

GUIDELINES AND POLICIES
FOR
CHILD CARE
AND
FAMILY DAYHOME
PROGRAMS

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GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

HEALTH

NUTRITIONAL GUIDELINES

INTRODUCTION:

The **Child Care Centre Regulations (Section 15 – 1 to 9)** and the **School Age Program Regulations (Section 15 – 1 to 4)** specify what snacks and meals are required for children attending full and part day programs.

- The operator of a child care program shall ensure that all children have a morning, mid-day or evening meal that includes at least a serving from each of the following four (4) food groups:
 1. Grain Products including breads, cereals, pasta, rice and bannock.
 2. Milk, Bone and Milk Products including cheese and yogurt, fish with crushed bones, such as canned salmon.
 3. Vegetables, Fruits, and Berries.
 4. Meat, Fish, Birds, Eggs and Alternatives, including beans, nuts, tofu and nut butters.
- A mid morning, mid afternoon or mid evening nutritional snack must be supplied that includes at least one serving from each of the two (2) food groups for children in attendance at those times. School age children must be supplied with an after school snack as above.
- Canada's Food Guide and/or the Native Food Guide shall be used as guides. Copies are available from the nutritionist, Whitehorse General Hospital or from Child Care Services Unit.
- Foods high in sugar, salt, fats and/or nitrates are to be used in moderation and never to replace foods from the 4 food groups.
- All foods shall be prepared, stored and served under sanitary conditions.
- An adequate supply of potable water shall always be available to children.
- Foods supplied from home shall be stored and served under sanitary conditions. Items which may be perishable within the time they were prepared, and intended to be eaten, shall be refrigerated. The operator of a child care facility shall ensure such foods are stored correctly.
- Foods may be supplied from home but **the operator of the centre has final responsibility to ensure that they are in accordance with these guidelines.**
- Infants must eat and drink according to their own individual schedule. A consistent adult figure shall be maintained whenever possible.
- Menus must be posted and followed and kept on file for three months.
- If foods are supplied from home a checklist must be maintained to ensure that all requirements are met.
- Any foods that are supplemented by the child care centre program must be recorded and kept on file.

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GUIDELINES FOR FOOD SERVICE

INTRODUCTION

If a child care centre serves hot meals, the following guidelines should be followed in order to ensure that children and staff are kept safe from food poisoning and contamination.

- Only food from an approved source may be served.
- Farm produced foods (i.e. eggs, milk and/or meat that are obtained from farm animals on site) and home canned or jarred products must be approved by a Health Officer.
- Perishable products shall be stored below 40 degrees F. (4 degrees C) or above 140 degrees F (60 degrees C).
- Cooling units that store perishable food product(s) are to have an accurate thermometer and the temperature regularly checked to ensure safe storage.
- Kitchens should be well lit and maintained in a clean and sanitary manner. All surfaces are to be non-absorbent, smooth, free from cracks/crevices.
- Food products shall be protected from contamination (i.e. covered, placed in sealed containers, etc.)
- Utensils, equipment and any apparatus used in the preparation, cooking, storage, serving or consumption of food shall be free of breaks, corrosion, open seams, cracks/ chips and maintained in a clean sanitary condition.
- Paper towels and soap, each in their own dispenser shall be available at the kitchen sink to facilitate hand washing.
- Thorough hand washing is to be performed prior to the handling of food.
- Hair should be restrained during food preparation.
- The food handler is to practice good hygiene and be free from any infectious agent of a disease that may be spread through the medium of food or drink.
- Animals are not permitted in the kitchen area during food preparation.
- A minimum of a three-compartment kitchen sink is to be available for the manual cleaning and sterilizing of dishes, glasses or utensils and the following method shall be:
 1. Wash dishes, glasses or utensils using a detergent solution in warm water, then;
 2. Rinse them in a second sink with warm clean water, then;
 3. Sterilize them in a third compartment by immersion in warm water with a chlorine solution of not less than 1 tablespoon or capful of household bleach for each gallon of water, for a minimum of 2 minutes, then;
 4. Air dry them in a clean dish rack (using a dish towel may add bacteria to the sanitized dishes), finally;
 5. Store them in such a manner as to prevent contamination.

OR

- Where a domestic dishwasher is used, it must be maintained and operated according to the manufacturer's specifications. The following dishwashing method shall be employed:
 1. Pre-rinse dishes, glasses and utensils to remove most of the soiled material, then;
 2. Place them in dishwasher so that the mechanical action of the water will remove soiled material, then;
 3. Allow them to dry within the dishwashing unit, finally;
 4. Store them in such a manner as to prevent contamination.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

SAMPLE WEEKLY MENU #1

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
A.M. Snack (at least 2 food groups)	Bran Muffins Orange Juice	Whole Wheat Toast Peanut Butter Milk	Yogurt Fresh Fruit	Fresh Fruit Graham Wafers	Bannock Strawberry Jam Milk
Lunch (all 4 food groups)	Taco Salad (Nachos, Lettuce, Hamburger, Cheese) Milk	Chicken Drumettes Brown Rice Peas and Carrots Milk	Chicken Veggie Noodle Soup (Chicken, Mixed Veggies, Noodles) Biscuits Milk	Shepherd's Pie (Potato, Ground Beef, Green Peas, Bread Crumbs) Milk	Sandwiches (Cheese, Lettuce, Ham, Peanut Butter, Bologna on Whole Wheat Bread) Carrot and Celery Sticks Milk
P.M. Snack (at least 2 food groups)	Veggies Yogurt Dip	Fruit Tray Whole Wheat Crackers	Blueberry Muffins Apple Juice	Ants on a Log (Celery Sticks with Peanut Butter or Cheese Whiz and Raisins)	Orange Wedges Cheese Chunks

Note: Juices must be pure, unsweetened fruit juices, **NOT** beverages, punches, drinks, aides, etc. which are not considered a fruit serving. Check labels when purchasing foods. If the first ingredient is water and the next is sugar (*or glucose, fructose, or maltose*) it is not fruit juice.

Jams, cookies, jello's, puddings, do not have enough food value to be considered a serving. Use sparingly, if at all.

Make your own soups rather than buying the pre-packaged mixes which are often full of sodium and sugars and short of nutrition. Add vegetables where possible... (*i.e. in chicken noodle soup*). Instant noodles in a broth are considered a serving of grain.

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SAMPLE WEEKLY MENU #2

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
A.M. Snack (at least 2 food groups)	Banana Oatmeal Muffins Pineapple Juice	English Muffins Cheese Melts Water	Trail Mix <i>(with Cheerios Raisins Pretzels Sunflower Seeds)</i> Water	Pancakes Orange Juice	Apple Slices Stoned Wheat Thins Peanut Butter
Lunch (all 4 food groups)	Chicken Stew <i>(Chicken, Potatoes, Carrots, Biscuit Topping)</i> Milk	Spaghetti and Tomato Sauce Cheddar Cheese Tossed Salad Milk	Baked Beans Carrot and Celery Sticks Whole Wheat Bread Milk	Meatless meatballs in Tomato Sauce <i>(tofu, bread crumbs, spices)</i> Brown Rice Broccoli Trees <i>(raw)</i> Milk	Build Your Own Pizza <i>(English Muffins, Tomato Sauce, Green and Red Peppers, Broccoli, Pepperoni, Mozzarella Cheese)</i> Milk
P.M. Snack (at least 2 food groups)	Fruit and Cheese Kabobs	Fruit Juice/Yogurt Popsicles Nuts and Bolts <i>(no peanuts for toddlers, allergies)</i>	Monkey Tails <i>(bananas in peanut butter, rolled in nuts or coconut and frozen)</i>	Life Cereal Blueberries Milk	Rice Krispy Peanut Butter Squares Orange juice

Note: Juices must be pure, unsweetened fruit juices, **NOT** beverages, punches, drinks, aides, etc. which are not considered a fruit serving. Check labels when purchasing foods. If the first ingredient is water and the next is sugar *(or glucose, fructose, or maltose)* it is not fruit juice.

Jams, cookies, jello's, puddings, do not have enough food value to be considered a serving. Use sparingly, if at all.

Make your own soups rather than buying the pre-packaged mixes which are often full of sodium and sugars and short of nutrition. Add vegetables where possible... *(i.e. in chicken noodle soup)*. Instant noodles in a broth are considered a serving of grain.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR SNACKS AND LUNCHESES IN CHILD CARE CENTRES

Day Care Centres are required by law to offer nutritionally sound snacks and meals according to the following guidelines.

- **Snacks: must include servings from at least 2 food groups**
- **Meals: must include servings from all 4 food groups.**
- **A mid-morning snack (2 food groups) must be provided.**
- **A main meal (4 food groups) needs to be provided.**
- **A mid-afternoon snack (2 food groups) must be provided.**

Centres offering extended hour services need to provide a supper meal consisting of 4 food groups and a bedtime snack of 2 food groups. Breakfast should include at least 3 food groups.

FOUR FOOD GROUPS

Milk and Milk Products

includes: cheese, yogurt, creamed soups, milk, fish with bones (*salmon*), almonds, fortified soy beverage,

BREAD AND CEREALS INCLUDES:
PITA, BREADS, CEREALS,
CRACKERS, PREFERABLY WHOLE
GRAIN.



MEAT AND MEAT ALTERNATIVES
INCLUDES: MEAT, FISH, POULTRY, BEANS,
LEGUMES, EGGS, NUT BUTTERS, ETC.

Fruit and Vegetables

includes: any of the huge variety of vegetables, fruits, berries available (*raw or cooked*), the darker in colour the better.

Notes: Juices must be pure, unsweetened fruit juices, NOT beverages, punches, drinks, aides, etc. which do not provide the nutritional equivalent of a serving of fruit or juice.

Jams, cookies, jellos, and puddings do not have enough food value to be considered a serving. Use sparingly, if at all.

Homemade soups are more nutritious than prepackaged mixes, which are often full of sodium and sugars, and short of nutrition. Add vegetables where possible, for example, in chicken noodle soup or packaged noodle mixes.

Read Labels: try and avoid sugars (including fructose, glucose, sucrose, corn syrup solids), nitrates, artificial colours and flavours.

Questions? Please call the Child Care Services Unit at 667-3492.

Menu Planning Form

Date: _____

Morning Snack	Monday	Tuesday	Wednesday	Thursday	Friday
#1 food group					
#2 food group					
Lunch					
Dairy product or alternate					
Bread/Cereal					
Meat or alternate					
Fruit/Vegetable					
Afternoon Snack					
#1 food group					
#2 food group					

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR COMMUNICABLE DISEASES

INTRODUCTION:

The **Child Care Centre Regulations (Sections 14(1)(g, h and I))** outline what should happen if a communicable disease is discovered at a child care program. Exclusion from a program depends on several factors, the most important being the way the child is feeling and the best interests of the other children:

- A child suffering from a communicable disease must not be admitted to the centre during the phase when the disease may be communicated. Medical advice will be needed to determine when the child can be allowed to return.
- If a communicable disease is discovered all parents/guardians must be informed and a notice posted as soon as reasonably possible, but within 24 hours.

If there is a communicable disease "going around" your centre, please refer to pages 195-201 of Well Beings (or see attached Appendix 1) to decide when to report it to the Yukon Communicable Disease Office. The local number is (867) 667-8369 or 1-800-661-0408, ext 8323.

EXCLUSION FROM CHILD CARE SERVICES:

1. Do NOT exclude unless the child is too ill or the physician has recommended it.
 - Chickenpox, if child is well enough to participate in activities
 - Colds
 - When a child has a germ in his/her stool that can cause diarrhea but is not causing diarrhea at the moment, for example Giardia
 - Fifth disease ((Parvovirus B19, Erythema Infectiosum, "Slapped Cheeks Syndrome")
 - When a child has a fever
 - Hepatitis B virus
 - HIV infection
 - Conjunctivitis (pinkeye): without yellow or white discharge, and without fever, eye pain, or eyelid redness
 - CMV (Cytomegalovirus): this can infect a fetus during pregnancy so warn staff who may be affected
2. A child should be excluded from the regular child care program if one or more of the following conditions exists:
 - a) The illness prevents the child from participating in the program activities; or
 - b) The illness results in greater need for care than the staff can provide without compromising the care of other children; or
 - c) The child has any of the following conditions:
 - Head lice
 - Hepatitis A
 - Impetigo

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

- Measles
- Mumps
- Conjunctivitis (pinkeye) with yellow or white discharge (pus)
- Rash
- Ringworm
- Rubella (German Measles)
- Scabies
- Shingles (uncovered lesions)
- Strep throat
- Tuberculosis
- Vomiting
- Whooping cough (pertussis)

TB

- Testing should take place for a staff person on hire or with a doctor's recommendation if there are signs or if a contact has been made with someone infected with TB
- Exclusion for adults is a maximum of 2 weeks once treatment has started. Children do not transmit T.B.

RASHES

- Generally itchy rashes are allergic in origin. A non itchy rash may be presumed infectious.
- Slap Cheek Syndrome: can be of concern to pregnant women as it can cause the fetus to abort.
- Generally, if a fever accompanies a rash, the child should be sent home.

LICE

- A **No Nit Policy** is the best bet where children are not allowed back until treated and all the nits have gone. Nix is the preferred treatment. Vinegar helps to get rid of the eggs.
- **HIV/AIDS:** This is not a reason to exclude although precautions need to be taken. These should be taken in dealing with blood, stools, vomitus and body fluids anyway, regardless of whether or not Aids or HIV is known.

See section on 'Cleaning of Body Fluid Spills: Urine, Stool, Vomitus, Blood and Bloody, Body Fluids' in Guidelines for Maintenance of Indoor Space.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR HANDWASHING, TOILETING & DIAPERING

INTRODUCTION:

Both the **Child Care Centre Regulations (Section 14 (1)(k)(m))** and **Family Day Home Regulations (Section 12 (1)(k)(m))** require that written policies regarding handwashing, toileting and diapering be posted to ensure that all caregivers are aware of and consistently follow them.

- Handwashing is the most effective way of preventing the spread of infections in child care settings.
- Post signs in the kitchen, washroom, and diaper change areas.

WHEN TO HANDWASH

ADULTS	CHILDREN
Before/after preparing food, eating/feeding a child	Before and after preparing food or eating
After going to the washroom	After going to the toilet
Before/after changing diapers, soiled clothing or other contaminated items (see universal precautions)	After changing soiled clothing
After cleaning up other bodily secretions such as vomit or blood (see universal precautions)	After wiping his/her nose
After wiping a child's nose	After playing in the sand or water table

HANDWASHING FOR CHILDREN

Wet your hands and leave water running.

Rub soap all over hands and between fingers.

Rub your soapy hands all over and count to 10.

Rinse your hands well under running water and count to 10.

Dry your hands well with a towel.

Turn off taps with a single-use towel.

Dispose of the cloth or paper towel.

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TOILETING PROCEDURE

If the child wears a diaper, remove it. If the diaper is soiled, clean and dry the child's skin. Dispose of the cloth or disposable diaper

Place the child on the toilet or potty. Stay with the child for a specific period of time. Five minutes is usually long enough.

Wipe the child.

Flush the toilet or let the child flush it. If a potty was used, empty its contents into the toilet and flush.

If necessary, diaper the child and help the child get dressed.

Assist the child in hand washing. Return the child to a supervised area.

Rinse out the potty and flush the water down the toilet. If there is any remaining stool in the potty, wear household rubber gloves and remove all the stool with toilet paper. Rinse the potty and flush the water.

If wearing rubber gloves, remove them. Spray the sanitizing solution onto the potty and the diaper-changing surface (if used). Leave for 30 seconds.

Put away all diapering supplies.

Wash your hands.

Dry the potty with a single-use towel. Dispose of the cloth or paper towel.

Dry the diaper-changing surface with a **different** towel. Dispose of the cloth or paper towel.

Return the potty to the storage area.

Wash your hands thoroughly.

Record the child's use of the potty, bowel movements and skin condition, as necessary.

DIAPER CHANGING PROCEDURE

Wash hands and put on rubber gloves

Set child on diaper change table & remove soiled diaper

Put soiled diaper in a lined and covered garbage container

Wash the child's bottom and put on a clean diaper

Wash yours and the child's hands

Remove the child from the diaper change area

Sanitize the change pad (Sanitizing solution: 1 tsp. bleach and 2 cups of water should be changed daily and kept in a spray bottle nearby for convenience).

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

SICK CHILD POLICY

INTRODUCTION:

Both the **Child Care Centre Regulations (Section 14(1)(c), (d) and (e))** and the **Family Day Home Regulations (Section 12(1)(c), (d), and (e))** specify that a policy must be developed to deal with a sick or injured child. Consideration should also be given to what happens if a caregiver is sick or injured.

- If a child is sick and needs to be sent home, he or she will need to have a place to rest until someone arrives to pick them up. This will need to be an area separate from the other children where they can be comfortable and lie down if they wish. An adult must be with the sick child or check in on them every five minutes or so until the parent arrives.
- Any bedding used for the sick child must be laundered and any mats washed and sanitized.
- A child who is sick is not to be in attendance at the child care centre or family day home. See the section on Communicable Diseases for guidelines as to when to exclude from group care.

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MEDICATION POLICY

INTRODUCTION:

Child Care Centre Regulations (Section 14(3)) and **Family Day Home Regulations (Section 12(3))** call for parental consent to be given before any medication is administered. Storage of medication is also regulated.

- Parents must always sign a consent form before any medication is administered.
- Medication must be dispensed from the original container labeled with the child's name, physician's name, mode of administration and any other instructions left by the parent.
- Never give a child medication prescribed for someone else.
- Before giving each dose of medication check the "Five Rights":
 1. The **right** medication
 2. The **right** dose
 3. The **right** child
 4. The **right** time
 5. The **right** route of administration (*e.g. by mouth, in eye or ear, or on the skin*)

MEDICATION RECORD SHEET

Name of Child	Date	Medication	Possible Side Effects	Times and Amounts	Parent's Signature	Time Given	Staff Initials

Each caregiver who administers medication must verify his or her initials in the last column with their signature once below:

Initials: _____ Signature: _____ Initials: _____ Signature: _____

Initials: _____ Signature: _____ Initials: _____ Signature: _____

Initials: _____ Signature: _____ Initials: _____ Signature: _____

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR MAINTENANCE OF PETS

INTRODUCTION:

Both the Child Care Centre Regulations and the Family Day Home Regulations refer to guidelines for the care of pets in child care programs. Environmental Health also concerns itself with this issue (**C.C.C. Reg. 9(7); F.D.H. Reg. 7(7)**).

- No pets are allowed in kitchen areas when food is being prepared. Animals are not permitted to play with children's toys.
- Children and adults must practice handwashing after feeding and handling pets.
- Litter boxes, cages, and the pet's environment must be cleaned on a regular basis **BY ADULTS ONLY** to ensure sanitary conditions.
- **Dogs must have an area separate from the children's playspace to prevent contamination of the play area.**
- In the winter only a dog may be permitted to use the outdoor play space on the condition that cleaning is done on a regular basis if children are using the area as well. **In cases where children are using alternative play spaces:**
 1. The play spaces must be clearly outlined **and** a daily log maintained recording outings.
 2. A major spring clean up must be done of the outdoor play space as soon as the weather permits. All contamination must be removed and the use of a separate pet area resumed.
- Cats and dogs must have appropriate annual immunizations and the records kept on file.
- Any animal dangerous to a child is not recommended. A centre or dayhome is legally responsible for any injuries or infections caused by pets and can be sued.
- Turtles are not allowed as they carry high concentrations of salmonella. Pets not recommended include newts, ferrets, cats, rabbits (especially male rabbits), snakes, parrots, monkeys, and wild animals.
- Rabbits must have yearly check ups with a veterinarian, and results kept on file.
- Children must always be supervised closely when playing with any animal, and should be taught how to act appropriately around animals.
- Child care facilities with pets should monitor children for allergic reactions which may be present or develop over time.
- Birds should be caged, and not permitted to fly outside their cage.
- Keep animal food out of reach of children, and separate from other food stuffs.
- Litter boxes must be kept out of reach of children, and not be located near food stuffs or food preparation areas.
- An animal that is sick or injured should have veterinary care and be isolated from children.

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SAFETY

EMERGENCY PROCEDURES

INTRODUCTION:

Several sections of the **Child Care Centre Regulations (8; 9(1)(a),(b), (c); 14(1)(a,b,c); 19(2)(a to e); 19(4)(d) and 19(5))** and the **Family Day Home Regulations (6; 7(a,b,c); 12(1)(a,b,c); 12(2)(a,b); 17(2)(a to e); 17(4)(d) and 17(5))** deal with the requirements and specifics of emergency procedures. To be prepared for an emergency, a facility needs:

- **An emergency plan, posted.**
- Emergency procedures and posted evacuation routes.
- Regular monthly drills of emergency procedures. A record needs to be kept of these drills that include the date, the time of day, the number of children, staff who participated, the time taken to evacuate the building and any other particulars of the drill.
- **Emergency phone numbers, posted.**
- Staff with valid first aid and CPR certification.
- First aid supplies.
- Emergency records.
- Policies for notifying parents.
- Policies for reporting injuries.
- Emergency equipment.
- Emergency transportation.

Plans for specific emergency situations, including injury or illness of staff or children, posted.

What you need to do:

- Prepare a floor plan of the child care facility or day home showing evacuation route and all exits.
- Know how to physically remove all the children from the building (i.e. How many children will each person be responsible for? How are infants to be carried Out?). In the winter, keep blankets near an exit to wrap around children as there will not be enough time to put on snowsuits.
- Designate one person to call the fire department.
- Post the floor plan and emergency plan in a conspicuous location (in each room of a child care centre, on each floor of a family day home).
- Keep daily attendance records in a readily accessible consistent place.
- Consult your fire department for assistance in emergency procedures and plans.
- Establish procedures for dealing with sick or injured children and staff. Designate staff responsibilities for notifying parents, attending the child, and transporting sick or injured party. Post in a prominent location and ensure all staff are properly trained in carrying out this procedure.

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AN EMERGENCY PLAN

This includes:

- Staff responsibilities in an emergency.
- Fire evacuation routes.
- Emergency accommodation.
- Emergency transportation.
- Parents need to sign permission forms for emergency treatment and transportation.
- Day homes and centres need name and phone numbers of emergency back up caregiver(s).
- Share copies of emergency plan with all parents.

FIRE DRILL RECORD

SAMPLE (To be Done Monthly)

Date & Time	Names & #'s of Staff	Names & #'s of Children	Comments

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EMERGENCY PHONE NUMBERS

The following emergency phone numbers must be posted by each phone in a centre or family day home:

1. Police
2. Fire
3. Ambulance
4. Hospital/nursing station/poison control
5. Taxi services or other emergency transportation
6. Emergency care giver
7. Telephone numbers for all the current parents of the children in attendance (should be handy but not necessarily posted—see Emergency Records)
8. The centre or day home's address should also be posted by the phone. This is very helpful in a stressful situation, especially for a new or substitute caregiver.

EMERGENCY RECORDS

1. Must be kept handy in a readily accessible, consistent place, such as near an exit or phone. An index file box may be used. (A sample index file format follows.)
2. A set should be taken in the first aid kit for each child to go on a field trip.
3. This information must be updated regularly.
4. The following information must be included:
 - Child's name and date of birth
 - Parent's name(s) and phone numbers (home and work)
 - Alternate person to contact (name and phone numbers)
 - Health care number
 - Child's doctor's name and phone number
 - Any allergies and medical conditions

EMERGENCY RECORD

Name of Child: _____
(Surname) (First Name)

Date of Birth: _____ Health Care Number: _____

Parent(s):

Mother's Name: _____
(Surname) (First Name)

Phone: (home) _____ (work) _____

Father's Name: _____
(Surname) (First Name)

Phone: (home) _____ (work) _____

Doctor:

Name: _____ Phone: _____

Clinic/ Practice: _____

Allergies and/or medical conditions: _____

(This form can be printed on recipe/index cards.)

PARENTAL CONSENT FOR EMERGENCY CARE AND TRANSPORTATION

Name of Child _____ Date _____

If at any time, due to such circumstances as an injury or sudden illness, medical treatment is necessary, I authorize the child care staff to take whatever emergency measures they deem necessary for the protection of my child while in their care.

I understand this may involve calling a physician or nurse, carrying out the instructions given and/or transporting my child to a hospital or nursing station, including the possible use of an emergency vehicle.

I understand that this may be done prior to contacting me and that any expense incurred for such treatment, including emergency transportation is my responsibility.

Parent's Signature

Centre Director or Day Home Operator Signature

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

FIRST AID PRACTICES

INTRODUCTION:

Staff in child care centre programs and in family day homes need to have valid first aid certification. The centre or family day home is required to have adequate first aid supplies as well. (**C.C.C. Reg. 8; 14(1)(a,b); F.D.H. Reg. 6; 12(1)(a,b)**).

1. A well stocked first aid kit should be available for each area where children are in attendance in a child care centre, and in a convenient area in a family day home. It will include the following items:
 - Tensor bandage
 - Adhesive bandages
 - Sterile pads
 - Thermometer
 - Tweezers
 - Medicated soap
 - Triangular bandage
 - Compresses
 - Cleaning swabs
 - Scissors
 - Non-prescription antibiotic ointment
 - Eyewash cup
 - Resuscitation device
 - Rubber gloves
 - An anaphylactic kit on the advice of a medical professional
2. Ensure that a portable first aid kit is available and is taken on each excursion. It must contain **all of the above items**, plus an emergency record form for each child on the trip. (*see section on Emergency Records*).
3. All regular staff who provide care and supervision of children shall be certified in an *approved First Aid course which includes child and infant CPR. Re-certification is to take place within 1 month of expiry. Every family day home operator will need to have a valid first aid and CPR certificate. Any substitute worker should have first aid and CPR as well.

*An approved First Aid Course should be 16 to 18 hours duration from a credible organization, such as St. John's Ambulance or Canadian Red Cross. An Emergency First Aid course of 8 hours would not qualify. Re-certification courses are permissible as long as the participant's certification has not expired, or is within the allowable time frame. It is recommended, but not required that a course specific to children's first aid be obtained.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

REPORTING ACCIDENTS

INTRODUCTION:

Accidents need to be dealt with in a certain way according to regulations (C.C.C. # 14(2)(A,B); F.D.H. # 12(2)(a,b)).

1. A written log of all injuries including bumps, bruises and small cuts shall be kept and the parents informed. This log should document at least the following:
 - Date
 - Time of day
 - Child's full name
 - What happened
 - How it was treated
 - Follow-up if any
 - Staff attending the injury
 - Parent signature
2. Any injury which requires medical care must be copied to the Child Care Services Unit and to the parent or guardian. (*see Accident Report form*).

ACCIDENT REPORT

Name of Centre or Family Day Home: _____

Name of Child: _____ Date of Birth: _____

Date of Injury: _____ Time: am/pm: _____

Date Parents Notified: _____ Time: am/pm: _____

Name of Attending Caregiver: _____

Describe the injury: *(You may also use the line drawing of the child to indicate where the injuries are located on the child's body):* _____

Describe how the injury occurred: _____

Where did the injury occur: _____

If any equipment was involved please describe it: _____

Was First Aid administered: Yes ___ No ___ If Yes, specify: _____

Who administered first aid: Was any further action taken (*e.g. child taken to hospital, to physician, taken home*): _____

If the child remained at the facility, what was the child's level of participation: _____

Other Comments: _____

What corrective action should be taken to prevent further injuries of this type: _____

Date: _____ Time: am/pm: _____

Names of staff who witnessed the injury: _____

Caregiver's Signature

Parent's Signature

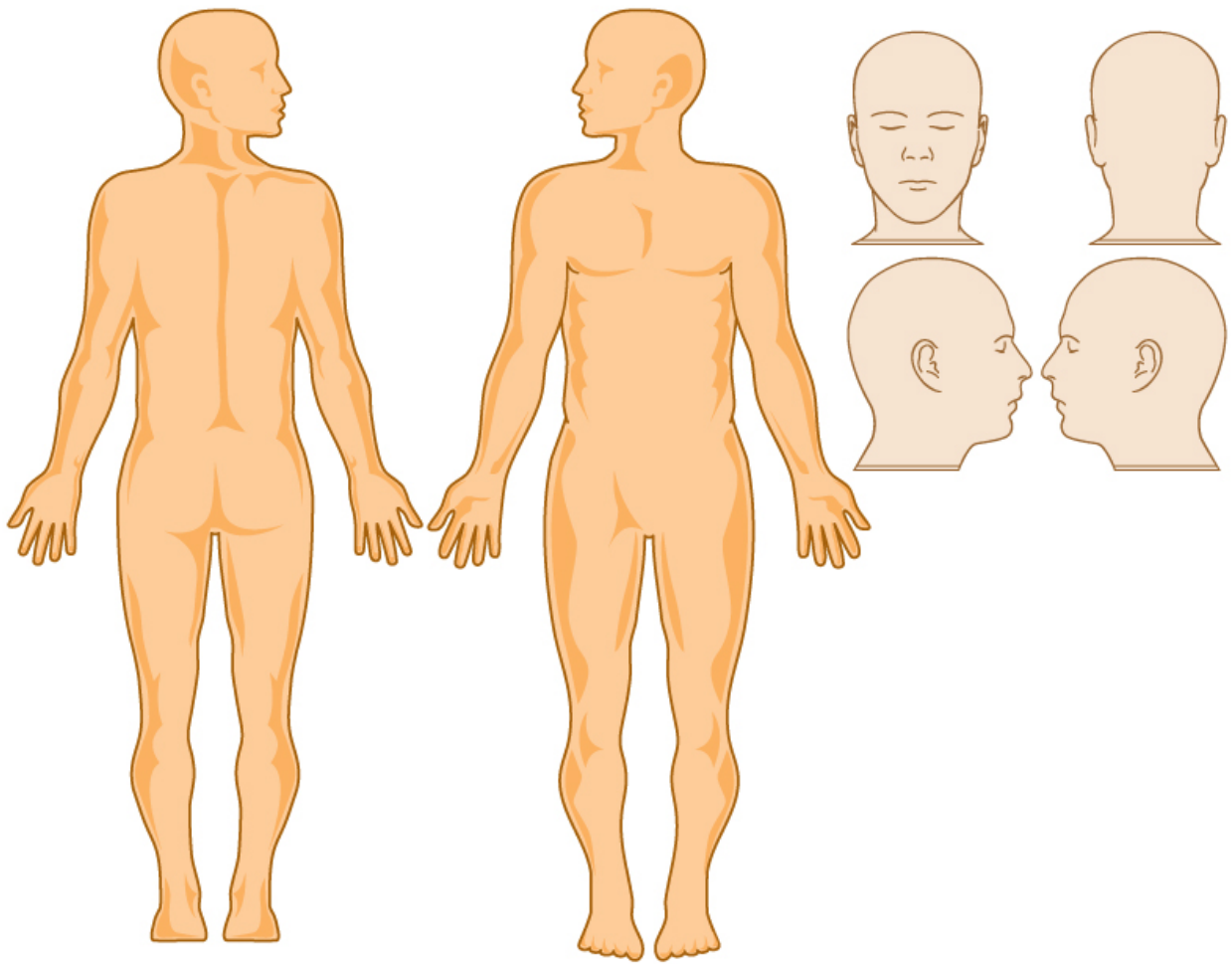
Date

Date

Accident Report

Centre/Day Home Name: _____

Name of Child: _____ Date: _____



Indicate site of injury with an "x"

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

ADMINISTRATION

ADMINISTRATION AND RECORDS GUIDELINES

INTRODUCTION:

Several Child Care Centre and Family Day Home Regulations deal with administration in centres and day homes. The applicable **Child Care Centre Regulations** are: **(19(1)(a to n); 19(2)(a to e); 19(3); 19(4(a to h) and 19(6))**. Those referred to in the **Family Day Home Regulations** are: **(17(1)(a to n); 17(2); 17(3) and 17(4)(a to h))**.

1. Individual records of each child enrolled in the program need to be kept. These records need to be accessible to the staff at all times the program is in operation. They must contain at least the following information:
 - Child's full name and address.
 - Child's date of birth.
 - Parents' or guardian's full name(s).
 - Parents' or guardian's full home address.
 - Parents' or guardian's home phone number(s).
 - Parents' or guardian's business phone number(s).
 - Name and phone number of an alternate person to call in event of emergency.
 - Doctor's name, address, phone number and clinic or practice.
 - Any special medical considerations, such as drug reactions, allergies, special diets..
 - Child's immunization status.
 - Record of any illnesses, injuries and behaviour problems.
 - Type of positive guidance found most effective by the parent(s).
2. The following records must be kept accessible in a central area:
 - Policies and guidelines on hygiene, health and discipline.
 - Nutritional guidelines and all menus for the last three months.
 - Program plans.
 - Evacuation and emergency procedures and plans.
 - Written record of fire drills that includes the date, time of day, number of children, staff who participated, time to evacuate and particulars of the drill.
 - Written permission to use playgrounds when required.
 - Inspection reports required by the Child Care Centre or Family Day Home Regulations and the Yukon Child Care Act. This may include some or all of the following: Environmental Health, Fire Marshall, Community and Transportation Services, Electrical, Building, Gas Safety including Radon Gas, Sound Test Level and verification of zoning approval.
3. A record of adequate public liability insurance which includes off premises excursions must be kept on file.
4. Individual staff files containing medical statements, immunization and tuberculin skin test status or chest x ray results, first aid certification and RCMP clearance must be kept.
5. Every child care centre shall have a **staff manual** (see page 34) available to all staff centre employees.

CHILD INFORMATION RECORD

DATE: _____

Name of Child: _____ Date of Birth: _____
(Surname) (First Name) dd/mm/yyyy

Address: _____

Health Care Number: _____

Custodial Parent or Guardian's Name: _____
(Surname) (First Name)

Home Address: _____

Phone Numbers: Mother: (home) _____ (work) _____
Father: (home) _____ (work) _____
Guardian: (home) _____ (work) _____

Family Doctor: _____ Clinic: _____

Phone: _____

Person to contact in an Emergency: _____ Phone: _____

Does your child have any allergies? Please explain: _____

Any special medical considerations (*drug reactions, special diets, etc.*)? _____

Past illnesses, injuries and/or behavior problems you might be aware of: _____

Immunization status of child
(*polio, pertussis, rubella, diphtheria, german measles, tetanus*): _

What type of positive guidance have you found most effective for your child? _____

Anything else that might be helpful for us to know? _____

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

ATTENDANCE RECORDS

INTRODUCTION:

Accurate daily attendance records must be kept by both child care centres (**Regulation 19(3)**) and family day homes (**Regulation 17(3)**).

- These must be kept accurately, at all times, by every adult responsible for a group of children. A parent may sign a child in or out of the centre or family day home, but it is the caregiver who is responsible to ensure it is recorded.
- Each child's first and last name and age group must be listed on the attendance record. (i.e. Infants: under 18 months; **Toddlers**: 18 months to 3 years; Preschoolers: 3 years up to and including kindergarten children; School Age: Grade 1 and up).
- Attendance records must be available for inspection at all time there are children in the program. These records must be kept for at least the past 6 months.
- Staff attendance must also be recorded.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

FINANCIAL GUIDELINES

INTRODUCTION:

Both profit and non profit child care centres need to have an organized way to plan financially. Family Day Homes also need to budget and keep financial records. A reapplication for licensing from a child care centre program must include a budget projection for the next 12 months. **(Section 3(2)(d))**.

- There are sources of good business information to be had: pamphlets from most banks, FBDB workshops, bookkeepers and accountants with expertise.
- Develop a business plan. Business goals are important. Decide what you want to do and what you're trying to offer, then decide how this will be best accomplished. Goals need to be specific and measurable.
- The first few months will be heavy on expenses and light on income. Plan accordingly. Work towards having a 3 month operating expense fund ahead in the bank that won't be touched for any other purpose. (*Perhaps invested in a Guaranteed Investment Certificate (GIC)*).
- Have a projection plan. Consider who you expect your customers to be and decide how to attract them.
- Involve others. Having a banker, bookkeeper, lawyer and accountant you like and can work with are important. If they aren't helpful, change them.
- Evaluate your progress financially. Monitor staff and client attitudes as well as the books you keep. Work to get and keep a good reputation.
- Manage your debt. Plan ahead for times when enrollment is down or when money will be late (YTG year end). Plan renovations and major expenses.
- Keep good, up to date financial records.
- Prepare a budget with your business goals in mind for one year and review every 3 months (*13 column example follows*). Do it in pencil and do not be afraid to re-work it. **REVIEW YOUR BUDGET DAILY** to ensure expenses are not getting out of line.
- Private businesses and family day homes should keep personal expenses separate.
- Keep on top of receivables. You are providing a service and are entitled to payment on time.
- Pay your bills on time. Your good reputation depends on it and those other businesses will in turn support you.

SAMPLE BUDGET WORKSHEET FOR CHILD CARE PROGRAM

Child Care Program

20__ Budget Projection

This covers the period from _____ to _____

REVENUE	
Fee Revenue (inc. parent & subsidy fees)	
Direct Operating Grant	
Other Grants	
Other (fundraising, donations, etc.)	
TOTAL REVENUE	
EXPENSES	
Wages & Benefits (regular & substitutes)	
Wages, Bookkeeper	
Wages, Janitorial	
Workers Compensation	
Professional Development	
Utilities	
Fuel	
Water/Sewer/Taxes	
Insurance	
Licenses	
Janitorial	
Program Costs—Consumable (program supplies etc.)	
1. Groceries	
2. Program supplies	
Program supplies—Non-consumable	
1. (Capital expenses)	
Repairs & Maintenance	
Office Expense	
Other:	
TOTAL EXPENSES	
NET PROFIT (LOSS)	

BUDGET/ACTUAL COMPARISON

For the month of _____ Year _____

Revenue	BUDGET (year)	ACTUAL (month)	REVENUE TO DATE	\$ RECEIVED TO DATE
---------	------------------	-------------------	--------------------	------------------------

TOTAL EXPENSES	BUDGET (year)	ACTUAL (month)	EXPENSES TO DATE	% SPENT TO DATE
-------------------	------------------	-------------------	---------------------	--------------------

TOTAL

Budget Goal This Month: %

Actual Revenue is: % over/under budget

Actual Expenses are: % over/under budget

BUDGET GOALS FOR EACH MONTH OF THE YEAR:

Jan	8.34%	July	58.34%
Feb	16.67%	Aug	66.67%
Mar	25.00%	Sept	75.00%
Apr	33.33%	Oct	83.34%
May	41.67%	Nov	91.67%
June	50.00%	Dec	100.00 %

Third column divided by first column = x 100 =

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

STAFF MANUAL

INTRODUCTION:

Child Care Centre Regulations (Section 19(6)) call for a staff manual to be available to all staff members that includes: Child Care Act, Child Care Centre Program Regulations, Child Care Subsidy Regulations, detailed program description, centre routines, all written policies and guidelines established by these Regulations. Canada's Food Guide and the Native Good Guide and a list of emergency telephone numbers.

This manual can be used as an orientation to new staff members and as an introduction to the program for substitutes, students or volunteers. It is advisable to review and update the manual on a regular basis. A 3 ring binder is recommended.

In addition to the above items, other items to include are:

<p>An introduction and welcome A brief (one paragraph) history of the child care program A description of the organizational structure</p>	<p>A list of centre staff and substitutes A copy of the Parent/Family Handbook and Parent Agreement A description of the program's personnel policies incl.:</p> <ul style="list-style-type: none"> -A sample of the employment contract -Salaries -Working conditions <i>(i.e. Hours of work, workers compensation coverage etc.)</i> -Hiring policies <i>(i.e. advertising the position, structure of the hiring committee, etc.)</i> -Criminal records check procedure <i>(and other documentation required for hire)</i> -Benefits <i>(i.e. sick days, vacations, etc.)</i> -Job descriptions and Performance Review procedures -Grievance procedures -If a unionized centre, a copy of the Collective Agreement
<p>A description of the philosophy and guiding principles of the centre:</p> <ul style="list-style-type: none"> -How children grow and learn -Value of diversity <i>(i.e. culture, language, inclusion of children, etc.)</i> -General operating information -Number and ages of children centre is licensed for 	<p>Any other policies and procedures of the program For example:</p> <ul style="list-style-type: none"> -Enrollment policy -Attendance policy -Policy and procedure for reporting suspected abuse -Fees and holidays policies -Illness policy -Health, safety and nutrition policies -Emergency procedures -Conflict resolution policies -Confidentiality policy -Concerns and complaints policy
<p>A building plan including:</p> <ul style="list-style-type: none"> -Location of fuse box, thermostats, exits, fire extinguishers and any useful instructions -A description of the first aid supplies and where they are kept 	<p>An outlines of the centres daily schedule An annual calendar of events related to the program A description of the behavior management policies and procedures A copy of the Constitution and By-laws <i>(if applicable)</i> A list of Board Members</p>

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

PARENT/FAMILY HANDBOOKS AND AGREEMENTS

While a manual or any written policy should never replace verbal communication on any issue, parent handbooks and agreements provide families with relevant information about the early childhood setting. They are easier to use if they are brief and to the point.

Handbooks provide each family with a welcome, introduction and orientation to the child care facility. It's typically an outline and description of the expectations and obligations for the enrolling family, the child care program and for the organization.

When the Family Handbook is carefully and clearly written, (reader friendly), respectful of the family - child care facility partnership, and is supplemented by a welcoming orientation session for each new enrolling family, it will enhance the introduction to the program and ongoing relationship between families and the program.

A Family Agreement is necessary to protect the program's (society or owner) and the family's interests. It can contain responsibilities and expectations for both parties and contribute towards a positive child care experience.

Sample handbooks are available through Child Care Services Unit.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

FAMILY DAY HOME CONTRACTS

A contract is a good idea as it lets parents know what the expectations are and it outlines your responsibilities to them as well. It should specify how absences are dealt with (*their vacation, your vacation, times when their child is sick or visiting another parent or grandparent, times when your own children are sick, or when you are sick*). It will outline how and when payment is to be made. Pick up times and penalties for lateness will be clarified. **Any contract should be short, easy to read and understand.** If it is long and wordy or written in stilted language or if you have just adopted someone else's contract, chances are that neither you or the parents may be exactly sure of what is specified. The following are some of the components you may wish to include in your own contract:

1. **Something about yourself:** Your background, any ECD or related training you've had, what you hope to offer in the way of a family day home. What is important to you about children and their needs and how do you hope to meet them?
2. **Something about the program you plan to offer:** What will the children be doing throughout their day? What kind of a routine can the parents (and their children) expect?
3. **What parents will need to supply and what you will provide:** Do you provide meals and snacks or will the parents be sending them? (*They will need to be in a sufficient quantity and from enough food groups to meet the Family Day Home Regulations and it will be your ultimate responsibility to see that they are, even when they come from home*). Diapers, wipes, changes of clothing, warm clothing for outdoor play may be items that parents need to supply. Are there "extras" that you may be charging for, such as fees for the occasional movie, skating or swimming lessons, bus tickets, tickets to tour the Klondike or Old MacDonald's Farm? If this will be included in your price, let the parents know. Will parents be expected to supply blankets for nap time? Who launders them?
4. **To sick to attend?** Will the parent still be expected to pay for the space? You need to set these rules out clearly beforehand so parents know what is expected.
5. **What happens when you are sick, or one of your own children?** Do you get a substitute to come in? Do you intend to have a certain number of "sick days" built into your contract? Do you reimburse a parent who may have to take a day off without pay or pay for alternate child care?
6. **When are payments due?** Is there a penalty for late payment?
7. **What about holidays, your own and parents?** If you will be closed for certain times, it is good to specify them in advance so parents can prepare, maybe by scheduling their own holidays at the same time or by making alternative child care arrangements. Will you require that parents pay to hold their spot when they take family holidays? Full fee or a percentage?
8. **How much notice do you require before a child is withdrawn from your day home?** Subsidy will honor up to 30 days notice, but it must be the same expectation for full fee paying parents as for subsidy recipients. If you expect a calendar month's notice, you will need to collect the additional fee from the parent directly. You will be expected to give the same notice if you withdraw services for a family.
9. **Is there a trial period?** Will the child fit in to your program? You may want to build in an initial trial period (say 2 weeks) where less notice can be given by either you or the parent if the arrangement is not working.
10. **What are your policies around discipline? Pick up times? Communicable diseases? Emergencies? Injuries? Medication? Field trips? Abuse and neglect reporting policy?** It is a good exercise to think through these things **before** a situation arises. Having clear expectations from the beginning helps both you and the parents plan and enjoy a cooperative relationship as far as the business end goes. Misunderstandings can be avoided by preplanning. If you change your mind after you have a contract, you can negotiate a new one. The time you spend on this important part of running your business can save you worry and stress later on.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

PROGRAMMING

GUIDELINES FOR PROGRAMMING

INTRODUCTION:

The **Child Care Centre Regulations (Section 16 (1) through (8))** and the **Family Day Home Regulations (Section 14 (1) through (6))**, specify that a daily program of activities shall be developed in both **child care centres** and **family day homes**.

1. A written program of daily activities is to be established which responds to the individual needs and interests of the children, is appropriate to each child's age and level of development and is sensitive to each child's cultural heritage.
2. This program shall provide a predictable daily routine to instill a sense of security, while remaining flexible enough to allow for individual preferences and independent choices. Time shall be allowed for:
 - Indoor play
 - Outdoor play except in inclement weather
 - Toilet and washroom routines according to individual needs
 - Meals and snacks
 - Periods of sleep, rest or quiet play, depending on the age of the child
3. The daily program shall include opportunities for a balance of:
 - Intellectual and social development through the use of a variety of games, toys, books, crafts, puzzles, sand, crayons, blocks and other activities and materials.
 - Activities and experiences to stimulate language development and encourage communication.
 - Periods of free play in an environment which can provide a wide variety of experiences and sufficient materials to allow the child opportunities to develop creative expression and appropriate social skills.
 - Physical activities which promote large muscle development and physical competence such as running and climbing.
 - Activities that promote small muscle development and eye-hand coordination.
 - Active and quiet activities.
 - Individual activities and activities which promote physical well being, independence and self esteem.
 - Small and large group activities which provide for social and emotional development.
 - Activities that promote creative expression through the fine arts of music and drama.
 - Individual interaction between children and adults.
 - Activities which promote cultural awareness, social responsibilities and community involvement.
 - Activities that promote respect and care of the natural environment.
4. Television should be used sparingly and with adult supervision and interaction.
5. Children are not to be left at any time without supervision.
6. With permission from their parent or guardian, school age children may attend off premises activities from the family day home program.
7. Specific training courses in Early Childhood Development and workshops developed to assist in program development are necessary for child care providers to give them the tools to work with young children.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

PROGRAM PLANNING AND REVIEW

WHY IS IT IMPORTANT TO PLAN YOUR DAILY PROGRAM?

Planning is a way to use what you've learned from past experiences to guide your future actions. By planning, you can bring about orderly change and make sure that your successes are repeated.

Planning affects all aspects of a program's operations – from curriculum to facility use and from financial management to health and safety.

In a child care program, as in many other organizations and services, planning has three primary functions:

1. To ensure a thoughtful, organized, and systematic approach to administration.
2. To ensure that goals are met or at least approached in all areas of the program.
3. To provide a framework for assessing what currently exists, what could or should exist in the future, and how to best move forward.

In the Yukon, the Regulations set general program standards. These standards provide a starting place for planning by identifying the key components of quality care.

Copied from: "Child Care Inform: An Administration Manual for Non Profit Child Care in BC" (Chapter 7, Program Planning and Review).

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

CHILD CARE PROGRAM REVIEW

A program review is a systematic way of gathering information about the program. It brings the program planning process to completion. Once you review the program, you can use the results to make revisions and adjustments which will, in turn, improve the quality of the program you offer.

WHY IS PROGRAM REVIEW IMPORTANT?

The purpose of a program review is to gather information about the program that can reveal its strengths and weaknesses. A review can give people the information they need and motivate them to find solutions to the problems.

Program review is part of the cycle of planning, implementation, and review that goes on continuously in every organization. It supplies the information about:

- What has actually happened
- Whether previous plans were carried out, and
- Whether the results were worthwhile

PROGRAM REVIEW CHOICES

There are different ways to go about looking at a child care program's operations. Some may use a format review instrument or check list that identifies indicators of quality. Others may choose to use their own goals and objectives and to ask to what extent they have achieved them over the course of the year.

An already existing and well respected tool for a comprehensive program review is the **Early Childhood Rating Scale** developed by Clifford and Harnes. Copies of this tool are available from the Child Care Services Unit for each of the specific programs: Child Care Centre, Infant/Toddler, Family Day Home and School Age Programs. Training to use this tool is available from Child Care Services. **After a facility has taken the required training to use this assessment tool, a program may arrange to do a self assessment in place of one inspection a year.**

It takes time and effort to conduct a program review. Be sure that the results will justify the expense. There are many different aspects of the program that might be reviewed from program activities to staff supervision to financial management, etc. A program review must fit the scope, style, and resources of the child care program. It is important to know the purpose of the review before beginning.

You may wish to develop questionnaires—one for parents and one for staff. Parent questionnaires should be short and general in nature, while those for staff might be more detailed. It can also be useful to request input from community resource persons such as child care inspectors, public health staff, or instructors from local training institutions.

The most efficient way of conducting a program review involves a written questionnaire or rating scale as well as group and/or individual discussions. A questionnaire can collect a breadth of information about people's perceptions of the program while discussions will add greater depth of analysis.

The following "Program Review" sample questions, answered by a "yes", "no" or "sometimes", with space for comments, provide examples that may be helpful in designing questionnaires.

Copied from: "Child Care Inform: An Administration Manual for Non Profit Child Care in BC" (Chapter 7, Program Planning and Review).

CHILD CARE PROGRAM DAILY REVIEW

CHILDREN IN ATTENDANCE	SNACKS AND LUNCH
1. _____	S.
2. _____	_____
3. _____	_____
4. _____	L
5. _____	_____
6. _____	_____
7. _____	S
8. _____	_____

ELDERS, VISITORS, AND PARENT INVOLVEMENT

ACTIVITIES PREPARED FOR FREE PLAY	CONCEPTS AND SKILLS BEING COVERED

CIRCLE TIME THEME / CONCEPT: _____

Stories:	Activities / Games:
Finger Plays:	Drama / Fantasy Play
Songs:	

Art and/or Craft Activity: _____

Science Activity: _____

Outside and Physical Activities: _____

Field Trips and Excursions: _____

GROUP OBSERVATIONS:

INDIVIDUAL CHILD OBSERVATIONS:

ANY CHANGES, IMPROVEMENTS:

THINGS THAT WORKED WELL TODAY:

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR MAXIMUM GROUP SIZE

INTRODUCTION:

Maximum group size refers to the maximum number of children allowed in a group. The Child Care Centre Regulations specifies the maximum number of children in each age range that may be included in a group with two primary staff members (**Section 4(5)**).

1. Research shows that **maximum group size** is an important indicator of quality child care. Smaller groups increase the chances that each child's needs will be met. They make it more likely that children will:
 - Receive more individual attention
 - Interact more positively with other children and staff
 - Be more involved in activities and therefore less likely to misbehave
 - Show less aimless wandering
 - Interact more often with other children
 - Have more opportunities for expression
 - Show more cooperative play
 - Learn and have more fun
2. Staff also benefit from reduced group size. They are more likely to:
 - Interact and participate more with children
 - Be more relaxed and positive when interacting with children, parents and other staff
 - Offer more encouragement, support and comfort to children
 - Encourage children's learning through play and spend less time passively observing
 - Be more aware of each child's individual development
 - Have fewer problems with behavior management.
3. The "**home room**" method of implementing group size would provide each group of children with their own room as "home" during the day. The same primary caregivers and children are together for most of the day. Each room would be equipped with toys, equipment and materials to meet the needs of that group of children.
4. In an "**open environment**" it is more of a challenge to accommodate maximum group sizes. Space needs to be organized to allow a home area for each maximum group. These home areas would be used for group activities, such as circle times, meals and naps. The main room would include activity centres, toys, equipment and materials for the children in attendance. Some of the activity areas could also serve as home areas. These home areas should be arranged to reduce interference of noise and traffic from other areas. Moveable dividers and shelves can be used to good advantage. Children should be allowed to choose freely between activity centres throughout most of the day. The arrangement of space and equipment will determine and limit the number of children who can be in any one area at one time.
5. Consistent staff are necessary for children's developmental needs so secure attachments can be formed. Whether in a home room or open environment, each child should be with consistent primary staff for most of the day, every day. In order that children's developmental needs can be met, individual children should not be shifted from one group to another during the day or from day to day in order to meet child: staff ratios.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

FIELD TRIP GUIDELINES

INTRODUCTION:

Some regulations deal with fieldtrips. For Child Care Centres, the applicable sections are: **(5(3); 8; 11(a); 14(b); 16 (3)(e); 16(7) and 16(8))**. The corresponding regulations for a Family Day Home are: **(6;9(2)(a to d); 9(4)(a,b,c); 12(b); 14(3)(1); 14(S) and 14(6))**.

- Notify parents of any planned outing at least 24 hours in advance.
- Obtain a signed consent form from parents outlining the date, time of departure and return, destination and purpose of trip and any special considerations.
- Each child should have an identification tag with the name, address and phone number of the centre or day home. Avoid identifying the child by name on these tags to prevent strangers referring to the children by name.
- Update emergency records, especially phone numbers for parents.
- Discuss and review rules of conduct with the children.
- Know what facilities will be available at the destination, such as phones, washrooms, water.
- Accessibility for children with a disability.
- Establish your route to and from the destination and leave a copy with staff at the centre or with day home parents. Leave a list of names for each adult and child who is on the trip.
- If using a vehicle or volunteer vehicles, ensure insurance coverage is adequate, that emergency equipment is carried and all children are using seat belts or approved child restraint systems.
- Have emergency records on hand, a first aid kit and a staff person who has current first aid certification.
- Lock all doors in a vehicle and ensure children remain seated and controlled during the trip.
- Never leave children unattended at any time. Take attendance regularly.
- Whenever possible a minimum of 2 adults from the child care centre should be on the trip, one in front and one at the back of the group.
- Children in strollers must be secured with safety belts. They should be dressed appropriately for the weather
- Children 3 and up should use a "buddy system".

OUTING RECORD FORM

Date: _____ Time Out: _____ Time In: _____

Staff: _____ Children: _____

Location: _____

FIRST AID KIT TAKEN: Yes No SUPERVISOR INFORMED: Yes No

Date: _____ Time Out: _____ Time In: _____

Staff: _____ Children: _____

Location: _____

FIRST AID KIT TAKEN: Yes No SUPERVISOR INFORMED: Yes No

Date: _____ Time Out: _____ Time In: _____

Staff: _____ Children: _____

Location: _____

FIRST AID KIT TAKEN: Yes No SUPERVISOR INFORMED: Yes No

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR BEHAVIOUR MANAGEMENT

INTRODUCTION:

There must be written discipline policies developed by each child care centre (**C.C.C. Reg. 18(1 through 4)**) and family day home (**F.D.II. Reg. 16(1 through 4)**) that reflect the use of positive discipline and child guidance. Following are guidelines to be considered.

PRACTICES:

- Written policies on child guidance practices must be developed and shared with staff and parents or guardians.
- Observe and assess the environment and individual children to anticipate situations and prevent problems by structuring space, materials, schedule, cleanup and transitions.
- Understand and apply child development knowledge to set and consistently enforce realistic, developmentally appropriate, clear, consistent rules and limits for behaviour.
- Be direct and clear with children when explaining how you want them to behave. Lower yourself to the child's level when speaking to him or her.
- Listen to children's feelings and frustrations and respond quickly and calmly to situations that require guidance.
- Redirect inappropriate behaviour to a more acceptable activity.
(*e.g. If you want to hit something you can bang the floor or use this "clobber clay"*).
- Be aware of your own feelings and accept your own humanness. Be a positive role model when dealing with others.
- Respect and value each child's unique feelings, developmental stage and background.
- Use preventative guidance by showing attention and affection to each child when they are not seeking it.
- Allow children the right to make mistakes and solve their own problems. Give them responsibility for the consequences of their behaviors
(*i.e. wiping up spilled juice*).
- Allow only realistic choices.
(*i.e. instead of saying "Do you want to pick up the toys?" Say instead, "It is time to pick up the toys"*).
- Challenge children physically so they can burn off excess energy.
- Total isolation in a closed, separate room for reason of punishment is prohibited.



No form of physical punishment, verbal or emotional abuse or denial of physical necessities of any child can be permitted, practiced or inflicted.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR ANTI BIAS CURRICULUM

INTRODUCTION:

There may be children from different backgrounds and nationalities in group child care. Differences in color, gender, language and physical ability are connected with privilege and power and children learn and are affected by this early in their lives. Centres and day homes should work very hard to eliminate stereotyping and prejudice in their programs. Yukon legislation calls for daily programming to be sensitive to each child's cultural heritage (**C.C.C. #16(1): F.D.H. #14(1)**).

- Research show that girls tend to be praised by teachers for appearance, cooperation and obedience whereas boys are noticed and praised for achievement and are described as being more active, even when research show similar activity levels. Know this and be aware of your own reactions.
- Offer non sexist play options to children. Give boys the opportunity to play with dolls and dress up clothes and girls with trucks and blocks.
- Yukon First Nations children need opportunities to develop a strong group identity as well as a strong individual identity. Race consciousness and pride are necessary to provide resilience and coping strategies needed to resist any racism they may face.
- All children are harmed intellectually and psychologically by racism. Rather than "not noticing" differences in children, these differences should be understood and appreciated.
- Don't teach a "tourist curriculum" for multiculturalism through celebrations, cultural events, foods. This can be patronizing and serves to trivialize a culture. Teach about Japanese Canadians rather than Japan.
- Environment is crucial. Display pictures and posters and materials that reflect children and adults of color, those who are differently abled and those who are engaged in non-stereotypic gender activities. Eliminate stereotypic and inaccurate materials from daily use (i.e. pasting Indigo over the Indian picture in the alphabet book). All toys, dolls, books, dramatic play areas and art materials should reflect the backgrounds of the children in our community and nation.
- Consider persona dolls introduced to the children with a story to tell. One may be blind, one has cerebral palsy, one lives with her mother and her mother's friend Sally, one is a Southern Tutchone, another Jewish and lives with his grandmother and his father. Each doll has certain celebrations and events to share with the children.
- Acknowledge all questions and comments children may have about differences in genitals, skin and hair coloring and about different physical abilities. Give matter of fact feedback and information and support each child's positive awareness of his or her budding self identity. Offer black and brown tempera paints, fingerpaints, crayons and markers. Refer to the colour of a child's skin as "beautiful chocolate brown". Ensure that you are phrasing positively all the remarks and adjectives that refer to them.
- Children need to know that treating someone in a biased way is hurtful and will not be tolerated. Don't ever allow a hurtful remark or an exclusion of a child pass by, even if the child who was hurt chooses to ignore it. It does hurt and will leave a mark. Ignoring an incident implies permission to act in a discriminatory way, making the environment unsafe for some children.
- Be pro-active in the community. Ask a toy store to offer coloured or First Nation dolls for sale or a bookstore to stock children's books by First Nation authors.
- Involve parents. Explain in a letter why Thanksgiving will be celebrated differently this year as it is not perceived as a cause for celebration by all people. Have parent meetings to include parents in the program and to get their ideas and feelings about anti bias.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR SUPERVISION

INTRODUCTION

The Regulations under Program of Activities (**Section 16(7)** in the **Child Care Centre Regulations** and (**Section 14 (5)** of the **Family Day Home Regulations** state that “Children in attendance are not to be left at any time without required supervision”. There is also provision in both sets of Regulations (**Section 16(8) CCC** and **Section 14(6) FDH**) stating that “With permission from the parents or guardians, school age children may attend off premises activities apart form and supervised by the (child centre/family day home) program”.

- As a child care provider you are responsible for the care and well being of the children. That means that at all times you know where they are and what they are doing. It is easy for a child to get themselves into trouble quickly when they don’t realize the consequences of their action (like putting their tongue on a piece of metal in the winter time, or chasing a ball into a busy street, or putting a plastic bag over their head to pretend they’re a monster to scare a friend). Being able to see and monitor the children in your care is an important part of your responsibility.
- Crib room monitors may be used to monitor a sleeping child when the rest of the group is awake. They may be also used in a family day home situation to assist a caregiver who is functioning on more than one floor.
- Kindergarten children are not considered school age children for the purposes of supervision. They are still considered preschool for the purposes of child staff ration (8:1) and child care subsidy.

SUPERVISION POLICY FOR SCHOOL AGE CHILDREN

If there are school age children in attendance at a family day home or child care centre, the parent may sign a permission letter to say that their child may leave the premises **for a specific reason**, (i.e. to walk to gymnastics, or to visit a neighbourhood friend or to walk home unaccompanied).

In such cases, a log must be maintained by the day home to document when the child left the day home, where they went and when they returned. This log needs to be initialed by the parent on a monthly basis to verify their agreement with this arrangement. It is the operator’s responsibility to ensure this log is accurate and up to date. In some cases where there are older school age children in attendance, they may be encouraged to keep this log.

In order for family day home operators to take an addition 4 school age children, they must have an assistant. **This assistant is expected to accompany the school age children when they leave the day home with permission from parents, (i.e. to the park or on an excursion).**

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

MAINTENANCE

GUIDELINES FOR MAINTENANCE OF EQUIPMENT AND FURNISHINGS

INTRODUCTION:

Child care centres are required to develop cleaning schedules and policies concerning the care and maintenance of the child's environment according to Child Care Regulations (Sections 13(1)(a) through (h), 13(2) and 13(3)). Family day homes must have policies and procedures in place as well (Regulations 11(1) (a) through (h), 11(2) and 11(3)). For both, any sanitization should be in accordance with the following procedure:

SANITIZATION PROCEDURE:

A sanitizing solution of bleach should be made up fresh daily. It can be used in a spray bottle for diaper changing surfaces and potties; with a cloth rinsed in the sanitizing solution for food preparation areas, large toys, books, puzzles and activity centres; or by immersing the object or toy in the sanitizing liquid. (1 tsp. bleach for 2 c. water or 5 ml. bleach to 500 ml. water: leave on the surface for 30 seconds before wiping). Other sanitizing solutions may be used. Discuss with an Environmental Health Officer before using.

Each centre or family day home is required to develop, post and follow written hygiene and sanitation policies that reflect the following guidelines:

TOYS:

- All toys should be of easily cleanable, washable materials.
- Toys belonging to older, non-diapered children should be cleaned weekly.
- Mouth toys (*musical instruments*) should be cleaned and sanitized before use by another child.
- Toys which are mouthed or those used by infants and toddlers need daily sanitization.
- Infant and toddler puzzles, board books, etc. need sanitization twice a week.
- Dress up clothing should be laundered weekly. All items should be washable. Straw and felt hats are not recommended.
- Soft cuddly toys should be washed weekly and as required.
- Water tables need to be drained and sanitized daily. Sand and water toys should be sanitized after use. Children should wash hands before and after playing in sand or water. Individual buckets are recommended for water play.
- Do not use broken toys. If not repairable, then discard.
- Store older children's toys away from younger children's play area.
- Climbing equipment and apparatus should be set up away from furniture or other objects. Any equipment more than 1 foot above the floor should be cushioned by energy absorbing mats.
- Toy chests and boxes are not recommended. Any storage containers must have non absorbent, easily cleanable surfaces (*not cardboard boxes*).

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

CRIBS:

- The mattress should be snug fitting with no more than 3 cm. (1¼") between the mattress and the sides. It should be less than 6" (15 cm) thick, have no soft surface and be made of non allergenic materials.
- Slats should be no more than 6 cm. (2 3/8") apart.
- Sides should lock at a maximum height. The latching device should not be easily released.
- There should be no exposed bolts or rough edges.
- Examine the crib and bumper pads regularly for wear and loose pieces that could choke a child. As soon as a child can stand, remove bumper pads and large toys that could be used for climbing.
- Avoid using pillows for an infant under 1 year.
- Never hang stringed objects (including toys) on bedposts.
- Do not use mobiles or crib gyms within reach of a child unless that child is supervised.
- Keep crib away from windows and blind cords.

HIGHCHAIRS:

- Should have a wide, stable base and a secure lockable tray.
- Sturdy restraining straps attached securely to the chair, not the tray, are needed. The child must be strapped in securely. A child should never be allowed to stand in a highchair.
- There should be no rough, sharp edges.
- Keep away from opening doors, such as refrigerators or stoves.
- Place the chair so a child cannot push against anything, such as a wall, to topple the chair.

BULLETIN BOARDS/ART WORK:

- Thumbtacks and staples should never be used in infant or toddler play areas, nor in eating and sleeping areas.

PLAYPENS:

- Mesh netting with weave less than 6 mm (¼") in diameter is required, or slats no more than 6 cm. (2 3/8") apart.
- Sides must be stable, sturdy and at least 48cm. (19") high.
- There should be no more than 2 wheels or casters.
- Firm floors with foam pads are needed.
- Hinges should lock tightly with no sharp edges.
- Vinyl covering on railings and padding should be thick enough to resist being chewed and bitten off by teething children. Repair or replace loose or torn coverings.

WALKERS:

- Should never be used.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

APPLIANCES:

- If there are over 30 children in a centre, a commercial dishwasher is recommended.
- The following cleaning schedule is recommended as a minimum guideline:
 1. Stovetops: daily
 2. Microwave: weekly
 3. Ovens: monthly
 4. Refrigerators: weekly
 5. Freezers: every 6 months
 6. Blenders, food processors: after every use
 7. Electric and hand operated can openers: daily

BEDDING:

- Label bedding or use fresh bedding daily. Launder weekly.
- Clean and sanitize sleep equipment before assigning to another child or if it becomes wet or soiled.

FURNISHINGS:

- Surfaces should be smooth, non absorbent and easily cleanable.
- Sofas and chairs should be vacuumed weekly.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR MAINTENANCE OF INDOOR SPACE

INTRODUCTION:

The care and maintenance of indoor space is regulated by the **Child Care Centre Regulations (Sections 9(1) a, d, e, f, g, h; 9(2, 3, 4, 5, 6); 10 (a through j); 12(1 through 6) and 14 (I, j, k, l and m))** and in the **Family Day Home Regulations (Sections 7(1)(a, d, e, f, g, h), 7(2, 3, 4, 5, 6); 8(a through f); 10(1 through 4); and 12(j, k, l, m))**. The following are guidelines to assist with individual child care centre and family day home policies.

FLOORING:

- Carpeting should be vacuumed daily. Commercial cleaning is necessary every month in infant areas and every three months in preschool and school age areas.
- Vinyl flooring is recommended for kitchen and eating areas, washrooms diaper changing areas, arts, crafts, water play and science areas and laundry areas. It should be swept or vacuumed at least daily and washed daily. Sanitization is necessary only if there has been a spill of body fluids. Washroom and diaper changing floor areas must be sanitized daily.

KITCHEN AND EATING AREAS:

- Clean, sanitize table tops, countertops and high chair trays after use. The surfaces must be free from dents, chips or cracks.
- Eating areas must be separate from sleeping areas.
- If tables are used for other activities, they must be cleaned and sanitized before children eat as well as before and after each use.
- Clean the remainder of high chairs every second day and as required.
- Clean chairs and table legs twice a week and as required for children under five. For older children, once a week is sufficient.
- Clean and sanitize plastic bibs after every snack and meal. Launder every second day and as required. Cloth bibs must be laundered after each use.
- Children should have no access to food or beverages hot enough to cause scalding.

DIAPER CHANGE STATIONS:

- The area needs to be properly equipped near running water and away from food preparation areas. The surface should be a sturdy table or counter top with an easily cleanable diapering pad (heavy padded vinyl or other surface, not quilted or with buttons).
- Sanitize after each use (chloral cleaner such as bleach: 1 tsp. per 2 cups of water. Leave 30 seconds before wiping with a single use wipe). Sanitizing solution must be made fresh daily. It should be kept easily accessible, but out of children's reach.
- No bottles or soothers are to be allowed in the diapering area.
- Thorough handwashing for both the child and the caregiver after each change is crucial.
- Paper towels should be dispensed from a single use dispenser.
- Written policies need to be developed and posted that all staff are aware of and follow consistently regarding: the disposal of soiled diapers, clothing and linen; bathing of a soiled child(ren) and the hygiene practices to be followed by staff before and after diapering.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GENERAL SAFETY INDOORS:

- Children must be protected from hot radiators, stoves, hot water pipes, cluttered exits and other hazardous conditions.
- All electrical outlets must be covered with protector caps except where school age children are exclusively in attendance.
- All items and articles which may be of potential danger to children, such as knives, firearms and ammunition, tools and cleaning supplies shall be stored in an area inaccessible to children.
- Emergency lighting in good working order is to be provided.
- Sufficient approved and annually checked fire extinguishers must be mounted..
- Space heaters are not to be operated during the time a facility is in operation unless more than 3 metres from a door which is an exit or which provides access to an exit. Guards must be provided.
- The hot water temperature must be set at a maximum of 48.8 degrees Celsius (120 degrees Fahrenheit).
- No doors which can be locked without a key can be used in any area where children have access, unless the door can be unlocked from either side.
- Smoking is not permitted except in designated staff areas separate from children and vented to the outside. Cigarette butts are not to be accessible to children at any time.
- All rooms where children are in attendance must be dry, well ventilated, well lighted and suitable for the care of children
- Activity areas must be separate from the sleeping area. Eating areas must be separate from the sleeping area.
- The premises must be kept clean, sanitary and in a good state of repair.
- A separate staff and administration space is required for child care centre programs.
- Where a child with special needs is in attendance, all areas must be safe and accessible to them.

TOILET AND WASHROOM FACILITIES:

- Toilets and sinks must be easily accessible to children with steps, nursery seats or platforms supplied.
- One toilet and one sink needs to be supplied for every 16 children who are not infants.
- An adequate supply of hot and cold water and liquid soap needs to be provided.
- Individual labeled wash cloths and towels or paper towels must be supplied to provide each user a clean towel unused by others.
- Labeled toothbrushes should be stored away from the toilet area in a way that each brush is separate from each other one. Egg cartons are not allowed.
- Washing and grooming materials should be labeled and not exchanged between children.
- Toilets and sinks and bathroom floors need to be cleaned and sanitized at least once during each day and more often if necessary. Potties need to be cleaned and sanitized after each use and stored in a manner which protects them from contamination.

CLEANING OF BODY FLUID SPILLS:

URINE, STOOL, VOMITUS, BLOOD AND BLOODY BODY FLUIDS:

- Wear gloves (household rubber, or disposable if blood is present).
- Clean and sanitize the contaminated area.
- Clean and sanitize gloves, mops, cloths. Air dry.
- Dispose of contaminated material in a lined covered garbage container.
- Wash hands thoroughly.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

GUIDELINES FOR MAINTAINING SPACE AND EQUIPMENT OUTDOORS

INTRODUCTION:

Outdoor space is regulated by **Child Care Centre Regulations (Sections 11(1)(a through g), 11(3), 11(4)(a through c))** and **Family Day Home Regulations (Sections 9(1)(a through g), 9(4), 9(4)(a through c))**. The following guidelines are to be taken into consideration:

- Any new (after May 1998) or renovated playgrounds should meet the current safety requirements established by **Canadian Standards Association (CSA)**. These include: the use of CSA approved play equipment; the dimensions for protective surfacing and encroachment areas; the materials used in energy absorbing surfaces as well as the depths of these surfaces.
- **No Encroachment Zone**— refers to the additional area adjacent to the protective surfacing zone, intended to allow pedestrian traffic near the play equipment with little risk.
- **Protective Surfacing**—is the surfacing material(s) to be used within the protective surfacing zone of any playground.
- Energy absorbing surfaces must cover the entire surface of a **protective surfacing zone** to prevent injuries and/ or fatalities. Some of those materials would be wood or tire chips, pea gravel or sand or rubber matting. Pea gravel and wood should be avoided in infant and toddler areas.
- Climatic conditions (freezing) will change the resilient effect of energy absorbing material. Equipment may need to be out of bounds for certain periods during seasonal change. Keep snow loosened during the winter months to help reduce the likelihood of serious injury.
- Close and careful supervision is recommended at all times. Extra staff may be necessary to supervise swings, slides and similar equipment. Children too young to use apparatus should be kept off and out of danger.
- Have rules for safe use of all equipment. Ensure staff are aware of and enforce these rules consistently.
- Periodically check toys and equipment for faulty parts and loose accessories. Repair, replace or eliminate.
- Check playground areas daily for glass, litter and animal feces. Remove and dispose of in a sanitary manner.
- Ensure wheels on used or newly purchased riding toys for children under 4 years of age do not have spokes, also that they are stable and well balanced.
- Children riding bicycles must wear a bicycle helmet approved by CSA (helmets must not be worn when playing on playground equipment) .
- Avoid mini and full trampolines and latex balloons as they are unsafe.
- Close supervision is necessary at all times a pool is used. Empty and sanitize after each use. Children
 - should never wear diapers in a pool.
- The playground must be fenced. It must have areas for a covered sand area, equipment for large muscle activities and an area for quiet play.
- If the playground is not on the premises, it should be within easy and safe walking conditions for the age of the children involved. Liability must be clarified and posted for all concerned (operator, playground owner, parent). Written permission to use the area must be obtained for any but public playgrounds.
- If not on the premises, playgrounds chosen must be developmentally appropriate and safe for the children using them (see above).

PLAYGROUND SAFETY CHECKLIST

SURFACING:

Do you have a safe surface material? *Circle the one(s) that apply:* gyra rock, pea gravel, sand, wood chips or wood mulch, shredded rubber or unitary synthetic surfaces.

Other (please specify) _____

What depth is your surfacing? (In inches)_____. Is this consistent throughout the protective area?

Is playground clear of stumps, rocks, glass and other hard or dangerous items? _____

Does it extend to a safe distance around equipment? (Should be a minimum of 1.8 m (6 feet) in all areas around each piece of play equipment. Swings require a minimum of twice the height from the top of the swing chain to the seat **plus** 6 more feet, front and back)? Please specify for each piece of equipment:

PIECE OF EQUIPMENT	SAFE SURFACING ALL AROUND? SPECIFY HOW MUCH	COMMENTS

LOCATION OF EQUIPMENT

Is equipment a safe distance from other equipment and from buildings, concrete or wooden retaining walls, pathways, etc.? It should be at least 1.8 m or 6 feet for stationary equipment and 3.6 - 5.5 m. (12 to 18.7 feet) for non-stationary equipment.

Yes No (please explain)

Are space and equipment organized so that children are readily visible and easily supervised?

Yes No (please explain) _____

GUARDRAILS AND HANDRAILS

All equipment over 20 inches high has adequate guardrails installed which contain no designated play surfaces.

Yes No (Please explain) _____

Protective barriers are installed on all equipment over 30 inches high. They contain no designated play surfaces (designed so a child will not be able to climb or stand on them).

Yes No (please explain) _____

Handrails or other means of hand support are available for use at the beginning of the first step. Continuous handrails that can be easily grasped 2.4-3.9 cm (0.95-1.55 inches) in diameter are provided on all stairs, stepladders and ramps that have more than one tread.

Yes No (please explain) _____

PLATFORMS

Platforms providing access to other platforms at different heights do not exceed a height of 30 cm (12 inches) for preschoolers and 45 cm (18 inches) for school age children.

Yes No (please explain) _____

Openings in steps that lead from one deck to another are closed off to prevent a crawl-through and risk of entrapment.

Yes No (please explain) _____

Platform decking does not trap water and has minimum openings for drainage.

Yes No (please explain) _____

VEGETATION

Ensure that there are no toxic plants or berries within reach of children. Ensure no pesticides or fertilizers are used that are toxic or that make vegetation toxic.

ENTRAPMENT OF HEAD, NECK OR OTHER BODY PARTS

There are no openings in equipment, stairs, overhead rungs, or steps that are between 100 mm(4 inches) and 225 mm (9 inches) where a child may enter and cannot withdraw his/her head, leading to strangulation.

Yes No (please explain) _____

Bicycle helmets are not worn when using playground equipment

Yes No (please explain) _____

ENTANGLEMENT

There are no protrusions or gaps that can catch toggles on clothing strings, especially at the top of slides

Yes No (please explain) _____

All "S" hooks (especially on swings) are a maximum of 1mm apart

Yes No (please explain) _____

There are no ropes available for children unless they are too thick to form nooses

Yes No (please explain) _____

No bolts extend more than 1 thread at any time.

Yes No (please explain) _____

PROJECTING PARTS

There are no dangerous sharp points, nuts, bolts or other projecting parts on playground equipment that a child may bump into or be cut or pierced by

Yes No (please explain) _____

PINCHING HAZARD

There are no exposed moving parts on play equipment to pinch or crush parts of a child's body, especially fingers

Yes No (please explain) _____

MAINTENANCE OF EQUIPMENT

Playground equipment is in safe condition and is stable. Wood parts have no loose splinters, large vertical cracks, decay

Yes No (please explain) _____

Plastic parts are not split or cracked

Yes No (please explain) _____

Metal parts are not rusty, have no chipped paint or sharp edges

Yes No (please explain) _____

Bolts, nuts and connector pieces are strong and cannot be undone.

Yes No (please explain) _____

Nuts and bolts have been lubricated. Fittings are greased. Corroded bolts and rivets have been replaced.

Yes No (please explain) _____

EQUIPMENT NOT RECOMMENDED

Check any of the following pieces of equipment that are **not recommended** that may be a part of your playground:

- | | |
|--|--|
| Seesaws (teeter totters) | Rope swings |
| Animal swings | Trampolines |
| Heavy swinging Trapeze bars | Chain/cable walks that are improperly designed
(not intended for preschoolers) |
| Climbing ropes if not tethered or anchored at the bottom | Free standing arch climbers |
| Rope swings | Climbing structures where a child can fall more than
45 cm (18") onto lower rung(s) (i.e. jungle gym,
Jacobs ladder, castle towers, monkey bars. |
| Merry-go rounds not speed controlled | Structures intended for home use only |

SWINGS

Swings are located away from other play structures and circulation areas and not attached to another play structure

Yes No (please explain) _____

There are no more than 2 swings per bay

Yes No (please explain) _____

Hangers at the top of the swing are wider apart than the width of the swing

Yes No (please explain) _____

Seats are made of impact absorbing material such as soft rubber, plastic or canvas material

Yes No (please explain) _____

Full bucket seats are available for toddlers

Yes No (please explain) _____

Tire or rotating swings have one swing per bay

Yes No (please explain) _____

The minimum clearance between the seating surface of a tire swing and the uprights of the supporting structure is 76 cm (30 inches) when the tire is in a position closest to the support structure

Yes No (please explain) _____

Swing seats when occupied are no less than 300 mm (12 inches) above the protective surface

Yes No (please explain) _____

Swing seats and components have been checked for signs of tilting and/or sinking

Yes No (please explain) _____

SLIDES

There are continuous grip handles all the way up the ladder from the first step

Yes No (please explain) _____

The standing platform at the top is at least as wide as the slide and at least 55 cm (22 inches)

Yes No (please explain) _____

There is no gap between the platform and the slide

Yes No (please explain) _____

There is a bar/panel at the top of the slide for the child to hold before descent

Yes No (please explain) _____

The slide's sides are at least 4 inches high

Yes No (please explain) _____

The exiting section of the slide is between 10-25.4 cm (4 - 10 inches) for preschoolers or between 25.4-45 cm (10-18 inches) off the ground for school age children

Yes No (please explain) _____

There are no gaps between sections for plastic sectional slides

Yes No (please explain) _____

TUBE SLIDES

There are no cracks, sharp edges, discoloration, scorching or burning, abrasion or wear on any tube slide.

Yes No (please explain) _____

The slide is fastened properly both at the top and at the bottom. Any loose bolts have been replaced or tightened.

Yes No (please explain) _____

TIRES

All tires have drainage holes so no water can be trapped

Yes No (please explain) _____

Tires are smooth (no steel) and are checked regularly for debris (inside).

Yes No (please explain) _____

SCHOOL AGE EQUIPMENT

The bottom rung of climbing equipment for school age children is far enough off the ground to prevent younger children climbing up.

Yes No (please explain) _____

WATER PLAY

All water play is supervised

Yes No (please explain) _____

Pools are emptied after use and turned upside down for storage.

Yes No (please explain) _____

SUPERVISION

Children are supervised on the playground at all times.

Yes No (please explain) _____

Playground safety rules are reviewed with children prior to using playground areas and public parks.

Yes No (please explain) _____

EQUIPMENT PURCHASED AFTER JULY, 1998

Complete and clear installation procedures were provided by the manufacturer and strictly followed during installation.

Yes No (please explain) _____

A complete parts list is on file.

Yes No (please explain) _____

Playground equipment is not used until protective surfacing has been installed.

Yes No (please explain) _____

A letter is on file from the manufacturer guaranteeing that the equipment meets the Canadian Standard for Children’s Playspaces and Equipment CAN/CSA-Z614-98.

Yes No (please explain) _____

A regular maintenance schedule for the equipment has been provided by the manufacturer and is followed by the centre/family day home with written records kept as to dates and findings

Yes No (please explain) _____

All renovations to play areas (new play spaces, new equipment and additions or replacement parts of existing play spaces and equipment) are in compliance with the Canadian Standards CAN/CSA-Z614-98

Yes No (please explain) _____

This checklist was adapted from the Alberta Resource Manual “Removing Playground Hazards for our Children’s Sake: and updated to include information from the Canadian Standards Association “Children’s Playspace and Equipment” manual published in May 1998.

Please contact: Child Care Services Unit
Box 2703
Whitehorse, YT Y1A 2Ct
Phone 667-3492 Toll Free 1-800-661-0408

for any questions you may have about specific pieces of equipment or for assistance in completing this survey.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

COMMUNICATION

PARENTAL INVOLVEMENT GUIDELINES

INTRODUCTION:

A strong relationship between caregiver and parent contributes to high quality care for the child. **The Child Care Centre Regulations (Section 20(1)(a) and (b))** and the **Family Day Home Regulations (Section 18(1)(a) and (b))** dictate what is necessary. Other recommendations are made as well.

- Custodial parents should feel welcome in a child care program to ask questions, observe, use resources, and contribute expertise. They need to be allowed reasonable access to the program, inspection reports, written policies, menus, log of injuries, the Child Care Act, Child Care Centre Program Regulations and guidelines or the Family Day Home Regulations and guidelines and the Child Care Subsidy Regulations.
- Parent meetings, which include all the parents together at the same time, are recommended to be held at least once every 3 months. The purpose should be to discuss:
 - a) The programs provided
 - b) The equipment and materials available for children
 - c) Staffing patterns and staff qualifications
 - d) Health and safety practices followed by the facility.
- Parents should have the opportunity to place items on the agenda for discussion.
- Minutes of these meeting should be kept and posted in a conspicuous place.
- A family day home is encouraged to have a meeting of all parents at least once every 6 months.
- Parents should be encouraged to become involved in the programs as program volunteers, board or advisory committee members, fundraisers, drivers, collectors of materials, trainers and participants in study groups, field trip extras, etc.
- Communication is also encouraged through use of pot lucks, picnics, newsletters, bulletin boards, questionnaires, festivals or celebrations, etc.
- A parent handbook outlining a centre or day home's policies should be developed, written and discussed with each parent.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

CONFIDENTIALITY GUIDELINES

INTRODUCTION:

Clear policies should be developed and written around the issue of confidentiality. Discussion about these policies need to take place with staff, parents and board members prior to employment, enrollment or duties.

- Personal or domestic information about children should never be divulged, other than to appropriate persons and in a professional manner (*i.e. perhaps with a child development centre teacher or social worker and perhaps in general terms rather than disclosing names*).
- Questions from parents or staff concerning other parents, staff or children should not be encouraged or answered. This includes families who may have separated.
- Speaking about a child, in front of that child, or in the hearing of other children, is never appropriate. Pick the right time and place for this kind of conversation so you will not be overheard.
- Personal or domestic information about staff should never be divulged other than to appropriate persons and in a professional manner (*i.e. perhaps to Board of Directors without mentioning names, if it is pertinent*).
- Personnel files should only be accessible to appropriate persons. Confidential information should be kept in a confidential file.
- Children's information files should only be accessible to appropriate persons (*i.e. to staff who are working with or responsible for those children*).

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

ABUSE AND NEGLECT REPORTING POLICIES

INTRODUCTION:

Mandatory reporting of child abuse and neglect is required in the **Yukon Child Care Act (Section 38(1), 38(2))**. As care givers you may have to deal with this area. You can be guided by the Abuse Reporting Protocol and the “Allegations for Abuse Within a Child Care Setting”, that is available through the Child Care Services Unit.

- You do not need to prove that abuse or neglect has taken place, only that there is a suspicion. The Department of Health and Social Services and the R. C. M. P. will do any investigation that is necessary. You can speak with a social worker or representative of the Department for guidance in this area.
- Keep in mind that you are not reporting a suspected abuser so much as assisting a child that may be in need of your intervention.

CHILD ABUSE PROTOCOL ROLES AND RESPONSIBILITIES

CHILD CARE PROVIDER

- Know their responsibility to report as legislated in the Yukon Child Care Act.
- Be familiar with the facility procedure and protocol for reporting suspected abuse or neglect.
- Know what information to document.
- Document any suspected abuse or disclosure in a factual, organized fashion.
- Maintain confidentiality Re: Disclosure listen to the child, avoid asking leading questions.
- Report any suspected abuse to Social Services (or call if you have questions).
- Cooperate with Social Services, RCMP and other agencies.
- Be familiar with what resources may be available to parents.
- Record information about the children on a regular basis to keep a record of typical development, behaviours and habits for each child.
- Regularly share information with parents about their child’s day.
- Provide support and understanding to the family in the ongoing relationship with the family.
- Ongoing training (formal education workshops) in Early Childhood Development (to be familiar with stages of development and what normal or typical development is).
- Be aware of indicators of abuse or neglect.
- Provide pre-employment requirements.
- Participate in regular performance evaluations.

BOARD OF DIRECTORS

- Ensure staff are aware of their legal obligation to report any suspected child abuse or neglect.
- Ensure regular performance appraisals are done for all staff.
- Ensure pre-employment documentation requirements are met.
- Participate in establishing clear policies and procedures around reporting suspected abuse.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

CHILD CARE UNIT

- Licensing and ongoing monitoring of child care facilities.
- Must be notified if the alleged perpetrator is a Child Care Provider.
- Receive “child development” inquiries.

SOCIAL SERVICES

- Consult with Child Care Providers and monitor information as requested.
- Receive referrals of children who may be in need of protection.
- Participate as a member of the Investigating Team.
- Intervene in order to determine if child abuse has occurred.
- To determine the degree of risk if the child remains in the present environment.
- To protect the child or children involved.

RCMP

- Investigate and interview.
- Participate as a member of the team.
- Apprehend as “Peace Officer” if a child is at risk or in an unsafe situation.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

INCIDENT REPORTING

WHAT IS A REPORTABLE INCIDENT

There are many events that involve a child in a child care program that requires reporting to the parents and some may also have to be reported to other agencies. The following list involving a child in a licensed child care program are reportable incidents. Incidents are to be reported to the parents and only to Child Care Services and other agencies where indicated.

REPORTABLE INCIDENT DEFINITIONS

<p>AGGRESSIVE/UNUSUAL BEHAVIOUR Aggressive/unusual behaviour on the part of a child in care towards another child or other persons, or an unusual behaviour by a child.</p>	<p>POISONING Ingestion of a poison by a child in care.</p>
<p>DISRUPTION OF SERVICE Any disruption of services which affects the delivery of care provided to children in the program (e.g. fire, flood, labour actions).</p>	<p>SUICIDE Reportable to CCS and other appropriate agencies (RCMP, Social Services, Coroner) when a child in care has taken his/her own life.</p>
<p>EMOTIONAL/PHYSICAL/SEXUAL ABUSE OR NEGLECT Any concerns are to be reported to the Social Services Agency or to the RCMP. Refer to Abuse and Neglect Reporting Policy.</p>	<p>SUICIDE ATTEMPT Reportable to CCS and other agencies as mentioned above when a child in care attempts to take his/her own life.</p>
<p>MEDICATION ERROR Where the incorrect medication is given to the child. Reporting to Child Care Services Unit required only when a child in care requires emergency care by a physician or transfer to a hospital.</p>	<p>UNEXPECTED DEATH Any unforeseen death of a child in care.</p>
<p>MISSING/WANDERING CHILD A child in care who goes missing.</p>	<p>UNEXPECTED ILLNESS Any unexpected illness involving a child in care requiring transfer to hospital. The report is to be copied to Child Care Services.</p>
<p>MOTOR VEHICLE ACCIDENT Where there is any MVA during transit of a child while under the care and supervision of the program.</p>	<p>ILLNESS OR ACCIDENT Any illness or accident requiring a Doctor's care.</p>

INCIDENT REPORT FORM

Name of Centre or Family Day Home: _____

Name of Child: _____ Date of Birth _____

Date of Incident: _____ Time: _____ a.m. _____ p.m.

Date Parents Notified: _____ Time: _____ a.m. _____ p.m.

Name of Attending Caregiver(s): _____

Details of Incident: _____

Location where incident occurred: _____

Action taken: _____

Suggestions for prevention: _____

Notification:

Parent/Guardian— Date: _____ Time: _____ a.m. _____ p.m.

Others:

Child Care Services, Fire Department, Social Services, RCMP, Ambulance, Coroner

Names of Staff who witnessed the incident: _____

Caregiver's Signature

Parent's Signature

Date *dd/mm/yyyy*

Date *dd/mm/yyyy*

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

PERSONNEL INFORMATION

JOB DESCRIPTION

It is worth the time to develop job descriptions for everyone that will be working at a centre or family day home. Having clear expectations will help all the way around. We have sample descriptions at Child Care Services Unit that can be borrowed. Other centres or family day homes are often willing to share this information as well.

JOB EVALUATIONS

It is important to do regular evaluations. It's part of goal setting and an excellent way to give and receive feedback. Sample forms are available from Child Care Services Unit.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

CHILD CARE FACILITY EMPLOYEE ORIENTATION GUIDE

Orienting a new team member is a technique for making new employees feel welcome, comfortable, and productive while they adjust to the team's work and work style.

An effective orientation makes new employees feel welcome, gives them an idea of program policies, procedures and plans; and helps them to settle in more quickly. All staff should have a role in welcoming a new team member.

Using a staff handbook and an orientation check list can help you to see that all the important points are covered. Orientation is an opportunity for the new employee to:

- Tour the program's facility
- Meet staff members, children, families and board members
- Learn job responsibilities (including emergency procedures) and personnel policies
- Become acquainted with the program's organizational structure

Orientation is also a time to complete required paperwork. Plan ahead for an orientation by preparing for the first six months of employment.

The following steps are a framework to assist you in your orientation program.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

EMPLOYEE RELATIONS

ORGANIZATIONAL STRUCTURE:

1. Who do staff report to?
2. Who does the director report to?
3. What is the board/committee role? Are these roles clearly defined for all involved: committee, staff, parents? Is there a staff/parent liaison?
4. How are complaints handled?
5. Who answers questions regarding the facility? (re: enrolling children, cost, finances, personnel etc.).
6. How is fiscal accountability established? Is there a proposed budget for the year, has the supervisor/staff been involved in developing this? Is a monthly financial statement prepared and checked with the proposed one. The actual income/expenses must be recorded monthly and it is wise to have a mid-year review.
7. What authority does the supervisor have for spending? Does the committee need to be involved in “petty cash type” items? groceries (if an amount is set this is easier) or for more larger budget items like additional staff, administration time for supervisor, planning time for staff, renovations, personnel benefits, large equipment items?
8. What about accessing other funding sources? Whose responsibility is it to write proposals? Does the committee need to review them if the supervisor is responsible?
9. Who develops the broad outline of the program and centre philosophy? Who evaluates and refines the program? Who plans short and long term objectives? Remember that a program of high quality will be attractive to families and will create more community support.
10. Who is responsible for policy making? If the supervisor/director/manager is responsible do the other workers have input and does the board/committee approve the documents?

Policies and procedures set out basic limits, standards and rules in general terms and should allow for some flexibility. They will not cover every problem that occurs and the supervisor may need to turn to the board/committee for support in making a difficult decision.

1. It is the responsibility of the society/board/owner to ensure that the facility is well managed and therefore must:
2. Define job descriptions, salary scales and personnel policies including hiring/firing procedures & who is responsible for this.
3. Hire competent supervisor/manager/director and have a plan for learning/training on the job if not qualified or experienced in all of the required duties.
4. Establish a close working relationship with the supervisor/manager/director.
5. Review the operation of the facility regularly to ensure that it is fulfilling the aims and objectives of the facility and of the society/board/owner.
6. Periodically evaluate the performance of the supervisor on the basis of specific job description in the management of the facility and its personnel, parent relationships, leadership skills, program planning and implementation.

NOTE—Be careful not to infringe on the responsibilities of the supervisor and staff. Be satisfied that the employees are competent and capable of handling responsibility. The board/committee must not attempt to exercise authority over staff because such behaviour undermines the authority of the supervisor.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

EARLY CHILDHOOD TRAINING

It is required that child care providers have some training in Early Childhood Development. Family day home providers must have at least one 60 hour course in ECD or equivalent. Child care centre staff by September 2000 must be trained at the following levels: 50% at Level I, 30% at Level II and 20% at Level III.

- Level I One 60 hour course in ECD or equivalent
- Level II One year training in ECD or equivalent
- Level III Two years of ECD training or equivalent

The following chart (on the next page) illustrates staffing minimums:

CHILD CARE WORKERS LEVELS

Primary Number of Workers (have a group of children)	CCW I Sept 99 (at least 50%)	CCW II Sept 99 (PLUS an additional 30% = 80% total)	CCW III Sept 99	CCW I Sept 2000 (at least 50%)	CCW II Sept 2000 (PLUS an additional 30% = 80 % total)	CCW III Sept 2000 (PLUS an additional 20% = 100 % total)
1		1				1
2	1	1			1	1
3	2	1		1	1	1
4	2	2		1	2	1
5	3	2		2	2	1
6	3	2		2	2	2
7	3	3		3	2	2
8	4	3		3	3	2
9	5	3		4	3	2
10	5	3		5	3	2
11	5	4		4	4	3
12	6	4		5	4	3
13	6	4		6	4	3
14	7	5		6	5	3
15	7	5		7	5	3
16	8	5		7	5	4
17	8	6		7	6	4
18	9	6		8	6	4
19	10	6		9	6	4
20	10	6		10	6	4

As well, providers must have an RCMP clearance, a valid first aid with CPR component, a record of immunizations, and both medical and T.B. clearance.

GUIDELINES AND POLICIES FOR CHILD CARE AND FAMILY DAYHOME PROGRAMS

CARING FOR THE CAREGIVER

It is very important that caregivers take time for themselves and that their work places are set up to offer comfortable seating and time away from the children from time to time. In a family day home situation, having adult sized furniture is usually not a problem. However in child care centre settings, caregivers are often using child sized furniture and may suffer real back and other problems from doing so over long periods of time. Also, it gives a message to them that they “don’t matter” as much.

Breaks are usually scheduled for staff working in a child care centre, but for a family day home operator, breaks are often few and far between. It is important if you are a caregiver in your own home that you have someone who can offer relief work to you on a regular basis. It helps to keep you from “burning out” prematurely.

It is important to take care of your selves in order to take care of children.

Having time built in for programming is a must for child care workers in order for them to be able to effectively plan for taking care of the children in their care.

The Regulations say (Section 10 (I)) that there must be an administration and staff-rest area which is separate from the space for the care and use of the children. This space should be ideally one where resources are available and where staff have priority. It is not meant to be just the director’s office where staff fit in if no one else needs the office.