, 101 1116	odicai, cuiturai, religious reasoris).						

Please advise the operator/administrator immediately of any changes to your child's health.

#### Preschool/childcare history

Has your child attended preschool/childcare before? Yes □ No □	
If yes, for how long? 6 months $\square$ 1 year $\square$ 2 years $\square$ more than 2 years	ears 🗆
If yes, please describe your child's experience:	
Child development	
Self Help: Does your child need help with the following? If yes, in what way?	
Dressing/Undressing:	
Eating:	
Toileting:	
Handwashing/Toothbrushing:	
Other: (ie: gross and/or fine motor skills	
Are there any hints/suggestions that will make your child's transition to the fac-	cility a positive one?
Tell us a few things about your child	
What does your child like to do? (i.e.: look at books, listen to music, play with other c	hildren, play
outdoors/indoors, toys, climb/run/jump, paint, computer, imaginative play/dress-up)	
Is there anything else you would like to share with us about your child?	
Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

Information on this form is to be verified for accuracy annually. Please immediately advise the operator/administrator of any changes.



Early Learning and Childcare Facility
Consent form

#### Please complete this consent form and return to the facility

Name of ELC	C facility:				
Child's Nam	е	Date			
Consent for	emergency care and transportation				
authorize the	e medical treatment is necessary, due to circumstance early learning and childcare staff to take whatever ememy child while in their care.				
	this may involve applying first aid, contacting a medical transporting my child to a hospital, including the possible				
	that this may be necessary prior to contacting me a cluding emergency transportation is my responsibility.	nd that any expense incurred for such			
Parent/Guar	dian Signature	Date			
Parent/Guardian Signature Date					
P	LEASE INDICATE YOUR CONSENT AND SIGN AT TH	E BOTTOM OF THE FORM			
Administrati	on of acetaminophen consent				
□ Yes □ No	I give consent for acetaminophen to be administered to contacted first to provide oral consent and to indicate				
	On picking up my child at the facility I understand I will be asked to sign a written acknowledgement that acetaminophen was administered with my consent.				
	I also understand that the acetaminophen is to relieve my child of minor discomfort or to help lower a fever while I am on my way to pick them up (within one hour).				
	Reason: Fever aboveCelsius Body ache				
	Other				
Consent for	my child to be taken on walking outings/excursions	off the premises			
□ Yes □ No	As a part of the day, walking trips may be taken off to Consent will provide more flexibility and allow for more				
	Consent forms for any motor transportation trips will be	e separate and for each outing.			
	I give permission for my child to be able to participate	in the walking trips off the premises.			

Consent for v	videographing and photographs				
□ Yes □ No	I give consent for my child to be videographed or photographed participating in the facility for the following reasons:				
	☐ Yes ☐ No Social Media such as Facebook				
	□ Yes □No Facility's website				
	☐ Yes ☐No Publication				
	☐ Yes ☐No Illustrate child's learning within the facil	lity			
Consent for o	child to walk/bicycle to and from school unattended	(school-age children only)			
□ Yes □ No	I give consent for my school-aged child to travel to and If my child does not arrive at the facility within the pre-corother procedures will be initiated to find him/her. I was a school of the consense of t	determined time period, the missing child			
□ N/A	absent.				
Consent for t	ransportation to and from school (school-age childr	ren only)			
□ Yes □ No	I authorize the operator to transport my child to and vehicle or by walking. Where applicable, appropriate s				
□ N/A					
Consent for I	pathing				
□ Yes □ No	I give permission to bathe my child if this becomes neowhile at the facility; either through play (paint, mud, sar				
□ N/A	Also applies to overnight care where bathing is part of the night time routine.				
	To ensure the health and safety of children who may require bathing, children must be:  • bathed individually and supervised according to developmental needs;  • never left unattended; and  • bathed as quickly as possible and dressed appropriately.				
	ballion de quienty de possible una discoura app	iophatoly.			
	Staff will supervise or bathe the child upon instructions of the parent according to their age, adhering to safety standards.				
	Bathtubs will be equipped with a nonskid mat or surface	e.			
□ Yes □ No	I have read, understand and been provided a copy of the	he facility's parent/guardian handbook.			
Parent/Guard	lian Signature	Date			
Parent/Guard	lian Signature	Date			



Early Learning and Childcare Facility
Denial of Access

i	s not to be provided with access to
(please print name of individual)	s not to be provided with access to
(please print name and date of birth of child	, nor any information regarding this child.
Attached is a copy of the court order that de	enies access of the above-named person to
I certify that this court order has not been rein effect.	evoked or amended, and remains valid and
I will notify the facility immediately should the	e order be varied or revoked.
I certify that the information provided by me	is true to the best of my knowledge.
Name (please print clearly)	Signature
Address	
Telephone number	 Date

WHEN COMPLETE, THIS FORM IS TO BE KEPT IN THE CHILD'S FILE AND MAINTAINED UNTIL IT NO LONGER APPLIES.

## Appendix 4 - Extreme Allergy Management and Emergency Plan



Early Learning and Childcare Facility Extreme Allergy Management and Emergency Plan

This plan is to be reviewed yearly. Any changes are to be reported immediately.

#### **PART I – CHILD INFORMATION**

IF YOUR CHILD HAS ALLERGIES THAT MAY LEAD TO ANAPHYLAXIS, THIS FORM IS TO BE COMPLETED.								
Anaphylaxis (Anaphylactic shock) is a severe allergic reaction that can involve several body systems and lead to death if left untreated. Anaphylaxis can result from reactions to foods, insect stings, medications, latex and other substances. The most common food triggers of anaphylaxis are peanut, tree nuts, shellfish, fish, milk, egg, wheat, soy and sesame. However, a wide variety of other foods have been known to trigger anaphylaxis. Trace amounts of an allergen can trigger a severe reaction.								
Child's Name First	Last		Da	te of Birth		Medicare Number		
Address Street A	Apt#	City	y/Tow	vn P	rovince	Postal Code		
Parent/Guardian Name	Cell Telephone	Num	ber	Work Telephon	e Numbe	r Home Telephone Number		
Parent/Guardian Name	Cell Telephone	Num	ber	Work Telephon	e Numbe	r Home Telephone Number		
Other Contact Name	Cell Telephone Number		ber	Work Telephone Number		r Home Telephone Number		
What type of epinephrine auto-inju	What type of epinephrine auto-injector (EpiPen©) does your child require?							
Junior (15 kg t			-1-1-		ar (30 kg	g or more)		
Allergy Information (to be comple	•			•	NI a			
Is this child at risk of anaphylactic re	action?	_ Y	'es		No			
If yes, to what?		п у	·		NI-			
Any other significant allergies?		□ Y	es	Ц	No			
If yes, describe:								
EpiPen® (epinephrine) recommended?		□ Y	es		No			
Physician Name			Tele	ephone Numbe	r			
Physician Signature			Dat	e				



PART II – EXTREME ALLERGY MANAGEMENT PLAN – how to minimize risk				
This part is to be completed by the ELC facility operator in collaboration with the parent or guardian.				
Parent's or guardians responsibilities:				
Operator responsibilities:				



	Child's Name:
PART I	II – EMERGENCY RESPONSE PLAN
This pa adminis	rt is to be completed by the ELC facility operator in collaboration with the parent or guardian. (eg. ster EpiPen®; call an ambulance or drive to hospital; contact parents, etc).
Parent'	's or guardians responsibilities:
☐ areas	I agree to have relevant information about my child's health/medical condition posted in strategic
arous	of the facility (e.g. parent board, kitchen, play areas, staff room) to assist staff in providing emergency services to my child. I will provide a photo of my child for this purpose.
	I do not wish information about my child to be posted in the facility.
Operat	or responsibilities:



Child's Name:

PART IV – SIGN-OFF				
I have read and understand the <i>Extreme Allergy Management and Emergency Plan</i> of information relevant to the service requested with those persons who must know i service.	_			
I hereby request and authorize facility staff to provide the care described above to m facility staff have no medical qualifications and will perform the requested service in scope of the training received in accordance with this agreement.	•			
In the event of an emergency, I authorize facility staff to administer the medication spand to obtain suitable medical assistance. I agree to assume responsibility for all costreatment and transportation.	_			
I understand the facility cannot guarantee an environment that is 100% allergen free				
I hereby acknowledge my responsibilities, as set out in this agreement and agree to of my ability.	carry these out to the best			
I agree to notify the facility in writing of any changes to the information provided on the	nis form.			
I agree that the information provided on this form will be shared on a need-to-know be involved in the care of my child on behalf of the facility.	pasis with anyone who will			
I agree that the operator or his/her designate may contact my child's physician in the event of a medical emergency or should he/she require clarification about the facility's responsibilities as set out in this plan.				
□ Yes □ No				
Parent/Guardian Signature	Date			
Parent/Guardian Signature	Date			
I hereby acknowledge and accept my responsibilities and those of facility staff, as se	et out in this agreement.			
Early Learning and Childcare Facility Operator/Administrator Date				

Page **4** of **5** 



Child's Name:

ANNUAL REVIEW					
<b>Note:</b> if the requirements of the service requested have <i>Management and Emergency Plan</i> form. If no changes, reviewed with the parent/guardian.					
This plan has been reviewed and remains in effect for the	ne 202	20 y	ear without change.		
Parent/Guardian :	Date :				
Operator/Administrator :	Date :				
This plan has been reviewed and remains in effect for the	ne 202	20 y	ear without change.		
Parent/Guardian :	Date :				
Operator/Administrator :	Date :				
This plan has been reviewed and remains in effect for the		20 y	ear without change.		
Parent/Guardian :	Date :				
Operator/Administrator :	Date :				
This plan has been reviewed and remains in effect for the	ne 202	20 y	ear without change.		
Parent/Guardian :	Date :				
Operator/Administrator :	Date :				
	<u> </u>				

### Appendix 5 - Essential Routine Services and Emergency Plan



Early Learning and Childcare Facility Essential Routine Services and Emergency Plan

This plan is to be reviewed yearly. Any changes are to be reported immediately.

#### **PART I – CHILD INFORMATION**

Child's Name	First	Last	Date of Birth	Medicare Number	
Address	Street	Apt # City	/Town Province	Postal Code	
Parent/Guardiar	n Name	Cell Telephone Numl	ber   Work Telephone Number	Home Telephone Number	
Parent/Guardiar	n Name	Cell Telephone Numl	ber Work Telephone Number	er Home Telephone Number	
Other Contact N	lame	Cell Telephone Numl	ber Work Telephone Number	Home Telephone Number	
Description of	child's health/medica	Il condition(s):			

Page **1** of **5** 



Child's Name:	
---------------	--

PART II – ROUTINE CARE PLAN – complete Part II separately for each service required
Note: Provision of medication to manage an ongoing medical condition is considered an essential routine service.
Describe the care required:
How often is this required?
Child's ability to self-administer / self-care?
Any additional instructions: i.e. What apparatus is needed, if any? Care of apparatus. Storage/accessibility of medication.
Parent/guardian responsibilities:
Child responsibilities (if applicable):
Operator responsibilities:
Please provide any other information that would help us to understand your child's needs.

Page **2** of **5** 



Child's Name:		
---------------	--	--

PART III – EMERGENCY CAR	E PLAN – COMPLETE ONLY IF AN EME	RGENCY PLAN IS REQUIRED
medication is to be administered or under which the medication should	the ELC facility operator in collaboration we have an "as needed" basis, the written instructions be given. This could include the physical syming or the child's temperature. Simply indicating	s must clearly indicate the situations uptoms that must be present, the
Parent/guardian responsibilities		
Operator responsibilities:		
The staff listed below have rece professional, to provide the care	eived the necessary training, either from the as described previously.	e parent or a health care
□ All staff	Name	Position

Page 3 of 5



Child's Name:

PART IV - CONFIRMATION	
have read and understand the <i>Essential Routine Services and Emergency Plan</i> agasharing of information relevant to the service requested with those persons who must he service.	
hereby request and authorize facility staff to provide the care described above to m designated persons have no medical qualifications and will perform the requested so within the scope of the training received in accordance with this agreement.	y child. I understand the ervice in good faith and
In the event of an emergency, I authorize facility staff to administer the medication(sagreement and provided by me, and to obtain suitable medical assistance. I agree to all costs associated with medical treatment and transportation.	
hereby acknowledge my responsibilities, as set out in this agreement and agree to of my ability.	carry these out to the best
agree to notify the facility in writing of any changes to the information provided on the	nis form.
agree that the information provided on this form will be shared on a need-to-know be involved in the care of my child on behalf of the facility.	pasis with anyone who will
agree that the operator or his/her designate may contact my child's physician in the emergency or should he/she require clarification about the facility's responsibilities a	
Parent/Guardian Signature	Date
Parent/Guardian Signature	Date
hereby acknowledge and accept my responsibilities and those of facility staff, as se	et out in this agreement.
Early Learning and Childcare Facility Operator/Administrator	Date



	Child's Name: _	
ANNUAL REVIEW		
Note: if the requirements of the service requested have <i>Services and Emergency Plan</i> form. If no changes, use parent/guardian.		
This plan has been reviewed and remains in effect for the	ne 2020	year without change.
Parent/Guardian :	Date :	
Operator/Administrator :	Date :	
This plan has been reviewed and remains in effect for the	ne 2020	year without change.
Parent/Guardian :	Date :	
Operator/Administrator :	Date :	
This plan has been reviewed and remains in effect for the	ne 2020	year without change.
Parent/Guardian :	Date :	
Operator/Administrator :	Date :	
This plan has been reviewed and remains in effect for the	ne 2020	year without change.
Parent/Guardian :	Date :	
Operator/Administrator :	Date :	

Page 5 of 5

## Appendix 6 - Administration of Medication Consent and Record Form — On-going Treatment



Early Learning and Childcare Facility Administration of Medication Consent and Record Form **On-going Treatment** 

#### This form is valid for no more than 12 months. One form must be completed for each medication.

Child's Name F	irst	Last		Date of Birth
N 4		Danama	T. 1. 1	line4ine An Inn white
Medication		Dosage	How is med	lication to be given
Medication is to be admini	stered at the f	following times. (If the medication	is to be admir	nistered on an "as needed"
basis, the written instruction could include the physical	ons must clear symptoms tha	rly indicate the situations under what must be present, the behaviour led" or "as required" is not sufficien	nich the medio the child mus	cation should be given. This
tomporataror omipi) maior	g		,	
For the following period of	time			
Tor the following period of	unc			
Special Instructions (e.g. g	give with food)		Storage Instr	ructions (e.g. refrigerate)
Reason for medication				
reason for inculcation				
		H FOR WITH THIS MEDICATION	– parents ar	e to be notified immediately of
any of these side effects				
I give permission for the	administrati	on of the above medication, acc	ording to the	e instructions provided, to the
child listed above.				
Date of consent	Signature of	parent/guardian		
500 0T455 0T'			2471011	

Is the medication consent form complete?
Is the original prescription label on the medication container or is the medication in the original manufacturer's container?
Is the full name of the child on the container?
Is the prescription or over-the counter medication current and not expired?
Is the dose, name of medication, and frequency of administration on label consistent with the instructions above?

The section below must be completed and each administration of medication must be documented when it is given.

	was given		in th	ne amount of(Dosage)
(Nan	ne of child)	(Name of medi		(Dosage)
		Administration	Record	
Date	Name of Medication	Dose	Time	Full signature of person giving medication

Both sides of this form must be observed by staff when administering the medication

### Appendix 7 - Administration of Medication Consent and Record Form

Last

Dosage



Child's Name

Medication

### Early Learning and Childcare Facility Administration of Medication Consent and Record Form

Date of Birth

How is medication to be given

Start Date		Er	nd Date		Times and Frequency
Special Instruc	ctions (eg. give	with food)		Storage	e Instructions (refrigerate)
Reason for me	edication				
POSSIBLE SI these side eff		TO WATCH FOR	WITH THIS MEDICATIO	N – parents are t	o be notified immediately of any of
I give permiss above.	sion for the ad	Iministration of th	ne above medication, ac	cording to the in	structions provided, to the child listed
Date of conser	nt	Signature of pare	ent/guardian		
FOR STA	AFF REVIE	W PRIOR TO	ADMINISTERING	MEDICATIO	N:
Is the medi	cation cons	sent form com	plete?		
manufactu	rer's contai	ner?		tainer or is th	e medication in the original
Is the full n	ame of the	child on the c	ontainer?		
Is the preso	cription or o	over-the count	er medication curre	ent and not ex	pired?
	, name of d	rug, and frequ	ency of administra	tion on label	consistent with the instructions
above?					
above?			Administration	Record	
Date	Name (	of Medication	Administration Dose	Record Time	Full signature of person giving medication
	Name (	of Medication			
	Name (	of Medication			
	Name o	of Medication			
	Name (	of Medication			
	Name (	of Medication			
	Name o	of Medication			
	Name o	of Medication			
	Name o	of Medication			
	Name of	of Medication			
	Name o	of Medication			

### Appendix 8 - Administration of Acetaminophen Record



Early Learning and Childcare Facility Administration of Acetaminophen Record

- 1. Take the child's temperature and record it in the space provided below.
- 2. Contact the parent/guardian to discuss the child's symptoms and temperature and to receive the oral consent for administering acetaminophen. Be sure to have the parent/guardian confirm the dosage to be administered.
- 3. Advise the parent/guardian they must pick up their child within an hour.
- 4. Administer the medication in accordance with the parent's/guardians directions.
- 5. Complete a Potential Illness Form, to be signed by the parent/guardian on pick up.
- 6. Ensure the parent/guardian signs the appropriate space below upon their arrival at the facility to confirm they were consulted and are in agreement with the dosage given.

Date :	
Symptoms observed:	
Time temperature taken:	Temperature:
Name of parent/guardian contacted :	
Dosage consented to by parent/guardian:	
Dose given by staff:	Time given:
Staff signature	Parent/guardian signature
Date:	
Symptoms observed: Time temperature taken:	Temperature:
·	Temperature.
Name of parent/guardian contacted :	
Dosage consented to by parent/guardian:	<del>_</del>
Dose given by staff:	Time given:
Staff signature	Parent/guardian signature
	- and the great areas originates or
5.	
Date:	
Symptoms observed: Time temperature taken:	Tomporatura
·	Temperature:
Name of parent/guardian contacted :	
Dosage consented to by parent/guardian:	
Dose given by staff:	Time given:
Staff signature	Parent/guardian signature

### Appendix 9 - Daily Information Sheet — 5 day

Q		Daily Information Sheet	nation Sh	eet		Child's Name:					
Reinf	Ineamon		2 2 111011113 di			Facility Name:					
CI MIC	WICh					Week Date:					
		MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
EATING/FLUID AI	AM snack	Fluids / Bottles	AM snack	Fluids / Bottles	AM snack	Fluids / Bottles	AM snack	Fluids / Bottles	AM snack	Fluids / Bottles	es
	None Some		Some		Some		Some		None		
	A/N	□None □Some □All	□Most □N/A		□Most □N/A	□None □Some □All	□Most □N/A		□Most □N/A	□None □Some	■ □
		Time	-	Time	-	Time	-	Time	-	Time	
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C. I.											
COMMENTS											
STAFF											
IGNATURE											

### Appendix 9 − Daily Information Sheet − 7 day

q			Daily	Daily Information Sheet	eet			Child's	Child's Name:					
Bruhswich	×		ONLY for cl	ONLY for children age 23 months and under	d under			Facility	Facility Name:			Week	Week Date:	
INFORMATION		MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY
EATING/FLUID	Breakfast	Fluids / Bottles	Breakfast	Fluids / Bottles	Breakfast	Fluids / Bottles	Breakfast	Fluids / Bottles	Breakfast	Fluids / Bottles	Breakfast	Fluids / Bottles	Breakfast	Fluids / Bottles
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	From	70	From	2	From	10	From	2	From	2	From	10	From	2
	From	To	From	To	From	To	From	To	From	To	From	To	From	To
GENERAL	Addah	TINHA DDV	Addyn	Addahiii	Addyn	VINHADDV	Addyn	AUNHADDY	Adda	ADDAMAIL	Adda	VINHADDY	HADDY	NHA DDV
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movement	□ BOWE	BOWEL MOVEMENT	□ BOW	BOWEL MOVEMENT		BOWEL MOVEMENT	□BOV	BOWEL MOVEMENT		BOWEL MOVEMENT	□ BO	BOWEL MOVEMENT		BOWEL MOVEMENT
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N - Normal	7	DBY WET TOLIET	200	DOWNER MOVEMENT		DBV WET TOILET	100	TEL MOVEMENT		BOWLE MOVEMENT		DBY WET TOURT	700	DOWLE MOVEMENT
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R - Rloody	□ DRY	DRY WET TOILET	□ DRY	DRY   WET   TOILET	DRY	DRY   WET   TOILET	□DRY	/   WET   TOILET		DRY WET TOILET	□ DRY	Y   WET   TOILET	□ DRY	- WET - TOILET
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COMMENTS														
STAFF														
SIGNATURE														

#### Appendix 10 - Attendance Record — 5 day

Early Learning and Childcare Facility
Attendance Record

Group Name:

For the week of:

Absent Reason OUT Friday Z Absent Reason OUT Z Absent Reason OUT Z Absent Reason OUT Z Absent Reason OUT Z Child's Name 10. 5 Ö. œ ത്

4 = Skin Problems 8= Not Illness Related 3 = Cold Symptoms (cough, ear ache, sore throat, eye discharge) 7 = Other Illness (specify on back) 6 = Behaviour Change with no other symptom Absent Codes:

Times must be recorded immediately upon the child's arrival and departure, and the record must reflect all children present at any given time. If a child leaves early due to illness, a "Potential Illness Report Form" must be completed.

Facility Name:

### Appendix 10 - Attendance Record — 7 day

Early Learning and Childcare Facility
Attendance Record

For the week of:

Group Name:

Facility Name:

	VebuoM	day	Tuesday	day	Wednesday	vehse	Thursday	Veb	Friday	2	Saturday	76	Sunday	>
:		1		1110		10000		11.0		!!		!!!		,
Child's Name	<b>Z</b> I		21		21		21		21		<b>Z</b> I		21	OUT
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						(					- :			
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3.														
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5.														
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10.														
	Absent	Absent Reason	Absent	Absent Reason	Absent	Absent Reason	Absent	Absent Reason	Absent Reason	Reason	Absent Reason	Reason	Absent Reason	Reason
Absent Codes:	1 = Diarrhea		2 = Fever	3 = Co	ld Symptoi	3 = Cold Symptoms (cough, ear ache, sore throat, eye discharge)	ear ache, s	ore throat	, eye discha		4 = Skin Problems		5 = Vomiting	

Times must be recorded immediately upon the child's arrival and departure, and the record must reflect all children present at any given time. If a child leaves early due to illness, a "Potential Illness Report Form" must be completed.

8= Not Illness Related

7 = Other Illness (specify on back)

6 = Behaviour Change with no other symptom

#### Appendix 11 - Potential Illness Report Form



#### Early Learning and Childcare Facility Potential Illness Report Form

Facility							ge. Provide the parent
Instructions:	with a copy of the	nis Jorm ana t	ne New Brunswick	Guiae for	Exclusion of Children	in Early	Learning and Childcare
Facility Name	· demeros				Licence Number		Date
Child's Name						Date	of Birth
The above named	child had the foll	owing indicatio	ns of not feeling w	vell today:			
Check the main sy	mptom below an	d use the space	provided to add o	details.			
Diarrhea		Details:					
Fever							
Cold Symptor	ns 🔲 📗						
Skin Problem:							
Vomiting							
Other							
Child's temperatu	re Time tal	ken	Medication gi	ven	If <b>yes</b> , indicate the	medica	tion and dose
(Celsius)			Yes	☐ No			
	•		•		_		
Required to repor	t illness to Public	Health? Date	contacted Public		las there been another ' ompleted for this child v		
□ les □	INO				Yes No		
T:	1	B			1/6		
Time parent notifi	ed	Departure tim	e	Parer	nt/Guardian signature		
Print reporting sta	itt's name			Staff signat	ture		

#### **Parent/Guardian Instructions**

- Please see a medical practitioner for a diagnosis of a communicable disease or if the child's symptoms do not improve within 24
- Please notify the facility operator/administrator of details relating to your child's condition within 24 hours after a confirmed diagnosis for any of the conditions listed in the attached New Brunswick Guide for Exclusion of Children in Early Learning and Childcares.
- Please follow the exclusion instructions for any condition listed in the attached New Brunswick Guide for Exclusion of Children in Early Learning and Childcare in order to allow re-admittance to your childcare facility.

### Appendix 12 - Return after Exclusion Form



Early Learning and Childcare Facility
Return after Exclusion Form

	nis form is completed b r being excluded due t		re-admitted to a	an early learning and		
Section A – General Information						
Facility Name		Licence	Number	Date		
Address		Telephoi	ne Number	Fax Number		
Continue D. Child Information						
Section B – Child Information Child's Name	Date of Birth	1	Name of Illness	<u> </u>		
Date of Illness Onset	Date of Diagnosis (if	f applicable)	Date Treatmen	t Began (if applicable)		
If illness is E.coli, Shigella or S and send	Salmonella typhi (Typ to Public Health to c			Section A and B		
Section C – Confirmation of Exclusion	n					
I have verified that defined in the "Common Childhood ( well enough to take part in regular ch		ses and Exclusion	d) has met the e n Periods", is syl	xclusion criteria as mptom free and is		
Signature of Facility Staff	Signature of Facility Staff Signature of Parent/Guardian					
Date		Date				
	<u> </u>					
Section D – Confirmation of Exclusion	n for E.coli, Shigella or	r Salmonella typh	i (Typhoid Fever	·)		
This section is to be completed by Pu form returned to the early learning an		Shigella or Salmo	onella typhi (Typl	hoid Fever) and the		
As per the exclusion criteria (refer to Early Learning and Childcare (ELC) F				unicable Diseases in		
□ E. coli and Shigella - two	negative stool culture	es taken 24 hours	apart			
□ Salmonella typhi (Typhoi (number of cultures to be			es			
This individual no longer needs to be	excluded from childca	are because of Illi	ness.			
Signature of Public Health Official		Date				

Brunswick

Early Learning and Childcare Facility Notice of Illness Form

# Parents/guardians: Please monitor your child for symptoms of this condition. Additional information is available from your facility operator or administrator. Early Learning and Childcare Facility Date in this Early Learning and Childcare Facility. case(s) of: Notice of Illness in an This is to notify you of Signature of Facility Operator or Administrator

## Appendix 14 - Managing Illness in ELC Facilities — Parent's/Guardian's Role



Early Learning and Childcare Facility Managing Illness in ELC Facilities - Parent's/Guardian's Role

Your involvement as a parent is important! You can take the following steps to help ensure that early learning and childcare facilities are safe and healthy places for all children.

#### Step 1:

Make sure you provide up-to-date information about your child's immunization to the facility operator. If you choose not to immunize your child, you must sign a waiver available from the Department of Health.

#### Step 2:

In general, if your child is too sick to participate comfortably in activities and has symptoms or a condition that may affect the health of other children, it is necessary that your child not attend childcare.

Examples of signs and symptoms that may indicate that a communicable disease may be present include:

- diarrhea unexplained diarrhea or loose stool (may or may not be accompanied by nausea, vomiting and cramps) may indicate a bacterial or viral illness that is easily passed from one child to another;
- vomiting nausea and vomiting;
- fever temperature taken from the ear (37.9°C/100.2°F or greater), mouth (37.5°C /99.5°F or greater) or armpit (37.5°C/99.5°F or greater);
- respiratory difficulty breathing, wheezing or persistent cough;
- infected eyes or eye drainage (clear or with pus);
- · sore throat or trouble swallowing;
- pain any complaints of unexplained or undiagnosed pain;
- · unusual skin colour;
- · severe itching, rashes or skin lesions; or
- unusual behaviour or any illness that prevents a child from participating comfortably in all activities.

#### Step 3.

If your child does not attend childcare due to illness, you must let the facility know your child's illness symptoms.

#### Step 4:

If your child gets ill at the facility, you will be notified and you will be asked to make arrangements to pick up your child within one hour of being notified by the facility staff. This is important to make sure your child gets the treatment he/she needs as well as to prevent the spread of illnesses to other children.

#### Step 5.

You are encouraged to take your child to a physician if their symptoms do not improve within 24 hours after leaving the ELC facility.

#### Step 6

For some illnesses, there is a required time period where your child cannot attend an ELC facility. These time periods and illnesses have been developed by health care professionals across Canada to ensure that your child is fully recovered and to prevent the spread of infectious diseases in ELC facilities. These illnesses are listed in Appendix B "New Brunswick Guide for Exclusion of Children in Early Learning and Childcare Facilities" of the "Guidelines for the Prevention and Control of Communicable Diseases in Early Learning and Childcare (ELC) Facilities". The guide is available from your facility operator or administrator.

If your child has been diagnosed with any of the illnesses in this guide, you **must** follow the requirements in order for the facility operator to allow your child to be re-admitted to the facility.

#### Step 7:

When you take your child back to the ELC facility after having been sick with an infectious illness, you must complete the Return after Exclusion form to certify that you have followed necessary steps for re-entry to the ELC facility.

We thank you in advance for taking these steps to make early learning and childcare facilities a safe and healthy place for all children in New Brunswick.



Early Learning and Childcare Facility Incident Report

#### ORIGINAL TO BE SUBMITTED TO THE QUALITY ASSURANCE MONITOR WITHIN 24 HOURS OF INCIDENT

	·					
Facility Name				Licence Nu	mber	
Name of Operator				☐ ELC Ho		
Address				Telephone		
If the incident Name of Child involved a child				Date of Birt	th	
Location of Incident		Date	of Incident	,	Time of Inci	ident
Type of Incident						
	Death Poisoning U	nsupervised o	hild 🛮 M	issing/Lost/	/Abducted o	child
☐ Motor Vehicle Accident ☐ Outt	break Unexpected facility closure	_	er serious incide se specify the ir		fire, flood, r	medication error
Details of Incident						
What, where and when it happened? W	Vhat actions were taken? Was any equip	ment involve	d? Current cond	ition of inju	ired person.	. Be specific.
				S	Show location	on of injury
Continue on another sheet if needed ar	nd attach to this one.					
Persons Notified						
Date Ti Parent/Guardian Emergency Contact QA Monitor	Da	te Tim	e	ner		e Time
Witnessed By (if applicable)						
Signature	Name	Position		Date		Time
Signature	Name	Position		Date	] *	Time
Report Completed By						
Signature	Name	Position		Date		Time
Signature of Operator/Administrator	L	1	Date	1		
Signature of Parent/Guardian			Date			

MAINTAIN A COPY OF THIS REPORT FOR THE CHILD'S RECORD AND PROVIDE PARENTS/GUARDIANS A COPY

### Appendix 16 - Emergency Evacuation and Fire Drill, Smoke Alarm, Smoke Detector and Fire Extinguisher Check

Early Learning and Childcare Facility

Emergency Evacuation and Fire Drill, Smoke Alarm, Smoke Detector and Fire Extinguisher Check

During each monthly emergency evacuation and fire drill, conditions and times should vary. Drills should be conducted at an unexpected time. Familiarize children with alternate routes. Emphasis should be placed on quiet and orderly evacuation.

COMMENTS/MAINTENANCE REQUIRED												
SMOKE ALARM/ DETECTOR CHECK												
EVACUATION TIME												
NUMBER OF CHILDREN												
TIME OF DAY												
DATE												
YEAR	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER

KEEP THE COMPLETED FORM ON FILE FOR 12 MONTHS

Fire extinguishers were checked and approved on:

### Appendix 17 - First Aid Supplies Checklist

Required contents for first aid kits can be found here:

https://www.worksafenb.ca/media/63044/2-basic-first-aid-kit-requirements.pdf

#### Appendix 18 - Social Development (SD) Record Check Consent Form

For a copy of the Social Development Record Check Consent Form, please contact your regional Early Learning and Childcare office.

### Appendix 19 - Criminal Record Check and Vulnerable Sector Check Request Letter

Early Learning and Childcare Facility Criminal Record Check and Vulnerable Sector Check Request Letter

Name of Address	of the ELC facility s
Date:	
To: Chi	ef of Police/RCMP
Subjec	t: Criminal Record and Vulnerable Sector checks
membe Crimina dwelling	ng to the <i>Licensing Regulation-Early Childhood Services Act</i> , all operators, staff rs and volunteers working at an Early Learning and Childcare (ELC) facility must have all Record Check/Vulnerable Sector Check. Where an ELC facility is located in a family g, each individual 18 and over residing in the home must have a Criminal Record check. occess will be undertaken, at minimum, every five years.
A Crimi	nal Record check including a Vulnerable Sector check is required for
	who will be :
	working in a licensed ELC facility
	volunteering in a licensed ELC facility
A Crimi be :	nal Record check is required for who will
	residing on the ELC premises
the form	ne Criminal Record check and the Vulnerable Sector check are completed, please return to the above named individual. Where applicable, all fees associated with these are the responsibility of the individual named in the request.
Thank y	you for your attention to this matter.
Sincere	ely,
Signatu	re of the operator

### Reference documents and additional information

# Appendix 20 - Parent and Guardian Handbook Template



Early Learning and Childcare Home Parent and Guardian Handbook Template (Statement of Services)

As per regulation 26 of the *Licensing Regulation* – *Early Childhood Services Act*, an operator of an early learning and childcare facility shall provide a handbook to a parent or guardian of a child receiving services at the facility.

When developing the handbook, operators may want to reflect on the following:

- Is the handbook easily understood by parents?
- Have you added facility specific policies to the handbook?
- Have you considered how you will relay information to parents who may not be able to read?

The handbook is easiest to understand if it is clear, brief and to the point. It should be reviewed yearly and updated if necessary.

Provide information on the following: Cover page: □ name of the facility; ☐ address, telephone, e-mail; □ contact information. Introduction: □ welcome statement: ☐ description of the ELC facility, who you are, etc. The services: □ overview of the type of services being offered to children; □ a description of the learning principles and goals and the measures that will be taken to reach those goals: □ where providing services to infants and preschool children, indicate which curriculum is being used: ☐ what type of activities the children are doing throughout their day, what kind of a flexible routine can the parents and their children expect; □ how services for school-aged children will promote their learning outside the formal school curriculum. Hours of operation:  $\Box$  the daily hours of operation; □ extended hours or overnight services, if applicable; □ when facility is closed i.e., statutory holidays, storms, summer, vacation, etc. **Enrolment and discharge procedures:** ☐ the enrolment process, part-time/full-time, documents required, proof of immunization,

preliminary visit, specific requirements such as whether the child must be toilet trained, etc.; discharge procedures, for example, two weeks' notice in lieu of payment when removing a child from the facility, children with challenging behaviours, non-payment of fees, etc.

#### Fee and payment schedules:

the fees charged for full day, half day, school-age, family discounts (operators may want to list the

fees in an appendix to include at the end of the handbook);

how payments are to be made – weekly, bi-weekly, monthly, post-dated checks, automatic withdrawals;

payment requirements when parents arrive late to pick up their child, if applicable.

#### **Transportation:**

whether the facility provides a transportation service, i.e. daily pick-up and delivery of children; what kind of vehicles are being used;

what the arrangements are for children walking to school.

# Outings and activities off the premises:

whether children will participate in outings;

types of organized activities that may take place away from the facility, i.e. field trips, visits to the library, daily walks, etc.;

what the transportation arrangements are for taking the children on outings, i.e. types of vehicles.

requirement for booster seats, etc.;

whether additional fees are required for special outings, activities, etc.

#### Administration of medication:

the facility's practices with regards to the administration of medication to children including written

consent;

requirements related to the medication, i.e. provided by parents, in the original container, labelled

with child's name, etc.

#### Child illness:

the facility's practices with regards to the acceptance of ill children, and the exclusion criteria in accordance with the *Guidelines for the Prevention and Control of Communicable Diseases in Early Learning and Childcare (ELC) Facilities*;

the requirement that a sick child must be picked up from the facility within one hour of notification. the requirement for parents to complete the Return After Exclusion form.

#### Absences:

the requirement for parents to report absences and the reason why.

# **Emergency evacuation plan:**

procedures for emergency evacuation including informing parents of any evacuation; location of an alternate accommodation for children and transportation to the alternate location if policable.

the requirement to have monthly fire drills.

# Child guidance:

describe how operator will guide children's behaviour; what positive child guidance techniques are used by the facility.

#### Child abuse and neglect protocol:

reporting requirements for an ELC facility as found in The Child and Youth Well-being Act.

Pa	rental Involvement:
	how parents can become involved in the facility's programs;
	how they can provide suggestions;
	parents are welcome at the facility at all times.
Pe	rsonal belongings:
	what children and parents should bring to the facility, i.e. blankets, toothbrush, diapers, etc.;
	what items should not be brought, i.e. toys, candy, electronic devices, etc. (operators may want to set up specific times to bring some of these items for example a favorite toy on the last day of the month);
	personal items are labelled with the name of the child.
Sn	noking:
	provide information on whether the home environment is smoking or non-smoking.
Со	emplaint procedures:
	how to contact the ELC licensing staff: parents are directed to find this information on the parent information board.
Sig	gned declaration:
	Provide declaration to be signed by the parent or guardian confirming that they have read, received a copy and understood the content of the handbook.
	(A declaration statement is also found on the optional consent form, therefore parents may sign that form if it is used by the facility).

# Other information

Operators may wish to add more information and other policies in the handbook such as:

- drop-off and pick-up
- meals and snacks
- inclusion statement
- outdoor play
- appropriate clothing
- swimming
- incidents/emergencies
- birthdays
- communication
- use of social media
- where information is posted in the facility



Early Learning and Childcare Facility
Diaper Changing Procedures

# **DIAPER CHANGING PROCEDURES**

- Staff wash their hands thoroughly with soap and water before each diaper change. Do not use only hand sanitizer between changes.
- Assemble within easy reach all the necessary supplies.
- If using gloves, ensure they are new single-use gloves. Gloves must be new for each child. Proper hand washing procedures are to be followed when gloves are removed.
- Place the child on the clean changing surface (change table or pad), using safety features of change table.
- Remove the soiled diaper. Fold the soiled diaper inward and set it aside.
- Clean the child's skin with a moist disposable cloth or towelette, wiping the child's bottom from front to back. Remember to wash in the creases of the child's skin.
- Ensure child's skin is dried. Discard wet wipe and paper into the soiled diaper or directly into a plastic-lined waste container.
- Keep waste containers tightly covered and out of children's reach. Waste containers containing diapers are not to be located in the play area.
- When necessary, use a facial tissue to apply ointments or creams.
- Put a fresh diaper on the child.
- Wash the child's hands using proper hand washing procedures. Return the child to a supervised area.
- Formed stool can be flushed down the toilet, avoid splashing. Never rinse soiled clothing or soiled diapers, as the increased handling of soiled items may lead to contamination.
- Dispose of the cloth or disposable diaper and if used, disposable paper liner.
- Soiled disposable diapers are to be enclosed in a plastic bag and placed into a plasticlined garbage container.
- Cloth diapers are to be placed in sealed plastic bag or wet bag and returned to parents.
- Clean the change table/pad and disinfect the entire surface of the change area after each use, including the sides of the change surface. Use a 500 ppm bleach disinfecting solution (refer to Guidelines for Mixing Bleach as a Sanitizer and Disinfectant for Early Learning and Childcare Facilities) and let sit for a minimum of 2 minutes before drying the surface with a single-use paper towel. Rinse with clean water and dry with a single use paper towel. Follow the manufacturer's instructions for dilution and contact time if using another disinfectant. Discard paper towel in the garbage.
- Put away all diapering supplies.
- Wash your hands thoroughly, following proper hand washing procedures.
- Record unusual skin condition and bowel movements, as per routine procedures.

# Appendix 22 - Equipment and Materials for School-age Children



Early Learning and Childcare Facility Equipment and Materials for School-age Children

In general, school-age children are moving from concrete thinking to more abstract thinking, becoming increasingly interested in their peer group and in cooperative activities. The materials and equipment within school-age facilities should reflect the skill and developmental levels of the children.

Play areas should minimally include the following:

- an art and creative area
- science and nature area
- a block and construction area
- dramatic play and housekeeping area
- a quiet and reading area
- fine motor/manipulative area for scientific and mathematical investigation and measurement
- space and equipment for large motor play indoors
- outdoor play environments must provide, minimally:
  - o large motor play area
  - o an area for quiet play
  - storage space
- sand and water play provisions for play with elemental materials sand, water, mud, clay, snow (indoors and outdoors)
- music and movement area

It is recognized that this list is not exhaustive and other possibilities are, therefore, encouraged. The specific equipment in each area should, in fact, change from time to time thereby providing an environment that is varied and challenging for the children.

Many school-age programs are operated in shared spaced environments, for example, schools, gyms and churches where daily movement of equipment and materials is required. Portable shelving must be available in these situations.

When choosing materials and equipment for school-age facilities, operators should select those that will withstand the use of multiple children. They should be checked often for breakage and any broken items disposed of. They should be easy to clean with durable surfaces.

The quantity, age appropriateness and arrangements of equipment and materials per activity centre and per age group will be determined in consultation with ELC licensing staff at the time of the ELC facility's initial licensing and will be reviewed annually at renewal.

While it is not required to have every item as listed in the following pages, operators are required to have indoor and outdoor play equipment, furnishings and program materials available in sufficient quantity and variety for the number of children enrolled at any one time.

#### This ensures that:

- a variety of options is available to the children;
- a child is able to work by themselves; and
- a group of children is able to work together without running out of materials.

What follows are suggestions for materials and equipment within play areas at the facility, they are not complete lists, but serve to start conversations. Children should be as involved as possible in adding ideas for materials and equipment.

#### Art and creative area

When creating an art and creative area the following should be considered:

Are resources visible and available, encouraging independence and creativity?

Is there a sufficient quantity of items for the children?

Are a variety of creative materials included?

Are different creative mediums, such as clay, playdough, available?

Are the children free to create how they wish?

Are children encouraged to use their creative freedom and celebrate the differences in their art?

Are art materials such as skin-coloured markers and paints available?

If possible, is the art area located close to a sink and not on carpet?

Are children encouraged to clean up their art area when they are done?

Are supplies rotated regularly to keep children interested?

Are children's creations displayed around the facility?

Do educators provide assistance only when asked?

Do educators avoid demonstrating a model?

Do educators talk to the children about their creations?

# Suggested materials and equipment for art and creative area:

- accessible storage shelf
- acrylic table or trays
- smocks or old t-shirts
- paint brushes variety of sizes
- paint rollers variety of patterns
- easel
- variety of scissors both right and left handed
- variety of crayons, markers, pastels, art chalks, charcoal

- rolls of brightly colored masking tape
- variety of paper in colors, textures and sizes
- different types of paints and water colours
- a variety of glue
- tape
- glitter
- q-tips
- chenille stems
- plastic cups
- popsicle sticks
- eye droppers
- feathers
- kitchen utensils that provide unique prints (potato masher)
- wallpaper
- spray bottles filled with water or paint
- sponges
- · dental floss for string painting
- · marbles and anything that rolls for painting
- unusual cake pans or molds for marble painting
- foil
- clay
- playdough
- cookie cutters, rollers, plastic knives
- sandpaper
- tissue paper
- clear shower curtain
- bubble wrap
- tree bark for rubbings
- beads, baubles, jewels, buttons, etc.
- · small collectibles from nature
- recycled items plastic sock holders, cardboard pieces, bottle caps, corks, fabric remnants, yarn, ribbon
- · costume jewelry
- broken jewelry
- ruler
- crayon melting tray
- knitting needles
- embroidery hoops
- needles needles with large needles for yarn, needles for cross stitch
- embroidery floss, thread, yarn
- ribbons, buttons, braid, bias tape
- thimbles/tape measure
- snaps, hooks and eyes, pins and pincushions

- cloth variety of sizes, shapes, patterns, textures
- scissors
- cotton batting

#### Science and nature area

When creating a science and nature area the following should be considered:

Is the area readily accessible for children to explore?

Is there a small table and chairs available in order to do experiments?

Is the area inviting and well-stocked to encourage children's engagement?

Are materials organized for display and exploration?

Are children provided the opportunities to explore "what if?" questions, to make guesses about what is going to happen, and to investigate those guesses?

Are items safe and age appropriate?

Are items rotated regularly to keep them new?

Is the area well-organized so that children are more encouraged to keep it that way by putting things away when they are finished an activity?

Is there paper available to chart and graph outcomes?

How is the learning that is taking place in the science and nature area linked to other areas of the centre?

Are there science books such as nature, astronomy, and space, including books that expand the children's interests encouraging them to ask "what is it made of?" and "how does it work?"

Are the interests of the group considered?

Are children encouraged to participate in the science and nature area?

How is science taken outdoors?

How are educators supporting the learning taking place?

Do educators assist children to set up and perform experiments, without taking over?

Do educators ask open ended questions to encourage further exploration and extend learning?

Do educators model different ways to find information, such as reading resource books and searching online (ensure that educators preview any websites before sharing them with children or sit beside children when looking online)?

# Suggested materials and equipment for science and nature area:

- display table/storage shelf
- listening tubes
- flashlights
- graphing grids
- · plastic test tubes and beakers
- lab coats
- safety goggles
- gloves
- trays
- hose/tubing
- pulleys
- gears
- small machines that don't work to take apart
- books of nature and animals
- aguarium/live animals
- fish
- plants (non-toxic)
- prisms/mirrors
- color wheels and colors for mixing
- magnifying glass
- microscope
- items to examine
- pumpkins, gourds
- flowers
- nuts
- bee hive that's no longer used
- moss/bark
- birdfeeders
- bird's nest
- pinecones
- feathers (real)
- shells/coral
- seeds/acorns
- fossils
- magnets
- color wheel or paddle
- pulleys/gears
- terrarium
- kaleidoscope
- telescope
- binoculars
- bug catcher/bugs

- binoculars
- bug catcher/bugs
- magnets
- scale
- balance and weights
- objects to balance such as rocks, pieces of wood, cotton balls, etc.
- tweezers
- ruler and tape measure
- adhesive tape
- scissors
- cardboard, cardboard tubing
- stopwatch
- · egg timer
- · jars, clear containers
- compass
- gardening materials and tools
- cork
- straws
- syringes
- squeeze bottles
- · soda, starch, salt, vinegar
- funnels
- thermometer

#### Block and construction area

When creating a block and construction area the following should be considered:

Is there plenty of space for the block area so children can build elaborate structures?

Is it in a good location in the room (not close to the guiet area)?

Is there plenty of shelving for easy access to the blocks and other materials?

Is there a rug in the block area, since most of the time will be spent on the floor?

Are there a sufficient number of blocks, ideally, provide at least 40 to 60 unit blocks for each child in the block area at the same time?

Are non-block materials stored in containers on the shelves or on the floor where the children can locate them easily?

# Suggested materials and equipment for block and construction area:

- storage shelf
- wooden blocks in assorted sizes and shapes (unit blocks)
- floor toys such as space station, garage, farm, house, airport/airplanes/helicopter

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- variety of hats e.g. construction, fire fighter, police officer
- houses and other buildings
- small people/animal figures
- track and train or road set, road signs
- · assorted vehicles in varied sized
- steering wheel
- discarded license plates
- heavy cardboard boxes

# **Dramatic Play and Housekeeping Area**

When creating a dramatic play and housekeeping area the following should be considered:

Is the area away from noisy or active play?

Is the area equipped with child-sized furniture?

Are toys and materials visible and within easy reach of the children?

Are the children able to use the materials present independently?

Are "real life" props present, such as oven mitts, aprons, telephone, etc?

Are props, clothing and items included that would be interesting to all children?

Are there multi-ethnic play food and cooking utensils available?

Is there a mirror for children to see how they look?

Is the dramatic play area changed to reflect the current interest of the children? (For example: If they are fascinated by doctors, add some gloves and surgical masks.)

Are resources rotated frequently to ensure novelty?

Are children encouraged to use their imagination and be actively involved in play?

Are children encouraged to talk about what it is they are doing?

Do educators participate in play when asked by children?

Do educators observe and listen to the children's behavior?

Do educators interact on the child's eye level by sitting or kneeling?

Ensure there are not too many props in this area, or clean up can be overwhelming.

# Suggested materials and equipment for dramatic play and housekeeping area:

- child sized appliances, sink, stove, refrigerator
- child size dishes, cutlery, pots and pans
- table and chairs, child sized/age appropriate
- kitchen items
- aprons, oven mitts, chef hat
- vase and flowers

- food props (empty food packages, plastic fruits and vegetables, etc.)
- broom, dustpan
- dish towel
- tablecloth
- blankets
- home living furniture
- telephone
- dress up clothes and accessories, including hats, purses, sunglasses, jewelry, gloves
- rack for dress up clothes
- · suitcases/backpacks
- purses
- wallets
- multi-ethnic dolls of both genders, with size appropriate clothes and accessories, i.e. strollers, doll beds
- toiletries
- sponge curlers
- old hair dryers cords removed
- non-breakable shatterproof full length mirror
- lunch boxes
- · tool belts
- tool box
- variety of real tools
- woodworking bench
- safety goggles
- nails
- scrap wood
- vice
- wood glue/sandpaper
- puppet theatres
- prop kits for children to explore and create

# Ideas for prop kits for dramatic play

Educators are encouraged to have discussions with children to come up with other prop box ideas and to work together to decide what they could contain and where to obtain items.

#### Bakery

fresh playdough, measuring spoons, rolling pins, aprons, oven mitts, cookie sheets, pictures of baked goods, chef's hat, muffin tins, cake pans, mixing bowls, spoons, cake decorators, order pads, recipes, cookie cutters, flour shaker, cupcake papers

#### **Beach**

blankets, picnic basket, beach umbrella, sunglasses, beach ball, empty suntan lotion bottles, beach towel, buckets and shovels, shells, lawn chairs, straw hats, play picnic foods, music, swimming caps, surfboard, snorkels, fins, flip flops, small portable swimming pool filled with sand

# Camping

canteen, flashlight, tent, knapsack, pretend campfire, sticks with marshmallows, binoculars, small skillet, mosquito-netting, nature books, food supplies, sleeping bags, thermos, fishing poles, plastic ants, small cooler, lawn furniture, orange vests, paper plates

#### Car Wash

tricycles, buckets, water, dish soap for outside play, buckets, sponges, squeegees, hose, car wash signs, play money

# Fire Fighter

yellow rubber raincoats, boots, old vacuum hose, phone, whistle, fire hats, flashlight, fire safety posters, walkie-talkies, gloves, baby dolls (to rescue)

# **Fishing**

boat (box), worms, net, tackle box, sinkers/bobbers, fishing hat, pole with string, fish (with magnets), binoculars, fishing magazines, camera, thermos

# Flower Shop

plastic flowers, watering can, seeds, florist smock, flower/garden magazines, garden hats, small garden tools, potting soil, vases, gardening gloves, ribbon, order book and pen, cash register/money, phone, plastic pots, styrofoam squares, baskets

#### **Gas Station / Auto Mechanic**

tools, tool box, steering wheels, play money, work clothes, oil cans (not real), gas hose, cash register, squeegee, bucket, poster with prices, tire gauge, car keys, funnel (for pretend oil), rags, tire pump, auto supply catalogue, small gas can (new), used/washed or new auto parts

#### **Grocery Store**

grocery cart/basket, aprons, purses/wallets, plastic fruit/vegetables, coupons, play food, check out area, reusable bags, cash register, play money, sale flyers, clean recycled food containers/boxes

# **House Painter**

paint brushes, paint rollers, buckets of water, paint, rags, paint trays, hats, old shirts, colour samples, drop sheets

#### Ice Cream Parlour

ice cream scoops, paper cones, empty ice cream tubs, ice cream toppings (e.g. small red pompoms for cherries), play money, cash register, apron and hat, order pads/pencils, wipe-off board menu, empty whipped cream spray cans

#### **Medical Clinic**

surgical masks/booties, stethoscope, cotton balls, band aids, lab coat, small flashlight, gauze bandages, non-latex gloves, dolls/doll beds, syringes (without needles), empty medicine bottle, medicine droppers, hospital gown, doctor bag, x-rays, prescription pad, patient files, blood pressure cuff, first aid book, splints

#### Office Worker

desk, name plate, old forms, file folders, keyboard, monitor, memo pad, phones, phone books, paper/pens/pencils, calculator, stamps, stapler, paperclips, junk mail, pen holder

# **Optometrist**

eye chart, pointer, glasses frames (with lenses removed), table, mirror, white lab coat, glass cases, wooden spoon, pictures of eyes

#### Pizza Restaurant

clean pizza boxes, cash register, play money, order pad, phone, bakery aprons, stove, play pizza cutter, prep area, cardboard circles, (pizzas) with felt on one side, felt toppings – pepperoni, green peppers, mushrooms, etc

#### Plumber

different shapes and sizes of piping, tools, toolbox, measuring devices, spigots, plungers hose/nozzles, old shirts (with logo on pocket)

# **Police Officer**

pad for writing tickets, small clipboard, police hat, stop signs, license plates, blue shirt, walkie-talkie, badge, 911 signs, steering wheel, whistle, boxes to create vehicles

#### **Post Office**

envelopes, postcards, stamps (seals/stickers), boxes or packages, bag for carrying mail, junk mail, mailbox, scale, stickers, paper punch, cash register, cash register, pens, pencils, paper

#### Restaurant

tablecloth, napkins, dishes, menus, order pads, pencils, aprons, chef hats, cash register, serving trays, play food, take out containers, play money, tables, chairs

#### **Shoe Store**

supply of different types of shoes, shoe boxes, cash register, play money, ruler or foot measurer, shoe horn, pictures of shoes, small chairs, full-length mirror, shoe polish (empty)

#### **Space**

helmet, air tank, earphones, globe, control panel, moon boots, flag, moon rocks, walkie-talkies, star decals, a rocket ship, space food

#### **Tourist / Vacation**

suitcases, tickets, sunglasses, maps, Hawaiian shirts, passports, travelers checks/money, postcards, travel magazines, camera

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#### Veterinarian

stuffed animals, cotton balls, gauze, surgical masks, pamphlets on animals, plastic gloves, play money, needless syringes, exam table, empty medicine bottles, pet brushes, white lab coat, pet carriers, magnifying glass, stethoscope

# **Quiet and Reading Area**

When creating a quiet and reading area the following should be considered:

Does the area have plenty of books for the children to access?

Are children provided with a variety of reading materials, including magazines and homemade books as well as traditional books?

Are there books that reflect the languages and cultural backgrounds of children in the group?

Are children taught how to handle and respect books?

Are children taught a love and appreciation for books and literature?

Are books rotated regularly to keep children interested and to support new areas of interest?

Are children encouraged to consult books for sources of information and to answer questions?

Are children provided opportunities to create their own books?

Do educators avoid interrupting a child concentrating on a book?

Do educators sit with children and read, or listen to them re-tell or reenact a story?

Do educators ask open-ended questions to encourage thinking and predicting skills?

#### Suggested materials and equipment for a quiet and reading area:

- shelf/rack to display books
- large cushions with washable covers and/or adult or child sized furniture (chair, love seat)
- carpet or area rug
- books at a variety of reading levels and appealing to a variety of interests e.g. poetry, nature, humour, adventure, myths, science
- books representing various languages, ethnicities, cultures, genders and abilities
- books made by the children
- factual books, magazines and newspapers
- felt board and pieces
- puppets and stage
- soft reading light

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- · music background
- music player with a selection of audio stories
- headphones
- environmental print pictures and posters
- materials to make books
- · writing surface

# Fine Motor/Manipulative Area

When creating a fine motor and manipulative area the following should be considered:

Is the centre located in an area with table(s) and chairs, or a quiet floor area with a rug?

Do children have easy access to a variety of games, both competitive and cooperative?

Are materials in adequate supply for the numbers of children present?

Are materials rotated frequently to keep children engaged?

Are puzzles and games age appropriate for school-age children?

Do educators ensure that games and puzzles are complete and not missing pieces?

Do educators facilitate problem-solving in the event there is a conflict over materials?

Do educators encourage children if they become frustrated?

# Suggested materials and equipment for fine motor and manipulative area:

- storage shelf
- tables and chairs
- developmentally appropriate puzzles e.g. wooden, interlocking, 3-d, and floor puzzles
- building toys e.g. lego, k'nex, mega blok
- pegs and pegboards
- rubber bands for peg boards
- stringing beads
- matching and sorting toys
- age appropriate board games e.g. matching and lotto games (color, picture), bingo
- stacking blocks
- tweezers and tongs
- scissor cutting activities
- hammering block
- golf tees / scissors / hammers for playdough
- rolling pins
- markers / chalk / crayons
- lacing dolls
- lock and key sets
- zipping and buttoning boards
- weaving boards

- small paint brushes
- squirt bottles
- simple card and board games
- memory games (Concentration)
- strategy games (Connect-4, Chinese Checkers, Checkers, Chess)
- word games, reading and spelling games (Scrabble)

# **Outdoor Play Area**

When creating an outdoor play area the following should be considered:

Are natural environments such as grass, sand, water, plants, trees in abundance?

Are there opportunities for children to create with natural materials?

Think about access to play in the outdoors, what materials are rotated through outdoor areas, and what activities are available in the outdoors?

Are children provided an area where they can plant and maintain a garden?

Do educators bring inside materials outside?

How will educators model a sense of wonder for nature and outdoor places?

How do educators support children's investigations in the natural world?

# Suggested materials and equipment for outdoor play area:

- small wagons/wheelbarrows
- balance beams, balancing items
- puppet theatre
- puppets
- props/accessories
- climbing structure (may include rings, bars, ropes and poles for climbing, swinging, etc.)
- natural material tree logs, branches, hills, wood pieces, planks
- large cardboard boxes
- blankets, tarps
- skipping ropes
- balls in a variety of sizes, e.g. basketball, soccer, tennis
- · basketball nets
- baseball bats, balls and gloves
- badminton and tennis rackets and nets
- floor hockey sticks, nets
- cones
- outdoor games bowling, croquet, ring toss, horseshoes, etc
- hula hoops
- mats for tumbling play

- large blocks
- frisbees
- biking area
- hopscotch area
- parachutes
- kites
- winter toys sleds, shovels
- variety of play areas

# Sand and Water Play (Indoors/outdoors)

When creating a sand and water play area the following should be considered:

Is the area located on hard floor, with non-slip mats used to prevent falls?

Is there a sand/water area outside?

Are children provided the opportunities to investigate measuring and to explore other math concepts such as more, less, bigger, smaller, and equal?

Are children encouraged to use their fine motor skills to scoop, sift, funnel, and pour?

If required, do educators remind children of safety rules when in the sand/water area?

Do educators assist children to find answers to their questions about sand, water, and other sensory materials through books, websites, and other resources?

# Suggested materials and equipment for sand and water play area:

- sand and/or water play table
- outdoor sand area
- sand/water (at least 15 centimeters in depth)
- storage shelf
- bubble toys
- dishpans/plastic bins
- buckets/pails
- sink
- kitchen utensils eggbeaters, sifters, measuring cups and spoons, pitchers, baster, funnels, pots, pans, muffin tins, etc
- sponges
- water wheels
- plastic tubes
- wood to make boats
- items to float/sink
- vehicles
- people/animals for sand play
- plastic spray bottles

- · shovels of various sizes
- rakes
- moulds
- gardening tools
- source of water
- · garden hoses, water sprinkler

#### **Music and Movement Area**

When creating a music and movement area the following should be considered:

Are a variety of music and musical instruments provided?

Are children encouraged to make their own rhythm instruments, such as tambourines, maracas, and rain sticks?

Are children provided opportunities to experiment with audio or video recordings with a computer, tape recorder, or digital recorder?

Is there an area for children to listen to music with headphones to not disturb other children? Do educators introduce children to musical instruments and music players when required?

# Suggested materials and equipment for music and movement area:

- variety of story, song, rhythm and movement media choices
- variety of music opportunities e.g. classical, jazz, pop, children's music, rock, R&B, cultural music from other countries ensure that music is appropriate for children
- music player with headphones
- Karaoke machine
- microphones
- musical instruments e.g. drums, cymbals, xylophone, triangles, tambourines, castanets, bells, maracas, auto harp, ukuleles, etc.
- scarves, streamers, ribbons, pompons, hoops, balls, costumes for movement and dance activities
- props
- dance shoes tap, ballet
- performance stage area

# Cooking

When cooking with the children the following should be considered:

Are children provided the opportunity to be actively involved in cooking? Are children encouraged to research what they would like to make?

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Do educators provide diverse cooking experiences, representing a variety of cultures and dietary choices (vegetarian, vegan)?

# Suggested materials and equipment for cooking:

- variety of kitchen utensils: spoons, spatulas, measuring cups and spoons, cookie cutters, rolling pin, eggbeater, etc.
- bowls
- cookie sheets
- muffin tins
- · baking/cooking ingredients, as needed
- variety of multicultural cookbooks appropriate for children
- cooking tools required: wok, chopsticks, frying pan, pots, pans

# **Construction and Carpentry Area**

When creating a construction and carpentry area the following should be considered:

Are children encouraged to create using real tools and materials?

Are children provided with guidance on how to keep the area safe?

Are books available that demonstrate how to build items?

Do educators provide assistance when asked for it?

Do educators ensure that the area is kept well stocked to prevent frustration of children?

#### Suggested materials and equipment for construction and carpentry area:

- storage shelf
- muffin tins, small plastic containers, or shoe boxes for sorting nails, screws, etc.
- real tools which may include: hammers, plane, pliers, vise, saws, screwdrivers, tape measure, square, level, wrench, drill and bits
- nails, screws, washers, wire, tacks, string
- sandpaper, graph paper
- paint
- wood scraps
- pencils, markers

# **Technology**

When creating a technology area the following should be considered:

What new technologies are available for use in the facility?

What safety precautions are in place for children accessing the internet?

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How do educators ensure that children aren't spending too much time on computers? Are computers in view of educators at all times to ensure they are easily supervised? Are educators available to provide assistance to children as required?

# Suggested materials and equipment for a technology area:

- computer
- headphones
- printer/scanner
- access to internet
- educational software/games
- paper
- camera
- photo paper
- voice recorder
- video recorder
- tables and chairs

# Appendix 23 - Educational Institutions with Recognized Early Childhood Education Programs



Early Learning and Childcare Facility Educational Institutions with Recognized Early Childhood Education Programs

# **New Brunswick**

# **Academy of Learning**

- · Early Childhood Education Certificate
- · Early Childhood Education & Teacher Assistant Diploma

# **Atlantic Business College**

· Early Childhood Education Diploma

# Collège communautaire du Nouveau-Brunswick (CCNB)

- Certificat d'éducation de la petite enfance
- Diplôme d'éducation de la petite enfance

# **Crandall University (formerly Atlantic Baptist University)**

· Bachelor of Education

# Horizon College (closed)

· Early Childhood Education Diploma

#### **Kingswood University**

· Early Childhood Education Associate of Arts degree

# New Brunswick Community College (NBCC)

- · Early Childhood Education Certificate
- · Early Childhood Education Diploma

# **Oulton College**

- · Early Childhood Education Diploma
- Early Childhood Education/ Teacher Assistant Diploma

#### St Thomas University

· Bachelor of Education

# Union of New Brunswick Indians (UNBI) Training Institute

- · Early Childhood Education Diploma
- · Early Childhood Education Certificate

#### Université de Moncton

· Bachelor of Education

# **University of New Brunswick**

· Bachelor of Education

#### **Nova Scotia**

# College de L'Acadie

· Early Childhood Education Diploma

# Institute for Early Childhood Education and Developmental Services

· Early Childhood Development Diploma

# **Mount Saint Vincent University**

· Bachelor of Arts in Child and Youth Study

#### **Nova Scotia Community College**

• Early Childhood Education Diploma

# Nova Scotia College of Early Childhood Education (NSCECE) (formerly St. Joseph's College of Early Childhood Education)

· Early Childhood Education Diploma

# **Prince Edward Island**

# Collège Acadie Î.-P.-É.

· Early Childhood Education Diploma

# **Holland College**

· Early Childhood Education Diploma

# Newfoundland

# **College of the North Atlantic**

- · Early Childhood Education Certificate
- · Early Childhood Education Diploma

#### **Keyin College**

Early Childhood Education Diploma

# **All Provinces**

A certificate, diploma or degree from a community college or university which clearly states Early Childhood Education.

Colleges must be signatory with Colleges and Institutes Canada <a href="http://www.collegesinstitutes.ca/our-members/member-directory/">http://www.collegesinstitutes.ca/our-members/member-directory/</a>

# Appendix 24 - Maintaining a Scent Reduced Environment



Early Learning and Childcare Centre Maintaining a Scent Reduced Environment

Scents can usually be found in personal care products, such as perfumes, aftershaves, colognes, shampoos and conditioners, soaps, body lotions and deodorants. Scents are also found in household items, such as air fresheners, deodorizers, candles, some laundry detergents, fabric softeners and cleaning products.

Chemicals used to add scents to products can cause serious health problems for some people, especially for people with respiratory diseases such as asthma. Being near a scented product can make some people sick. Young children are especially vulnerable because of their developing systems and their size.

Scents enter our bodies through our skin and our lungs. The chemicals in scents can cause many different reactions. Even products containing natural plant extracts can cause allergic reactions in some people.

To minimize exposure to scents in the facility, operators should:

- Use gentler cleaning products on windows, walls, and floors where sanitizers are not required by the Department of Health.
- Use scent-free personal care products.
- Use non-scented laundry detergent and soap.
- Keep your facility well ventilated. If you don't have an air exchange system, open a
  window to get fresh air in and stale air out. You can also put a fan in a window drawing
  air out and open another window to increase air circulation.
- Avoid the use of oil diffusers, essential oils, air fresheners, scented candles and any other products used to fragrance the air.
- If a scent-free policy is not in place, work with your staff to adopt one. For more information on how to create and implement a scent-free policy visit: "Developing a Scent-free Policy for the Workplace" at <a href="https://www.nb.lung.ca">www.nb.lung.ca</a>.
- Post "Scent-free Childcare Facility" signs to remind parents and staff to go scent-free.

Visit New Brunswick Lung Association for more information <a href="https://nb.lung.ca/programs/indoor-air-quality-iaq/scents">https://nb.lung.ca/programs/indoor-air-quality-iaq/scents</a>

# Appendix 25 - Using Video Monitoring



Early Learning and Childcare Facility
Using Video Monitoring

In the event that a facility chooses to use video monitoring, the following should be considered:

- Is there a reason for security cameras to be installed?
- What is the purpose of the footage?
- Is it only video, or is it video and audio?
- Where are the cameras located? (they are only to be located in the "public" areas of the facility)
- Who has access to the footage, who "owns" the footage, and how long is it kept?
- Operators are to include a statement in their parent handbook stating that they use audio/video recording.
- Staff and children should be aware of the cameras, and whether they record simply video, or if they record sound as well.
- The security company responsible for the system should be contacted to determine if they have a policy regarding the footage they accumulate. Operators should feel comfortable in how these recordings are handled, encrypted, accessed, their purpose,
- Is the footage scanned by the company regularly, or only when requested by the center to the company?
- Are the recordings encrypted, kept onsite or offsite (in Canada, or US, cloud based, etc), are they downloaded once a day/week, or is it a live stream that others at the security company can watch live?
- Parents should sign a form stating that they are aware of cameras/security; however, the rights of their children to privacy when they are in the facility must be respected.
- Signs should be posted advising that there is audio/video monitoring.

For more information on video surveillance, consult the Office of the Access to Information and Privacy Commissioner – New Brunswick at <a href="http://www.info-priv-nb.ca/userfiles/file/best%20practice%20-%20Video%20Surveillance.pdf">http://www.info-priv-nb.ca/userfiles/file/best%20practice%20-%20Video%20Surveillance.pdf</a>

# Appendix 26 - Ideas for Healthy Snacks



Early Learning and Childcare Facility Ideas for Healthy Snacks

Each snack includes foods from two or more food groups

- Apple or banana slices spread with peanut butter
- Whole grain pita with cheese, cucumber and tomato
- Fresh fruit and plain yogurt
- Chunks of cheese and pieces of fruit
- Whole grain pita with hummus
- Whole grain roll and cheese
- Hard-boiled egg and pieces of tomato
- Sweet potatoes, apple, milk
- Whole grain muffin and milk
- Hot or cold whole grain cereal with fruit and milk
- Raw or cooked vegetables with hummus
- Steamed spinach with yogurt, onions and garlic
- Baked beans and toast
- Smoothie with milk or yogurt and fruit
- Whole grain toast, applesauce and milk
- Whole grain pita with pizza sauce and grated cheese
- Fruit, whole grain pita, milk
- Soup and whole grain crackers
- Rice cracker, yogurt, fruit

#### Reference:

# Appendix 27 - Menus and Recipes



Early Learning and Childcare Facility Menus and Recipes

Menu Plan	
Week:	

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning snack					
Lunch					
Afternoon snack					
Substitutions					

SAMPLE Menu Plan Week:

\*Recipes included ^Modification required for 0-4 year olds

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning snack	Apple slices^ Yogurt	Blueberry muffin* Milk	Banana roll-up*	Cheese Sliced fruit	Applesauce Toast with cinnamon
Lunch	Beef chili* Cornmeal muffin* Canned peaches Milk	Egg salad sandwich* Vegetable soup* Kiwi slices Milk	Shepard's Pie* Whole grain roll Fruit salad Milk	Baked fish* Potato wedges* Mixed veggies Rhubarb-blueberry crumble*	Veggie-bean burrito* Watermelon slices Milk
Afternoon snack	Whole grain mini- pitas Hummus	Fruit smoothie*	Cucumber and carrot sticks^ Cheese	Grapes ^ Whole grain crackers	Oatmeal cranberry cookie* Yogurt
Substitutions					

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SAMPLE Menu Plan

	Monday	Tuesday	Wednesday	Thursday	Friday
	Apple slices Yogurt	Blueberry muffins Milk	Banana roll-up	Cheese Sliced fruit	Applesauce Cinnamon toast
Morning snack	<b>)</b>				
At least 2 food	√ V/F	√ V/F	√ V/F	√V/F	√V/F
groups	_Grains	√Grains	√Grains	_Grains	√Grains
	_Meat & Alt	_Meat & Alt	√Meat & Alt	_Meat & Alt	_Meat & Alt
	√Milk & Alt	√Milk & Alt	_Milk & Alt	√ Milk & Alt	_Milk & Alt
	Beef chili	Egg salad sandwich	Shepard's Pie	Baked fish	Veggie-bean burrito
	Cornmeal muffin	Vegetable soup	Whole grain roll	Potato wedges	Watermelon slices
	Milk	Milk	Milk	Rhubarb-blueberry	VIII)
Lunch				crumble	
4 food groups	₹/V/F	√V/F	√ V/F		₹/V/F
	√Grains	√Grains	√Grains	√V/F	√Grains
	√Meat & Alt	√Meat & Alt	√Meat & Alt	√Grains	√Meat & Alt
	√Milk & Alt	√Milk & Alt	√Milk & Alt	√Meat & Alt √Milk & Alt	√Milk & Alt
	Whole grain mini-	Fruit smoothie	Cucumber and	Grapes	Oatmeal cranberry
	pitas		carrots	Whole grain	cookie
Afternoon snack	Hummus		Cheese	crackers	Yogurt
At least 2 food	V/F	√V/F	√ V/F		V/F
groups	√Grains	_Grains	_Grains	√ V/F	√Grains
	√Meat & Alt	_Meat & Alt	_Meat & Alt	√Grains	_Meat & Alt
	_Milk & Alt	√Milk & Alt	√Milk & Alt	_Meat & Alt	√Milk & Alt
				_Milk & Alt	
Substitutions					

# Chili

Adapted from *Healthy U* Makes 8-10 servings

1 tsp	Canola oil	5 mL
1	Medium onion, finely chopped	1
1	Clove garlic, finely chopped	1
1	Medium green or red pepper, chopped	1
1 lb	Extra lean ground beef or ground turkey	500 g
14oz	Stewed tomatoes, unsalted, undrained	398 mL
2 tsp	Chili powder	10 mL
1 tsp	Oregano	5 mL
14oz	Kidney beans, drained and rinsed	398 mL
½ cup	Mushrooms, sliced (optional)	125 mL

- 1. In a large sauce pan, heat the oil.
- 2. Add onions, garlic and green pepper. Sauté over medium heat for a couple of minutes. Cover to let vegetables soften for another couple of minutes.
- 3. If using meat, add to vegetables and cook until all pink has left the meat. Stir in tomatoes and seasonings. See vegetarian option below.
- 4. Bring to a boil, heat and simmer for 10 minutes. Add the beans, mix well and continue cooking until chili reaches an internal temperature of 74°C (165°F) for at least 10 minutes.

**Vegetarian option:** To make vegetarian chili, substitute a 398 mL can of white kidney beans and omit the beef. Remember to drain or rinse the beans prior to adding to reduce the sodium.

# **Oven-Baked Potato Wedges**

Adapted from Food Flair Makes 6-8 servings

4	Large potatoes (e.g. russet, Yukon	4
	Gold or sweet potatoes)	
1 tbsp	Vegetable oil	15
2 top	Mixed barba or 2 than (20 ml ) freeh	10

mL Mixed herbs or 2 tbsp (30 mL) fresh 10 mL 2 tsp

- herbs, finely chopped
- 1. Preheat oven to 400 F.
- 2. Wash potatoes with scrub brush.
- 3. Cut the potatoes into wedges.
- 4. Put oil into a sealable plastic container with the herbs.
- 5. Add the potato wedges to the container.
- 6. Close tightly and shake.
- 7. Put potatoes onto a baking tray and place in the hot oven.
- 8. Bake for 15 minutes, then turn with spatula and bake another 15 minutes until brown.

# Egg Salad

Adapted from *Food Flair* Makes 1 serving

1 Egg, hard boiled 1 tbsp Mayonnaise

Dash Salt

- 1. Boil and cook egg.
- 2. Crack and peel the egg.
- 3. Crumble the egg into a bowl.
- 4. Add the mayonnaise and a dash of salt.
- 5. Mix well.
- 6. Spread on whole wheat bread, whole wheat tortilla or whole wheat crackers.

# **Veggie-Bean Burritos**

Adapted from *Having Fun with Healthy Foods: A daycare menu planning manual* Makes 50 servings

2 tbsp	Vegetable oil	30 mL
5 x 14oz	Canned kidney beans, drained and rinsed	5 x 398 mL
5 x 14oz	Canned baked beans	5 x 398 mL
10	Carrots, grated	10
10	Zucchini, grated or 3 bunches broccoli, cut into small pieces	10
5 x 14oz	Canned tomatoes, drained and chopped (reserve liquid)	5 x 398 mL
6	Onions, finely chopped	6
5	Green pepper, chopped	5
2 tbsp	Each chili powder, garlic powder, dried oregano, cumin	30 mL
50	Whole wheat tortillas (6-inch)	50
	Shredded cheese, sour cream, salsa	

- 1. In a nonstick skillet, heat oil over medium heat, cook onions, stirring occasionally for 3 minutes.
- 2. Add green pepper, zucchini and carrot. Cook, stirring for 5 minutes. Stir in spices.
- 3. Add beans. Continue to cook and stir for 10 minutes.
- 4. Spread ¼ cup (60 mL) of bean and vegetable mixture over each tortilla, leaving about 1" border.
- 5. Roll up each tortilla and place, seam side down, in a baking dish that has been sprayed with vegetable oil.
- 6. Bake in 400°F (200°C) oven for 15-20 minutes. Sprinkle with cheese and bake for 5 minutes longer.
- 7. Serve burritos with toppings such as: shredded cheese, sour cream, and salsa.

# **Hearty Blueberry Muffins**

Adapted from *Strive for Five at School* Makes 40 muffins

3 cups	all-purpose flour	400 g
3 cups	Whole-wheat flour	420 g
1 cup	Flax flour or flax meal	65 g
3 tbsp	Baking powder	45 g
1 tsp	Baking soda	5 g
1 tsp	Salt	5 g
4	Eggs	4
1 ½ cups	Canola oil	375 mL
1 ½ cups	Brown sugar, lightly packed	227 g
3 ½ cups	Applesauce, unsweetened	875 ml
2 cups	Blueberries, frozen	300 g
½ cup	Brown sugar, lightly packed	75 g

- 1. In a large mixing bowl, mix the 3 flours, baking powder, baking soda and salt.
- 2. In a separate bowl, beat the eggs; add the oil, brown sugar and applesauce.
- 3. Add the liquid ingredients to the dry ingredients and mix until blended or until the dry ingredients have been moistened.
- 4. Gently fold the blueberries into the batter.
- 5. Pour into the muffin cups, filling each muffin cup 2/3 full. Sprinkle the remaining ½ cup (125 mL) of brown sugar over the 40 muffins.
- 6. Bake 20-30 minutes, until lightly browned and a toothpick inserted in the centre comes out clean.

# **Vegetable Noodle Soup**

Adapted from *Alberta Nutrition Guidelines for Children and Youth* Makes 9 – ½ cup servings

4 cups	Chicken, beef or vegetable broth (reduced sodium/salt)
½ cup	Broccoli, frozen
½ cup	Sweet peas
½ cup	Niblet corn
½ cup	Carrots, sliced
½ cup	Celery, thinly sliced
½ cup	Whole wheat noodles

- 1. In a large pan, bring broth and water to a boil. Add frozen vegetables, carrots and celery; cook one minute
- 2. Add noodles.
- 3. Reduce heat to low; simmer five minutes or until vegetables are tender-crisp and noodles are cooked.

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# Shepard's Pie

Adapted from *Alberta Nutrition Guidelines for Children and Youth* Makes 10 – <sup>3</sup>/<sub>4</sub> cup servings Preheat oven to 350F

2 cups Mashed potatoes 1 Onion, chopped ½ cup Broccoli, cut into flowerets ½ cup Green pepper, chopped 2 cups Carrots, chopped ½ cup Tomato paste 2 ½ cups Lean ground turkey (or beef) 2 tbsp Oil ½ cup Water ½ tsp Basil 1 cup Shredded cheese 1 Bay leaf

- 1. Brown the ground turkey in a pain until no pink colour remains. Remove meat from pan.
- 2. Sauté onion in oil; add broccoli, pepper, carrots, basil and bay leaf. Stir well and add tomato paste, water and the cooked ground beef; bring to boil.
- 3. Cover and simmer on low 15 minutes or until vegetables are tender.

Paprika, sprinkle

- 4. Put vegetable/meat mixture and cooking liquid in 9x13 inch baking dish. Top with mashed potatoes, then cheese. Sprinkle with paprika for colour.
- 5. Bake 10-15 minutes or until potatoes are heated through. Make sure the internal temperature of the pie reaches 74°C (165°F) for at least 10 minutes.

#### **Vegetable Dip**

Adapted from Food Flair and Healthy U

³∕₄ cup	Plain yogurt	200 mL
3 tbsp	Mayonnaise	50 mL
1 tbsp	Green onion, minced	15 mL
1 tsp	Dijon mustard	5 mL
2 tsp	Chopped fresh dill or 1 mL (1/4 tsp) dried	10 mL
2 tsp	Chopped fresh basil or 1 ml (1/4 tsp) dried	10 mL
To taste	Garlic powder (optional)	

- 1. In a bowl, mix together all ingredients. Season with garlic powder to taste, if desired.
- 2. Refrigerate covered for at least one hour and up to 3 days.
- 3. Serve with raw vegetables or whole grain bread/pita.

# **Cornmeal Muffins**

Adapted from *Strive for Five at School* Preheat oven to 375F

12 muffin cups lined with papers OR mini-muffin tin, greased

1 cup	All-purpose flour	250 mL
1 cup	Cornmeal	250 mL
4 tsp	Baking powder	20 mL
2/3 cup	Kernel corn	150 mL
½ tsp	Salt	2.5 mL
Pinch	Cayenne pepper, ground	Pinch
1/3 cup	Canola oil	75 mL
1 tbsp	Red pepper, finely chopped	15 mL
1 tbsp	Green onion, finely chopped	15 mL
2	Eggs, beaten	2
1 cup	Skim milk	250 mL
4oz	Light cheddar cheese	120 g

- 1. In a large mixing bowl, mix the flour, cornmeal, baking powder, kernel corn, salt and cayenne pepper
- 2. Heat 1 tsp (5 mL) of the oil; heat in a frying pan over medium heat. Add the red pepper and green onion; sauté until soft. Add to the dry ingredients
- 3. Mix the eggs, skim milk and remaining oil together. Add to the other ingredients and mix until blended or until the dry ingredients have been moistened.
- 4. Cut the cheese into 12 equal-sized cubes.
- 5. Fill the muffin cups 1/3 full. Place a cheese cube in the centre of each muffin. Add the remaining batter to the muffin cups until each one is 2/3 full.
- 6. Bake for 20-30 minutes, until lightly browned and a toothpick inserted in the centre comes out clean.

#### **Fruit Smoothies**

Adapted from *Food Flair* Makes 4 servings

1 cup	Frozen berries	250 mL
1 cup	Milk or soy milk	250 mL
1 cup	Plain or vanilla yogurt	250 mL
½ tsp	Cinnamon	2.5 mL

- 1. Place berries, milk, yogurt, cinnamon and sugar in the blender.
- 2. Blend until smooth.
- 3. Serve into four cups or store in the fridge.

# Oatmeal Cranberry Cookies - Adapted from Strive for Five at School

Makes 60 cookies Preheat oven to 350F

4 11"x17" sheet pans, lightly greased

1 cup	Non-hydrogenated margarine	250 g
1 cup	White granulated sugar	250 g
1 cup	Brown sugar, lightly packed	150 g
2	Eggs	2
2 cups	Whole-wheat flour	240 g
2 cups	Rolled oats	200 g
½ cup	Wheat germ	30 g
2 tsp	Baking powder	10 g
2 tsp	Baking soda	10 g
2 cups	Chopped cranberries, fresh or frozen	200 g

- 1. In a large bowl, cream the margarine with the 2 sugars; beat in the eggs.
- 2. In another bowl, combine the flour, oats, wheat germ, baking powder, and baking soda. Add to the creamed mixture and mix well. Stir in the cranberries
- 3. Drop by tablespoons onto the sheet pans (Be sure to get 60 cookies from this recipe.) Flatten slightly with a wet fork.
- 4. Bake for about 12 minutes or until lightly golden.

#### **Baked Fish**

Adapted from *Healthy U* Makes 6-8 servings

1 ½ lbs White fish (haddock, tilapia, cod, sole)

2 tbsp Vegetable oil

Lemon slices

Herbs (dried or fresh)

- 1. Spray baking dish with vegetable oil.
- 2. Place fish in 9x13 inch baking dish.
- 3. If desired, add lemon slices and herbs on top of the fish.
- 4. Cover dish with foil. Bake at 400°F for 15-20 minutes or until the fish reaches an internal temperature of 74°C (165°F) for at least 10 minutes.

# Banana roll-up

# Makes 4 servings

4 tbsp Smooth peanut butter

Whole wheat tortillas (8-inch)

2 Bananas

- 1. Spread 2 tbsp of peanut butter on each tortilla
- 2. Place peeled banana in the centre of the tortilla
- 3. Fold the ends over the banana and roll-up the tortilla
- 4. Cut in half and serve

# **Rhubarb & Blueberry Crumble**

Adapted from *Strive for Five at School* Preheat oven to 350F 1- 8"x8" baking pan

#### Crumb Mixture

¾ cup	Oatmeal (large flake, not instant)	175 mL
3 tbsp	Wheat germ	45 mL
3 tbsp	Flax flour or flax meal	45 mL
¼ cup	Brown sugar, lightly packed	50 mL
½ tsp	Cinnamon, ground	2 mL
1/4 cup	Non-hydrogenated margarine	50 mL

# Fruit Mixture

2 cups	Rhubarb, frozen, cut into 1" pieces	500 mL
2 cups	Blueberries, fresh or frozen	500 mL
1/3 cup	Brown sugar, lightly packed	75 mL
½ tsp	Cinnamon, ground	2 mL
1 tbsp	Cornstarch	15 mL

- 1. In a large bowl, mix the oatmeal, wheat germ, flax flour, brown sugar, and cinnamon. Cut the margarine into the flour mix until it is well distributed and all the dry ingredients have been moistened.
- 2. In a second large bowl, combine the rhubarb and blueberries
- 3. Mix the brown sugar, cinnamon and cornstarch. Spread over the fruit and toss well.
- 4. Spoon the fruit mixture evenly into the pan and sprinkle the crumb mixture evenly over the fruit.
- 5. Bake for 40-45 minutes or until the fruit is soft and golden.

#### **Recipe References:**

Government of Alberta. Alberta Nutrition Guidelines for Children and Youth: A Childcare, School and Recreation/Community Centre Resource Manual. 2012. Available at: https://open.alberta.ca/publications/5906406. Accessed January 25, 2018.

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Vancouver Coastal Health. Food Flair: Early Learning Practitioners Resource. 2014. Available at: <a href="https://www.vch.ca/media/Food\_Flair\_Resource\_Manual\_December\_2014.pdf">https://www.vch.ca/media/Food\_Flair\_Resource\_Manual\_December\_2014.pdf</a>. Accessed February 26, 2016.

## Appendix 28 - Menu Planning Checklist



Early Learning and Childcare Facility
Menu Planning Checklist

The Menu Planning Checklist is a tool that can be used as you begin to develop a menu or to review a completed menu. Following this checklist will help you create healthy menus that are consistent with the *Licensing Regulation – Early Childhood Services Act*.

Ger	eral	Gu	lahi	lines
<b>U</b> GI	ıcıaı	- Ou	ıuc	11163

	Each of the four food groups are included at recognized meal times At least two of the four food groups are included at every snack Foods served contain little to no added fat, sugar and salt Honey and foods containing honey are not served to children under one year of age Foods and beverages of low nutritional value or that pose a food safety risk are not included on the menu (Appendix ) Foods and beverages that are potential choking hazards are not included on the menu for children younger than four or are modified to be safer (Appendix )
Food	Group Guidelines
Vegeta	A variety of vegetables and fruit are served each day Vegetables and fruit are served more often than 100% juice 100% juice is served no more than two times a week (1/2 cup per serving) and is never served in a bottle
Grain       	Products Use whole grain products as much as possible Whole grains include: oats, corn, rice, wheat berries, flax seeds, wheat germ, rye, light rye, stone ground whole wheat, kamut, amaranth, quinoa, pumpernickel, barley, cracked wheat, bulgur, sprouted grain, flax
Milk ar	Children from nine months to two years of age are served whole/homogenized (3.25%) milk Children under nine months will receive either breast milk or infant formula provided by the parents Children over two years are served 2% milk
Meat a	and Alternatives  Meat alternatives are served at least once a week (e.g. beans, lentils, tofu, eggs)  Fish is served at least once a week

#### References:

Government of Nova Scotia. Manual for Food and Nutrition in Regulated Child Care Settings. 2011. Available at: <a href="https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf">https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf</a>. Accessed January 26, 2018.

Health Canada: Food Guide – Children. 2011. Available at: <a href="http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/child-enfant-eng.php">http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/child-enfant-eng.php</a>. Accessed January 26, 2018.

Health Canada. Eating Well with Canada's Food Guide a Resource for Educators and Communicators. 2011. Available at: <a href="http://www.hc-sc.gc.ca/fn-an/pubs/res-educat/res-educat-eng.php">http://www.hc-sc.gc.ca/fn-an/pubs/res-educat/res-educat-eng.php</a>. Accessed January 26, 2018.

# Appendix 29 - Healthy Substitutions



Early Learning and Childcare Facility Healthy Substitutions

**Cooking Substitutions** 

Cooking Substitutions						
То	Instead of	Try				
Use less fat	Frying	<ul> <li>Grilling, baking, roasting, broiling, or poaching</li> </ul>				
	Butter, margarine, or oil	Using less than the recipe calls for				
	in the amount called for	Replacing with cooking spray, water or broth, or				
	Eatty outs of boof, park	using a non-stick frying pan				
	Fatty cuts of beef, pork, lamb or sausage	<ul><li>Lean cuts of meat such as loin or round</li><li>Trimming visible fat</li></ul>				
	lamb or sadsage	Fish, dried peas, beans or lentils				
	Cooking poultry with the	Removing the skin and excess fat				
	skin on	Adding colour with paprika, herbs or tomato				
		sauce				
	Cream	<ul> <li>Using skim, 1% milk, 2% milk, evaporated milk</li> </ul>				
		or equal parts of low-fat milk and evaporated milk				
		<ul> <li>Using fortified milk (one part skim milk powder</li> </ul>				
		to four parts low-fat or skim milk)				
		Using low-fat sour cream				
	Full-fat cream cheese	Using fat-free or low-fat cream cheese, yogurt				
	Full-fat sour cream	cheese or cottage cheese pureed until smooth				
	Full-lat Soul Clean	<ul> <li>Replacing all or part with fat-free or low-fat sour cream, cottage cheese, part skim ricotta, yogurt</li> </ul>				
		cheese or plain yogurt (250 mL yogurt blended				
		with 15 mL cornstarch if it will be cooked)				
Use less	Fruit canned in syrup	Using fresh fruit or fruit canned in its own juice				
sugar		or water				
	Syrup	Using pureed fruit or small amounts of syrup				
Use less	Canned broth	Using homemade stock, commercial reduced-				
sodium		sodium or salt-free stock  Lising houillon in souns, gravies, sauces and				
		dressings				
	Regular canned foods	Using foods canned in water (not homemade),				
		preferably with no salt added  Using reduced-sodium products				
		<ul><li>Using reduced-sodium products</li><li>Draining and rinsing canned foods for 30</li></ul>				
		seconds				
		Using fresh foods when possible				
	Processed, cured or	Using fresh or frozen meat or poultry cooked				
	smoked meats	without salt or high-sodium smoked meat				
		ingredients				
	Instant packaged foods,	Preparing product from scratch using fresh is readily to				
	especially with salty powder or sauce packets	ingredients				
	powder or sauce packers	<ul> <li>Using only a small amount of the prepared powder or sauce</li> </ul>				
		<ul> <li>Using homemade herb and spice mixtures</li> </ul>				
		<ul> <li>Using chopped or sliced vegetables or fruit</li> </ul>				
		instead of pickles				
		<ul> <li>Using chunky fruit or vegetable sauces like</li> </ul>				
		salsa, chutney or relish				

Commercial condiments	<ul> <li>Using small amounts (1 tsp – 1 tbsp / 5 mL – 15 mL) of condiments such as ketchup, soya sauce, salad dressings and salsas</li> <li>Substituting reduced-sodium products</li> </ul>
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**Baking Substitutions** 

Baking Substitutions					
То	Instead of	Try			
Boost fibre	250 mL white flour	<ul> <li>Using 125 mL white flour plus 125 mL whole wheat or whole grain flour</li> <li>Using 175 mL white flour plus 50 mL ground flaxseed</li> <li>Adding wheat bran or oatmeal to breads and muffins</li> </ul>			
Use less fat	125 mL fat (e.g. oil, margarine, butter)	<ul> <li>Using 50 mL mashed fruit plus 50 mL fat; use applesauce, apple butter, mashed banana, pureed prunes, or pureed pumpkin (using mashed fruit may reduce the baking time by 25%)</li> </ul>			
	250 mL fat (e.g. oil, margarine, butter)	<ul> <li>Using 150 – 175 mL fat</li> </ul>			
	250 mL solid fat (e.g. margarine, butter, or shortening in yeast breads)	Using 175 mL ricotta cheese plus 50 mL solid fat			
	Cream	<ul> <li>Using low-fat evaporated milk or low-fat sour cream</li> </ul>			
Use less salt	Using the amount called for	Omitting the salt or using less			
Use less sugar	250 mL sugar	<ul> <li>Using 150 to 175 mL sugar; add cinnamon, vanilla or almond extract</li> </ul>			
	250 mL chocolate chips	<ul> <li>Using 125 – 250 mL chopped dried fruits such as cranberries, raisins, apricots or cherries (or a combination)</li> </ul>			
	Fruit canned in syrup	<ul> <li>Using fruit canned in its own juice or water, or fresh fruit</li> </ul>			
	Frosting or icing	Using sliced fresh fruit or pureed fruit			
Boost iron	125 mL fat (e.g. oil, margarine or butter)	<ul> <li>Using 50 mL fat plus 50 mL pumpkin puree</li> <li>Adding raisins, dried apricots, pumpkin or sesame seeds, nuts, oatmeal, wheat germ</li> </ul>			
	375 mL sugar in breads, muffins, cookies	<ul> <li>Using 250 mL blackstrap molasses and 175 mL sugar; add 2 mL of baking soda for each 250 mL of molasses; omit baking powder or use half the amount. Molasses should not replace more than half of the sugar called for in a recipe.</li> </ul>			

#### References:

Government of Nova Scotia. Manual for Food and Nutrition in Regulated Child Care Settings. 2011. Available at: <a href="https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf">https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf</a>. Accessed January 26, 2018.

Government of Prince Edward Island. Healthy Living Guidelines for Early Learning and Child Care Centres on Prince Edward Island. 2012. Available at: <a href="http://www.gov.pe.ca/photos/original/eecd\_healthyliv.pdf">http://www.gov.pe.ca/photos/original/eecd\_healthyliv.pdf</a>. Accessed January 26, 2018.

## Appendix 30 - Serving Sizes for Children



Early Learning and Childcare Facility
Serving Sizes for Children

Food Guide servings may be larger than a young child can eat at one time. Children have small stomachs and need to eat small amounts of food more often throughout the day. One food guide serving can be divided up into smaller amounts and served throughout the day.

For example, children need 1 serving of meat and alternatives per day. They could have one hard-boiled egg (1/2 a Food Guide serving) for a snack and 60 mL (1/4 cup) of chicken (1/2 a Food Guide serving) for lunch.

1 egg + ½ cup cooked chicken = 1 Food Guide serving of Meat & Alternatives

#### Keep in mind:

- Caregivers decide <u>what foods</u> are offered and children decide <u>how much</u> they need to
  eat. The amount of food eaten at each meal and snack will be different each day
  depending on many things, such as the child's appetite, how active they are, if they are
  feeling sick or are having a growth spurt.
- Offer small portions and allow children to ask for more if they are still hungry.
- When young children are hungry, they will focus on eating. When they are full, they lose interest in meal or snack time and will want to do something else.

#### For more information:

- Eating Well with Canada's Food Guide (<a href="http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php">http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php</a>)
- Eating Well with Canada's Food Guide: A Resource for Educators and Communicators (pages 39-41) (<a href="http://www.hc-sc.gc.ca/fn-an/alt\_formats/hpfb-dgpsa/pdf/pubs/res-educat-eng.pdf">http://www.hc-sc.gc.ca/fn-an/alt\_formats/hpfb-dgpsa/pdf/pubs/res-educat-eng.pdf</a>)
- Sample 1-day menus:
  - o 3 year old girl (<a href="http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/child-enfant\_wide-eng.php">http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/child-enfant\_wide-eng.php</a>)
  - 7 year old boy (<a href="http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/boy-garcon-7-eng.php">http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/boy-garcon-7-eng.php</a>)
  - 10 year old boy (https://www.canada.ca/en/health-canada/services/foodnutrition/canada-food-guide/choosing-foods/advice-different-ages-stages/sample-10-year-old-boy.html)
  - 12 year old girl (<a href="http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/girl-fille-12-eng.php">http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/choose-choix/advice-conseil/girl-fille-12-eng.php</a>)
- What is a food guide serving of: <u>vegetables and fruit</u>
- What is a food guide serving of: grains
- What is a food guide serving of: milk and alternatives
- What is a food guide serving of: meat and alternatives

## Appendix 31 - Foods to Serve



Early Learning and Childcare Facility Foods to Serve

#### Vegetables and Fruit

- Fresh vegetables and fruit
- Frozen vegetables
- Frozen fruit (100% fruit, no added sugar)
- Canned vegetables (rinsed and drained)
- Canned tomatoes, whole, diced or crushed
- Canned fruit (packed in juice or light syrup)
- Apple sauce or other fruit sauces (100% fruit, no added sugar or sugar substitutes)
- Dried fruit and vegetables without added sugars, sugar substitutes or fat

#### Milk and Alternatives

- Milk (fluid or powdered)
- Plain fortified soy beverage (children 2 years of age and older)
- Ricotta cheese
- Cottage cheese
- Hard cheese
- Yogurt
- Pudding

#### **Grain Products**

- Whole grain bread, bannock, tortillas, bagels, pitas, buns, crackers, English muffins, pancakes, waffles, roti, naan, pizza dough
- Rice
- Quinoa
- Couscous
- Unsweetened whole grain cereal
- Oatmeal
- Packaged products where whole grains is listed at the first ingredient
- Recipes using whole grains (e.g. muffins, loaves, sweet breads)

#### Meat and Alternatives

- Dried, canned and frozen legumes (e.g. beans, peas, lentils, chickpeas)
- Fresh and frozen fish (e.g. haddock, salmon, trout, shrimp, clam, smelt)
- Canned fish
- Nut and seed butters
- Eggs
- Fresh lean meats (e.g. beef, venison, bison, pork, lamb)
- Fresh poultry (e.g. chicken, turkey, duck)
- Hummus and bean dip

#### References:

Government of Nova Scotia. Manual for Food and Nutrition in Regulated Child Care Settings. 2011. Available at: <a href="https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf">https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf</a>. Accessed January 26, 2018.

Government of Prince Edward Island. Healthy Living Guidelines for Early Learning and Child Care Centres on Prince Edward Island. 2012. Available at:

http://www.gov.pe.ca/photos/original/eecd\_healthyliv.pdf. Accessed January 26, 2018.



#### Early Learning and Childcare Facility Foods Not to Serve

The following foods and beverages will not be included on the menu as ingredients or foods served.

Rationale	Food/Beverage
	- Processed cheese spreads
	- Processed meats (e.g. hot dogs, bologna, salami, pepperoni,
	bacon and sausages)
	- Hard taco shells
	- Canned soup and pasta (look for "low sodium")
	- Battered and fried vegetables
	<ul> <li>Dried fruit or vegetables with added sugar and/or sugar substitutes</li> </ul>
	- Sweetened gelatin (jello)
	- Chewy fruit snacks (e.g. gummies, leathers, roll-ups)
Foods and	- Sugar-coated cereal
beverages of low	- Pastries and doughnuts
nutritional value	- Candy and chocolate, including chocolate spreads
	- Marshmallows
	- Ice cream and frozen desserts
	<ul> <li>Foods or beverages containing sugar substitutes</li> </ul>
	- Snack foods (e.g. chips, cheese puffs)
	- Fruit-based drinks that contain less than 100% fruit juice
	- Pop, diet pop
	- Sport and energy drinks
	<ul> <li>Water with added flavourings, sweeteners, vitamins, minerals, etc</li> </ul>
	- Beverages with caffeine (e.g. tea, coffee, pop)
	- Honey for children under 12 months
	- Unpasteurized foods and beverages
Foods and	- Homemade canned goods
beverages that pose food safety	<ul> <li>High mercury fish (e.g. fresh/frozen tuna, shark, swordfish, marlin, orange roughy, escolar)</li> </ul>
risks	- Raw or undercooked eggs, meat, poultry, and fish
	- Unpasteurized milk, milk products and juice
	· · · · · · · · · · · · · · · · · · ·

	_	Nuts			
	-	Popcorn			
	-	Hard candy, cough drops			
Foods and beverages that are potential choking hazards for children younger than four years old	-	Gum			
	-	Whole grapes			
	-	Raisins			
	-	Raw carrots cut into rounds			
	-	Hot dogs			
	-	Fish with bones			
	-	Snacks with toothpicks or skewers			
	-	Marshmallows			

#### References:

Government of Nova Scotia. Manual for Food and Nutrition in Regulated Child Care Settings. 2011. Available at: <a href="https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf">https://www.novascotia.ca/coms/families/provider/documents/Manual-Food\_and\_Nutrition.pdf</a>. Accessed January 26, 2018.

Parent Health Education Resource Working Group. Loving Care: 1-3 Years. 2015. Available at: <a href="http://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy\_people/content/loving\_care.htm">http://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy\_people/content/loving\_care.htm</a> I. Accessed January 26, 2018.

## Appendix 33 - Choking Prevention



Early Learning and Childcare Facility
Choking Prevention

Choking can happen with any type of food, though some foods are more common choking hazards for young children. To prevent choking, encourage the children to eat while sitting down, not while running or playing; and not to rush while eating.

Foods that can cause choking	How to make these foods safer
Sticky foods – like peanut butter, tahini, and almond butter	Spread them thinly on whole grain breads or crackers  Don't give blobs or spoonfuls of these foods
Hard foods – like some raw vegetables and fruits	Cook hard foods to soften them Grate them into small pieces
Round, smooth foods – like grapes and cherries	Cut each one into 4 small pieces Remove seeds or pits
Tube-shaped foods – like baby carrots	Cut them lengthwise into strips Cut the strips into small pieces
Stringy or chewy foods – like meat, long thin pasta, and melted cheese	Cut these foods into small pieces
Dried fruit – like apricots, dates, cranberries, and raisins	Chop or dice into small pieces

#### References:

Government of Nova Scotia. Manual for Food and Nutrition in Regulated Child Care Settings. 2011. Available at: <a href="https://www.novascotia.ca/coms/families/provider/documents/Manual-Food">https://www.novascotia.ca/coms/families/provider/documents/Manual-Food and Nutrition.pdf</a>. Accessed January 26, 2018.

Parent Health Education Resource Working Group. Loving Care: 6-12 Months. 2015. Available at:

http://www2.gnb.ca/content/gnb/en/departments/ocmoh/healthy\_people/content/loving\_care.htm 
I. Accessed January 26, 2018.

## Appendix 34 - Infant Feeding Plan



Early Learning and Childcare Facility
Infant Feeding Plan

Infant feeding plans are developed at the request of parents or when foods from home are provided for children between birth and 12 months of age. The following is a list of possible questions that may be used when developing an infant feeding plan:

- What types of food does the child currently consume?
- Have solid foods been successfully introduced? If so, what types?
- · What textures have been successfully introduced?
- What are the child's food preferences?
- What are the child's self-feeding abilities?
- Are there any dietary considerations or special requests?
- Does the child have any identified allergies, food intolerances or any suspected concerns?
- What are the child's feeding times/routines?
- Are there any foods that the parents wish to wait to introduce?
- What is the process for updating and making changes to a feeding plan?
- To what extent will the childcare setting be involved in introducing new solids/textures?
- What is the plan for breast milk supply (e.g. liquid or frozen)?
- Is the mother planning to drop in to feed her baby?
- How should the facility respond in the event that breast milk is unavailable (e.g. runs out)?
- May the child eat modified items from the menu?
- Are there any food requests based on medical issues?
- Will the child consume food from home as well as from the facility? If so, how should the
  facility respond in the event that foods and beverages brought from home are
  unavailable (e.g. run out)?

These questions may be helpful when developing infant feeding plans. Infant feeding plans are especially beneficial to ensure there is ongoing communication between the facility and the family.

Feeding plans may be created for infants between the ages of birth to 12 months of age. This will enable ongoing communication between the infant's parent and the staff, including the cook.

Infant Feeding Plan

Name of child:		Date of birth:		Age at enrollment:
Does your child currently consume:  □ Breast milk*  □ Formula  □ Solid foods**  □ Cows' milk (3.25% milk fat)  Solid foods that have been introduced:	Feeding method:  □ Breastfed □ Bottle □ Spoon □ Cup  Feeding abilities: (e.g. fed by caregiver, selffeed with fingers, spoon and/or fork)		Special instructions This can include: breast milk or formula storage and supply, food allergies, religious/ cultural food requests, food requests related to medical conditions. This can also include whether the infant will consume food from home at the parents'/guardians' request, or consume food served in the facility.	
	Textures: (e minced, dic	• .		

For more information:

Breastfeeding your Baby (Storing and thawing breast milk sections)

How to feed your baby with infant formula – <a href="www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/HealthyPeople/BFI/InfantFormula.pdf">www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/HealthyPeople/BFI/InfantFormula.pdf</a>

Breastfeeding Friendly Places Initiative

#### Reference:

Government of Nova Scotia. Manual for Food and Nutrition in Regulated Child Care Settings. 2011. Available at: <a href="https://www.novascotia.ca/coms/families/provider/documents/Manual-Food">https://www.novascotia.ca/coms/families/provider/documents/Manual-Food and Nutrition.pdf</a>. Accessed January 26, 2018.

<sup>\*</sup>ELC facilities welcome mothers to breastfeed anywhere in the centre or home. Ongoing communication between staff and the parent will occur to make sure there is an adequate supply of breast milk at the facility. No other form of nutrition will be provided unless instructed by the parent.

<sup>\*\*</sup>It is important that infants receive nutrient dense, iron containing foods at 6 months of age. This may include foods from the Meat and Alternative group such as meats, fish, poultry, eggs, tofu and well-cooked legumes.



Early Learning and Childcare Facility
CHEFS! Toolkit

**CHEFS!** Is a toolkit that helps you teach children and youth about healthy eating and physical activity while they learn the fun of cooking. These are tools to help them be their best selves!

This toolkit was developed as a way for organizations to deliver interactive, thought–stimulating, and engaging opportunities around food and cooking. **CHEFS!** can be led by facilitators with little or no experience, and includes 90–minute sessions designed with children and youth aged 8 to 12 years in mind.

Upon completion of the sessions contained in this toolkit, participants will have learned basic cooking skills, practiced handling and storing food safely, and discovered the benefits of healthy eating and physical activity.

Learning is achieved through hands—on activities, games, and sharing delicious, healthy foods prepared by the kids themselves.

For further information on the CHEFS! Toolkit refer to the links below:

<u>Introduction – How to use the toolkit</u>

Theme 1 – Becoming a chef

Theme 2 – Keeping food safe

Theme 3 - Healthy eating

Theme 4 – All about nutrients

Theme 5 – Be active

# Policies, standards and guidelines

# Appendix 36 - Public Health Inspection Standards

For Public Health Inspection Standards, click the link below:

Health Inspection Standards for Early Learning and Childcare Centres\*

# Appendix 37 - Guidelines for the Prevention and Control of Communicable Diseases in Early Learning and Childcare (ELC) Facilities

For the guidelines on the Prevention and Control of Communicable Diseases in Early Learning and Childcare (ELC) Facilities, see the link below:

Guidelines for the Prevention and Control of Communicable Diseases in Early

Learning and Childcare (ELC) Facilities\*