



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Safety Index

Section: Safety

Policy : 800

Amended:

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Akwesasne Child Care Program Policies and Procedures Manual

Subject: Fire Safety & Drills

Section: Safety

Policy : 801

Amended:

Policy: Fire safety and preparedness is essential, therefore each child care centre room must have an evacuation plan posted by the door, and centers conduct a fire drill once a month.

Procedure: Supervisors must ensure that each room is equipped with a plan & map and that is it updated with building changes, and all staff are made aware of the plan during orientation and reminded annually and signed off on.

Fire drills must be completed once a month by the Supervisor or in coordination with the Maintenance Supervisor, and staff must adhere to the Emergency Evacuation Plan.

Drills must be documented on a monthly fire drill form, to include date and time, and kept on file to be reviewed during fire inspection and relicensing. Drills must be completed at various times of day.

Summary of drills must also be sent to the Administration Office on a monthly basis.

Insert Fire Drill Form

Insert Fire Evacuation Plan Sample Map



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Emergency Exit Procedure (Evacuation Plan)

Section: Safety

Policy : 802

Amended:

Policy: All centers must post emergency exit procedure at every door of every room to ensure awareness during emergency.

EMERGENCY EXIT PROCEDURE

Immediately upon hearing fire alarm the following steps shall be taken while presenting a cool, calm but sensible mood.

1. Attendance Record taken with staff.
Emergency Phone Numbers file taken with Supervisor.
2. Children with Staff will evacuate the building immediately through appropriate exits, taking the emergency kit/backpacks.
3. A head count will be taken and checked against the daily enrollment count. A count of all children must be available at all times.
4. Once everyone has been accounted for, the group will walk calmly to the designated area to wait for further instructions from the Supervisor.
5. One person will be posted by the Main Entrance to Centre to prevent entry into the Centre. When available this will be the responsibility of the Housekeeper – Cook or a designated staff.
6. Children with staff will remain outdoors until an okay is received from Supervisor.
7. All attempts should be made to ensure the safety and comfort of all children during this waiting period.
8. If this is a false alarm or drill the Supervisor will record the fire drill and comment on the execution on appropriate form. If real, a serious occurrence form must be completed within 24hrs.

IN THE EVENT OF A NATURAL DISASTER:

Staff and children shall be taken to the relocation shelter as designated annually.

The Building Fire Safety Plan must also be read and signed off on annually.



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Building Fire Safety Plan

Section: Safety

Policy : 803

Amended:

Policy: Every center must have a building fire safety plan specific to the building they are in which is signed off annually by each staff.

The Building Fire Safety Plan will be located in the licensing binder for each center, along with fire drill forms, and other safety documents.

The plan must be reviewed and updated annually.

Insert Building Fire Safety Plan



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Emergency Relocation Shelter Agreement

Section: Safety

Policy : 804

Amended:

Policy: It is the responsibility of the supervisor to obtain a letter of Relocation Shelter Agreement from a facility which has agreed to be the designated emergency shelter.

Procedure: The Supervisor must locate an emergency shelter within walking distance in the event of an emergency and the center has been deemed unsafe.

Each year the agreement must be signed and kept in the emergency file, and staff must be made aware of where the site is. A copy of the agreement is attached.

Emergency Relocation Shelter Agreement

I hereby give permission for the Akwesasne Child Care Program - _____ Child Care Center to use _____ as an emergency relocation site for E.C.E. Staff and children.

This agreement shall remain in effect until _____ (date).

The agreement may be terminated before this date by either party but only with written notification.

Printed Name _____ Date _____

Address _____

Phone _____ Alternate Phone _____

Is site accessible at all times child care program is open? _____ Yes _____ No

Describe how to access _____

Special Considerations (i.e., Storage of emergency supplies, reimbursement, limitations, etc.)

Signed and Dated

Relocation Site Representative

Child Care Representative



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Natural Disaster

Section: Safety

Policy : 805

Amended:

Policy: In order to keep staff and children of ACCP safe at all times, the following procedure during a disaster of any kind will be implemented.

Procedure: In the event of a disaster, ACCP staff and children will remain in the site building if safe, and await direction from MCA Department of Emergency Measures.

In order to ensure the safety of staff and children certain preparations will have been made ahead of time.

- Each supervisor will ensure the center has stored at least three days of emergency food and water.
- Each supervisor will ensure that a line of communication is available to receive direction, access cell phone, and portable radio.



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Serious Occurrence Reporting

Section: Safety

Policy : 806

Amended:11/4/16

Policy: To support the safety and well-being of children in care staff must conduct a preliminary inquiry immediately following any serious occurrence and to report it and in compliance with Subsection 3.9, Serious Occurrences, Child Care & Early Years Act 2014, Ontario Regulation 137/15, ACCP is accountable to the Ministry under which it is licensed under.

Definition:

A serious occurrence is defined in the Childcare and Early Years Act Manual (DN-0202-06) includes:

1. The death of a child while receiving child care at a home child care premises or child care centre, whether it occurs on or off the premises,
2. A life-threatening injury to or a life-threatening illness of a child who receives child care at a home premises or child care centre.
3. Abuse, neglect or an allegation of abuse or neglect of a child while the child receives child Care at a home premises or child care centre.
4. An incident where a child who is receiving child care at a home premise or child care centre goes missing or is temporarily unsupervised.
5. An unplanned disruption of the normal operations of a home child care premises or child care centre that poses a risk of health, safety or well-being of children receiving care at a home child care or child care premises.

Procedure: Once the incident has occurred the teacher within the classroom must remain calm, immediately and quickly assess the situation, reduce immediate risk, call for Supervisor, calm child(ren), administer first aid, phone ambulance, or police, contact parents.

Once situation is calmed, Supervisor must contact Program Manager, then follow the Serious Occurrence Reporting Procedures for Service Providers.

The Serious Occurrence must be reported electronically by the Supervisor in the Child Care Licensing System (CCLS) submitted to the Program Advisor within 24 hours, if CCLS unavailable they must telephone or email the Program Advisor.

The CCLS can be found at this address:

<https://www.earlyyears.edu.gov.on.ca/ChildCareWeb/public/login.xhtml>

It is the responsibility of the Supervisor and Designate to keep their One Key id and password up to date to access the CCLS.

There are five categories applicable to child care that should be reflected in operator policies.

1. The **death of a child** while receiving child care at a home child care premises or child care centre, whether it occurs on or off the premises,

CCLS Category: Death

2. A **life-threatening injury to or a life-threatening illness of a child** who receives child care at a home premises or child care centre.

CCLS Category: Life-threatening injury or illness

3. **Abuse, neglect or an allegation of abuse or neglect of a child** while the child receives child care at a home premises or child care centre.

CCLS Category: Alleged Abuse/neglect

Note: An allegation of abuse and/or neglect of a child that occurred while the child was not attending the child care service is not a serious occurrence because it is unrelated to the child care service, but this situation must still be reported to CAS.

4. An incident where a child who is receiving child care at a home premise or child care centre **goes missing or is temporarily unsupervised**.

CCLS Category: Missing
Sub-Categories: Child Found
Child Still Missing

Note: licensees need to have a "Missing Child" policy outlining practices and protocols staff are to follow is a child is missing. A child is not considered missing if they have not been in attendance. Only use "Child Still Missing" if child is still missing when serious occurrence is being reported. If the child's whereabouts were unknown for a period of time but they have since been found, use "Child Found".

5. An **unplanned disruption of the normal operations** of a home child care premises or child care centre that poses a risk of health, safety or well-being of children receiving care at a home child care or child care premises.

CCLS Category: Unplanned Disruptions

In the event of a Serious Occurrence follow the steps outlined below.

1. Address the health and safety of the child.

2. In the event of a death, contact the police, coroner, family /others as appropriate.

3. Notify:

_____ (Supervisor) Home _____ / Work _____ / cell _____

_____ (Designated Person in Charge) Home _____ / Work _____

_____ (_____) Home _____ / Work _____ / cell _____

_____ (Portfolio Holder) Home _____ / Work _____ / cell _____

4. A report is provided to a program adviser of any serious occurrence in any child care centre operated by the licensee or any premises where it oversees the provision of home child care within 24 hours of its happening through the Child Care Licensing System (CCLS)
5. If no follow up is required and the initial notification is the only report, Part 2 of the Serious Occurrence Report can be filed at the same time as the Part 1.
6. Recommendations as a result of the Serious Occurrence Report will be strictly adhered to with an action plan.
7. Following the submission of the Serious Occurrence Report to the ministry and within 24 hours of becoming aware of an occurrence or when the operator deems the occurrence to be serious as set out under the Serious Occurrence Reporting Procedures, the operator will complete a Serious Occurrence Notification Form to communicate information to parents. (This includes allegations of abuse)
8. In the centre, the Serious Occurrence Notification Form will be posted at the entrance used by parents. The form will be posted near the child care licence and Licensing Summary chart.
9. The Serious Occurrence Notification Form is updated as the operator takes additional actions or investigations are completed.
10. The Serious Occurrence Notification Form is posted for a minimum of 10 business days. If the form is updated with additional information such as additional actions taken by the operator, the form remains posted for 10 days from the date of the update.
11. The Serious Occurrence Notification Form is retained for at least three years from the date of the occurrence and forms are available for current and prospective parents, licensing and municipal children's services staff upon request (consistent with current requirements for the availability of licensing documentation).
12. Licensees ensure the information posted in the Serious Occurrence Notification Form protects personal information and privacy:
 - No child or staff names, initials, and age or birth date of child will be used on the Serious Occurrence Notification Form.
 - In addition no age group identifiers will be used, e.g. preschool room; toddler room.

13. Licensees ensure child care staff review this policy upon implementation and annually thereafter.

14. Licensees ensure parents/guardians are aware of policy through communication via parent handbook / parent letter.

15. The current policy also sets out a requirement for licensees to complete and submit an “Annual Summary and Analysis Report” and retain the report on file at the child care centre. In addition to ongoing reviews and follow-up to serious occurrences, licensing staff will review the annual reports during licensing inspections. History is available on CCLS.

Additional Information

If a licensee or staff member suspects that a child is, or may be, in need of protection, they must report this to the local children’s aid society in accordance with section 72 of the Child and Family Services Act.

The person who has the reasonable grounds to suspect that a child is, or may be, in need of protection must make the report directly to a children’s aid society. The person must not rely on anyone else to report on his or her behalf.

A report to a children's aid society must be made for all situations where a child is, or may be, in need of protection. Licensees should only report a serious occurrence if the allegation of abuse or neglect has been made against an employee of the child care centre.

It is also important to note that registered early childhood educators (RECEs) are expected to be accountable for their actions as early childhood educators and to abide by the College of Early Childhood Educators’ Code of Ethics and Standards of Practice as well as all applicable legislation, regulations, by-laws and policies that are relevant to their professional practice.

The Early Childhood Educators Act, 2007 and the Professional Misconduct Regulation state that it is an act of professional misconduct to “[contravene] a law, if the contravention has caused or may cause a child who is under the member’s professional supervision to be put at or remain at risk.”

RECEs should familiarize themselves with reporting requirements under the Child and Family Services Act, and abide by them as the failure to do so is contrary to the law and may constitute professional misconduct.

For more information on the Child and Family Services Act and the duty to report, see Reporting Child Abuse and Neglect: It’s Your Duty

For more information about your responsibilities as an RECE, please visit the College of Early Childhood Educators website.

1. COMPLAINTS

Timing of posting:

- Licensees are responsible for managing complaints that they receive directly. If a licensee receives a complaint about an incident that relates to a defined serious occurrence

category, the incident should be reported to the Ministry of Education under the appropriate category. The complaint itself does not need to be reported to the ministry.

- The Ministry of Education will follow up on all complaints received from the public and other regulatory authorities about licensed child care programs. These complaints will be tracked separately in the Child Care Licensing System.
- When the licensee has filed a serious occurrence report about a complaint, verified the complaint and has taken actions to address the issue, the Serious Occurrence Notification Form is posted within 24 hours of the occurrence.
- When a licensee has filed a serious occurrence report to the ministry about a complaint, but has not taken action because the complaint has not yet been verified, the serious occurrence will not be posted within 24 hours.
- Once the complaint has been verified or not verified, the Serious Occurrence Notification Form is posted.

The licensee will have a conflict resolution policy in place to support open discussions between licensed child care providers and parents through a fair and transparent process. The policy is to outline clear and consistent standards for licensed child care providers to ensure issues and concerns are addressed in a timely and transparent manner which will support communication and positive relationships between licensees and parents.

Licensees will ensure that all legislated policies and procedures are implemented, reviewed and monitored on a regular basis by all employees, volunteers and students to be more aware of their roles and responsibilities and are better equipped to provide for the health, safety and well-being of children receiving child care.

2.ANNUAL ANALYSIS OF SERIOUS OCCURANCES:

In January of each year an analysis of all serious occurrences from previous calendar year must be completed. This will determine risks and remedies and what has been done to resolve issues. Actions taken must be recorded and kept in licensing binder. Running list of SO also need to be added into Monthly Report Form.

** Insert Annual Analysis form here found on Common Drive in PDF

Serious Occurrence Notification Form



Program Name:	
Date:	
Date of Occurrence:	
Type:	
Description:	
Action Taken by Operator / Outcome: (add update if applicable)	
Signature:	

** Insert Serious Occurrences Annual Summary Report Form here



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Reporting Child Abuse and Neglect

Section: Safety

Policy : 807

Amended: 11/21/15

Policy: All employees are responsible for immediate mandatory reporting of any suspicion of child abuse and/or neglect.

Procedure: Staff may become knowledgeable of a situation in several different ways.

- They may actually see an injury/harm on a child's body. Injuries and marks on a child's body must be questioned without judgment as required to the parents upon entry in the morning or shortly thereafter by a quick phone call. A child if of preschool age can be asked what happened without leading or suggesting abuse.
- They may hear a disclosure from a child
- They may be the recipient of an adult's complaint and/or allegation against another adult

If you have reasonable grounds to suspect that a child is being abused or neglected you must immediately notify:

Akwesasne Child and Family Services Program
Monday – Friday 8am to 5 pm 613-575-2341 ext. 3308
Evenings and Week-ends: call the Akwesasne Mohawk Police
Dispatch at 613-575-2000

Also notify the Supervisor or designate to complete a Serious Occurrence, if between 4:30-5:00 pm use own judgment to determine reasonable grounds and call ACFS.

If you have reasonable grounds, no victims or alleged abusers are to be contacted or questioned by the child care staff. These concerns will be dealt with as part of the investigation to be conducted by the Police and the appropriate child protective services.

Confidentiality is a must. Employees are responsible only for informing their immediate supervisor that they have called in a complaint, e.g. Supervisor, Program Manager, Director.

Failure to comply with this policy whether through failure to report or interference in the investigation will be grounds for disciplinary action.



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Accusation of Misconduct against a Staff Person

Section: Safety

Policy : 808

Amended:

Policy: The Department of Community and Social Services of MCA will make known to all management and staff the necessary immediate response procedures that must be taken in the event that a serious allegation of misconduct, against a vulnerable youth or adult, is brought against a staff person. Note: This policy is not addressed in the MCA General Personal Policy.

Procedure:

- Managers/Supervisors/Directors may be apprised of an allegation of serious misconduct of a staff/employee in several ways:
 - The child/adult and or family member may come directly to the Director/Manager/Supervisor with the allegation
 - The Police Department may contact the Manager/Director and apprise of the allegation
 - The Akwesasne Child and Family Services or Children's Aid Society may contact the Manager/Director/Supervisor to apprise of the allegation

If this allegation comes directly from the individual and/or family member, the ACFS Services must be contacted and apprised of the situation.

- Managers/Supervisors/Directors are responsible for contacting their immediate supervisor or designate to apprise them of what has occurred and their proposed actions
 - A record of specifics (time/date/participants) of all contacts, meetings and phone conversations pertaining to this allegation will be documented in chronological order in a note book.
- Considering that this allegation is of a serious nature that has caused physical and/or emotional harm or has placed one in jeopardy of such, by an employee, the employee will be immediately relieved of their duties pending the outcome of a criminal and/or employee investigation.
- Because allegations are just that, an employee is to be considered innocent until evidence from a criminal or employee investigation proves otherwise, employees are to be put on Administrative Leave with full pay.

- With consultation with their immediate supervisor, the Manager/Director/Supervisor has the authority to relieve an employee of their duties immediately when allegations of serious misconduct from a credible source become known.
- The Manager/Director/Supervisor will inform the employee that there has been an allegation of serious misconduct brought against them and that they will be considered to be on an Administrative Leave with pay until another work site can be identified for them to work at. They must remain away from their substantive position, pending the outcome of the investigation.
 - Assuming that these circumstances are traumatic for the employee. The Manager/Director/Supervisor will strongly encourage the employee to contact the EAP or Counseling Program to assist to deal with their feelings.
 - The employee will be advised that they may expect a letter informing them of their leave and any other particulars.
 - The employee will be informed that if it appears that the investigation will be lengthy another work site may be sought for placement until they can be cleared of misconduct; training, if needed, will be provided.
- Once the employee has been informed of Administrative Leave situation, the Human Resources Department of MCA will be contacted by Manager/Supervisor/Director taking this action.
 - The personnel officer of HR will require the employees name, title and/or job site and any other particulars on a need to know basis.
 - b) A letter to the employee regarding the Administration Leave with Pay is to be requested from the HR office. This letter will be co-signed by the HR Personnel
 - Supervisor must file a report with the College of Early Childhood Educators
 - Supervisor must file a Serious Occurance Report

Officer and the Manager/Director/Supervisor.

- Because these types of serious allegations can have major impacts on programming and create extenuating circumstances the following must be considered:
 - The Executive Director will be informed of the situation and in turn inform the Portfolio Chiefs, if appropriate.

- The particular program staff may be told that there has been an allegation of misconduct brought against a co-worker and that the MCA policies and procedures dictated by the Labor Law and Criminal Code are being followed.
- Confidentiality must be remembered in that names and particulars of the situation are not to be divulged.
- When curious inquiries are made, staff may answer. “I don’t know anything about the situation and I am not at liberty to discuss it anyway”.

Follow-Up

After all immediate responses have been dealt with; the accused staff person is to be contacted by their immediate supervisor and or manager for the following reasons:

- To determine how the employee is coping or handling their circumstances
- To determine whether the employee is attending EAP or a counseling program
- To determine if there is anything else the employer can do to be supportive
- To discuss the appropriateness of another job placement
- To request the employee to make weekly contact with their immediate supervisor as long as they are on Leave with Pay
- To ensure the employee that all the actions the employer is taking are within the confines of the law
- To recommend that the employee retains legal counsel if appropriate



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Prevention of Misconduct

Section: Safety

Policy : 809

Amended:

Policy: The ACCP is committed to assisting all staff to prevent accusations of misconduct in the workplace.

Procedures: The following measures will be taken by staff to protect themselves from accusation. Failure to comply with these measures will result in disciplinary action.

- Staff members will refrain from transporting children in their own personal vehicles
- All the business of the child care program will be conducted on the premises
- All physical contact between children and staff members will be of a gentle nature. There are management strategies in place to address all behavioral issues
- During rest time, staff will ensure that blinds and curtains allow enough light into the rest room that from the hallway, all staff are visible as they assist the children to rest.
- A clear view into all playrooms and washrooms will be possible at all times.
- In the early morning and at the end of the day, when staff may be alone with one or two children, they will make sure they can be clearly viewed by parents coming and going.



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Injury on the Job

Section: Safety

Policy : 810

Amended:

Policy: It is the responsibility of all staff to ensure their safety and take caution on the job and to report to their supervisor immediately any incident of personal injury or illness while on the job.

Procedure: The green two-sided Supervisor's Report of Work Injury will be completed by the immediate supervisor in consultation with the injured employee at the earliest possible opportunity after the injury takes place. Depending on the severity of the injury, the staff member may be directed by the supervisor to see a doctor immediately and proceed accordingly.

The completed Supervisor's Report of Work Injury is to be submitted to Operational Support with a copy to the program manager, and the human resources manager within 24 hours. All information required is to be included on both sides of the green document.

Supervisor will determine if the injury or incident warrants a serious or enhanced serious occurrence and also fill out the paperwork within 24 hours.

SUPERVISOR'S REPORT OF WORK INJURY / ILLNESS

This form is required to be completed in the event of a workplace injury or illness. It must be completed by the immediate Supervisor in consultation with the injured / ill employee. It must be reported as early as is possible / practicable. Supervisors must be informed of any injury / illness that occur in the worksite. Your prompt attention in reporting will avoid possible fines from the respective agencies (WSIB / CSST).

The unsafe acts of persons and the physical conditions that contribute to accidents / illness can be prevented when they are known in detail. As a Supervisor, it is your responsibility to provide complete details and offer corrective measures to avoid further incidents from occurring.

Employee Information:	
Name of Injured / Ill Employee: _____	
Last / First / Middle Initial	
Date of Birth: _____	Social Insurance Number

Home Address: _____	
Civic # and Street / City / Province / Postal Code	
Phone Number: _____	Work Number

Program / Department: _____	
Work Site: _____	
Job Title: _____	Hrly Rate: _____

Date of Employment: _____	Years of Service with MCA: _____

Date & Time of Accident: _____	
Location of Accident: _____	
Date Reported to Supervisor: _____	

Describe Injury / Illness. Be specific. (Rt/Lt Limb, scrap / cut / burn; swelling, ache / pain, etc.)

How did the injury / illness occur? Describe what the employee was doing at the time and the circumstances leading up to the injury / illness.

If first aid was given, who was the provider and what was done? If medical attention was sought, where and when (send along any notes).

Did the injury / illness result in any lost time (absence – how long).

Names of Witness / Telephone Number (if any)

Physical conditions that may have contributed to the injury / illness (poor lighting, broken steps, ice, snow, etc).

Corrective measures (what steps will be taken or have been taken to prevent similar injuries from occurring).

Reporting Supervisor _____ Date _____

The original form must be forwarded to the Manager of Operational Support Program
Copies should be distributed to Program Manager and Director of the Department

Do Not Reproduce – Original Green copy must be used for reporting.
Call OSP at 575-2250 for more copies



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Playground Safety

Section: Employee Orientation and Sign Offs

Policy : 811/511

Amended:

Policy: ACCP makes every effort to ensure children's safety while outdoors in our playgrounds.

Procedure: Supervisors are responsible for ensuring the following ACCP's Playground Safety Policy will be read, understood and signed off on by all staff, volunteers, students, on a yearly basis. Yearly licensing requirements from Ministry indicate that signed policies will be kept for 3 years at each site and available to the program advisor upon her yearly licensing visit.

The majority of the playgrounds are green, although inspections are completed on the structures daily, monthly, quarterly and annually for Kawehnoke Child Care.



AKWESASNE CHILD CARE PROGRAM

Playground Safety Policy

Supervision

Requirements for supervision of children on Centre playgrounds are as follows:

Staff ratios are not to be reduced on the playground. There needs to be at all times:

- 1 staff per 5 toddlers
- 1 staff per 8 preschoolers
- staff must ensure a safe outdoor environment for children
- staff must promote creative and constructive play for children

NEW EQUIPMENT, RENOVATIONS, REPAIRS OR REPLACEMENTS

Any modifications of the above must be installed to meet the Canadian Standards Association's new standard for Children's Play spaces and Equipment. Confirmation of such is to be maintained on file, verifying that all changes meet the Standard and is verified in writing by a Certified Safety Inspector. MCSS, as required under the Childcare and Early Years Act, must also approve any new equipment, renovations, repairs or replacements to the playground.

PLAYGROUND SAFETY LOG

A Playground Safety Logbook is located on the site of each centre. In this log, the supervisor and/or appropriate staff person will record any playground injuries, citing their action plan or resolution.

The date, time, name, and signature of person conducting each of the following inspections will also be recorded in this logbook.

- Daily Inspections
- Monthly Inspections
- Seasonal Inspections
- Annual Inspections

All action plans related to the findings of the inspections are to be recorded as well.

INSPECTOR OR DESIGNATES

- 1) Daily inspections will be conducted and recorded by the caretaker. In their absence, the supervisor will be responsible for ensuring that this duty has been fulfilled.
- 2) Monthly maintenance inspections will be conducted and recorded by the caretaker of the Department of Technical Services (DTS). The supervisor or designate will ensure that a centre staff accompanies the inspector to ensure knowledge of whereabouts of any necessary repairs or concerns.

- 3) Seasonal maintenance inspections will be conducted and recorded by the caretaker of the Department of Technical Services (DTS). The supervisor or designate will ensure that a child care staff accompanies the inspector to ensure knowledge of whereabouts for plans and/or repairs. A repair log will be kept by maintenance either on paper or electronically in MOCA.
- 4) Light, playground maintenance will be carried out by the caretaker. Persons for other heavy maintenance and repairs will be selected based on the type of service needed.
- 5) Playground injuries will be recorded into the Logbook by the staff, whom is responsible for the particular child group, when the injury occurred. An Injury Report Form will be completed.
- 6) The Environment Health Officer will conduct annual inspections. A written report of the findings will be forwarded to the Centre supervisor and copied to the Program Manager and Head Caretaker. The MCSS Program Advisor at the re-licensing site inspection will insert this report into the Log for viewing.
- 7) An outdoor staff schedule and outdoor program plan will be developed and posted in an area for the staff and parents to see. The Outdoor Program Plan will provide for games and activities that enhance gross motor play and provide creative stimulation.
- 8) All staff will read the PLAYGROUND SAFETY POLICY and acknowledge the process by signing and dating the last page, prior to commencing employment and annually, thereafter. This document will be kept on file for at least 2 years from the time of signing. Documentation of each staff reviewing the policy will be recorded in the Playground Safety Log, along with the master copy of the signed policy.

Ministry staff will review this Playground Safety Policy at the time of the annual license renewal visit.

I acknowledge that I have read the Akwesasne Child Care Program, Playground Safety Policy. I clearly understand it and agree to abide by it.

Signature

Date



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Accident & Playground Injury Report Forms

Section: Safety

Policy : 812

Amended:

Policy: All staff and children's accidents and injuries must be reported to parents, filed and signed off on daily.

Procedure: The Accident/Incident Report Form and or the Playground Injury Report Form must be completed and submitted to both parent and administration office with appropriate details and signatures listed.

Depending on the severity parents are to be notified immediately by phone, for extreme circumstances reporting is to be elevated to a serious occurrence, please see Safety Policy 806.



AKWESASNE CHILD CARE PROGRAM

ACCIDENT/INCIDENT REPORT FORM

Date: _____ Time of Accident/Incident: _____

Person(s) involved in Accident/Incident: _____

Description of "What Happened": _____

Description of any injuries: _____

First aid administered: _____

Further steps taken: (E.g. calling parent) _____

Steps taken to avoid similar accidents/incidents: (E.g. moving an obstacle) _____

Other comments:

Reported by: _____

Original to file

Copy to staff, parent or guardian

Supervisor Signature

Parent or guardian signature



AKWESASNE CHILD CARE PROGRAM Playground Injury Report Form

Centre Name: _____ Contact Person: _____

Injured Person: _____

Sex M F Age: _____

Has the child been injured on the playground equipment before? Yes No

Injury Information:

Date of injury (Y / M / D) _____ / _____ / _____

Time of Injury: _____ a.m. / p.m.

Describe what the injured person was doing when injury occurred, what went wrong, and what actually caused the injury: _____

Type of Injury:

Fall from equipment and at what height _____ ft. Collision with an object Collision with a person Other(specify) _____

Equipment / Surface Involved:

Identify what equipment was involved: None Slide Bicycle/Tricycle

Other (specify) _____ Surfacing _____

If possible, specify: Source of equipment (name and manufacturer): _____

Date of purchase / installation: _____

Model # _____

In Case of Fall:

How high was the structure: N/A less than 1.5 m From where did the child fall and onto what? from ladder backwards from slide bed sideways from the top of the slide onto the bed of the slide other (specify) _____ Thickness of surface _____

Supervision: Was an adult present on the site of the injury No Yes

ECE Parent/Caregiver Other (specify) _____

Nature of Injury: Minor serious Very serious Fatal (death)

Please describe the area if injury specifically on the body and what the nature of the injury has caused to the injured: _____

If multiple sites of injury, which, in your opinion, was the most serious? (Please specify) _____

Comments: _____

Preventative actions to be taken:

Date of form completion (Y / M / D) _____ / _____ / _____ By _____



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Sanitary Practices and Universal Precautions

Section: Safety

Policy : 813

Amended:

Policy: The Akwesasne Child Care enforces universal precautions and sanitizing schedules while working with the children to improve the health and safety of all in attendance within the facility.

All recommendations made by the local Medical Officer of Health, and Environmental Health Officer to any matter that improves the health and well being of children in the centers will be carried out by staff.

All signs must be posted in each classroom for toileting, diaper changing and handwashing, and first aid kit inspection.

Procedure:

Washing Hands All centers are equipped with hand sanitizer stations at door.

Hands are required to be washed before and after serving food, before and after diapering/toileting children and personally, handling or cleaning of bodily fluids of any kind, after applying first aid of any kind and after removing protective gloves. This helps keep the spread of germs to a minimum. Bodily fluids contain germs that can be passed from one person's body to another.

Hand washing signs are posted at each sink and diaper changing procedures are posted at each change table.

Hand washing procedure: 1. Wet hands thoroughly with warm water. 2. Apply soap using friction, lather for 20 seconds paying attention to finger nails and thumbs. 3. Rinse well holding hands downward. 4. Dry hands thoroughly with paper towel, use paper to turn off taps and dispose of paper towel.

Latex Gloves

Latex gloves are required when handling any bodily fluids that might or do contain blood, including urine, vomit and feces, and when performing first aid on another person. Latex gloves are disposable so if there is contact with germs they can be removed and disposed of to avoid the germs spreading to others.

Staff must wash hands after taking gloves off and before putting on a new one.

Sanitizing the Environment

Use a bleach solution on all surfaces, and toys should be washed down regularly and as needed if soiled. Remember that germs are not visible to the naked eye, so just because a toy or surface looks clean does not mean that it is. Cleaning all surfaces and toys at regular intervals can help keep a cleaner, more sanitary environment for all people in the child care environment.

There is a disinfecting sanitizing schedule posted at every classroom sink where every surface must be sanitized weekly or as needed. Any toy that touches a child's mouth must be sanitized.

Children are taught to sneeze in the sleeve, if not toys and surfaces must be sanitized.

Eating surfaces and common surfaces will be sanitized after each use.

Toilets and sinks will be sanitized daily by maintenance daily.

Wash cloths and towels if used will be for each child, used once and then laundered.

Each classroom, playroom, playground, dining room, and bathroom will be supplied with Kleenex, paper towels, sanitizer and garbage can to curb the spread of germs.

Water play tables are to be drained daily and sanitized.

Please see the maintenance check list for a list of further cleaning schedules.

Cots:

Each child has their own cot that is labelled with their name, and cots are to be placed with adequate spacing so as to not spread germs while coughing during nap. Each crib must be placed in the same way, head to toe placement to reduce the spread of germs.

Each child will have their own sheet provided by the program which is cleaned weekly or as needed, cots and cribs will be sanitized weekly as well.

Blankets provided by the child's family will be washed every two weeks or as needed.

Proper Disposal of Soiled Items or Materials

All items that have come in contact with blood need to be double bagged and given to the parent or washed separately in the child care laundry facility. If any child requires injections or finger lancets for blood testing, the parents of the child are required to provide a sharps container for the disposal of these items.

Linen cleaning schedule is posted in each room, sheets once a week, blankets twice monthly, wash clothes after each use, costumes every other week. It is the responsibility of the RECE to wash the linens with appropriate soap in the laundry room.

Children's clothing which has been soiled is bagged and sent home for parents to wash.

Staff must wash hands after bagging linen and before and after laundering.

Toothbrushes

Each child will brush teeth daily, each child will have their own tooth brush to be dried on a holder not touching and covered up. Each brush will have designated spot and labelled and brush to be replaced as needed, not to exceed three months. The holders and covers must be sanitized weekly.

Sanitizing Mixtures

Large Quantities – mix 50 ml (1/4 cup) bleach to 5 l (1 gallon) water.

Smaller Quantities – mix 5 ml (1 tsp) bleach to 500 ml (2 cups) water.

Spray Bottle – 5 ml (1 tsp) bleach to 500 ml (2 cups) water.

NOTE: If using a sanitizing product other than bleach, follow the manufacturer's mixing recommendations.

Health of Children and Staff

1. Staff will practice strict adherence to all sanitary procedures to reduce the spread of illnesses.
2. Daily observations of each child in attendance will be made before he/she begins to associate with other children in order to detect possible symptoms of ill health.
3. Mildly ill children may remain in the program if well enough to participate in all activities and are comfortable.
4. A child not able to participate due to illness will be separated from the group if staff is available and pending ratio requirements and symptoms of the illness will be noted in the child's file. Arrangements will be made for an ill child to be taken home by his/her parent, guardian or emergency contact person.
5. Exclusion is required according to the latest advice on communicable diseases from the Eastern Ontario Health Unit, the Well Beings Guide or by advice of the child's doctor. Known reportable diseases will be reported to the local Community Health Unit 613-575-2341.
6. A readily available first aid kit is located in the classroom and is also brought on field trips. All staff are aware of its location. The traveling first aid kit will contain medical emergency information on each child.
 - First Aid Kits are equipped with the following items but are not limited to:

Current edition of first aid manual, sterile band aids, gloves, sterile gauze pads, rolls of gauze band aids, safety pins, gauze wrap, scissors, triangular bandages, rolls of splint padding.

- First Aid Inspections will be completed monthly – sheet is attached and Supervisor will refill the box or will notify operational support to refill.

7. **All signs must be posted within each classroom, signs can be changed but must be initiated and dated by center supervisor.**

Sanitary Change for Toileting Accidents

1. Gather supplies which would include: towel, disposable cloth, liquid soap, disinfectant, disposable rubber gloves. Collect clean change of clothing for the child. Ensure that all staff members wear disposable rubber gloves for each incident.
2. Remove the child from the play area.
3. Remove child's soiled clothing. Cleanse skin with disposable cloth moving from front to back.
4. Dress child quickly to prevent chill, wash child's hands and return to play room.
5. Dispose of cloth in plastic garbage bag.
6. Dispose of any solid matter in child's underwear in toilet.
7. Place soiled clothing in plastic bag and secure with twist tie. Label with child's name. Ensure clothing goes home with parent at the end of the day.
8. Cleanse changing area with sanitizing solution. Remove plastic garbage bag from washroom and place it in the area for garbage pickup.
9. Wash your hands thoroughly.
10. Report abnormal skin or stool conditions to parents.
11. Sanitary change procedure posted in changing area.

Diapering

1. An approved mat or change table is to be used for diapering. The diapering procedure is to be implemented at all times unless otherwise specified and approved by the Supervisor.
2. Each child is to have a separate compartment for storage of diapering materials.
3. Sanitizing solutions and materials are to be readily available and out of reach of children.
4. Soiled diapers and disposable towels must be placed in a secure garbage.
5. Cloths and towels must be used for cleansing diaper area only once. Separate linen should be available for cleaning hands and face.
6. The change pad will be cleaned and sanitized after each use.
7. Cloth diapers supplied by the parents are to be placed in a plastic bag after use and sent home with parents.
8. Hand washing of children and staff will occur immediately after diapering a child.
9. Diapering procedure posted in changing area.
10. Trash to be taken out to dumpster daily.



DIAPER-CHANGING ROUTINE

1. Assemble all the necessary supplies you need.
2. Place the child on the changing surface and remove the soiled diaper. Fold the soiled surface inward and set it aside. If safety pins have been used to fasten the diaper, close them and put them out of the child's reach. Never put them in your mouth.
3. Clean and dry the child's skin.
4. When necessary, use a facial tissue to apply ointments or creams.
5. Put a fresh diaper on the child.
6. **Wash the child's hands.** Return the child to a supervised area.
7. Formed stool can be flushed down the toilet. Do not rinse the diaper.
8. Dispose of the cloth or disposable diaper and if used the disposable paper covering.
9. Spray the sanitizing solution onto the entire surface of the changing surface. Leave for 30 seconds.
10. Put away all diapering supplies.
11. **Wash your hands.**
12. Dry the changing surface with a single-use towel. Dispose of the cloth or paper towel.
13. Wash your hands thoroughly.
14. Record skin condition and bowel movements as necessary.

***POST IN CHANGING AREA**



TOILETING ROUTINE

1. If a 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.
2. Place the child on the toilet or potty. Stay with the child for a specific period of time. Five minutes is usually long enough.
3. Wipe the child.
4. Flush the toilet or let the child flush it. If a potty was used, empty its contents into the toilet and flush.
5. If necessary, diaper the child and help the child get dressed.
6. **Assist the child in handwashing.** Return the child to a supervised area.
7. 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 the entire stool with toilet paper. Rinse the potty and flush the water.
8. If wearing rubber gloves, remove them. Spray the sanitizing solution onto the potty and the diaper-changing surface (if used). Leave for 30 seconds.
9. Put away all diapering supplies.
10. **Wash your hands.**
11. Dry the potty with a single use towel. Dispose of the cloth or paper towel.
12. Dry the diaper-changing surface with a different towel. Dispose of the cloth or paper towel.
13. **Wash your hands thoroughly.**

***POST IN TOILETING AREA**



Akwesasne Child Care Program Policies and Procedures

Subject: Sanitary Practices and Universal Precautions

Section 813

Monthly First Aid Kit Inspection

Program _____ Year _____

First Aid Kit	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Sterile Band-Aids												
Gloves												
Sterile gauze pads												
Rolls of gauze bandages												
Safety Pins												
Gauze wrap												
Scissors												
Date												
Initial												

***POST IN FIRST AID KIT**



NAP TIME DUTIES

This is to occur when all children are asleep.

- Clean art area
- Wash brushes clean easel
- Empty and disinfect water table and toys
- Pick up and put toys away
- Fill out any accident incident forms if needed
- Disinfect table and chairs
- Spray and disinfect toys
- Put art in children's cubbies
- Contact parents if needed or write notes for extra clothes
- Complete learning stories
- Sanitize toothbrushes

SANITIZING SCHEDULE

- Monday – Dramatic Play Area & Toothbrush holders
- Tuesday – Launder cots sheet, second week – blankets, every other week –costumes
- Wednesday – Shelves, toys, books and puzzles
- Thursday – Tables and Chairs
- Friday – Table toys, carpet toys and climbers

***Trash to be taken out to dumpster daily at end of shift**



HAND WASHING



***ALL STAFF MUST WASH HANDS AFTER TOILETING, DIAPERING, BEFORE EATING, AFTER WIPING NOSES OR ANY BODILY FLUID.**

***POST BY EACH SINK**



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Sleep Safety

Section: Safety

Policy : 814/1027

Amended:10/16/18

Policy: Staff must ensure sleep safety is a priority.

Please find attached a sleep policy and supervision procedure that reflects phase 2 regulations of the Child Care and Early Years Act (CCEYA).

Please review subsections 4.13 and 4.14, pages 103-110 of the Child Care Licensing Manual August 2016.

Monitoring sleeping children reduces the risk of harm/injury because caregivers can look for signs of distress (e.g. change in skin color, change in breathing, signs of overheating) and react as required.

Sleep policies must be reviewed with staff, volunteers and students, implemented and monitored for compliance and contraventions.

Sleep Supervision Policy

Akwesasne child care program realizes that for healthy development, children must have an adequate amount of sleep. Nap time is respected in our center and we make every effort to help children relax and enjoy the experience. Each age group has a different routine but we endeavor to adapt the procedure to each particular child as much as possible.

Staff will consult with parents respecting their child's sleeping arrangements at the time the child is enrolled and at any time there is a change such as at transitions between programs or at the parent's request. Written documentation will be included in the child's file to reflect the child's sleep patterns and updates will be added when they occur.

Nap Procedure:

1. Toddler and preschool rooms nap in their classrooms on personalized cots in designated areas indicated with signage on cots, and a cot map or hanging signs above.
2. Toddler and preschool children nap after lunch for no more than two hours.
3. Shoes will be removed for comfort and will be placed in one bin to be easily carried out in case of emergency.
4. Each child has an assigned cot or crib mattress is required to have a sheet which is provided by the program, the blankets are provided by the parent.

5. Infant programs have a designated nap room so that infants can nap at any time, following their natural rhythm. Their sleep routine is posted on the wall above the cot so that it is visible to any educator member who is working in that program.
6. Upon enrollment, move in classroom, and every change after every family is consulted about their child's sleep arrangements.
7. The supervisor or program educator will review the sleep policies and procedure with all families upon enrollment, move in classroom, or any change.
8. If any educator observes significant change in a child's sleeping habits or behaviors the educator is required to communicate/document the observations which will be discussed with the families to determine if alternate supervision is required for the child.
9. Educators must ensure that all children younger than 12 months are placed to sleep on their backs unless the child's physician recommends otherwise in writing.
10. Educators must position themselves in a manner that allows them to directly observe the resting or sleeping children.
11. During nap time, the educator will enter the nap room to check on children every 15 minutes and will be documented in sleep log. This is done quietly and unobtrusively so it does not disturb their sleep. **Private Home Providers will enter the sleep area/room twice hourly during the nap time.**
12. Educators in toddler and preschool programs will document how each child slept each day through direct observation during the sleep and rest period. An check indicates sleeping, an "x" indicates awake.
13. Educators will complete direct visual checks more often if required. (e.g.) A child is having trouble settling for sleep, a child is coughing.
14. A rocking chair may be in the program or nap room so that a child may be rocked and lulled to sleep before being put in the crib.
15. Infants, toddlers and preschoolers are encouraged to self-soothe and supported to learn how to do this.
16. Baby bottles are never given to children in cribs. Children are always held while they drink a bottle.
17. Music if played during rest time should not interfere with staff being able to hear children's movement and sounds.
18. Electronic devices can be used to detect and monitor the sounds and if applicable, video images, of every sleeping child.
19. The receiver unit of the electronic sleep monitoring device is actively monitored by educators at all times and is checked daily (by whom) to ensure it is functioning properly. They are not to be used as a replacement for the direct visual checks. (include who will be responsible for checking the electronic devices, how often, documentation, steps taken if the device does not work).
20. There is sufficient light at all times to ensure educators can conduct direct visual checks. (small lamp, night lights).
21. From time to time, items may be stored under the cribs in closed bins. Bins are never stored under evacuation cribs.

Equipment

All furniture and equipment is compliant with current standards, is sturdy and is in good repair. Each infant has a crib with their own bedding, and each toddler and preschooler have their own cot. Furniture is checked on a quarterly (regular) basis during the Health and Safety Inspection.

Breathable blankets are required in sleep rooms, children must be monitored during sleep, nothing should be placed in cribs other than breathable blanket, and children must sleep head to toe formation. Sheets are provided by the program and washed weekly or when soiled, parents provide blankets.

Strollers, swings, bouncers and car seats are not intended for infant sleep. Children should be placed in their crib once asleep.

Special Instructions

The licensee should review the recommendations set out in the most current version of the Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada(SIDS).

The current recommendation set out in the Joint Statement is that children up to their first birthday be placed on their backs for sleep. This has been Health Canada's recommendation since 1993, as a means to reduce the risk of SIDs.

It is important to note that the Joint Statement sets out that once infants are able to roll from their backs to their stomachs or sides, it is not necessary to reposition them onto their backs.

The requirement for an infant sleep position may only be waived if a medical doctor/physician recommends differently in writing.

Provisions have been added to the regulations to reduce risk of harm and injury, including death, when infants are sleeping. Placing infants on their back for sleep is recommended by major children's organizations such as the Canadian Pediatric Society and the American Academy of Pediatrics. The federal government (Health Canada/Public Health Agency of Canada) concurs with this recommendation, as set out in the Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada.

Please note: In the recommendations on page 107 it talks about the risks of suffocation and placing children to sleep with no blankets, etc. This does not mean that children can't have their comfort materials when requested by parents. Written documentation is required from families outlining how their child sleeps and what they require during sleep (blanket, soother, etc.). Staff will be diligent in their visual checks to ensure that blankets are not over children's heads

Insert Sleep Safety Document Here & Sleep Safety Log

ACCP Sleep Safety Log

Week:

Room:

Child Name →

Time ↓

	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F
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✓ = asleep/sleeping

✗ = awake/rocking



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Walking Trips & Safety

Section: Safety

Policy : 815 (& Program 1018)

Amended:10/27/16

Policy: Staff must make safety of the children the utmost priority when on field trips and walking off the premises.

Procedures: Staff often take the children for walks in the areas local to their centers, during this time staff will wear reflective clothing, carry emergency info for each child, a cell phone, an emergency kit, a list of children in attendance that day.

Routes will be identified prior to departure and regular walking routes will be made public so that local motorists can take caution.

Occasionally field trips will be coordinated with the permission of the parent/guardian. Chaperones may be required depending on the developmental abilities of the child, and staff must also carry emergency information, kit and attendance record.

These procedures will also be utilized on field trips where a chaperone would not be required.

- Staff will inform center supervisor/designate regarding which designated route they will be using.
- Staff will wear brightly colored safety vests as provided by ACCP
- Staff will carry a cellphone (personal or one provided by ACCP if available)
- Staff will position themselves at the front of the line and one at the end if 2 or more staff are in attendance.
- Staff will utilize a “walking rope” for children to hold on to or be strapped on to depending on age and ability. Children will be placed on alternate sides of the rope when walking on side roads, when on main roads children will be placed on the side opposite to the road.
- Infants will be strapped into the strollers if their developmental level requires that.
- Staff and children will follow the rules of the road for pedestrians as noted below.
- Caution flags will be attached to all strollers at all times while on a walk.
- Staff will exercise attendance monitoring and have the emergency info for all children present on the walk as well as a first aid kit and any necessary anaphylactic medication required by children/staff.

Rules of the Road (while on field trips if applicable)

- Cross only at marked crosswalks or traffic lights/stop signs. Don't cross in the middle of the block or between parked cars.
- Make sure drivers see you before you cross. If the driver is stopped, make eye contact before you step into the road.
- Wear bright or light-coloured clothing or reflective strips.
- At a traffic light/stop sign:
 - Cross when traffic has come to a complete stop.
 - Begin to cross at the start of the green light or “Walk” signal, where provided.
 - Do not start to cross if you see a flashing “Do Not Walk” symbol or the light turns yellow. If you already started to cross, complete your crossing in safety.
 - Never cross on a red light.
- Watch for traffic turning at intersections or turning into and leaving driveways.

Practice with your children how to cross a road safely. Set the example of:

- Stay to the side of the road, walking as far away from traffic as they safely can
- Stop at the edge of the sidewalk, and look both ways before crossing the road
- Take extra care on roadways that have no curbs
- Watch out for blind corners (for example, a car coming out of an alley may not see a child pedestrian about to cross).



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Unexpected Closures of Centers

Section: Safety

Policy : 816/606

Amended:

Policy: On occasion, centers must close unexpectedly for emergencies or adverse weather conditions. Site supervisors will take action that ensures the health and safety of staff, parents and children.

Procedure: Staff are expected to remain on site until the last child has left, and keep within ratio. The first staff to arrive at work will be the first to be released. No extra time will be allotted for remaining on site to stay with a child.

Time & Inclement Weather Closure

Policy: Permanent MCA employees are to report to work as soon as they can get in, even when the centers are closed to children, unless the announcement on CKON indicates a closure of the entire MCA organization.

During inclement weather, the Executive Director will assess the situation and determine whether there will be a delayed opening or a closure for that day. A notice will be placed with CKON radio before 7:00 am. staff are reminded to tune in.

If a staff member does not report for work, they must call the center to indicate that lost time will be applied to their vacation or personal benefit.

In the event of a delayed opening, permanent staff that are already at work will remain, and no time credit allotted, should notification of a closure of entire MCA organization is announced staff may leave. If child-staff ratios are low an arrangement may be made with the site supervisor for staff to leave early.

Regardless of the weather conditions, staff or parents will not be refused entry to the centers for shelter until the inclement weather clears and it is safe to return home.

An hour delay announcement will delay opening of center for that hour, so centers will open at 8:30am.

Children's entry cut off time will be one hour past the cut off time, beyond that is the Supervisor's discretion depending on the circumstances.

ACCP follows the MCA closure and parents are only to be called when the official announcement is made.



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Health Inspections

Section: Safety

Policy : 817/912 Facilities Management

Amended:

Policy: There will be an annual health inspection conducted by the Environmental Health Officer and recommendations and standards must be adhered to.

The center supervisor will ensure that health inspections occur and that all standards and recommendations are met.

The supervisor is also responsible for contacting the EHO and obtaining inspection report, please see section 816 of this policy on safety. Maintenance staff will also work in conjunction with ACCP health inspections and recommendations.



Akwesasne Child Care Program Policies and Procedures Manual

Subject: First Aid & CPR

Section: Safety/Employee Expectations

Policy : 818/614

Amended:

Policy: The following persons shall have a valid certification in standard first aid, including infant and child CPR issued by a training agency recognized by the Workplace Safety and Insurance Board:

- Supervisor of Akwesasne child care centers
- Every employee of Akwesasne child care who is counted for the purposes of meeting the ratios required.
- This includes employees who may occasionally be counted in ratio as well as occasional staff to have first aid training including infant and child CPR.
- Where a person is not able to obtain the standard first aid certification with infant and child CPR due to a disability, the licensee will have on file an exemption letter for review from the Ministry director.

Procedure: Every two years a St. John Ambulance Standard First Aid & Infant/Child CPR will be offered by ACCP. Staff who require a current certificate will be enrolled in the course, and all expenses will be paid by the agency for all full time/part time employees.

Staff who do not hold a Standard First aid Certificate including Infant and Child CPR will work with a staff member who holds a current certification.

It is the responsibility of the Supervisor to ensure that their staff are current with CPR and that the current certificate is in the staff file and available upon request.

A tracking log must be kept by the center supervisor to ensure that each staff within the center is in compliance.

Insert Sample CPR & First Aid Tracking Log.

Sample Log - Staff

First Aid and Infant CPR (O. Reg 137/15, ss. 58(2)) To be fully completed by September 1, 2016.

Name	Position	Date of Certification	Renewal Date	Requires First Aid/Infant CPR	Plan of Action: Insert proposed date of certification	Completion Date Initial	Renewal Date
Exemption Letter on file for the following:	Name of staff:		Name of staff:				



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Plan for Children with Medical Needs

Section: Safety

Policy : 819/1022

Created: 8/23/17

Policy: As per Ontario Regulation 137/15: Children with Medical Needs, the ACCP is required to develop an individualized plan for children with medical needs.

Procedure: Once a child has been identified either through the medical assessment upon entry or with observation and consultation with parents as per policy 1021, the following will be implemented:

The individualized plan shall be developed in consultation with a parent of the child and with any regulated health professional who is involved in the child's health care and who, in the parent's opinion, should be included in the consultation. O. Reg. 126/16, s. 27.

The plan shall include,

- (a) steps to be followed to reduce the risk of the child being exposed to any causative agents or situations that may exacerbate a medical condition or cause an allergic reaction or other medical emergency;
- (b) a description of any medical devices used by the child and any instructions related to its use;
- (c) a description of the procedures to be followed in the event of an allergic reaction or other medical emergency;
- (d) a description of the supports that will be made available to the child in the child care centre or premises where the licensee oversees the provision of home child care or in-home services; and
- (e) any additional procedures to be followed when a child with a medical condition is part of an evacuation or participating in an off-site field trip. O. Reg. 126/16, s. 27.

A licensee is not required to develop an individualized plan under this section for a child with an anaphylactic allergy if the licensee has developed an individualized plan for the child under section 39 and the child is not otherwise a child with medical needs. O. Reg. 126/16, s. 27.

Intent

This provision requires that an individualized plan be developed for each child with medical needs and that licensees take all necessary steps to support the child's medical needs and ensure his or her inclusion in the program.

The review of each individualized plan (by employees, students and volunteers) supports the child(ren)'s ability to participate in the child care program, and provides staff with all necessary information to deal with any medical situation pertaining to the child.

Please fill out the attached form: INDIVIDUALIZED PLAN FOR A CHILD WITH MEDICAL NEEDS & fill out the sections "click here to enter text".

INDIVIDUALIZED PLAN FOR A CHILD WITH MEDICAL NEEDS

This form must be completed for a child who has one or more acute or chronic** medical conditions such that he or she requires additional supports, accommodation or assistance.*

Child's Full Name: [Click here to enter text.](#)

Child's Date of Birth: [Click here to enter text.](#)
(dd/mm/yyyy)

Date Individualized Plan Completed: [Click here to enter text.](#)

Medical Condition(s):

- Diabetes Asthma
 Seizure Other: [Click here to enter text.](#)

Photo of Child
(Recommended)

Prevention and Supports

STEPS TO REDUCE THE RISK OF CAUSING OR WORSENING THE MEDICAL CONDITION(S): *[include how to prevent an allergic reaction/other medical emergency; how not to aggravate the medical condition (e.g. Pureeing food to minimize choking)]*

[Click here to enter text.](#)

LIST OF MEDICAL DEVICES AND HOW TO USE THEM (if applicable): *(e.g. feeding tube, stoma, glucose monitor, etc.; or not applicable (N/A))*

[Click here to enter text.](#)

LOCATION OF MEDICATION AND/OR MEDICAL DEVICE(S) (if applicable): *(e.g. glucose monitor is stored on the second shelf in the program room storage closet; or not applicable (N/A))*

[Click here to enter text.](#)

SUPPORTS AVAILABLE TO THE CHILD (if applicable): *(e.g. nurse or trained staff to assist with feeding and/or disposing and changing of stoma bag; or not applicable (N/A))*

[Click here to enter text.](#)

Symptoms and Emergency Procedures

SIGNS AND SYMPTOMS OF AN ALLERGIC REACTION OR OTHER MEDICAL EMERGENCY: *[include observable physical reactions that indicate the child may need support or assistance (e.g. hives, shortness of breath, bleeding, foaming at the mouth)]*

[Click here to enter text.](#)

PROCEDURE TO FOLLOW IF CHILD HAS AN ALLERGIC REACTION OR OTHER MEDICAL EMERGENCY: *[include steps (e.g. Administer 2 puffs of corticosteroids; wait and observe the child's condition; contact emergency services/parent or guardian, parent/guardian/emergency contact information; etc.)]*

[Click here to enter text.](#)

PROCEDURES TO FOLLOW DURING AN EVACUATION: *(e.g. ice packs for medication and items that require refrigeration; how to assist the child to evacuate)*

[Click here to enter text.](#)

PROCEDURES TO FOLLOW DURING FIELD TRIPS: *(e.g. how to plan for off-site excursion; how to assist and care for the child during a field trip)*

[Click here to enter text.](#)

Additional Information Related to the Medical Condition (if applicable):

[Click here to enter text.](#)

This plan has been created in consultation with the child's parent / guardian.

Parent/Guardian Signature:

Print name: Click here to enter text.	Relationship to child: Click here to enter text.
Signature:	Date: (dd/mm/yyyy) Click here to enter text.

The following individuals participated in the development of this individual plan (optional):

First and Last Name	Position/Role	Signature
Click here to enter text.	Click here to enter text.	

Frequency at which this individualized plan will be reviewed with the child's parent/guardian:

[Click here to enter text.](#)



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Emergency Management Policy & Procedures

Section: Safety

Policy : 820

Created: 8/25/17

Policy: The ACCP must protect the health and safety of children and staff in the event of an emergency.

Procedures: Each center must fill out the attached Policy and Procedures Form and enter the appropriate data in "enter text" sections.

All staff roles and responsibilities be clearly outlined in the event of an emergency.

The form must be updated and entered on an annual basis by the center Supervisor.

The policy must be reviewed by all staff and document kept in the licensing binder readily available during emergency.

Akwesasne Child Care Program

Emergency Management Policy and Procedures

Name of Child Care Centre: [Click here to enter text.](#)

Date Policy and Procedures Established: August 25th, 2017.

Date Policy and Procedures Updated: [Click here to enter text.](#)

Purpose

The purpose of this policy is to provide clear direction for staff and licensees to follow to deal with emergency situations. The procedures set out steps for staff to follow to support the safety and well-being of everyone involved.

Clear policies and procedures will support all individuals to manage responses and responsibilities during an emergency, resulting in the safest outcomes possible.

Definitions

All-Clear: A notification from an authority that a threat and/or disaster no longer pose a danger and it is deemed safe to return to the child care premises and/or resume normal operations.

Authority: A person or entity responsible for providing direction during an emergency situation (e.g. emergency services personnel, the licensee).

Emergency: An urgent or pressing situation where immediate action is required to ensure the safety of children and adults in attendance. These include situations that may not affect the whole child care centre (e.g. child-specific incidents) and where 911 is called.

Emergency Services Personnel: persons responsible for ensuring public safety and mitigating activities in an emergency (e.g. law enforcement, fire departments, emergency medical services, rescue services).

Evacuation Site: the designated off-site location where shelter is obtained during an emergency. The evacuation site is used when it is deemed unsafe to be at or return to the child care centre.

Licensee: The individual or agency licensed by the Ministry of Education responsible for the operation and management of each child care centre it operates (i.e. the operator).

Meeting Place: the designated safe place near the child care centre where everyone is to initially gather before proceeding to the evacuation site, or returning to the child care centre if evacuation is not necessary.

Staff: Individual employed by the licensee (e.g. program staff, supervisor).

Unsafe to Return: A notification from an authority that a threat and/or disaster continue to pose a danger and it is unsafe to return to the child care premises.

Policy

Staff will follow the emergency response procedures outlined in this document by following these three phases:

1. Immediate Emergency Response;
2. Next Steps during an Emergency; and
3. Recovery.

Staff will ensure that children are kept safe, are accounted for and are supervised at all times during an emergency situation.

For situations that require evacuation of the child care centre, the **meeting place** to gather immediately will be located at: [Click here to enter text.](#)

If it is deemed 'unsafe to return' to the child care centre, the **evacuation site** to proceed to is located at: [Click here to enter text.](#)

Note: all directions given by emergency services personnel will be followed under all circumstances, including directions to evacuate to locations different than those listed above.

For any emergency situations involving a child with an individualized plan in place, the procedures in the child's individualized plan will be followed.

If any emergency situations happen that are not described in this document, [Click here to enter text.](#) will provide direction to staff for the immediate response and next steps. Staff will follow the direction given.

If any emergency situations result in a serious occurrence, the serious occurrence policy and procedures will also be followed.

All emergency situations will be documented in detail by [Click here to enter text.](#) in the daily written record.

Additional Policy Statements

E.g. regular drills with staff for training/practice, emergency bag preparation, etc.

[Click here to enter text.](#)

Procedures

Phase 1: Immediate Emergency Response

Emergency Situation	Roles and Responsibilities
<p>Lockdown When a threat is on, very near, or inside the child care centre. E.g. a suspicious individual in the building who is posing a threat.</p>	<ol style="list-style-type: none">1) The staff member who becomes aware of the threat must inform all other staff of the threat as quickly and safely as possible.2) Staff members who are outdoors must ensure everyone who is outdoors proceeds to a safe location.3) Staff inside the child care centre must:<ul style="list-style-type: none">• remain calm;• gather all children and move them away from doors and windows;• take children's attendance to confirm all children are accounted for;• take shelter in closets and/or under furniture with the children, if appropriate;• keep children calm;• ensure children remain in the sheltered space;• turn off/mute all cellular phones; and• wait for further instructions.4) If possible, staff inside the program room(s) should also:<ul style="list-style-type: none">• close all window coverings and doors;• barricade the room door;• gather emergency medication; and• join the rest of the group for shelter.5) Click here to enter text will immediately:<ul style="list-style-type: none">• close and lock all child care centre entrance/exit doors, if possible; and• take shelter. <p>Note: only emergency service personnel are allowed to enter or exit the child care centre during a lockdown.</p>

<p>Hold & Secure When a threat is in the general vicinity of the child care centre, but not on or inside the child care premises. E.g. a shooting at a nearby building.</p>	<ol style="list-style-type: none"> 1) The staff member who becomes aware of the external threat must inform all other staff of the threat as quickly and safely as possible. 2) Staff members who are outdoors must ensure everyone returns to their program room(s) immediately. 3) Staff in the program room must immediately: <ul style="list-style-type: none"> • remain calm; • take children's attendance to confirm all children are accounted for; • close all window coverings and windows in the program room; • continue normal operations of the program; and • wait for further instructions. 4) Click here to enter text. must immediately: <ul style="list-style-type: none"> • close and lock all entrances/exits of the child care centre; • close all blinds and windows outside of the program rooms; and • place a note on the external doors with instructions that no one may enter or exit the child care centre. <p>Note: only emergency services personnel are allowed to enter or exit the centre during a hold and secure.</p>
<p>Bomb Threat A threat to detonate an explosive device to cause property damage, death, or injuries E.g. phone call bomb threat, receipt of a suspicious package.</p>	<ol style="list-style-type: none"> 1) The staff member who becomes aware of the threat or Click here to enter text. must: <ul style="list-style-type: none"> • remain calm; • call 911 if emergency services is not yet aware of the situation; • follow the directions of emergency services personnel; and • take children's attendance to confirm all children are accounted for. A. Where the threat is received by telephone, the person on the phone should try to keep the suspect on the line as long as possible while another individual calls 911 and communicates with emergency services personnel. B. Where the threat is received in the form of a suspicious package, staff must ensure that no one approaches or touches the package at any time.

Disaster Requiring Evacuation

A serious incident that affects the physical building and requires everyone to leave the premises. E.g. fire, flood, power failure.

1) The staff member who becomes aware of the disaster must inform all other staff of the incident and that the centre must be evacuated, as quickly and safely as possible. If the disaster is a fire, the fire alarm pull station must be used and staff must follow the centre's fire evacuation procedures.

2) Staff must immediately:

- remain calm;
- gather all children, the attendance record, children's emergency contact information any emergency medication;
- exit the building with the children using the nearest safe exit, bringing children's outdoor clothing (if possible) according to weather conditions;
- escort children to the meeting place; and
- take children's attendance to confirm all children are accounted for;
- keep children calm; and
- wait for further instructions.

3) If possible, staff should also:

- take a first aid kit; and
- gather all non-emergency medications.

4) Designated staff will:

- help any individuals with medical and/or special needs who need assistance to go to the meeting place (in accordance with the procedure in a child's individualized plan, if the individual is a child); and
- in doing so, follow the instructions posted on special needs equipment or assistive devices during the evacuation.
- If individuals cannot be safely assisted to exit the building, the designated staff will assist them to [Click here to enter text.](#) and ensure their required medication is accessible, if applicable; and
- wait for further instructions.

5) If possible, the site designate must conduct a walk-through of the child care centre to verify that everyone has exited the building and secure any windows or doors, unless otherwise directed by emergency services personnel.

<p>Disaster – External Environmental Threat</p> <p>An incident outside of the building that may have adverse effects on persons in the child care centre. E.g. gas leak, oil spill, chemical release, forest fire, nuclear emergency.</p>	<p>1) The staff member who becomes aware of the external environmental threat must inform all other staff of the threat as quickly and safely as possible and, according to directions from emergency services personnel, advise whether to remain on site or evacuate the premises.</p> <p>If remaining on site:</p> <p>1) Staff members who are outdoors with children must ensure everyone who is outdoors returns to their program room immediately.</p> <p>2) Staff must immediately:</p> <ul style="list-style-type: none"> • remain calm; • take children’s attendance to confirm all children are accounted for; • close all program room windows and all doors that lead outside (where applicable); • seal off external air entryways located in the program rooms (where applicable); • continue with normal operations of the program; and • wait for further instructions. <p>3) Click here to enter text. must:</p> <ul style="list-style-type: none"> • seal off external air entryways not located in program rooms (where applicable); • place a note on all external doors with instructions that no one may enter or exit the child care centre until further notice; and • turn off all air handling equipment (i.e. heating, ventilation and/or air conditioning, where applicable). <p>If emergency services personnel otherwise direct the child care centre to evacuate, follow the procedures outlined in the “Disaster Requiring Evacuation” section of this policy.</p>
<p>Natural Disaster: Tornado / Tornado Warning</p>	<p>1) The staff member who becomes aware of the tornado or tornado warning must inform all other staff as quickly and safely as possible.</p> <p>2) Staff members who are outdoors with children must ensure everyone who is outdoors returns to their program room(s) immediately.</p> <p>3) Staff must immediately:</p> <ul style="list-style-type: none"> • remain calm; • gather all children; • go to the basement or take shelter in small interior ground floor rooms such as washrooms, closets or hallways; • take children’s attendance to confirm all children are accounted for; • remain and keep children away from windows, doors and exterior walls; • keep children calm; • conduct ongoing visual checks of the children; and • wait for further instructions.

**Natural
Disaster:
Major
Earthquake**

- 1) Staff in the program room must immediately:
 - remain calm;
 - instruct children to find shelter under a sturdy desk or table and away from unstable structures;
 - ensure that everyone is away from windows and outer walls;
 - help children who require assistance to find shelter;
 - for individuals in wheelchairs, lock the wheels and instruct the individual to duck as low as possible, and use a strong article (e.g. shelf, hard book, etc.) to protect their head and neck;
 - find safe shelter for themselves;
 - visually assess the safety of all children.; and
 - wait for the shaking to stop.
- 2) Staff members who are outdoors with children must immediately ensure that everyone outdoors stays away from buildings, power lines, trees, and other tall structures that may collapse, and wait for the shaking to stop.
- 3) Once the shaking stops, staff must:
 - gather the children, their emergency cards and emergency medication; and
 - exit the building through the nearest safe exit, where possible, in case of aftershock or damage to the building.
- 4) If possible, prior to exiting the building, staff should also:
 - take a first aid kit; and
 - gather all non-emergency medications.
- 5) Individuals who have exited the building must gather at the meeting place and wait for further instructions.
- 6) Designated staff will:
 - help any individuals with medical and/or special needs who need assistance to go to the meeting place (in accordance with the procedure in a child's individualized plan, if the individual is a child); and
 - in doing so, follow the instructions posted on special needs equipment or assistive devices during the evacuation.
 - If individuals cannot be safely assisted to exit the building, the designated staff will assist them to [Click here to enter text.](#) and ensure their required medication is accessible, if applicable; and
 - wait for further instructions.
- 7) The site designate must conduct a walkthrough of the child care centre to ensure all individuals have evacuated, where possible.

Immediate Emergency Response Procedures for Other Emergencies

[Click here to enter text.](#)

[Click here to enter text.](#)

Additional Procedures for Immediate Emergency Response

E.g. assisting other program rooms during an emergency, etc.

[Click here to enter text.](#)

Phase 2: Next Steps During the Emergency

- 1) Where emergency services personnel are not already aware of the situation, [Click here to enter text.](#) must notify emergency services personnel (911) of the emergency as soon as possible.
- 2) Where the child care centre has been evacuated, emergency services must be notified of individuals remaining inside the building, where applicable.
- 3) If the licensee is not already on site, the site designate must contact the licensee to inform them of the emergency situation and the current status, once it is possible and safe to do so.

List of Emergency Contact Persons: [(insert information (e.g. supervisor, licensee, on-site designate, board of directors, local authority))]

Local Police Department:

Ambulance:

Local Fire Services:

Site Supervisor:

Licensee Contact(s):

Child Care Centre Site Designate:

[insert others:]

- 4) Where any staff, students and/or volunteers are not on site, [Click here to enter text.](#) must notify these individuals of the situation, and instruct them to proceed directly to the evacuation site if it is not safe or practical for them return to the child care centre.
- 5) [Click here to enter text.](#) must wait for further instructions from emergency services personnel. Once instructions are received, they must communicate the instructions to staff and ensure they are followed.
- 6) Throughout the emergency, staff will:

- help keep children calm;
- take attendance to ensure that all children are accounted for;
- conduct ongoing visual checks and head counts of children;
- maintain constant supervision of the children; and
- engage children in activities, where possible.

7) In situations where injuries have been sustained, staff with first aid training will assist with administering first aid. Staff must inform emergency personnel of severe injuries requiring immediate attention and assistance.

8a) Procedures to Follow When “All-Clear” Notification is Given	
Procedures	<ol style="list-style-type: none"> 1) The individual who receives the ‘all-clear’ from an authority must inform all staff that the ‘all-clear’ has been given and that it is safe to return to the child care centre. 2) Designated staff who have assisted individuals with medical and/or special needs with exiting the building will assist and accompany these individuals with returning to the child care centre. 3) Staff must: <ul style="list-style-type: none"> • take attendance to ensure all children are accounted for; • escort children back to their program room(s), where applicable; • take attendance upon returning to the program room(s) to ensure that all children are accounted for; where applicable; and • re-open closed/sealed blinds, windows and doors. 4) Click here to enter text. will determine if operations will resume and communicate this decision to staff.
Communication with parents/guardians	<ol style="list-style-type: none"> 1) As soon as possible, Click here to enter text. must notify parents/guardians of the emergency situation and that the all-clear has been given. 2) Where disasters have occurred that did not require evacuation of the child care centre, Click here to enter text. must provide a notice of the incident to parents/guardians by Click here to enter text. 3) If normal operations do not resume the same day that an emergency situation has taken place, Click here to enter text. must provide parents/guardians with information as to when and how normal operations will resume as soon as this is determined.

8b) Procedures to Follow When “Unsafe to Return” Notification is Given	
Procedures	<ol style="list-style-type: none"> 1) The individual who receives the ‘unsafe to return’ notification from an authority must inform all staff of this direction and instruct them to proceed from the meeting place to the evacuation site, or the site determined by emergency services personnel. 2) Staff must take attendance to confirm that all children are accounted for, and escort children to the evacuation site. 3) Designated staff who have assisted individuals with medical and/or special needs with exiting the building will assist and accompany these individuals to the evacuation site. 4) Click here to enter text. will post a note for parents/guardians on the child care centre entrance with information on the evacuation site, where it is possible and safe to do so. 5) Upon arrival at the evacuation site, staff must: <ul style="list-style-type: none"> • remain calm; • take attendance to ensure all children are accounted for; • help keep children calm; • engage children in activities, where possible; • conduct ongoing visual checks and head counts of children; • maintain constant supervision of the children; • keep attendance as children are picked up by their parents, guardians or authorized pick-up persons; and • remain at the evacuation site until all children have been picked up.
Communication with parents/guardians	<ol style="list-style-type: none"> 1) Upon arrival at the emergency evacuation site, Click here to enter text. will notify parents/guardians of the emergency situation, evacuation and the location to pick up their children. 2) Where possible, Click here to enter text. will update the child care centre’s voicemail box as soon as possible to inform parents/guardians that the child care centre has been evacuated, and include the details of the evacuation site location and contact information in the message.

Additional Procedures for Next Steps During an Emergency

E.g. documenting children’s accidents/injuries, providing water and/or snacks, etc.

[Click here to enter text.](#)

Phase 3: Recovery (After an Emergency Situation has Ended)

Procedures for Resuming Normal Operations	<p>The supervisor in conjunction with the Program Manager and Director, Ministry Advisor along with appropriate emergency professional will obtain the “all clear” to resume normal operations.</p> <p>The team will take the necessary steps to ensure the safety of the structure and facility, once all is in place normal operations will resume. This will include media, insurance, dts, etc.</p>
Procedures for Providing Support to Children and Staff who Experience Distress	<p>All involved will be assessed for stress and services to debrief will be coordinated by the Wholistic Health Program – 613-575-2341.</p>
Procedures for Debriefing Staff, Children and Parents/ Guardians	<p>The supervisor will contact Wholistic Health and they must debrief staff, children and parents/guardians after the emergency.</p> <p>The ACCP will provide a meeting location to ensure debriefing, and offer this service to all those involved.</p>



Akwesasne Child Care Program Policies and Procedures Manual

Subject: Security Pogs & Access Cards

Section: HR, Employees Expectations, Safety, Facilities Management

Policy : 421, 616, 821, 913

Amended:

Policy: Access to the buildings is limited to ensure safety, staff are granted access and must ensure safety of facility at all times.

Procedure: All staff must obtain security cards on hire from the ACCP administration office to gain access to the building in which they are employed only. Staff must not access to the building after hours without permission of the supervisor.

This card is issued and identified to the cardholder along with an access code. This card or code is not to be shared.

A security code is also granted with the security card to be given to the security company when they call during fire or emergency.

It is your responsibility to report when your card is lost or stolen. In the event of a lost card the replacement card will cost \$20. In the event of a break in or stolen merchandise and it is found that access was gained by the unreported lost card, charges may be laid on the card holder.