

# Mission, Vision and Values

#### MISSION STATEMENT

The creative and innovative leadership of MCRC with the Halton community will develop and deliver services to inspire and support children, their families and professionals.

#### VISION

A safe, caring community where children and families are valued, grow and succeed.

#### **VALUES**

**Inclusive:** Endeavor to remove all barriers which prevent acceptance and accessibility.

Quality: Strive for a standard of excellence.

Collaborative: Share ideas and work together toward a common goal.

**Integrity:** Be honest, consistent and informed.

Accountable: Establish trust through responsible and transparent work.

Innovative: Develop fresh ideas, solutions and inspirational thinking

Who We Are       3         PROGRAM STATEMENT       4         Our Approach       4         Environment       6         Family Engagement       7         Criminal Reference Checks         Nutrition       8         Brogram Assessment       9         Serious Occurrence Reporting         Child Guidance/Prohibited Practices       11         Sanitary Practices         Community Partnerships       13         Standing and Recreational Bodies of Water         Our Commitment       14         Students and Volunteers         Licensed Home Based Child Care       16         What Do Home Visitors Do?       17         Termination of Care         What Do Home Visitors Do?       17         Proyrider Approval Procedure       18         Withdrawal Policy         Home Child Care Group Sizes       19         Program Requirements       20         Play Materials, Equipment and Furnishings       21         Registration Requirements       21         Subsidy       22         Hours of Operation       22         Arrival and Pick-up       23         Clothing       23         FA	WELCOME2	Anaphylaxis/Asthma	24
Our Approach	Who We Are3		
Environment	PROGRAM STATEMENT4	Parent Issues and Concerns	26
Family Engagement 7 Criminal Reference Checks 8 Illness/Health 8 Illness/Health 9 Serious Occurrence Reporting 9 Serious Occ	Our Approach4	Wait List Policy	28
Nutrition 8 Illness/Health 9 Serious Occurrence Reporting 9 Students and Recreational Bodies of Water 9 Students and Recreational Bodies of Water 9 Students and Volunteers 9 Students	Environment6	Child Protection Responsibilities	28
Program Assessment	Family Engagement7	Criminal Reference Checks	29
Child Guidance/Prohibited Practices	Nutrition8	Illness/Health	30
Community Partnerships	Program Assessment9	Serious Occurrence Reporting	31
Our Commitment	Child Guidance/Prohibited Practices I I	Sanitary Practices	31
Licensed Home Based Child Care	Community Partnerships13	Standing and Recreational Bodies of Water	32
Licensed Home Based Child Care	Our Commitment14	Standard First Aid and Infant CPR	32
What Do Home Visitors Do?	PROGRAM DETAILS 15	Students and Volunteers	33
Provider Approval Procedure	Licensed Home Based Child Care16	Supervision of Children	33
Home Child Care Group Sizes	What Do Home Visitors Do?17	Termination of Care	33
Program Requirements	Provider Approval Procedure18	Withdrawal Policy	34
Play Materials, Equipment and Furnishings21 Inclusion	Home Child Care Group Sizes19	Trips and Excursions	34
Play Materials, Equipment and Furnishings21 Inclusion	Program Requirements20	EINANCIAIS	3.5
Inclusion	Play Materials, Equipment and Furnishings 21		
Fire Drills	Inclusion21		
Hours of Operation	Fire Drills22	,	
Arrival and Pick-up	Hours of Operation22	, .	
FAQ's POLICIES & PROCEDURES . 24 HEALTH RESOURCES	Arrival and Pick-up23	·	
POLICIES & PROCEDURES . 24 HEALTH RESOURCES	Clothing23		
	POLICIES & PROCEDURES 24	-	
Administration of Medications24 CONNECT WITH US	Administration of Medications24	CONNECT WITH US	

# Dear Families,

On behalf of our entire organization, I want to welcome you to Milton Community Resource Centre. We are excited to have you join our community and look forward to partnering with you and your children as they grow and develop within our programs.

MCRC was established in 1998 following the amalgamation of Milton Children and Youth Services and Milton Community Information Services. Over the past years, MCRC has continued to grow and expand its programs and services in order to support and meet the growing needs of the children, families and early years' professionals in our community.

Our mission statement is: The creative and innovative leadership of MCRC with the Halton community will develop and deliver services to inspire and support children, their families and professionals. Guided by this statement, we are an organization that is committed to continual growth and development meeting and supporting the needs of our community in ways that are both purposeful and meaningful.

MCRC is also strongly committed to advocating for change in the field of early childhood learning and child care. We are active, contributing members and partners with various local, Regional and Provincial initiatives and committees such as:

- Halton's Our Kids Network
- Halton's DA (Developmental Assets®) Strategy Committee
- DA Community Trainers
- Quality Early Learning Network
- Halton's EDU-Care Partnership Committee
- Professional Advisory Committee
- Partners for Children with Special Needs

It is my sincere hope that you feel welcomed and supported as parents and partners of our organization that your children feel safe and secure and are inspired to play and learn while contributing their voice to their classroom program and planning. We value your input and encourage your questions, ideas and feedback. They are not only important to us...they make us better.

#### Sincerely,



Rebecca Barrows-Vrankulj Executive Director





# MILTON COMMUNITY RESOURCE CENTRE (MCRC)

Milton Community Resource Centre (MCRC) is a Not-for-profit, multi-service organization that provides programs and services to children and families of Milton and the surrounding communities. Our programs and services include:

#### **EARLY YEARS PROGRAMS**

- Ontario Early Years Centre, North Halton
- Family Resource Programs
- Parent Resource Library

#### **LICENSED CHILD CARE\***

- Bronte Street School full time toddler and preschool programs
- Bruce Trail Early Learning Centre full time toddler and preschool programs
- MCRC Early Learning Centre part time preschool program
- CHERISH Home Child Care full and part time programs for all age groups
- Licensed Before and After School Programs
- Licensed P.A. Day, Summer, Spring and Winter Break School Age Camps

#### **OTHER AGENCY PROGRAMS**

- Artists and Children Together (ACT)
- Youth Dances

# THE HALTON RESOURCE CONNECTION (THRC)

THRC is supported through collaborative partnership between Halton Region and MCRC.

- Resource Library
- Professional Learning
- Child Care Directory and Information Line (CCDIL)
- Quality First (QF)
- Centralized Intake Line
- In Centre Support

\*All of MCRC's Licensed Programs follow the requirements as specified in the Child Care and Early Years Act, 2014.

#### **OUR APPROACH**

"From the very beginning of his or her education, the child should experience the joy of discovery" -Alfred North Whitehead

Milton Community Resource Centre's (MCRC) program, philosophy and approach to working with children is inspired by the work of the children, parents and teachers in the schools of Reggio Emilia, Italy, and as such, our curriculum is built around the children's questions, ideas and interests. Our approach to early learning is based on a fundamental view of the child as a competent citizen with full rights, and the ability to share what they know and wonder about through multiple languages. MCRC recognizes that children are competent, capable, curious, and rich in potential and we strive to deliver programs and services that value and build on these strengths and abilities. It is imperative that all programs promote the health, safety, nutrition and well-being of children and incorporate indoor and outdoor play, active play as well as rest and quiet time. The individual needs of the child are considered at all times throughout the day.



MCRC has embraced "How Does Learning Happen? Ontario's Pedagogy for the Early Years" as a professional learning resource guide for Educators and Home Child Care Providers to support pedagogy and curriculum/program development in our early learning programs. This document refers to four foundational conditions that are essential to a child's ability to grow and flourish. MCRC is committed to ensuring the four foundation; Belonging, Well-Being, Engagement and Expression; are reflected throughout our licensed child care programs.

Foundations	Goals for Children	Expectations for Programs
Belonging	Every child has a sense of belonging when he/she is connected to others and contributes to his/her world.	Cultivate respectful relationships and connections to create a sense of belonging among and between children, adults, and the world around them
Well-Being	Every child is developing a sense of self and health and well-being	Nurture children's healthy development and support their growing sense of self.
Engagement	Every child is an active and engaged learner who explores the world with his/her senses, bodies and minds	Provide environments and experiences to engage children in active, creative, and meaningful exploration and learning.
Expression	Every child is a capable communicator who is able to express himself/herself in many ways	Foster communication and expression in all forms.

Relationships are central to this approach, with children, families and Educators and Home Child Care Providers working collaboratively and learning together. We know that children flourish in all areas when they are in supportive, caring and responsive relationships with adults. Fostering those relationships is MCRC's top priority, and our Educators and Home Child Care Providers strive to build authentic relationships and connections with children and families. Throughout our programs, the Developmental Assets framework has been integrated into our approach with children, youth, Educators, Home Child Care Providers and the community. At MCRC, we actively seek to hear the voice of the child to inform early childhood practice, centre policy and community development.

Our Educators and Home Child Care Providers are co-learners who connect with the children, ensure safe environments, plan and extend play, document the children's learning and engage in reflective practice. We know that children learn through play that is spontaneous, active and undertaken without external goals. All children are curious, and as they explore their world through play, their competence, capacity and potential will be maximized.

#### ENVIRONMENT

Children will be provided with a positive learning environment that enables child initiated, adult supported play and engages children in active, creative and meaningful exploration and inquiry. Educators and Home Child Care Providers will connect with families to ensure the environment and experiences offered are reflective of and relevant to the children's individual needs and everyday lives.

The flow of the day in each program will incorporate opportunities for active play, rest and quiet time, while ensuring the individual needs of each child is met. Children will be provided with materials that are open ended, encourage exploration, and provide opportunities to represent their thinking and ideas.



MCRC believes that self-directed and unstructured play is essential and fundamental to a child's social, emotional, physical and intellectual development. Learning takes place when children freely interact with their environment by exploring and manipulating objects, asking questions, solving problems, and performing experiments.

# FAMILY ENGAGEMENT

"When we recognize and build on the strengths of families and the love they have for their children, everyone benefits"

-How Does Learning Happen

MCRC believes that parents are their children's first teachers, and as such, have much to offer to their child's early learning program. Parent participation is seen as greatly enhancing the child's program and maximizes their learning experiences. The meaningful exchange of ideas between Educators, Providers and parents/families support the child as they grow and develop within our programs, and contributes to the child's sense of belonging. MCRC encourages parents to be active in their child's experience in our programs, and offers many opportunities for parent engagement including:

- Daily, verbal communication between parents and MCRC Educators
- Communication with parents using multiple means including email updates, newsletters, MCRC Facebook page, Twitter and the MCRC blog
- Posted documentation of daily activities, interactions and learning experiences. This
  may include photos, videos, artwork, and transcribed conversations, as well as adult
  interpretations and theories about the work of the children
- Inviting families to reflect and comment on a piece of documentation
- Sharing resources and information regarding community supports and activities
- Access to the MCRC Parent Resource Library resources including books, videos, reference articles, parent/child resource kits, topical parent workshops and parenting programs
- Social and open house activities throughout the year

MCRC has an open door policy, and we welcome parents to visit our programs and share their knowledge and experiences with the children. A strong, respectful and equitable relationship with parents is key to our ability to engage as co-learners with the children and their families.

WELCOME

#### NUTRITION

#### "The fondest memories are made gathered around the table"

-Unknown

MCRC believes that adequate and appropriate nutrition is vital to children's health, growth, development and well-being. Meal and snack times are served in a family style environment, providing an opportunity to encourage self-care skills while also making connections and building relationships with the children.

It is the Home Child Care Provider's responsibility to provide children in care with a nutritious mid-day meal, and a morning and afternoon snack. These meals and snacks must meet the recommendations set out in the Health Canada Documents "Eating Well with Canada's Food Guide". Providers are required to post at least 2 weeks of menus and plan their menus in consultation with the parent/guardian and Home Visitor. Menus will be kept on file for 30 days after the last day served. Drinking water must be available at all times.

Parents/guardians must indicate any food allergies on their child's Application Form, Child's Individual Student Plan (if applicable) and Emergency Card. Parents/guardians will inform the Provider at the time of their interview and parents/guardians must supply food if their child has any special dietary needs. All food allergies and food restrictions must be posted where food is prepared and served.



Children under one year of age and not yet on table food must be fed in accordance with written instructions which must be supplied by the parent/guardian on the CHERISH Infant Feeding Schedule. Where food and/or drink or both are supplied by a parent of a child, the container for the food or drink is labelled with the child's name and all food or drink is stored, prepared and served so as to retain maximum nutritional value and prevent contamination. Parents/guardians of small infants are encouraged to use a log book. This enables both parents/guardians and Provider to share information on a daily basis.

Should a parent be unable to feed their child breakfast before leaving home, we ask that arrangements be made with the Provider to ensure that the child starts the day with a nutritional meal. It is the parent/guardian's responsibility to provide breakfast.



Our full time, licensed child care centres have fully functional kitchens onsite, with qualified cooks who are certified food handlers. A nutritious lunch, as well as a morning and afternoon snack, are provided. In our School Age and Nursery School programs, children are provided with a nutritious morning and afternoon snack. All of our programs follow a four week, rotational menu that meet the recommendations of Health Canada's document, the Canada Food Guide.

Our menus are rich in fruits, vegetables and whole grains, and are reflective of family and cultural preferences. During PA Days and Camps, School Age children are required to provide their own bagged lunches. MCRC will provide families with guidelines and sample menus to assist with preparing bagged lunches that are nutritious and in accordance with the Canada Food Guide.

# PROGRAM ASSESSMENT and REFLECTIVE PRACTICE

"The wider the range of possibilities we offer to children, the more intense will be their motivations and the richer their experiences" -Loris Malaguzzi

At MCRC, our Educators and Providers reflect on and assess their program and environment on a daily basis to ensure the needs and interests of both the individual children, and the group, are being met. Through regular conversations and team meetings, our Educators and Providers will engage in dialogue and reflection in an effort to continually adapt and improve upon what is happening in the classrooms. Program Supervisors will observe the programs and adult-child interactions, as well as review program planning and documentation, to ensure they meet our MCRC Program Statement requirements. A licensing checklist is completed bi-annually to ensure that program quality indicators are being met.

In addition, MCRC is an active participant in Quality First – a quality, early learning initiative that provides a developmental model for quality improvement. We strive for a standard of excellence above and beyond licensing requirements, and as such, all of our licensed programs actively participate in the Quality First initiative. Through on-site observations by a Quality First Consultant, professional learning opportunities, self-reflection activities, and support to reach established goals, MCRC will consistently assess and reflect on the quality and effectiveness of our programs.

#### PROFESSIONAL LEARNING

"When educators engage in continuous learning and questioning, exploring new ideas and adjusting practices, they achieve the best outcomes for children, families and themselves" -How Does Learning Happen

MCRC understands the importance of, and is committed to, ongoing development and professional learning. Home Child Care Providers are encouraged to attend professional learning opportunities of their choice, as well as participate in staff meetings, discussion groups, regular training sessions and special projects. In addition, our Supervisors, Home Visitor, Quality First Consultants and community partners provide ongoing coaching and mentoring opportunities to further develop our Educators and Home Child Care Providers in their professional learning.

MCRC Educators and Home Child Care Providers are members of the Halton Resource Connection (THRC) and are encouraged to spend their programming time utilizing the various resources offered, including curriculum support, classroom resources and materials, and a wide variety of professional learning opportunities.



#### **CHILD GUIDANCE**

"When Educators are aware of, and able to understand and respond to the many languages of children, they give every child a voice" -How Does Learning Happen

MCRC's mission is to develop and deliver services to inspire and support children, their families and professionals. Our vision is a safe, caring community where children and families are valued, grow and succeed. All Educators, Home Child Care Providers, volunteers and students will ensure that every child has a sense of belonging, and is developing a sense of self and well-being. Every child will be an active and engaged learner who is able to explore their world, and will be capable communicators who express themselves in many different ways.

The foundation of our programs is building relationships, and supporting children in their relationships with each other, adults and their environment. Educators and Home Child Care Providers support children in developing strategies to remain calm and to regulate their emotions while recognizing the effects of their actions on others. MCRC believes that the goal of behaviour guidance is to promote children's self-esteem, foster strong peer relationships as well as independence, and become more aware of each child's individual learning style and pace. This occurs by listening to children, respecting their rights, giving choices and setting appropriate limits.

Strategies that Educators and Home Child Care Providers utilize include:

- · Setting appropriate limits and expectations
- Promoting positive behaviour
- Natural and logical consequences
- Positive redirection
- Physical environment considerations



Any practice based on a negative control technique is not part of MCRC's Behaviour Guidance policy, and is not in line with our Mission, Vision and Values. MCRC believes that the prohibited practices outlined below are inappropriate, negate children's rights and must not be utilized:

- Corporal punishment of the child
- Physical restraint, such as confining the child to a high chair, car seat, stroller or other device for the purposes of discipline or in lieu of supervision
- Locking the exits of the premises for the purpose of confining the child, or confining the
  child in an area or room without adult supervision, unless such confinement occurs during
  an emergency and is required as part of the emergency management policies and procedures
- Use of harsh or degrading measures or threats or use of derogatory language directed at or used in the presence of a child that would humiliate, shame or frighten the child or undermine his or her self-respect, dignity or self-worth
- Depriving the child of basic needs including food, drink, shelter, sleep, toilet use, clothing or bedding
- Inflicting any bodily harm on children including making children eat or drink against their will

If a prohibited practice is observed being used, a report will made to the Children's Aid Society as per MCRC's Behaviour Guidance policy, and Ontario law. Program Supervisors and/or the Home Visitor will observe and monitor Educators, Home Child Care Providers, volunteers and student's child guidance practices on a bi-annual basis, and ensure that a written record of those observations is completed.



# COMMUNITY PARTNERSHIPS

#### "It takes a community to raise a child"

-Unknown

MCRC is an active and visible organization in the local community, and is strongly committed to advocating for change in the field of early childhood learning and child care. We are active, contributing members and partners with various local, Regional and Provincial initiatives and committees such as:

- Halton's Our Kids Network
- Halton's Developmental Assets Strategy Committee
- Halton's EDU-Care Partnership Committee
- Our Kids School Age Bullying Prevention Task Force
- Partners for Children with Special Needs
- Quality Early Learning Network
- Salvation Army (Infant Food Bank)
- Halton Licensed Home Child Care Agencies



In addition, MCRC has developed strong partnerships with external agencies and organizations including the Region of Halton, the Halton District School Board, Community Living North Halton, and the Reach Out Centre for Kids. These partnerships enable us to support the entire family unit, as well as the individual child, and also provide invaluable support to our Educators and staff.

Members of the community are often invited into our programs to share their knowledge and experiences. MCRC also encourages the children in our programs to become active participants in the community around them. This may include, but is not limited to:

- Sharing cultural and family traditions including holiday celebrations, cooking, music and dance
- Further exploring the children's interests by inviting in community "experts"
- Local artists integrated into our programs through the Artists and Children Together program
- Engaging in philanthropic community activities
- Field trips and neighbourhood walks
- Exploring the natural environment



# **OUR COMMITMENT**

MCRC will facilitate and support a continuous professional learning process to ensure that Educators are ready, willing and able to actively deliver the commitments made through the MCRC Program Statement. This will include, but not be limited to:

- All individuals referred to in the Program Statement Implementation Policy will review the Program Statement prior to interacting with children
- All individuals referred to in the Program Statement Implementation Policy will review the Program Statement annually, or at any time modifications to the Program Statement are made
- Upon review of the Program Statement, staff will have the opportunity to reflect on the successes and challenges of the past year, and any modifications needed to the Program Statement will be considered
- All staff will be provided regular opportunities to engage in staff meetings, group discussions, and/or professional learning opportunities to support reflective practice and collaborative planning

All MCRC Educators will be regularly observed and monitored by the Program Supervisor to ensure all requirements of the Program Statement are being met throughout our programs. These observations will be documented on a bi-annual basis, and used as a tool to reflect on the impact of the strategies and continued improvement.

#### **QUALITY FIRST**

Quality First is a quality early learning initiative providing all licensed children care programs in Halton Region with the opportunity to participate in a developmental model for quality improvement. At MCRC we strive for a standard of excellence above and beyond licensing requirements thus all of our licensed programs actively participate in the Quality First initiative. CHERISH Home Child Care will be part of the Quality First initiative beginning January 2016.



# **DEVELOPMENTAL ASSETS®**

MCRC is part of an "asset building" community that has integrated the Developmental Assets framework into our approach with children, youth, parents, Educators, Home Child Care Providers and the community. Developmental Assets represent the relationships, opportunities and personal qualities that children and youth require to succeed. All children and youth need assets and everyone can be an asset builder. At MCRC we intentionally embed assets into all our work and actively seek to hear the voice of the child to inform early childhood practice, centre policy, and community development.

For more information, visit: www.search-institute.org/developmental-assets



#### LICENSED HOME CHILD CARE

CHERISH Home Child Care is a program offered by Milton Community Resource Centre (MCRC). This licensed program offers a flexible alternative to Centre-Based Care by offering a supervised home child care within a family setting. Home Child Care offers a range of services including full-time, part-time, shift and emergency care. This child care option provides a small group setting within the Provider's home for up to 6 children from 6 weeks to 13 years of age.

MCRC/CHERISH is licensed by the Ministry of Education as a Home Child Care Agency and must meet and maintain specific provincial standards set out in the new Child Care and Early Years Act (CCEYA). These standards provide for the health, safety and developmental needs of the children.

As a Licensed Home Child Care Agency, MCRC/CHERISH contracts service from individual caregivers (Providers) who offer child care in their own home. Providers may care for infants, toddlers, preschool aged children and offer care for school aged children before and after regular school hours, and on days when schools are closed.

The Ministry of Education inspects the agency and the home child care locations at least once a year to ensure:

- Provincial standards and regulations are being met.
- Issue and renew licenses.
- Investigate complaints.
- Monitor operators who are having difficulty meeting licensing standards.



# WHAT DO HOME VISITORS DO?

A Home Child Care Home Visitor is a registered Early Childhood Educator who is a member in good standing of the College of Early Childhood Educators, with at least 2 years' experience working with children under 13 years of age. Their role is to provide support and supervision of the home child care premises.

All Providers are screened, approved and monitored by MCRC's CHERISH Home Visitor. Before a home is approved, the premises including the outdoor play space is inspected by the Home Visitor to ensure compliance with the Child Care and Early Years ACT (CCEYA). The CCEYA requires that homes are visited every three months, but CHERISH attempts to visit each home at least once a month without prior notice to the Provider. A summary of each monthly visit is kept on file.

They also provide support and assistance in:

- Planning activities for children at different stages of their development.
- Nutritious meal planning.
- Helping choose toys and equipment that are safe and suitable for the children.

Programs are re-evaluated regularly to reflect changes in the Regulation under the CCEYA and to incorporate new ideologies on early childhood education development.

CHERISH Providers are offered Standard First Aid and Infant Child CPR Certification and various ongoing professional learning opportunities throughout the year. Each Provider receives a free membership to The Halton Resource Connection (THRC) which includes a Resource Lending Library. A CHERISH newsletter is distributed monthly, alternating between parent and Providers.

The Home Visitor also works with families to find a Provider contracted with our agency that meets the specific needs of the child and family. Our agency attempts to match parent/guardian(s) and children with approved Providers within the child's own neighborhood or their place of employment. A child is placed only after the Provider, parent/guardian and child(ren) have had the opportunity to meet, at which time an interview has taken place, and all required documentation has been completed and filed with CHERISH. Each Provider and parent/guardian must complete a Parent/Provider Agreement as part of this process.

# PROVIDER APPROVAL PROCEDURE

Before the approval process takes place, the perspective Provider must contact their home insurance company to inform them that they require child care liability coverage. Providers must have appropriate insurance for the provision of care in their home and each Provider is encouraged to consult with his/her agent to determine coverage under their current home insurance policy. The policy must state that the Provider is providing child care in their home. Additional coverage may be necessary for excursions out of the Provider's town/city and fire and extended coverage.

Once this has been verified, the Provider will:

- Submit for review, a consent to a Children's Aid Society Check, Criminal Record Check and Vulnerable Sector Screening (current in the last 6 months) for themselves and all persons over the age of 18 years, residing in the home or regularly on the premises.
- Complete a Family Medical Form on themselves and every person in the household over 18 years of age. Provide Immunization Records that identify current Diphtheria, Tetanus, Pertussis, Measles, Mumps, Rubella and 2 Step TB testing results, or chest x-ray. Tetanus must be completed every 10 years and updated records submitted to the agency. For all persons under the age of 18 years, a copy of their most updated immunization record must be submitted.
- Should a potential Provider be renting the premises where they would like to open a home child care, they must have written permission from their lessee giving them permission to run a business where clients will visit them.
- All dogs and cats in the Provider's home are immunized against rabies annually, with a copy of the certificate forwarded to CHERISH.
- Make arrangements with a relief person over the age of 18 years, to be available in case of an emergency. The Provider must complete and sign the Emergency Back Up Form. The Agency will make every attempt to place children in another CHERISH Home in the event that the Provider is unable to provide care, but is not responsible for emergency care.
- Provide the names and contact phone numbers for three personal references.
- Establish a home-specific Fire Escape Plan.

A valid Standard First Aid with Infant & Child CPR Certification is required upon completion of an initial application and once the above items have been submitted to the agency the Provider will:

- Complete the Health and Safety requirements identified in the Regional Health Department Reference Guide.
- A First Aid Kit and manual containing the items listed in CHERISH's First Aid Kit Contents List must be readily available in the Provider's home.

The Provider will contact the agency for a home visit and then:

• Contact the local fire department for inspection and approval.

Once approved, Providers are required to follow comprehensive MCRC agency policies, in addition to the Child Care and Early Years Act requirements.

Ongoing access to their home will be provided to CHERISH Staff, Regional Representatives, Program Advisors, Health Department Staff, Fire Department, Children's Aid Society and parents.

The Ministry will provide signage to each home that will identify them as part of a licensed program. A Home Child Care Provider shall return the signage to CHERISH within 30 days after the day the provider's agreement expires.

#### HOME CHILD CARE GROUP SIZES

Licensed Home Child Care Agencies are regulated under the Child Care and Early Years Act (CCEYA). CHERISH Home Child Care ensures that the number of children receiving child care, including the children of the home child care provider, in each premises, does not exceed the number specified in the Act.

- Providers can care for up to a maximum of 6 children under the age of 13 years;
- Providers must count their own children under the age of 6 years and;
- Can only care of a maximum of 2 children under the age of 2.

Before placing a child, the Home Visitor would consider if the placement in the Child Care Home would provide safe accommodation for a child or any children already at the premises and would consider the following:

- The ages of the children in the group.
- Any special needs of the children in the group.
- The ability of each child to evacuate independently in an emergency.
- The experience and qualifications of the Home Child Care Provider.
- The physical environment of the home, including the total amount of distribution space in the home.
- Any children placed privately.

The maximum number of children applies regardless of the number of adults in the home.



#### PROGRAM REQUIREMENTS

Providers must post daily program activities taking into account the developmental level of the child(ren) and needs to provide for individual and group activities, active and quiet play, both indoors and out.

Each child who receives child care for 6 hours or more in a day is expected to play outdoors for at least 2 hours each day, weather permitting. Supervision of outdoor play will be in according to plans agreed upon by the Provider, parent and Home Visitor and documented during the application process.

TV time will be discussed between the parent and Provider and will be limited, age appropriate and supervised.

Each toddler or preschool child who receives child care for 6 hours or more in a day has a rest period not exceeding 2 hours in length and a toddler, preschool or kindergarten child is permitted to sleep, rest or engage in quiet activities based on the child's needs.

The CHERISH Home Visitor provides a journal to each family in the program and encourages the parent/guardian to use the journal as a communication tool with the Providers. Daily contact between the family and Provider ensures that there is ongoing communication with parent/guardians about the

program and their children. Providers must keep a daily written record indicating any incident affecting health, safety or well-being of the children.

#### **BALCONIES**

No child is permitted to play on a balcony unless an adult is present on the balcony.

#### DOGS and CATS

Every dog and cat that is kept in the Home Child Care premises is inoculated against rabies annually and documentation is provided to CHERISH prior to children being placed in child care.

#### **TEMPERATURE**

The temperature in each Home Child Care program will be maintained at a level of at least 20 degrees Celsius.

#### **HAZARDS**

All poisonous and hazardous substances are inaccessible to children. Firearms and ammunitions are locked up separately and the key, if any, is inaccessible to children.



#### PLAY MATERIALS, EQUIPMENT AND FURNISHINGS

Each Home Child Care Provider must ensure that they have play materials that are:

- Provided in numbers that are adequate to serve the number of children receiving child care;
- A sufficient variety to allow for rotation of the play materials;
- Available and accessible to the children throughout the day;
- Play materials allow the children to makes choice and to encourage exploraton, plan and inquiry; and
- Appropriate to support the learning and dvelopment of each child.

The Provider will discuss with the parent/guardian the appropriate equipement needs for each child prior to placement and throughout the time of contracted care.

For each infant, a cradle or crib or playpen provided complies with the standards for cradles, cribs and playpens in the regulations made under the Canada Consumer Product Safety Act and bedding.

For each child 18 months old up to and including 5 years old who received home child care for 6 hours or more, a cot or bed and bedding is supplied.

All play materials, equipment and furnishings must be maintained in safe and clean condition and kept in a good state of repair.

### INCLUSION

Milton Community Resource Centre believes that all children are unique with a multitude of gifts and abilities, and have the right to be valued, accepted and included. Regardless of a child's level of ability in any area (socially, physically, mentally, emotionally), they have the right to be provided a safe and caring environment that is conductive to their needs. Therefore MCRC is committed to partnering with the children's family, community resources and other professionals in the field, in order to provide all children with any needed support.



#### FIRE DRILLS

The Provider shall establish and post a home specific Fire Escape Plan. Fire drills are conducted on a monthly basis in all homes and recorded on the Fire Escape Plan. Every home must have working smoke alarms on each level of the home and carbon monoxide detectors that conform to CAN/ULC-S531 standards near all sleeping areas.

#### HOURS OF OPERATION

CHERISH Home Child Care offers the option of both full-time and part-time hours. The parent/guardian is expected to establish hours with the Provider to drop off and pick up their child which are documented on the original Application Form. Home Child Care is provided between 6:00 am and 7:00 pm depending on the Provider's availability.

The following legal and statutory holidays will be observed and all families are required to pay their daily rate for these days if it is a normally scheduled child care day:

New Year's Day	Victoria Day	Thanksgiving
Family Day	Canada Day	Christmas Day
Good Friday	Civic Holiday	Boxing Day
	Labour Day	

Should a holiday not fall on a regular weekday, MCRC will inform parents/guardians which day in lieu of the Providers will be closed

Parents/guardians may take vacation but will be responsible for the full child care costs while they are off. They will not be charged if their Provider is not available so we strongly encourage parent/guardians and Providers to coordinate their vacation so there is no loss of any additional monies. Providers are required to give families at least one months' notice of vacation as some families may have to put in for holidays months in advance.

Should a Provider be unavailable, due to illness or holiday, it is a parent/guardians responsibility to seek alternate care for their child. If required, the Home Visitor may be called upon to assist in finding care in another CHERISH Provider's home. If the Provider is unable to care for a child and alternative care is not found within the CHERISH organization, families will be provided a credit for those days.

# ARRIVAL AND PICK UP

It is a parent/guardian's responsibility to ensure that their child is escorted to and from the home child care by a responsible person and delivered directly to the Provider on the premises.

In order to protect the safety and well-being of your child, the Provider will only release to the authorized people as documented by you on your application form. The minimum age to pick up any child is 16 years of age and photo ID will be required. Parent/guardians must provide verbal/written authorization for a non-designated person to act as an escort.

If for any reason your child will be absent, late or early, parents/guardians are asked to inform the Provider as soon as possible. An unexpected absence or late arrival can make it difficult for Providers to plan their day.

If the parent/guardian has not collected their child an hour after the agreed upon time with the Provider, the Provider will contact the authorized people on the CHERISH Application Form. If the Provider cannot contact the parent/guardians or any of the authorized people, they next step will be to contact CHERISH and if required, the Children's Aid Society

In the event that a parent/guardian arrives to pick up a child and appears to be intoxicated, the Provider will let them know that they should not take the child: a) if they are driving, b) if they are not driving but are too impaired to care for their child. The Provider will offer to call the spouse, emergency contact or a taxi. If the parent/guardian becomes a busive or takes the child regardless the Provider will call the police.

While their child is in care, the parent/guardian will be provided access to the Provider's home and their child at their own discretion.

# CLOTHING

All children need to arrive clean and suitably dressed for indoor/outdoor play, with an adequate supply of extra clothing appropriate to the weather and age of the child. Families are responsible for supplying and labeling diapers, necessary creams, lotions and baby wipes. Several pairs of training pants (for a child who is being toilet trained) must also be supplied. Soiled clothing will be rinsed by the Provider, but



parents/guardians are responsible for laundering. When clothing has been loaned by the Provider, the family is expected to wash and return the item(s). All items supplied by the parent/guardian must be clearly labelled.

#### **ADMINISTRATION OF MEDICATIONS**

All prescribed medication must be in the original container labelled with your child's name, name of medication, the dosage, the date of purchase and expiry, the instructions for storage and administration. It is recommended that you ask the pharmacist to divide the medication between two bottles so that one can remain in the home. The Medication Administration Form must be filled out with written consent for administration of the medication. All medications are stored, out of reach of children. Parents must give all medication directly to the Provider and must not be left in your child's bag where it might be obtained by another child. The Provider will not administer Tylenol or other over the counter medications without a supporting prescription from the doctor. In the case of asthma medication or emergency allergy medication, they will be stored in the home out of reach of children, where the Providers have easy access to them in case of emergency. With parental permission, the child is allowed to wear their emergency medication on themselves at all times. All medication forms must be on file with Provider and agency.

#### ANAPHYLAXIS/MEDICAL PLANS

If a child has been diagnosed as having anaphylaxis or asthma, there are additional forms for the parent/guardian to complete and review/sign off prior to a child starting in program. Each child will have an Individual Anaphylaxis or Medical Plan completed. The Home Visitor, Provider, student, volunteer and any persons who are ordinarily residents on the premises must receive training from a parent/guardian on the procedures to be followed if the child has an asthma or anaphylactic reaction prior to the child starting and at any time there is change in the Individual Student Plan or policy.

## **ACCIDENT REPORTING**

When a serious accident or illness occurs, all necessary emergency medical assistance will be obtained by the Provider. The Provider will notify the parent/guardian (or emergency contact person) and CHERISH Home Visitor immediately. It is important that the parent/guardian complete and sign the Emergency Card and Consent Card since this must accompany the child to the place where treatment is sought. It is the parent/guardian's responsibility to provide one or more emergency telephone numbers and addresses for alternative contacts. It is suggested that the emergency contacts be close to the Providers home. An Accident Form must be completed as soon as possible and will be forwarded to the Home Visitor and a copy will be provided to the parent/guardian.

#### PARENT ISSUES and CONCERNS

Parents/guardians are encouraged to take an active role in in our home child care agency, and regularly discuss what their child(ren) are experiencing within our program. Cherish supports positive and responsive interactions among the children, parents/guardians and home child care providers, and fosters ongoing communication with parents/guardians about the program and their children.

This policy is intended to provide parents/guardians, staff and child care providers with a clear and transparent procedure to follow when a parent has brought forward an issue or concern they wish to have addressed.

- I. Parents/guardians may bring issues or concerns forward verbally or in writing. Issues/concerns should be brought forward to the appropriate person as outlined below:
  - Program related concerns (eg schedule, sleep arrangements, feeding arrangements, etc) can be raised with the provider directly, or brought to the Home Visitor.
  - Agency or operations related concerns (eg. fees, placement, etc.) should be brought to the Home Visitor.
  - Concerns regarding the provider, the Home Visitor or other agency staff should be addressed either with the individual directly, the Home Visitor or the Program Manager.
  - Concerns regarding other persons at the home premises should be addressed either with the provider directly, or brought to the Home Visitor.
  - Concerns regarding students or volunteers should be addressed with the person directly supervising the student or volunteer, or the Home Visitor.
- 2. All issues or concerns about the conduct of the provider, other persons in the home, agency staff, students, volunteers, etc. that puts a child's health, safety and well-being at risk should be reported to the Home Visitor as soon as parents/guardians become aware of the situation.
- 3. The person receiving the concern will either address the issue at the time it is raised, or schedule a meeting with the parent/guardian within two business days.
- 4. The person receiving the concern will document the issue or concern in detail. Documentation will include:
  - The date and time the issue/concern was received;
  - The name of the person who received the issue/concern;
  - The name of the person who reported the issue/concern;
  - The details of the issue/concern, and
  - Any steps taken to resolve the issue/concern and/or information given to the parent/guardian regarding next steps or referral.
- 5. If unable to respond to the matter, the provider or Home Visitor will provide the parent/guardian with contact information for the appropriate person.

- 6. The provider and/or agency staff will ensure that the investigation of the issue/concern is initiated by the appropriate party within 2 business days, or as soon as reasonably possible thereafter. Reasons for any delays will be documented in writing. Investigations of concerns will be fair, impartial and respectful to all parties involved.
- 7. Every issue and concern will be treated confidentially and every effort will be made to protect the privacy of parents/guardians, children, providers, staff, students and volunteers, except when information must be disclosed for legal reasons (eg. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities or a Children's Aid Society).
- 8. The parent/guardian who raised the issue or concern will be kept informed throughout the resolution process. Responses and outcomes will be provided verbally, or in writing upon request. The level of detail provided to the parent/guardian will respect and maintain the confidentiality of all parties involved.
- 9. If at any point a parent/guardian, provider or staff feels uncomfortable, threatened, abused or belittled they may immediately end the conversation and report the situation to the Home Visitor or Program Manager.
- 10. Where a parent/guardian is not satisfied with the response or outcome of an issue or concern, they may escalate the issue or concern verbally, or in writing, to the Program Manager or the Director of Licensed Child Care.
- 11. Issues or concerns related to compliance with the requirements set out in the Child Care and Early Years Act, 2014 and Ontario Regulation 137/15 should be reported to the Ministry of Education's Child Care Quality Assurance and Licensing Branch.
- 12. Issues or concerns may also be reported to other relevant regulatory bodies (eg. Halton Region Public Health, Ministry of labour, College of Early Childhood Educators, etc.)
- 13. If a parent/guardian expresses concerns that a child is being abused or neglected, the parent will be advised to contact the local Children's Aid Society (CAS) directly. Persons, including providers and staff members, who become aware of such concerns are also responsible for reporting this information to CAS as per the Child and Family Services Act, and MCRC's Duty to Report Child Abuse policy.

#### **WAIT LIST POLICY**

MCRC has developed clear guidelines for the management of wait lists, and the allocation of spaces in our licensed child care programs in order to ensure a process that is fair, consistent and transparent. A computerized wait list database is maintained for all programs, and families wishing to be placed on the wait list may contact the program's Home Visitor, Supervisor, Assistant Supervisor, Registration Clerk or Navigators. Children will be listed according to their date of entry, and the date care is required.

When allocating spaces, priority is given as follows:

- Children who are currently enrolled in a licensed child care program at MCRC and have requested a transfer to another program, and/or who require a change in the type of care required
- Siblings of children who are currently enrolled in a licensed child care program at MCRC
- All other children on the wait list will be prioritized by the date they were entered into the wait list database (record date)

Families requesting an update on their status on the wait list may contact the Home Visitor, Supervisor, Assistant Supervisor or Registration Clerk. Upon request of an update, families will be given the best possible approximation of their child's status/position on the wait list at that time. In order to ensure privacy and confidentiality, at no time will information about other children or families on the wait list be given.

#### CHILD PROTECTION RESPONSIBILITY

Any MCRC staff who has reasonable grounds to suspect that a child is or may be in need of protection must promptly report the suspicion and the information upon which it is based to the Children's Aid Society. (CAS) It is not necessary for staff to be certain a child is or may be in need of protection to make a report to a children's aid society. "Reasonable grounds" refers to the information that an average person, using normal and honest judgment, would need in order to decide to report. The CFSA specifies that a person who acts in accordance with the duty to report is protected from civil actions unless the person acts maliciously or without reasonable grounds for the suspicion.

#### CONFIDENTIALITY

Providers and parent/guardians must remember that all child-parent information is CONFIDENTIAL. If it is necessary for a certain situation to be discussed, it is imperative that these concerns be discussed ONLY with the parent/guardian, Provider and/or Home Visitor.

#### COLLECTION OF PERSONAL INFORMATION

Please be assured that MCRC only collects information required to provide care for your child. All children's files are kept in locked storage cabinets. Please note that it is your responsibility to provide your child's updated immunization records to MCRC, when they change as this information is required for our licensing process. Children's individual files are retained for three years from the date the child is discharged. Please be assured that all files are shredded once the three years period is over.

#### CRIMINAL RECORD CHECKS

All new Providers, persons residing in the home over 18, and any other persons that are regularly on the premises of a CHERISH home where child care is provided must have a Criminal Reference Check (CRC) and Vulnerable Sector Screening (VSS) that is current within six months, prior to starting their contract with CHERISH. CRC and VSS will be completed every five years.

Annually, when a new CRC and VSS is not required, Providers, persons residing in the home over 18, and any other persons that are regularly on the premises will be required to sign a Criminal Reference Check Affidavit indicating whether there has been any incident that would alter the results of their CRC and VSS. This must be completed no more than 15 days after the annual anniversary of the original CRC and VSS Verification Form sign off.



#### **ILLNESS/HEALTH**

Prior to admission, children must be immunized as recommended by the local medical officer of health or a written exemption for medical religious reasons must be produced. Parent/guardians are required to give the agency an updated copy of immunization cards or any change in the child's medical information (allergies, etc.). This change in information must also be on file with CHERISH and required to be updated as changes happen.

Parents are required to keep their child at home when they are ill and unable to fully participate in the regular daily routine. Some indications of illness include, but are not limited to: fever, severe cough, unusual spots or rashes, vomiting, diarrhea. Please call the Home Visitor and Provider to inform if your child has a communicable disease so the information can be posted, according to licensing requirements. Names will be kept confidential. When a child is diagnosed with a reportable communicable disease (ie. chicken pox) the Provider will advise the local Public Health Department. Children may return when they are no longer contagious based on a medical assessment or the symptoms have subsided (24 hours) and the child is well enough to participate in activities (refer to Period of Exclusion fact sheet on page 28).

Upon arrival, the Provider must make a daily observation of each child to look for any signs of illness. When a child appears to be ill, the child must be separated from other children. Symptoms of the illness will be noted in the child's records.

When a child is separated from other children because of suspected illness, a parent must be contacted to take the child home as soon as possible. If it is not possible for a parent of the child to come and take the child home or if the child needs immediate medical attention, the child must be examined by a qualified physician or nurse. In the case of serious illness or injury during program hours, we will complete the following:

- 911 will be called in the event of an emergency.
- The Provider will try to contact one or both parent/guardians.
- If parent/guardians cannot be reached, one of the emergency contacts will be notified.

A First Aid Kit and First Aid Manual is kept on site and the Provider is required to have a valid standard first aid certification including infant and child cardiopulmonary resuscitation (CPR).

You are required to pay for the child's sick days if the Provider is available to care for the child. All other families will be informed if a child in care is ill.

If the Provider's own child is ill, the parent/guardian of the children in care will be notified. If they choose to find alternative care for their child until the Provider's child has recovered, they will not be billed, as the Provider was not available for care.

# SERIOUS OCCURRENCE REPORTING

Regulations under the Child Care and Early Years Act, 2014 requires MCRC to report all Serious Occurences (S.O.) within 24 hours to the Ministry of Education as required:

- Death of a child while receiving child care at a home child care premises whether it occurs on or off the premises;
- Any life threatening injury or life threatening illness to a child while receiving child care at a home child care premises whether it occures on or off the premises;
- Abuse or neglect (or allegation of abuse or neglect) of a child within the meaning of the Child and Family Services Act by a home child care provider at a home child care premises or any other person while the child receives child care at a home child care premises.

A Serious Occurrence Notification Form will be posted in a conspicuous place at the home for a minimum of 10 business days after the last action has been noted.

# **SANITARY PRACTICES**

Regulations under the Child Care and Early Years Act require that all Home Child Care Providers practice good health and sanitary practices. Providers are required to follow the guidelines from the Halton Region Child Care Health Resource in the areas of health and sanitary practices, communicable diseases, nutrition and safety. In order to prevent the spread

of all infections and transmission of HIV, MCRC has developed the following policies which are seen as universal precautions in which the Providers are expected to follow:

- Diapering, Toliet Learning and Washroom Routine Policy.
- Hand Washing Policy
- Health and Sanitary Practices Policy.

Providers are required to follow the practices as outlined by Public Health regulations which include daily maintenance of floors and bathrooms, the cleaning of toys, play equipment and furnishings along with sanitary dishwashing practices.

#### **HANDWASHING**

Proper hand washing routines for both Provider and children is the best way to help minimize the spread of germs. Children are required to wash their hands after toilet routines including diapering procedures, before and after using sensory bins and before and after eating. Disposable toweling or individual labelled washcloths and towels will be supplied along with replaceable liquid soap dispensers.

#### **DIAPERING**

MCRC has developed policies around diapering, toilet learning and washroom routines to ensure the safety, health and wellbeing of the children in our care during these routines, as well as to encourage self-help skills. The approved diapering procedure must be followed and will be posted in each Provider's home close to the diapering area.

#### STANDING AND RECREATIONAL BODIES OF WATER

The Ministry of Education prohibits the use of and access to all standing bodies of water (ie. ponds) and recreational in-ground/above-ground swimming, portable/"kiddie"/inflatable wading-type, and hydro-massage pools, hot tubs, and spas on the premises of any single or multi-dwelling private residence, including a provider's own house, townhouse complex or apartment building where the Provider resides, for children under the supervision/care of the contracted home day care Provider in his/her capacity as a child care provider during operating hours.

CHERISH will continue to ensure that, where applicable, all licensed homes that have standing bodies of water; swimming pools are in compliance with local by-laws requiring private residences with standing bodies of water/pools etc. in their catchment area to have an enclosure (ie. fence and a latched gate).

The Ministry of Education supports play-based learning and sensory exploration and encourages the use of splash pads, sprinklers, hoses or water tables, under direct supervision of adults at all times, as safer alternatives during cooling or play/sensory activities.

# SMOKE FREE ONTARIO ACT

Smoking is prohibited where licensed home day care is provided. The Health Department guidelines state that the entire premises must be smoke free at all times whether children are present or not. When transporting children in any vehicle, no one is allowed to smoke in the vehicle. Smoking or handling of a cigarette in the home child care location including the backyard, garage, front yard and driveway whether or not children are present is prohibited.

# STANDARD FIRST AID & INFANT CPR

All CHERISH Home Child Care Providers and agency staff must have a valid Standard First Aid certification.



#### STUDENT & VOLUNTEER

Students and volunteers on a placement are important to our program. In order to ensure the safety and well-being of all children in our programs, students and volunteers will not have direct, unsupervised access to children. Volunteers and students will be supervised by an employee at all times, and are not counted in our staffing ratios. MCRC's Student and Volunteer Participation policy clearly outlines the roles and responsibilities for the organization, all staff, volunteers and students. In addition. MCRC has an orientation process in place that includes a Criminal Records Check, a Vulnerable Sector Screening, a review of policies and procedures, and a review of all emergency procedures before they commence. Reviews are completed on an annual basis and at any time there is a change made.

Student: A person doing a placement by a recognized college/university that has been approved by MCRC.

Volunteer: A person who is in the program for a consistent period of time and has been approved by MCRC.



#### SUPERVISION OF CHILDREN

Every child who receives Home Child Care will be supervised by an adult at all times, whether the child is on or off the premises.

Occasionally an Alternate Care Provider may be required. The Provider will notify the parent/guardian in advance and be asked to sign the Alternate Care Permission Form. Alternate Care Permission Forms need to be submitted to CHERISH in advance. If that is not possible, the Provider will notify the parent/guardians and CHERISH ahead of time, who will be providing alternate care. Once the form is signed a copy is sent to CHERISH to keep on file.

An Alternate Care Provider must be an adult over the age of 18 with a Criminal Record Check and Vulnerable Sector Screening along with Children's Aid Society (CAS) Check.

# **TERMINATION OF CARE**

MCRC holds the right to terminate care immediately if any of the following situations occur: non-payment,

parents/guardians/children who are abusive towards Provider, Home Visitor, volunteers, other children and families, and/or refusal by parent/guardian to meet with MCRC Home Visitor and/or refuse to consent to the use of support services for children.

### WITHDRAWAL POLICY

When a child starts at the Providers, the first month shall be considered a probationary period; discharge or withdrawal within the first month requires one weeks' notice during this time. MCRC has a one month written/verbal withdrawal policy for children already enrolled in the program. If the parent/guardian or Provider wishes to withdraw the child from the program, both CHERISH and the parent/guardian or Provider require a months' written/verbal notice (Subsidized clients are required to provide two weeks' notice). Fees will be charged for one month from the date the withdrawal notice is received.

# WITHDRAWAL FROM PROGRAM

MCRC is a diverse and inclusive organization that is committed to supporting families and partnering with children in their learning. At times, despite our best efforts and commitment to children and their families, we may not be able to adequately support a child with complex needs or particularly challenging behaviour. MCRC will make every reasonable effort to support a child and their parent/guardians to discuss new strategies. If efforts are exhausted, one months' written notification of withdrawal will be provided to the parent/guardians. In extreme situations, where safety of all children is compromised, MCRC reserves the right to give immediate notice of withdrawal.

### TRIPS AND EXCURSIONS

The Provider may take the children on local excursions such as the library, park, walks etc. providing parent/guardians and the Provider have previously discussed the excursion, and the Outdoor Supervision on the Application Form is completed at the time of registration.

All trips involving travel in an automobile require the parent/guardian have completed and signed the Authorization to Travel Consent Form. The Provider shall ensure that all regulation and requirement regarding car seat safety are adhered to specifically:

- Provider has discussed with the parent/guardian the extent to which the car will be used.
- Provider carries \$1,000,000 liability insurance on the vehicle and it is on file with CHERISH.
- Provider ensures that all children are restrained according to Canadian Motor Vehicle Safety Standards (CMVSS) car seat belts/car seats for the appropriate age and weight. These seats will either be provided by the parent/guardian or Provider.
- Provider must never leave the children in the car unattended.
- Provider must have a current Driver's License.

Any trip which is more extensive where the Provider is leaving their immediate community, Milton or Halton Hills (Georgetown and Acton) must be cleared with the parent/guardian beforehand and a Special Excursion Form is completed. This form advises of the destination, date and time of the outing.

# REGISTRATION REQUIREMENTS

MCRC/CHERISH will attempt to match Providers, parent/guardians and children as carefully as possible. Once a parent/guardian has contacted the Provider, it is essential that an interview is arranged for the family to meet the prospective Provider. When a decision regarding enrollment has been made, MCRC's CHERISH Home Visitor will provide all the necessary forms which must be completed prior to admission. A non-refundable registration fee of \$35.00 is required. A \$200.00 deposit is required upon registration of a child into a MCRC program. This deposit is then applied against the first months' fees. You will also be required to submit the Financial Information Form including your banking information for direct withdrawal from your bank account or from your credit card for monthly payments for child care costs. Your child care fees are due on the first of the month for that month.

The CHERISH Home Visitor will provide you with the rate schedule for your program.

### **SUBSIDY**

Please call Halton Region at (905) 825-6000 to see if your family qualifies for financial assistance for child care costs.

# PAYMENT OPTIONS

Please complete a Financial Information Form for:

 Pre-authorized payment by bank withdrawal on the I<sup>st</sup> of each month (void cheque required).

### OR

 Pre-authorized payment on Visa or MasterCard on the I<sup>st</sup> of each month.

A \$25.00 returned payment fee will apply to all payments that do not clear (preauthorized bank) or are declined (preauthorized credit card.

# **CANCELLATION POLICY**

A \$200.00 deposit is required upon registration of a child into a MCRC program. This \$200.00 payment is applied to the first month's fees. Should you cancel your registration in a program with at least one months' notice before your child's scheduled attendance starts, your \$200.00 deposit will be refunded less a \$25.00 cancellation fee (\$175.00). Should you cancel the registration with less than one months' written notice the \$200.00 deposit will not be refunded.

### **ATTENDANCE SHEETS**

Actual attendance billing is generated by the days marked on the attendance sheet. Drop off times and pick up times must be recorded. Parents/guardians are required to verify and sign the attendance sheets kept by the Provider, on the  $15^{th}/30^{th}/31^{st}$ . If there is a discrepancy with the attendance, please speak to the Provider first and then report any discrepancies to CHERISH.

Any discrepancies from the original invoice will be added to the next months' payment. Credits will be applied to your next months' fees, any money owing shall be paid out upon termination with CHERISH.

Receipts for child care fees paid by parents/guardians for income tax purposes are issued yearly.

Placements are not guaranteed immediately and are not always long lasting. Family situations change and a child care family may move or no longer require care; therefore, it is important that the Provider has another source of income.



- Q. Have the Providers through CHERISH been screened?
- A. Each Provider has been through a screening process including a Children's Aid Society Check, Criminal Record Check and Vulnerable Sector Screening for themselves and all persons over the age of 18, residing in the home, or any person's regularly on the premises. Provider's homes have been inspected by the local Fire Department and during the initial visit with the Home Visitor, the Health Department Reference Guide is reviewed. The Provider is required to be visited by the Home Visitor, unannounced at least every 3 months, although, CHERISH Home Visitor attempts to visit the homes monthly.
- Q. Do I have to pay when my child is away because of illness?
- A. Yes, parents/guardians are required to pay their regular fees for all scheduled days of care unless the Provider is not available.
- Q. Am I allowed to bring Tempra, Tylenol etc. for the Provider to give to my child?
- A. CHERISH Providers will not administer over the counter medication to children without a detailed prescription from the doctor.
- Q. Who do I pay childcare fees to?
- A. All fees are payable to MCRC.
- Q. Will I be notified if my Provider is transporting my child in his/her car?
- A. The Provider must inform you of all outings. All trips involving travel in an automobile require that the parent/guardian have signed the Authorization to Travel Consent Form. The Provider shall ensure that all regulation and requirement regarding car seat safety are adhered to.

- Q. Am I required to provide my child's food?
- A. Yes, if your child has special dietary requirements, or is not on regular table food (under 12 months).
- Q. How will I be informed of my child's daily activities?
- A. CHERISH provides each family with a journal to share information with the Provider. Daily communication is encouraged between the Provider and parent/guardian.

### SYMPTOMS THAT MAY INDICATE A COMMUNICABLE DISEASE

### Fever:

Elevated body temperature especially if other symptoms such as vomiting, sore throat, diarrhea, headache, stiff neck or undiagnosed rash are present.

**Respiratory Symptoms:** 

Difficult or rapid breathing or severe coughing; child makes high-pitched croupy or whooping sound after he/she coughs; child is unable to lie comfortably due to continuous cough.

### Vomiting:

Two or more episodes of vomiting within the previous 24 hours.

### Diarrhea:

An increased number of abnormally loose stools in the previous 24 hours; or 2 or more unexpected loose stools per day without obvious dietary, drug or medical cause. Observe the child for other symptoms such as fever, abdominal pain or vomiting and/or foul-smelling stools.

### Eye/nose Drainage

Mucous or pus draining from an eye or nose.

**Sore Throat:** Sore throat, especially when other symptoms such as fever, decreased appetite, or difficulty swallowing are present.

**Skin Problems:** Rashes that are undiagnosed or contagious. Sores with crusty, yellow or green discharge.

### Itching:

Persistent itching (or scratching) of body or scalp.

Appearance/Behaviour: Child looks or acts differently; unusually tired, pale, lacking appetite, confused, irritable, or difficult to awake.

### **Unusual Colour:**

Eyes or skin – yellow (jaundice); stool – grey or white; urine – dark, tea coloured.

# PERIODS OF EXCLUSION

Anyone with the following diseases should remain at home and away from others:

**Diarrhea:** (non-outbreak situation) until 24 hours after cessation of diarrhea.

**E.Coli:** Until 2 consecutive negative stool specimens taken 24 hours apart.

Giardia: Until diarrhea has stopped.

Head Lice: Until child has been treated for head lice.

**Hepatitis A:** Until I week after onset of jaundice.

**Impetigo:** Until 24 hours of antibiotics.

Influenza: Until 5 days after symptoms began.

Pertussis: Until 5 days after antibiotics are started, or until 3 weeks if not treated with

antibiotics.

Pinkeye: Until I full day of antibiotic treatment.

**Pinworms:** Until 24 hours after treatment is started.

Ringworm: Until treatment has started; keep child from swimming/wading pools, and water

play until treatment is complete.

Rubella: Until 7 days after onset of rash.

**Scabies:** Until 24 hours after treatment.

**Scarlet Fever:** Until 24 hours after treatment.

Shigella: Until 2 consecutive negative stool specimens taken 24 hours apart.

**Strep Throat:** Until 24 hours after antibiotics are started.

Tuberculosis: Active Call Public Health (905) 825-6000

**Vomiting:** Until the vomitting stops, or it is determined that the vomiting is caused by a noninfectious condition.

The following illnesses do NOT require a person to be excluded, unless the child is not well enough to participate in regular activities.

- Chickenpox
- Ear Infection
- Hepatitis B
- Roseola
- Cold Sores
- Fifths Disease
- HIV
- Thrush or Diaper Rash
- Colds
- Hand, Foot, Mouth Disease
- Pinkeye (without discharge from eyes)
- Shingles
- Cytomegalovirus

# Be sure to stay connected and updated. Join us online!

www.mcrc.on.ca



MCRC - Milton Community Resource Centre



www.mcrcblogs.tumblr.com



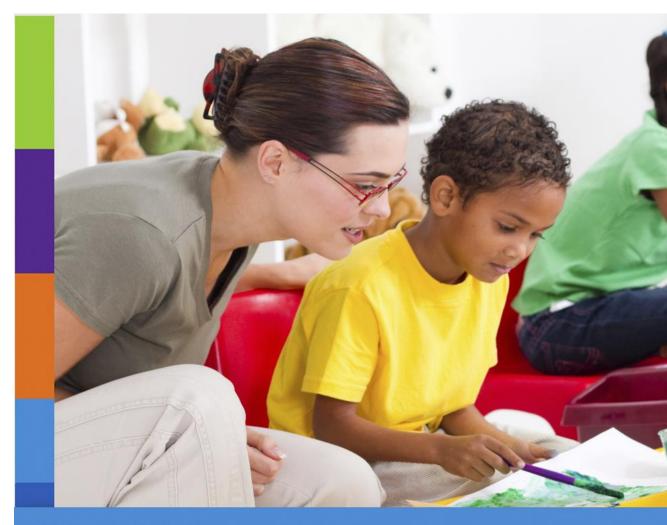
Twitter: @MCRCHalton

**Ouestions?** 

Please feel free to contact us at:

Home Visitor:

Kate Sherwood (905) 876-1244 ext. 212 | kates@mcrc.on.ca



MCRC receives funding from:







CHARITABLE BN/REGISTRATION # 11904-1325 - RR0001

