

# **Blooming Babies Child Care Agreement**

# 1. Definitions

a) "Agreement" means the provisions of this Blooming Babies Child Care Agreement;

b) "You", "your" and "yours" refer to the customer(s)- (parent(s)/legal guardian(s))- a person having lawful custody of a child or a person who has demonstrated a settled intention to treat a child as a child of his or her family; ("père ou mère") who have signed Blooming Babies Child Care Agreement and to the customer(s) (child, children) who this agreement was signed for by the parent(s)/legal guardian(s);

c) "Child", "children", "beneficiary" and "beneficiaries" refer to the customer(s) for which we are providing child care services and is in our care at our facility including but not limited to the names mentioned in this agreement and for which you are a parent/legal guardian.

d) "We", "us", "ours" and "our" refer to Blooming Babies Childcare and all Blooming Babies Childcare Staff

e) "Program", "programs" and "activities" refer to the whole range of deeds, actions and sphere of actions including but not limited to: educational, social, medical, financial and legal provided or solicited by us and you and your children being a part of, regardless of a signed agreement.

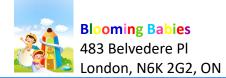
f) "Materials" and "Equipment" refer to all the provisions used and/or your child comes in contact during child care services including but not limited to food, toys, books, sorts of educational objects, paint, live plants and animals, crayons, pencils, paper, play dough, stickers, furniture, clay, water, snow, toiletry products, rocks and minerals.

g) "Food" refers to the whole range of products we are offering to your child for a proper nutrition including but not limited to products you are sending from home, products prepared on our premises, products bought from licensed grocery stores, restaurant, fast-food, farmers and farmer's market and processed foods in accordance with Canada Food Guide (http://www.hc-sc.gc.ca).

# 2. Philosophy

a) At Blooming Babies Child Care we strongly believe that it is through free play and structured learning programs that children learn best. We feel it is our role to provide quality, interesting and stimulating materials and equipment to facilitate the learning process. We provide materials that meet a range of developmental levels. This creates an environment for each child to grow and learn at their own pace, because each child is different and therefore grows and learns in their own unique way.

b) A lot of our "programming" occurs in the moment, taking advantage of simple every day learning opportunities. Often we will focus on a specific theme for a day. Often there is information on the website **https://bloomingbabies.ca/** that details our plans for each week. We strive to keep our focus on the children's interests and take cues from them. The children and their families are our priority and so this is simply one of the ways we try to



show and give them the respect they deserve. We provide a strictly anti-bias environment. Our child care is open to any child and family regardless of their abilities, culture, race, family structure etc. We do our best to represent all types of people within our centre but would also appreciate any input from you. If you have information on cultural holidays or customs unfamiliar to us - please share! If you can provide information and insight into your family structure that we could use - please share! If you can better help us understand certain abilities or disabilities that are perhaps a part of yourself or someone you know - please share! We would love to learn more!

# **3.** Discipline Policy

a) Blooming Babies Child Care, discipline and guidance centers around respect and responsibility. Each child is expected to be a respectful, responsible member of our group. This ranges from children cleaning up their own "mess" after play and lunch to using manners and politeness when speaking with myself and each other.

b) All "rules" centre around these: respect/responsibility/safety guidelines. The only rules are those that are required to maintain a safe and respectful environment for all the children in our centre. UNDER NO CIRCUMSTANCES will any form of physical punishment or any form of abuse EVER be used!

c) Instead, to help in preventing problems, clear, consistent and simple limits will be established. These limits will be stated in a positive manner (ex. "please walk inside" rather than "don't run") and all limits will be explained in a manner that the children can understand (ex. "we need to walk inside so you or someone else doesn't get hurt in case of a 'crash' or fall"). In every instance ample time will be allowed to give children time to respond to the limit set, and the focus will be on the behavior not the children (ex. "running is not a safe way to move inside" rather than "you're a bad boy - stop running!"). And of course, when the children are doing well we reinforce these appropriate behaviors both verbally and through gestures (ex. "it's great to see you walking inside, being so safe!" or giving a 'thumbs up').

d) When intervening in a situation we will ensure to be down at the child's level and have their attention. If the situation involves two children having a problem we can act as a mediator when necessary, modeling problem-solving skills. We need to encourage the children to express their feelings and ideas for solving the problem, and have them work together to come up with solutions. We try to ask open-ended questions to encourage the children to problem solve together (ex. " Gentle hands please. You both want a turn on the slide. What can we do?") Some children need more assistance than this though. In these other instances, appropriate choices will be offered to the child (ex. "You can wait in line for a turn on the slide or go ride a bike until the slide is free") and logical, natural consequences of an action will be explained, and then followed through on, if a behavior continues (ex. "if you continue to push the other children waiting for a turn with the slide you will need to go play somewhere else. The children don't like to be pushed and I will not allow you to do that to them."). In every instance the children's feelings will be acknowledged first (ex. "I know it's hard to wait for your turn, it's not easy to be patient. But pushing is not OK") to help the child feel understood and supported. In some instances children, especially younger ones, can be redirected to another toy or activity to resolve problems. This will be used as a method mainly with the infant/toddler aged children. As the children grow older it is necessary to 'step-by-step' work through resolving the problem to develop appropriate social skills for the future.

e) Only in extreme cases will time-out ('missing out') be used as a discipline method. Persistent refusal to follow the defined limits at times requires the child to be removed from the group. It is explained to the child as "when you cannot be safe with yourself and your friends/when you cannot play nicely, you cannot be a part of the group". The child will be removed from the group and asked to go sit in the crafts area. They will be asked to sit for a few short minutes or to prepare a craft to calm down, think about what behaviors are OK, and to let us know when they are ready to rejoin the group. Before rejoining the group we will briefly discuss what appropriate behaviors will need to be used to be a part



of the group again. A child will only ever be physically restrained if they are posing a threat to themselves or others. Only sufficient strength would be used and the child will be released as soon as he or she has gained self-control again.

### 4. Daily Routine

a)

Daily routine at Blooming Babies 6:30 a.m.-8:30 a.m. Arrival Time/Breakfast. Free play time is encouraged after breakfast. (Children arriving after 8:30 a.m. are encouraged to eat their morning meal at home)

8:30 a.m.-9:00 a.m. Group Activity/Circle Time

9:00 a.m.-9:45 a.m. Toddler/Preschool Curriculum OR Arts & Crafts

9:45 a.m.-10:00 a.m. Morning Snack

10:00 a.m.-11:45 a.m. Outside Play/Activity Center (weather permitting)

11:45 a.m.-12:00 p.m. Bathroom routine

12:00 p.m.-1:00 p.m. Lunch Time and Clean Up

1:00 p.m.-3:00 p.m. Nap/Quiet Time (Children who do not nap are encouraged to play quietly, watch an educational program, color individually)

3:00 p.m.-3:30 p.m. Afternoon Snack

3:30 p.m.-4:00 p.m. Group Activity and/or Outside Play (weather permitting)

4:00 p.m.-4:30 p.m. Playroom and activity centre clean up

4:30 p.m.-5:30 p.m. Free Play/Pick Up

\* In summer time, we are trying to arrange for most of the activities to be scheduled outdoors, except for the meals and naps. In extreme weather conditions (be it summer or winter) we are watchful of all the allerts and making sure not to over expose the kids in any way.

IMPORTANT: ALL children must have a nap/quiet time. Since we don't have any breaks during 12 hours of work we will not make any exceptions from this rule. Quite time is not only use for the staff to relax and regain their energy but also to catch up with paper work (Daily Reports, medication forms, etc) you are getting in your mail daily.

#### b) Please have your children at daycare by 9:00am, so we can go "out" by then.

c) Please call by 9 a.m. regardless of the situation and let us know what are your plans. If you can't make it by 9 a.m. please call and we can let you know where we will be going so you can drop off there. We do go out daily and so if we don't hear from you, you can drop off when we return for lunch (by 12noon). As well, depending on what school-age children are enrolled in the daycare, we also go out to take them to and from school. We can let you know specifically what those times currently are.

d) For younger children that do not follow such a predictable routine as that above we bring bottles and snack food when we're out so that they may eat when necessary and we do our best to make them comfortable in the stroller or van to nap if necessary.

### 5. Field Trip Policies and Procedures

a) Upon signing registration form parents consent to their children's participation in general daily outings (walks, trips to local parks). We either walk or take the van. We have a valid driver's license and special insurance for paying passengers on our van. On all trips and outings the first aid kit and the children's emergency info/consent cards will be brought along.



b) Prior to each outing the children will be told where we are going, what the boundaries and limits are, and what to do if they find themselves lost. Children not in a stroller will either be holding the stroller or use the walking rope.

c) If a child should become lost while on an outing, the other children will be safely cared for while looking for the missing child. If the search is unsuccessful 911 will be contacted along with the parents/guardians. A serious incident report would also be filed. I hope that such an incident would never occur, but with both preventative measures in place and procedures to follow we feel prepared.

d) If the outing requires vehicle transportation each child will be buckled into their own seatbelt or an appropriate car seat for their weight and height. Infants will be seated in a rear facing car seat until 1 year of age (we use convertible car seats appropriate for 5-40lbs). At 1 year old they will then sit in a forward facing car seat. Children 40 lbs or over (or those whose mid-ear reaches the top of a car seat) will sit in a booster seat. I use booster seats that allow use of the van's lap and shoulder belts. Children this size will use a booster seat until their mid-ear reaches the back of the seat or exceed the weight restrictions. When they become this tall they will no longer use a booster seat and will sit on the normal seat in the van. The front passenger seat will only be used if all the other six seats in the back rows are full. If this is the case, the biggest child will sit in the front passenger seat.

### 6. Items Needed From Home

a)

# -INDOOR SHOES ARE MANDATORY in cold season (in case of fire we will apply the emergency plan and run out as quickly as possible and children must have footwear)

-blanket, toothbrush, pacifiers

-sleep toy/cuddly, slippers/indoor shoes/socks, diapers and wipes diaper rash ointment

-picture with parents/guardians

Spare Clothing/Summer

-sunscreen (we recommend the mineral- non chemical ones, choose a tested natural one)

-underwear

-socks

-sunhat

-pants/shorts

-shirts

Winter Items

-muddy buddies/puddle pants - appropriate (waterproof) jacket



-gloves/mitts

-boots

b) Please ensure that children come dressed in "play" clothes. Although we are careful while doing art and playing outside there are instances where clothes could become stained. I appreciate your understanding and so do the children.

c) Extra supplies can be left at child care and replenished when necessary or can be brought on a daily basis.

d) A very detailed inventory will be held for each children and it will be updated frequently. You will have to date and initial every object you bring in and stays on our premises also you will have to date and initial every object that belongs to you and you retrieve from our premises. All your belongings that you bring in a backpack to be used for your child(ren) needs for the day and are taken back home at the end of your scheduled child care day, are not subject to Inventory policy.

e) If you are sending food or snacks from home, make sure this items are in a sealed container and labeled with your child name and are safe to be stored with other food in our fridge.

f) Children are welcome to bring toys from home to the centre but we ask that it be limited to one toy a day. Children will be asked to share these toys from home with the other children. If a child does not wish to share his toy we will put it away for them until they feel like sharing. The only toys we ask that the children do not bring to the centre are guns and weapons. Thank you for your understanding. Please also note we cannot care or focus on the toys brought for home nor we can be held responsible for their lost.

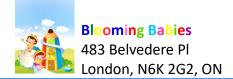
# 7. Safety

# 7.1 Playground Safety

a) Whenever we are playing outside with our children we make sure there is at least a space equivalent with 5.6 square meters for each child. Our premises at 483 Belvedere Pl in London, ON offer an outdoor play space of over 40 square meters for each child enrolled. Your child will be able to run and play and explore in a very energetic and healthy manner.

b) Please do not send scarves, jackets with drawstring hoods or mittens on strings. These can all be very dangerous on climbing/playground equipment. Children can get stuck and/or choke if caught with these.

c) We have a "If you can't reach it you're not big enough yet" policy. We will not lift children up to/onto equipment (ie. high climbers, monkey bars etc) that they cannot climb up to yet themselves. Equipment that is out of their reach and ability is not safe for them to be using. As they become older we will be there to lend a helping hand as they try new things with their developing skills. We ask that parents respect this policy at all times when with the children in our play yard and/or at the parks with us.



# 7.2 General Safety Rules

- a) Our childcare is equipped with the following areas were children have no access:
- 1. Washing, dressing, toileting and isolation.
- 2. Storage for toys, indoor play materials and equipment.
- 3. Cooking area
- 4. Storage for food.
- 5. Storage of required records.

6. Storage for medical supplies, cleaning materials and equipment and other hazardous substances.

7. Heating and electrical equipment.

b) Indoor and outdoor play *material* and *equipment* is in sufficient numbers and of a type suitable to meet the needs of the children enrolled in our child care;

c) We provide a cradle or crib or a playpen that complies with the standards for cradles, cribs and playpens in the regulations made under the Hazardous Products Act (Canada) for each child enrolled in our child care;

d) Our material and equipment is regularly inspected, cleaned and repaired to ensure the safety and well being of enrolled children

#### e) Cleaning and Disinfecting Washrooms

The washroom is cleaned and disinfected twice a day, in the morning at 6:00 a.m. and in the afternoon at 5:45 p.m. The floor and all accessories are washed with water and soap, rinsed and disinfected with a bleach based solution (1 part bleach for 99 parts water) or alcohol based solution (alcohol 70%).

#### f) Cleaning and Disinfecting Eating Area

The eating area is cleaned and disinfected after each meal. We use special formulated liquid soap made with organic oils and no chemicals added for washing and 70% based alcohol solution for disinfecting. Hydrogen peroxide may also be used.

#### g) Cleaning and Disinfecting Hard Plastic Toys

Our toys are periodically rotated so the children are always entertained and passionate about their play time. After each rotation toys are collected and washed in a dishwasher on "Sanitize: cycle.

#### h) Cleaning and Disinfecting Soft Toys

During influenza season we are not allowing sharing of plush toys, blankets, pillows or any items that cannot be easily cleaned and disinfected.

On a regular basis all plush toys are launder on hot water cycle and dry in hot air cycle.

#### i) Cleaning and disinfecting Board Games, Books and Puzzles

We wipe dry using a solution of 70% alcohol.

If this items become saturated with secretions or body fluids we simply discard them.

#### j) Cleaning and Disinfecting Craft Supplies

All craft equipment and scissors are kept clean and disinfected.

# 7.3 Safety Drills

a) Fire drills are held monthly, smoke alarms and CO detectors are tested every 2 weeks and the children are taught what to do in each situation. Our Fire Extinguishers are located in the main room by the daycare entrance.

### 7.4 In the event of Fire/Carbon Monoxide

a) -at the signal of the smoke/CO detector all children and staff will stop what they are doing and leave the centre by way of the closest, safest exit

\*from inside the Playroom we will get out through the main room and head for the door to the backyard

\*from inside the Playroom when access to door is blocked by smoke and fire we go out by the large windows that are very accessible.

\*the whole house is equipped with emergency doors basically there are 6 entrances.

-Staff will take both the 1st Aid Kit (children's emergency info/consent cards included) and Attendance Sheet with them and close all windows/doors on the way out, while checking behind doors, in bathroom etc for children who may be frightened and hiding.

\*Children physically incapable of walking out will be carried by staff

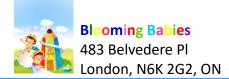
-Children and staff will group at the meeting spot (the front gate).

-911 will then be called and any medical treatment necessary will be administered

\*Specific Emergency Escape Plans are posted in the centre with Floor Plans that detail which exits to use\*

b) Along with our practice drills, we are prepared to be able to care for the children until parents/guardians can arrive and pick them up. We are stocked up on batteries (for the radio and flashlight) and water. We always have a well stocked 1st Aid Kit, along with juice, water and snack food that could be made to last days. We also have off grid power and heat in case of emergency.

c) In such an emergency it is understandable that the children will be upset and want Mom or Dad immediately. To help them get through those tough times a family photo (to be kept at daycare) is a wonderful item for the children to have and hold. We ask that these photos be brought to daycare in the hopes that they never have to be "used".



### 7.5 Health

#### **General Health Rules**

a) We will ensure that a daily written record is maintained that includes a summary of any incident affecting the health, safety or well-being of any child enrolled in our *programs* and that record is kept for at least two years from the date of its making.

b) Before a child is admitted to Blooming Babies Child Care an up to date record of immunization is required. It is the parent responsibility to update the immunization record with us in order to continue child care services. A schedule of immunizations and more information can be found on our website www.bloomingbabies.ca/immune.pdf for quick access or you can contact the local health officer. This measure is necessary to ensure the safety of your child and of the community.

#### Medications

c) All medications are stored in a locked medicine box. Children are not given any medication without the parents written consent. Written consent may only be on a "Permission to administer medications" form, and all medications must be in their original bottles with original labels. We also indicate on the administering form the date, time and dosage of medicine given at each administration, and then initial this information.

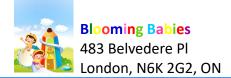
d) For prescription medication, only the directions on the bottle will be accepted for administering the medication. And in all instances we will also need to know when the child received her last dosage of the medication, to ensure medication is given at appropriate times consistently.

e) With any prescription medication, children may not return to care until they've had a full 24 hours of dosage, are no longer contagious **AND** ready to participate in the full child care day, to ensure they are well on the road to recovery.

# 7.6 Allergies

a) At Blooming Babies Child Care we can ensure a safe environment for children with allergies provided the "Allergy Protocol" is signed and up to date. To obtain an "Allergy Protocol" form please visit www.bloomingbabies.ca/allergy.pdf or request a copy at our front desk.

b) If your child is allergic and you did not inform us or did not signed the "Allergy Protocol" under any circumstances and at any time you will NOT press charges against us. Also under any circumstances and at any time you will not press charges against us if your child first allergic reaction debuts on our premises due to a material/equipment used. For any allergic reaction we will follow the Allergy Protocol making sure we are doing all our best for your child well being.



# 7.7 First Aid

a) All staff holds current first aid certificates, and are ready to perform care when necessary. Staff will wear disposable gloves when administering care involving the treatment of wounds and when cleaning up bodily fluids. A complete first aid kit is available at all times, including on field trips etc. The children's emergency info/consent cards are kept in the first aid kit at all times, as well I usually carry our cell phone with us on outings for use in the event of an emergency. In the event a child needs emergency medical attention an ambulance will be called, and then the parents - to allow them to meet the child at the hospital as soon as possible. Any serious incidents will be reported by filing a serious incident report immediately.

### 7.8 Illness Policy

a) In the event a child becomes ill during the course of the day the parents/guardians will be contacted immediately and be required to come pick the child up. If the parents/guardians can't be reached the alternate emergency contact person will be called to come pick up the child. While waiting for an ill child to be picked up, the nap room will be used as a place to rest, as the child can be closely supervised in this area. This also allows the child to be separated from the others to prevent spreading of illness. If the child requires emergency medical attention an ambulance will be called first and then the parents/guardians to notify them of the incident and which hospital to meet the child at.

b) In the event a child arrives at the center in the morning and appears to be too ill to participate in the day, the parents/guardians will be asked to find alternate care for the child. If a child is too ill to participate in the child care day, then that child is too ill to be at the daycare. Our day includes both inside and outside play. We request appropriate clothing be at the daycare to match the weather. This ensures we can have outside play on a daily basis, except in extreme weather conditions of course. Allergy related and common cold symptoms as well as noncommunicable diseases/illnesses do not require that the child be excluded from care.

c) As a participant in our programs you commit to adhere to the following protocol and policies regarding illness:

# 7.9 Common situations

#### a) Diarrhea

1. If a child has one episode of diarrhea, we will separate him/her from the group and watch for

other signs of illness for the remainder of the day.

2. If no more diarrhea occurs, and the child does not appear to be ill, we will inform the parents

at the end of the day.

3. If more diarrhea episodes occur during that day, we will inform the child's parents as soon as



possible. We will tell them to **keep the child home until stools are normal for 24 hours**. We suggest that the parent take the child to their doctor and request a stool culture if diarrhea persists.

4. Frequent diarrhea in a sick looking child with fever, stomach pain or blood in the stool indicates that the child needs immediate medical attention. We will inform the parents immediately, asking them to pick up the child and seek medical advice. We will exclude the child until stools are normal for 24 hours.

5. We will clean up the child's surroundings, including anything that might have been touched by the child's stool, as soon as possible after the diarrhea episode. We will take special care with the diaper change area and with handwashing.

#### b) Vomiting

Children vomit more readily and easily than adults and often with much less discomfort.

Children may vomit as a result of problems not directly related to the bowel or stomach.

The cause may not be infectious.

Young children sometimes vomit because of a fever, especially a high one. If the child also has episodes of diarrhea, you may suspect an infectious cause.

1. When a child vomits, we will separate him/her from the group and watch for other signs of illness.

2. If diarrhea or more vomiting occur, we will inform the child's parents as soon as possible. Parents will keep the child home until he/she has completely recovered.

3. If the child appears to have pain in the abdomen, we will inform the parents immediately. **Parents will pick up the child immediately and seek medical assessment.** 

4. We will clean the area where the child vomited as soon as possible. Wash hands thoroughly.

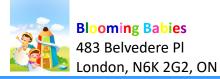
5. After an episode of vomiting, we'll give the child small drinks of diluted fruit juice. We won't offer solid food or milk.

#### c) Fever

Definition: Normal body temperature is around 37°C. A fever is defined as a body temperature of 38°C (100°F) or higher when measured orally, or 38.5°C when taken under the armpit.

In general, the height of the fever has little to do with the seriousness of the illness. How sick a child acts is what matters.

1. When deciding whether to check a child's temperature, caregivers should be guided by signs of unwellness. These signs may include:



- lethargy or irritability
- uninterested in playing
- not eating or drinking as usual
- appears pale
- shows obvious signs of pain or discomfort.

2. We will contact the parents immediately about an unwell child, with or without a fever, and advise the parents to take the child home as soon as possible and seek medical attention as appropriate.

3. Observe the child closely until the parents arrive. While waiting for the parents, we will offer the child extra fluids and remove most clothing to allow the body to cool. Encourage quiet activity.

4. If we are unable to contact the parents, we will attempt to reach the emergency contacts. If we are unable to contact either the parents or the emergency caregiver, we may consider administering acetaminophen (Guidelines for Use of Acetaminophen).

5. We will continue to try and reach the parents or emergency contacts. If we are unable to reach the parents or emergency contacts, and the child appears very ill, we will have the child assessed by a physician as soon as possible.

#### d) MANAGEMENT OF HUMAN BITES AT OUR FACILITY

#### If the skin is not broken:

- clean the wound with soap and water
- apply a cold compress

#### If the skin is broken:

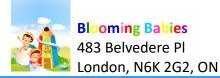
- allow the wound to bleed gently
- carefully clean the wound with soap and water
- advise the parents to observe the wound over the next few days, and if redness or swelling

#### develops to consult a physician

• inform the parents of both the biter and the bitten child that a Health Unit staff member will be contacting them. The staff member will discuss issues such as immunization status of the child, the risks of potential blood borne infections, and may advise testing the child for some blood borne infections.

• We will contact the Middlesex-London Health Unit at 519-663-5317 extension 2330 or after hours at 519-675-7523

• We will supply the following information regarding both the biter and bitten child when we call:



- name of the child and parent
- date of birth
- address
- telephone number
- physician's name and telephone number
- immunization information.

#### e) PEDICULOSIS (HEAD LICE) CONTROL

**Definition:** "Head Lice" is an infestation of the scalp by a tiny parasite. These parasites do not pose a health hazard although they cause uncomfortable itching. They are easily passed from one child to another by direct contact or by contact with personal items.

#### Head lice have nothing to do with the cleanliness of child's home or hair.

If we find evidence of head lice in a child in our childcare we will ask the parents to treat their children before returning them to our facility. We will provide you with information sheets: Illustrated Treatment of Pediculosis and Deinfestation of Personal Articles. This information sheets can be downloaded from our web site at: www.bloomingbabies.ca/lice.pdf Or you can access detailed information under Services tab then click Forms & Information Sheets

Also if parents discover lice at home, please inform us in a timely manner so we can take all the precautions required and apply all our policies.

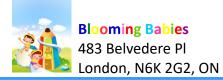
- We are making sure the children are not using each other's comb to brush their hair;
- Hats and sun hats will not be shared as well as any other kind of clothing items;
- We will monitor grouping activities and separately store items such as: towels, bedding, towels, etc
- We will vacuum, clean and disinfect carpets, toys, bedding items, etc

### 7.10 Influenza- like-Illness

a)

Definition for children under 5 years of age: rapid onset of cough with one of the following:

- Sore throat
- Fatigue
- Muscle aches/joint pain
- Fever



- Diarrhea/vomiting
- Headache

What to do:

b) If children have influenza-like illness, they should be sent home. Children can return to the childcare when they no longer have a fever (without the use of acetaminophen or ibuprophen,) feeling better and are able to participate in activities.

c) We will keep an illness tracking list to monitor illnesses in our group. If there are 3 children ill in the centre within a 48 hour period, then the health unit should be notified. Our centre should also report to the health unit an increase in absenteeism due to respiratory illnesses (anything above our norm). We will fax this information to 519-663-8241 with the name of our facility and the number of children ill.

d) Preventing Illness:

Influenza-like illness is spread by droplets. Frequent hand washing is essential to prevent spread of the illness. Ensure all staff and children wash their hands after coughing or sneezing. Cough or sneeze into a tissue or your elbow. Children should also wash hands before eating and after using the washroom.

Provide alcohol based hand sanitizer for all parents and visitors to the centre. These should be placed out of reach children.

e) Environmental cleaning:

Ensure all surfaces are cleaned and disinfected at least daily and when visibly soiled. Special attention should be given to surfaces with frequent hand contact, ie. doorknobs, light switches, computer keyboards and toys. A low level disinfectant will be used.

# 7.11 Our policy regarding different diseases

a) Parents are required to adhere to the following illness policy.

Disease	How it is spread	Symptoms and signs	When it is contagious	Childcare policy	Report to public health?
		Respirato	ory Infectio	ns	
Common Cold	Viral. Spread person- toperson via droplets; indirect spread via contaminated hands, objects, surfaces.	Runny nose, sneezing, sore throat, cough, decreased appetite. Fever with some colds.	1 day before to 5 days after onset.	Do not exclude unless too ill to take part in the activities.	No
Ear Infections (Otitis Media)	Complication of cold.	Earache or irritability, fever and cold symptoms,	Not spread person-toperson.	Do not exclude unless too ill to take part in the activities.	No



		pulling at ears, temporary hearing loss.			
Influenza ("flu") (Croup)	Virus spread through air or indirectly by contact with contaminated hands, objects, surfaces.	Sudden onset of fever, chills, headache, generalized aches and pains, loss of appetite, cough. Weakness and cough can last several days to weeks. Incubation period 1- 3 days.	Before symptoms have developed until 5-7 days after onset of symptoms.	Exclude until well enough to participate. Usually 5-7 days.	Yes
Strep Throat Scarlet Fever	Bacteria ( <i>Group A</i> <i>Streptococcus</i> ). Spread from person-to-person through the air.	Fever, sore throat. Rash on neck, chest, in folds under arm, in elbow, groin, and inner surface of the thighs. Face looks flushed. Rash feels like fine sandpaper and peels skin. Incubation period 1- 3 days.	Until 24 hours after treatment begun. If untreated 10-21 days.	Exclude until 24 hours after start of treatment.	No
Whooping Cough (Pertussis)	Bacteria in respiratory secretions. Spread from person-to-person, through the air. Very infectious.	Begins as cold with profuse runny nose and cough. Cough gets gradually worse and occurs in spasms, often with high pitched "whoop". Face red or purple during coughing spells and child may vomit. Fever uncommon. Incubation period 7- 20 days.	From onset of runny nose until 3 weeks after onset of spasmodic cough with whooping, if not treated with antibiotics. If treated, 5 days after the start of antibiotics.	Exclude until 5 days after start of antibiotics or 3 weeks if no treatment given. Contacts may need antibiotics or vaccine.	Yes. Contacts may need antibiotics or vaccine.



Gastrointestinal Infections					
Disease	How it is spread	Symptoms and signs	When it is contagious	Childcare policy	Report to public health?
Campylobacter	Bacteria excreted in stool. Poultry, beef, unpasteurized milk, or contaminated water may be source of infection. Infected pets may also be a source.	Fever, vomiting, diarrhea, blood in stool, abdominal cramps. Incubation period 1- 10 days	For duration of diarrhea. If untreated, may be as long as 2- 7 weeks.	Exclude until diarrhea is gone and symptom free for 24 hours.	Yes
Cryptosporidiosis	Parasite excreted in stool of infected persons and animals. Spread person-to-person; may also be spread in contaminated food or water.	Watery diarrhea, abdominal cramps and sometimes fever, loss of appetite, nausea and vomiting. Symptoms may last 1-2 weeks or as long as a month. Symptoms can come and go over time. Incubation period 1- 14 days, average 7 days.	From onset of diarrhea until several weeks after symptoms stop.	Exclude until diarrhea is gone and symptom free for 24 hours. Immuno- compromised people are at risk of serious complications.	Yes
Diarrhea (of undetermined cause)	Virus or bacteria excreted in stool of infected persons. Spread directly from person- toperson; indirectly from hands of staff and children, objects, surfaces, contaminated food or water (young children frequently put fingers and objects in mouth).	Increase in frequency of stools and/or change to unformed, loose, or watery stool. Fever, loss of appetite, nausea, vomiting, abdominal pain, mucus or blood in stool may also occur. Diarrhea may be dangerous in infants and young children because the loss of fluid may cause dehydration.	For duration of diarrhea.	Exclude children until diarrhea is gone or physician determines child is not infectious. Notify parents at once if any of the following occur: 2 or more episodes of diarrhea or diarrhea with fever over 39°C (102°F); repeated vomiting; dehydration; blood or mucus in stool.	Report to Health Unit if 2 or more children have diarrhea occurring within 48 hours. Report any case of bloody diarrhea.



Escherichia	Spread through	Mild diarrhea to	For duration of	Exclude until 2	Yes.
coli	food or water	blood in stool,	the diarrhea.	negative stool	Additional
(E. coli	contaminated with	abdominal		samples have been	precautions
0157:H7)	human or animal	cramps,		obtained, at least 24	necessary for
0101111)	feces. Person-	occasionally fever.		hours apart.	foodhandlers,
	toperson	Incubation period		Emphasize proper	childcare and
	spread is	2		handwashing.	health care
	less likely.	to 8 days. Usually		nanuwasining.	providers.
	less likely.	3-4 days.			
Giardia	Parasite in stool of	Most children have	Often months.	Exclude until	Yes
Olardia	infected persons.	no symptoms. May	Oncert montais.	symptom-free for 24	105
	Spread person-	have loss of		hours.	
	toperson. Common	appetite,		Emphasize proper	
	-	vomiting,		handwashing	
	in child care	abdominal		between	
	settings.	cramps,		diaper changes.	
		diarrhea, soft			
		stool,			
		excessive gas,			
		fatigue, weight			
		loss.			
		Incubation period			
		1-			
		4 weeks.			
Hepatitis A	Virus excreted in	Most children have	2 weeks before	Exclude for 1 week	Yes.
	stool of infected	no symptoms. May	to 1 week after	after onset of	Additional
	persons. Spread	have fever, loss of	onset of	jaundice.	precautions
	person-to-person;	appetite, nausea,	jaundice.	Emphasize proper	necessary for
	may also be	vomiting, jaundice		handwashing.	foodhandlers,
	spread in	(yellow colour in			childcare and
	contaminated food	skin and eyes).			health care
	or water.	Incubation period			providers.
		15-50 days.			
Norwalk	Virus excreted in	Nausea, vomiting,	Duration of	Exclude until 48 hours	Yes
Virus	stool of infected	watery diarrhea,	illness. Usually	after diarrhea and	
Norwalk-like	persons and	abdominal	10-72 hours.	vomiting have	
Virus	through the air.	cramps,		stopped.	
	Spread person-	headache,			
	toperson.	lowgrade			
		fever.			
		Incubation period			
		1-			
		2 days.			
Rotavirus	Virus excreted in	Fever and	For duration of	Exclude until 48 hours	Report
	stool of infected	vomiting	diarrhea. Usually	after diarrhea and	outbreaks to
	persons and	precede watery	3-8 days.	vomiting have	Health Unit.
	through the air.	diarrhea.		stopped.	
	Spread person-	Dehydration may		Emphasize proper	
	toperson	occur rapidly.		handwashing.	
		Incubation period		list addining.	
		24-72 hours.			
Salmonella	Acquired mainly	Sudden onset of	While having	Exclude until diarrhea	Yes
- annonona	from food,	headache,	diarrhea. Can be	is gone and symptom	
		neauache,		is yone and symptom	



	oone sielly area	vemiting	anyoral days to	fron for 24 hours	
	especially eggs	vomiting,	several days to	free for 24 hours.	
	and egg products,	fever followed by	several weeks.		
	beef, poultry,	diarrhea,			
	unpasteurized	abdominal			
	milk.	pain and mucous			
		in			
		stool.			
		Incubation period			
		6-			
		72 hours.			
Shigella	Bacteria excreted	Diarrhea, fever,	For duration of	Exclude until diarrhea	Yes.
	in stool of infected	blood and/or	diarrhea. Highly	is gone and symptom	Additional
	persons. Spread	mucus	infectious. If	free for 24 hours.	precautions
	person-to-person;	in stool, abdominal	untreated, may	Emphasize proper	necessary for
	or contaminated	cramps.	be contagious	handwashing.	foodhandlers,
	food, water or milk;	Incubation period	for as long as 4		childcare and
	can be fly borne.	1-	weeks.		health care
		7 days.			providers.
Yersinia	Bacteria excreted	Watery diarrhea,	For duration of	Exclude until diarrhea	Yes.
	in stool of infected	cramps, fever,	diarrhea or other	is gone and symptom	
	persons. Spread	nausea,	symptoms. If	free for 24 hours.	
	person-to-person.	headaches	untreated, 2-3		
	Infected animals	and vomiting.	months.		
	may be a source.	Incubation period			
		3-			
		3- 10 days.			
		10 days.	alp Infecti	ons	
Disaasa		10 days. Skin and Sc	-		Papart to public
Disease		10 days. Skin and Sc Symptoms and	When it is	ONS Childcare policy	Report to public
	How it is spread	10 days. Skin and Sc Symptoms and signs	When it is contagious	Childcare policy	health?
Chickenpox	How it is spread	10 days. Skin and Sc Symptoms and signs Sudden onset of	When it is contagious 1-4 days before	Childcare policy     Exclude until child is	health? Yes.
	How it is spread Virus spread person-to-person	10 days. Skin and Sc Symptoms and signs Sudden onset of mild	When it is contagious 1-4 days before until all lesions	Childcare policy     Exclude until child is well enough to	health? Yes. Vaccine
Chickenpox	How it is spread Virus spread person-to-person and via air. Very	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red	When it is contagious 1-4 days before until all lesions are crusted	Childcare policy Exclude until child is well enough to participate normally in	health? Yes. Vaccine effective in
Chickenpox	How it is spread   Virus spread   person-to-person   and via air. Very   infectious. May	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which	When it is contagious 1-4 days before until all lesions are crusted over (usually 5	Childcare policy Exclude until child is well enough to participate normally in all activities	health? Yes. Vaccine effective in preventing
Chickenpox	How it is spread Virus spread person-to-person and via air. Very infectious. May develop following	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the	health? Yes. Vaccine effective in preventing spread to
Chickenpox	How it is spread Virus spread person-to-person and via air. Very infectious. May develop following contact with	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters,	When it is contagious 1-4 days before until all lesions are crusted over (usually 5	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash).	health? Yes. Vaccine effective in preventing spread to contacts if
Chickenpox	How it is spread Virus spread person-to-person and via air. Very infectious. May develop following contact with person having	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of	health? Yes. Vaccine effective in preventing spread to contacts if used within
Chickenpox	How it is spread Virus spread person-to-person and via air. Very infectious. May develop following contact with person having shingles. Exposure	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days
Chickenpox	How it is spread person-to-person and via air. Very infectious. May develop following contact with person having shingles. Exposure poses a concern to	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands,	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread Virus spread person-to-person and via air. Very infectious. May develop following contact with person having shingles. Exposure	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days
Chickenpox	How it is spread person-to-person and via air. Very infectious. May develop following contact with person having shingles. Exposure poses a concern to	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities.	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility.	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities.	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility.	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14-	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14-	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify pregnant teachers	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14-	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify pregnant teachers and	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14-	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify pregnant teachers and parents who may	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of exposure.
Chickenpox (Varicella)	How it is spread person-to-person and via air. Very infectious. May develop following contact with person having shingles. Exposure poses a concern to susceptible pregnant women.	10 days. Skin and Science Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14- 21 days.	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after onset of rash).	Childcare policy Exclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify pregnant teachers and parents who may have had exposure.	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of
Chickenpox (Varicella)	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible   pregnant women.   Spread person-   Spread person.	10 days. Skin and Sciences Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14- 21 days. Most children have	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after onset of rash).	Childcare policyExclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify pregnant teachers and parents who may have had exposure.Exclude until treated with an appropriate	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of exposure.
Chickenpox (Varicella)	How it is spread   Person-to-person   and via air. Very   infectious. May   develop following   contact with   person having   shingles. Exposure   poses a concern to   susceptible   pregnant women.	10 days. Skin and Sc Symptoms and signs Sudden onset of mild fever. Small red pimples which develop into blisters, then become encrusted. Usually affect face, hands, neck and extremities. Incubation period 14- 21 days. Most children have no symptoms.	When it is contagious 1-4 days before until all lesions are crusted over (usually 5 days after onset of rash).	Childcare policyExclude until child is well enough to participate normally in all activities (regardless of the state of the rash). Notify parents of immunosuppressed children that chickenpox is in the facility. In consultation with public health, notify pregnant teachers and parents who may have had exposure.	health? Yes. Vaccine effective in preventing spread to contacts if used within 3-5 days from time of exposure.



	hats, clothes may	are seen attached		staff for presence of	
	also be involved in	to		lice and nits and	
		hairs near scalp.		exclude accordingly.	
Herpes	spread. Spread person-	Many infections	For several	Exclude accordingly.	N
Simplex				participate.	No
	toperson. Virus in	occur without any	weeks during	1	
(Cold Sores)		symptoms. May	first infection	Avoid direct contact	
	saliva and infected	cause high fever,	and	with lesions or cold	
	sores.	many painful	intermittently	sores.	
		ulcers	thereafter		
		in mouth. May	especially		
		recur	when cold		
		as cold sores.	sores return.		
Impetigo	Bacteria spread	Pustules or	From onset of	Exclude until antibiotic	No
	person-to-person	crusted	rash until 1 day	treatment has been	
	by direct contact.	rash on face or	after start of	taken for 1 full day.	
	Often spread by	exposed parts of	treatment with		
	hands.	body (arms and/or	antibiotics.		
		legs). Incubation			
		period generally 4-			
		10			
		days, but may			
		occur			
		months later.			
Ringworm	Fungus spread by	May cause circular	While lesions	Exclude until seen by	No
	direct or indirect	lesions on skin or	are visible.	family physician and	
	contact with	scalp. Lesions		treatment started.	
	lesions of infected	may		Avoid contact	
	persons or	have slightly		activities until cleared	
	animals.	raised,		by a physician.	
		red edges and			
		may			
		be scaly and itchy.			
		Other types may			
		affect skin			
		between			
		toes ("athlete's			
		foot"),			
		nails, or groin			
		("jock			
		itch").			
		Incubation period			
		4-			
		14 days			
		depending			
		on type.			
Scabies	Mite. Spread	Very itchy rash.	Until mites and	Exclude until 24 hours	No
	person-to-person.	Itching more	eggs are	after treatment first	
	Requires close	intense	destroyed by	applied.	
	direct contact.	at night. Usually	treatment.		
			Usually after 1		
		appears on	-		
		fingers,	or occasionally		
		elbows, armpits	2 courses of		
		and	treat-ment a		



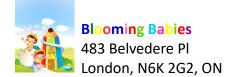
		abdomen.	week apart.		
			меек арап.		
		Incubation period			
		2-6			
		weeks in persons			
		without previous			
		exposure.			
		Other	Infections		
Disease	How it is spread	Symptoms and	When it is	Childcare policy	Report to public
		signs	contagious		health?
Hand/Foot/	Virus spread	Fever, headache,	Most common	Do not exclude unless	No
Mouth	person-to-person	sore throat, lack of	in summer and	too ill to participate.	
Disease	through direct	energy. Small	fall. Can		
(coxsackie	contact with nose	painful ulcers in	continue to		
virus)	and throat	mouth. Rash	transmit virus		
virus)		consists of red	in stools for		
	discharges and				
	feces of infected	spots	weeks.		
	people or indirectly	often topped by	Illness may last		
	via contaminated	small	for 7-10 days.		
	hands, objects and	blisters on hands			
	surfaces.	and			
		feet.			
		Incubation period			
		3-6			
		days.			
Pinkeye	May be bacterial or	Redness, swelling,	For duration of	Exclude if yellowish	No
(conjunctivitis)	viral. Spread	itching, pain,	infection or	discharge present and	
	person-to-person	discharge from	until	then until the	
	by contact with	eye.	24 hours after	antibiotics have been	
	secretions from	After sleep,	treatment	taken or dropped into	
	eye.	discharge forms	started.	eyes for one full day.	
	,	dry,		5	
		yellowish crusts on			
		eyelashes.			
		Incubation period			
		usually 24-72			
		hours.			
Pinworms	Tiny thread-like	Anal itching,	Until	No exclusion. Notify	No
	worms spread	disturbed sleep,	appropriately	parents if you notice a	No
	person-to-person	irritability and	treated.	child scratching the	
	by direct transfer	sometimes		anal area.	
	-	infection			
	of eggs from			Wash hands carefully.	
	rectum to mouth	of the scratched			
	by hand or through	skin.			
	articles				
	contaminated with				
	eggs.				
Fifth Disease	Virus spread from	Mild fever, very	Greatest before	Do not exclude if well	No
	person-to-person	red	onset of rash.	enough to take part in	
	through contact	rash begins on	Probably not	activities.	
	with respiratory	cheeks ("slapped	communicable	In consultation with	
	secretions.	face") followed in 1	after onset of	public health, notify	



	_				1
	Exposure poses a	to	rash.	pregnant teachers	
	concern to	4 days by a lace-		and	
	pregnant women.	like		parents who may	
		rash on the trunk		have had exposure.	
		and			
		extremities which			
		fades but may			
		come			
		and go for 1 to 3			
Lisu stitis D	\/immage for any of ing	weeks.	<b>F</b>	NI	
Hepatitis B	Virus found in	Symptoms may be	From weeks	No exclusion	Yes
	blood, and other	absent or consist	before onset to	required.	
	body fluids. Can	of:	months or	Immediately report	
	be spread by	lack of appetite,	years after	any bites that cause	
	unprotected sex,	nausea, vomiting,	recovery from	bleeding to the Health	
	blood contact, and	tiredness,	illness. May be	Unit.	
	bites, and from	abdominal	infectious for		
	mother to baby at	pain and/or	life (chronic		
	birth.	yellowing	carriers).		
		of the skin.	camoro).		
		Incubation period			
Measles	Virus in respiratory	from 45-160 days. Fever, cough,	3 to 5 days	Exclude until at least	Yes. Speed
		-	before onset of	4	· ·
(Red	secretions. Spread	runny			is essential in
Measles)	from person-	nose, inflamed	rash until 4	days after onset of	limiting
	toperson,	eyes	days after	rash.	outbreaks of
	through	for 1 to 3 days	onset of rash.		measles.
	the air.	before			Vaccine
	Very infectious.	onset of rash.			available for
		Rash			susceptible
		is large red spots			persons.
		which often join			
		together, starts on			
		face and spreads			
		rapidly over body.			
		Illness lasts 5 to			
		10			
		days.			
		Incubation period			
		7-			
NA : '1'		18 days.			
Meningitis	Can be viral or	A severe	Until treated	Remain at home until	Yes. Seek
	bacterial. Spread	headache,	with antibiotics	allowed to return by a	emergency
	from person-	sudden high	(if caused by	physician.	care immediately.
	toperson,	temperature,	bacteria).		Occasionally,
	requiring	vomiting, stiff			day nursery
	close, direct	neck,			contacts may
	contact.	drowsiness,			need antibiotics
		confusion, coma.			or
		May develop a red			rarely,
		pinpoint rash. May			vaccinations.
		be a very serious			
		-			
		infection.			



Mumps	Virus spread from person-to-person when nose and mouth secretions from the ill person enter the nose, mouth or eyes of another person.	Enlargement of salivary glands causing swelling of cheeks and face. May have fever, headache, abdominal pain. Many children have no symptoms. Incubation period is usually 15-18 days.	6-7 days before to 9 days after swelling. Most infectious 2 days before onset of swelling.	Exclude for 9 days or until the swelling is gone.	Yes
Roseola (Sixth Disease) (Human Herpesvirus 6)	Spread is not clearly understood. Common in children 6-24 months of age.	Starts with fever which may be quite high. Rash generally appears once fever has broken and lasts 1-2 days. Incubation period is about 5-15 days.	Not highly infectious. Difficult to diagnose until rash appears.	Do not exclude unless too ill to participate	No
Rubella (German Measles)	Virus spread person- to- person through contact with respiratory secretions. May be direct contact or by droplets. There is risk of severe damage to fetus if a pregnant woman gets rubella during early pregnancy.	Many infected children have no signs of illness or rash. May have mild fever, sore throat, swollen glands. Rash is small red spots which start on scalp and face and spread rapidly over entire body. Incubation period 14- 21 days.	7 days before until at least 4 days after onset of rash.	Exclude for 7 days after onset of rash. In consultation with public health, notify pregnant teachers and parents who may have had exposure. Check immunization records of children and staff for the MMR vaccine or other evidence of immunity and exclude accordingly.	Yes



# 7.12 Reportable Diseases

a) The following diseases has to be reported as per Ontario Regulations 559/91 and amendments under the Health Protection and Promotion Act

Acquired Immunodeficiency Syndrome (AIDS)	Leprosy
Acute Flaccid Paralysis	Leprosy *Listeriosis
Amebiasis	
*Anthrax	Lyme Disease Malaria
*Botulism	*Measles
*Brucellosis	*Meningitis, acute,
Campylobacter enteritis	*i. bacterial
Chancroid	ii. viral
Chickenpox (Varicella)	iii. other
Chlamydia trachomatis infections	*Meningococcal disease, invasive
Cholera	Mumps
Clostridium difficile associated disease (CDAD)	Ophthalmia neonatorum
outbreaks in public hospitals	Paralytic Shellfish Poisoning
Creutzfeldt-Jakob Disease, all types	Paratyphoid Fever
*Cryptosporidiosis	Pertussis (Whooping Cough)
*Cyclosporiasis	*Plague
*Diphtheria	Pneumococcal disease, invasive
*Encephalitis, including,	*Poliomyelitis, acute
*i. Primary, viral	Psittacosis/Ornithosis
ii. Post-infectious	*Q Fever
iii. Vaccine-related	*Rabies
iv. Subacute sclerosing panencephalitis	*Respiratory infection outbreaks in institutions
v. Unspecified	Rubella
*Food poisoning, all causes	Rubella, congenital syndrome
*Gastroenteritis, institutional outbreaks	Salmonellosis
*Giardiasis, except asymptomatic cases	Severe Acute Respiratory Syndrome (SARS)
Gonorrhoea	*Shigellosis
*Group A Streptococcal disease, invasive	*Smallpox
Group B Streptococcal disease, neonatal	Syphilis
*Haemophilus influenzae b disease, invasive	Tetanus
*Hantavirus pulmonary syndrome	Trichinosis
*Hemorrhagic fevers, including,	*Tuberculosis
*i. Ebola virus disease	Tularemia
*ii. Marburg virus disease	*Typhoid Fever
*iii. Other viral causes	Verotoxin-producing E. coli infection indicator
Hepatitis, viral,	conditions, including Haemolytic



*i. Hepatitis A	*Uraemic Syndrome (HUS)
*ii. Hepatitis B	West Nile Virus Illness
*iii. Hepatitis C	Yellow Fever
Influenza	Yersiniosis
*Lassa Fever	
*Legionellosis	

b) NOTE: Diseases marked \* and respiratory infection outbreaks in childcare should be reported immediately to the Medical Officer of Health by telephone. (519) 663-5317 ext. 2330 Other diseases are to be reported by the next working day.

c) Parents are required to inform us of any serious illness or communicable / contagious disease (with their child or within their family) within 24 hours to allow other families within the child care centre and the Health Unit to be alerted.

If we notice you gave a sick child any time released medication just to attend child care and you deliberately misinformed us we will ask you to pick up your child and we may terminate your contract without notice.

# 7.13 Hygiene and Health Promotion

a) Natural hand soap and individual hand towels will be used for hand washing. Children and staff will wash their hands before and after food preparation/eating, before and after diapering, and after toileting, nose wiping/sneezing and outside play. Both hand washing and teeth brushing will be supervised. Toileting will be supervised from outside of the bathroom to give the child privacy and other children will be asked to wait outside of the bathroom. Children will be asked to flush the toilet after each use and then of course to wash their hands.

b) Single use tissues will be available at all times to use for wiping noses etc. These tissues will be disposed of after each use. Children will be encouraged to cough/sneeze into the "inside corner of their elbow" instead of their hands to prevent spread of illnesses by hand.

c) The diapering location is away from food preparation areas. Diapers will be disposed of in a bag lined garbage/ diaper container with a lid. Cloth diaper service is also available for an additional fee. After each diapering the change mat area will be cleaned with an appropriate disinfectant solution (70% alcohol or a 1/99 bleach solution) or children will each have their own diapering pads. Staff will also wash both their hands and the baby's after each diapering.

d) Food preparation areas will be kept clean, dry and separate from playing, toileting and diapering areas. Food preparation will only be done in the kitchen. The refrigerator will be kept between 0 and 4 degrees C, which will be monitored by a thermometer located in the refrigerator at all times. All hand towels, wash clothes and dish towels will be laundered daily. Tables, counter tops etc. will be cleaned after each use with the appropriate solution and disinfected as mentioned in this agreement. Toileting areas will be sanitized daily as well as carpets vacuumed. Shelving, doorknobs, play pen rails etc. will be sanitized with an appropriate bleach/water solution daily, or as needed. All dishes will be washed in a dishwasher or by use of the four step method (wash, rinse, sanitize, air dry). Plastic toys will be washed on a rotating schedule using the same methods, and stuffed toys and dress-up clothes will also be laundered on a schedule.

e) Children will consistently use the same sleep mats, which will be sanitized with an appropriate solution biweekly. Bedding will be laundered every two weeks or as needed.



f) All cleaning supplies, knives, plastic bags and other potentially dangerous products are stored inaccessible to the children.

**7.14 Potty Training** - Potty training shouldn't be rushed; it is important that your child is psychologically and physically ready for training. It is important that you prepare the child during a long weekend or vacation before starting the potty training in our facility. Huggie's Pull Ups (or other brand) must be provided by the parent/guardian during this transition period, no regular style training pants or underwear will be used until your child maintains 2 continuous weeks of bladder/bowel control; of course, if your child regresses after this 2 week period we will assess the next step.

### 7.15 Insurance

Blooming Babies Childcare has insurance maintained in full force and effect that includes but is not limited to:

- Home Childcare
- Liability Conditions

### Summary and disclaimer of the above insurance statement

Our insurance gives you peace of mind and it's a statement of our commitment to you and your children. The Liability Conditions are covering the children in our programs not only while on our premises but anywhere we go included but not limited to field trips, excursions, zoo and tours.

For our "School Bus" services and After School Programs we carry a special auto insurance for paying passengers.

#### Disclaimer

The insurance policy is at our sole discretion and we can make any sorts of changes to it without your written or verbal permission.

We will notify you by means of electronic/written/verbal communication of any major changes in our Insurance policy.

### 8. Snack and Meal Times

a) We will provide the children with a morning and afternoon nutritious snack. Water, veggie juice or milk drinks will also be provided at these snack times.

b) Breakfast/Lunch food and drink is provided by Blooming Babies. We have a meal plan which is updated weekly and posted on the website www.bloomingbabies.ca; please always check our online menu to prevent possible allergies or inconveniences. We serve generous and nutritious meals encouraging children to "try" a wide variety of fruits and veggies. We talk to them and often decide together what is going to be for lunch.



c) Throughout the day water and veggie juice are available for the children as needed. At all times during drinking and eating, children are required to be seated at table and not engaged in any play activity. This is to ensure safety (choking etc...) and to promote appropriate eating/drinking habits. Under no circumstances will young children be allowed to walk around or play with bottles in their mouths. Pacifiers are encouraged for use at nap time only and if your child requires a bottle at nap it will be given to him or her before they get in bed. Under no circumstances will children be allowed to go to sleep with bottles in bed. This is also to ensure safety (choking etc.) and to prevent dental problems.

d) Our childcare is NOT peanut free. We can however ensure optimal worry free conditions for your child if he/she is allergic to a specific material/equipment. We have a specific detailed protocol for children with allergies that both Us and You have to adhere to. This protocol will be provided to you if the "Allergy" option on this agreement is mentioned by including but not limited to you, family members, your child teachers, emergency contacts, health authorities and health practitioners.

### 9. Child Care

Our home childcare accommodates a number of 4 children only.

a) You are paying for a spot in our childcare. You are bounded by all terms and conditions of the present agreement and its annotations (if applicable) regardless of the names of the child(ren) or papers you signed. You are bounded to our Terms and Conditions and all our policies included but not limited from the \*starting date of this agreement until you present us with a written notice of termination of services and all account settlements and closures have been established.

\*The starting date of this agreement is the first day you voluntarily agreed to participate in any of our programs or you made a payment for or you asked us in any form of communication to sign you up for our programs regardless of the names mentioned in written or any other form. All fees and procedures apply.

b) ONE TIME Registration Fee: NOT Negotiable NOT Refundable

(\$10 for Full Time Care& Part Time Care) and (\$2 Walk-In) it's a **one time fee**; non-refundable registration fee must accompany your child's completed registration forms and agreement before your child's first day of care in our centre.

10. Child Care Fees: (2019) Fees are refundable but NOT negotiable

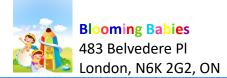
a)

-Infant (1-18 months) \$44/day

\*\*Cloth Diaper service available for an additional \$40 a month

-Toddler (19 - 35 months) \$44/day

-Preschoolers (3 - 5 years) \$44/day



- School aged \$44/day

b) Fees are due by Friday 6:00 p.m. for the following week (one week in advance) also bi-weekly and monthly payments are available all payments are required in advance for the contracted period of time. Fees may also be paid **online, cash, cheque, credit card and debit card, money order, bank transfers or direct debit**. We do NOT accept late payments unless clearly explained and proved that late payment is independent of your will (e.i. employer pays you late, transfers to your account are late or any reason beyond your control). Any fail to pay or explain will result in immediate termination of the contract and reserved spot.

c) Our website is secured and presents valid certificate of security and authentication. Your computer's connection with our server is always encrypted and protected. We will not share your private information and we will not disclose any type of information you have provided us in any form at any time unless we have your written consent or enforced by law or to defend ourselves in a legal action in truth and good faith. All your private medical information is confidential and reserved only for medical authorities for your and your child benefits.

d) All our credit card operations are safe, secure and confidential, endorsed by authorized electronic security certificate, transaction insurance and in compliance with Payment Applications Best Practices guidelines for handling credit card information handed down by the Payment Card Industry (PCI) for software providers.

e) Full fees are due regardless of a child's illness. However you can use your eligible vacation days towards the sick days; in this case all requirements and policies under "Vacation" applies.

f) A receipt for any fees paid will be provided at the time of payment free of charge and at the end of each year for tax purposes. Any other form or receipt or statement requested by you during the fiscal year at any given time for any given reason is subject to a \$10 fee.

g) Blooming Babies Child Care will **NOT** issue under any circumstances Tax Receipts that are split or fractionated or grouped as per your will/ request.

h) Each year you will receive by the end of January a complete Tax Receipt for the previous fiscal year (January  $1^{st}$  – December  $31^{st}$ ) and during the  $1^{st}$  week of April a complete Tax Receipt for the current fiscal year (January  $1^{st}$  – March  $31^{st}$ ). All this receipts mentioned here in Paragraph, are FREE of charge.

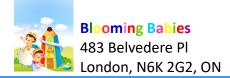
i) Every time you are being audited by the fiscal authorities you will receive from Blooming Babies Childcare a detailed Child Care Tax Receipt for the previous fiscal years, FREE of charge. For your convenience and peace of mind we will keep your records for 6 years.

j) Fees are subject to increase with a minimum of one full calendar month notice.

k) Each year the daycare is closed for all Stat Holidays and for posted staff vacation.

I) We do NOT charge for Statutory Holidays if they fall in your regular scheduled care days. Please note if a Statutory Holiday falls on Sunday but your employer will give you either previous Friday or next Monday as a day off that situation does not apply to your child care schedule.

m) We do NOT charge for 5 business day vacation/year (subject to eligibility after 12 months of care/contract). We will do our best to match our vacation with yours. In case a perfect matching is not possible you responsible for finding child care alternatives.



n) Vacation days are not carried over to the next year if you didn't use them. All vacation days are forfeit if you change the program from full time to part time.

#### o) Part time programs and occasional care are NOT eligible for vacation or sick days.

p) Snow Days and other Special Circumstances – full payment is required if your day is usually scheduled for child care.

q) There is no siblings discount, our childcare is outstanding providing the best quality therefore spots are limited and we don't work by volume.

### 10.1 Other Types of Care:

### Day Camps (2019)

Age: 4-9 years old. All children MUST be potty trained.

Day camps are billed weekly at the price of **\$225/week**.

Additional Fees for 2018 Spring Camps: \$20/Summer/child

Fees are required 30 days in advanced prior your chosen week(s) starts. Refunds are processed in the following manner:

1.1 Canceled more than 30 days before camp starting date: \$150 refunded

1.2 Canceled 29-14 days before camp starting date: \$50 refunded

1.3 Canceled 13-0 days before camp starting date: \$0 refunded

All Terms, Conditions and Policies of present Agreement applies, unless specifically modified within Day Camps paragraphs.

Day Camps are NOT eligible for vacation or sick days.

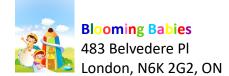
What to bring to camp:

- The most important: Check weather, dress properly, we spent most of our time outdoors.

- A full change of clothes (we can keep this at our facility for the length of the camp) in case they get wet/dirty.

- During Spring camps:

Warm clothes, waterproof boots, snow/splash pants, hat, mitts and scarf. No backpack necessary provided you already sent a full change of clothes. Additional useful items: A beeswax or similar cream for hands and face, chap-stick, pocket size pack of paper tissue is ideal. We will make sure the child is aware and using properly all the items you provided as per your instructions. In certain days we will ask you to send: bike, scooter, skates, sleight or other equipment your child love and is suitable for our scheduled activities. If there are special events that requires and extra fee this will be mentioned in advance in our flyer and you will be aware of it before signing up for camp. Also all extra



fees are mentioned in this Agreement. Toys such as stuffies, nerf guns, water guns, light sabers, cars, super heroes, etc are ALL allowed. Whatever toy your child likes and you agree upon it is allowed and encouraged. We are trying our best to keep an eye and an inventory with everything your child brings but it is not a guarantee the items will not get lost and we CANNOT assume the full responsibility therefore you agree not to have ANY financial compensation.

Spring Camps drop off: at your house between 4:45 pm – 5:00 pm

#### -During Summer camps:

Backpack is a must. We are combining activities at a fast pace so it is mandatory for children to have:

- two pairs of shoes: runners and a pair of socks AND sandals/flip-flops.

- sun hat, we recommend: baseball cap for an easy hike in the woods and the large brim ones for the beach.

- sun glasses
- beach towel
- sunscreen (we recommend the mineral ones, safe for kids and chemical free).

- swimming suit and swimming gear (please also pack a plastic bag for wet stuff). Blooming Babies provides all beach toys, swimming goggles, etc but feel free to send the items your child prefers the most. Provided they all fit in your backpack.

- **one full change of clothes** (if not used, this can stay with us until the end of the camp so the child doesn't have to carry it home every day)

- insulated, leak proof, easy to open by child water bottle (because nobody likes warm water in the Summer and we are only able to carry 2 gallons of ice cold water with us for re-fill, which is enough if we don't have to waste it by replacing the warm water often...). From our experience certain models from Contigo performed the best so far...

- bug spray, lotion or cream
- small pack of wet wipes
- small bottle of sanitizer

Additional items such as bike, scooter, skateboard, safety gear, etc will be requested in our daily basis communication based on scheduled activities and children's wish.

All gear and equipment can be left at our facility during the Summer camps period. We return everything home on a weekly basis.

Addressing behavioral issues: During our first day orientation we will explain the children what the rules are and what we expect from them. Feel free to recap with them at home.

We are striving for a happy, positive and safe environment for everyone!



#### During the camp day:

- always stay with your group
- have a positive attitude
- participate in all activities. It's OK if you are tired, you can rest and set the pace you want... anytime.
- follow the game/activity rules each time
- always help others and stand up for them
- violence is completely discouraged
- we are careful not to hurt anyone's feelings with our words
- wherever you need to go, let the group leader know.
- Never get in the water without a safety vest

- do not pick your ride-on without asking for permission, we want to make sure you are wearing all your safety gear and it's OK to perform the activity...

- help with anything you can and be polite

#### During car rides:

- set your backpack and all your stuff in the trunk

- you can chose only one toy that doesn't come apart, opens or makes loud noises to have with you in the car
- no food, drinks, sharp objects, musical objects or writing instruments are allowed in the car
- please only use the seat you have been assigned

- do not poke, pinch, hit or have physical contact with the person beside you during car rides. Basically "hands off" policy.

- always keep your feet and hands inside your sitting area. Do not extend your legs to hit the person beside you or to kick the chair in front of you.

- Do not make loud noises or yell during car rides
- Fighting with others in the car is a big NO NO



- Do not touch any buttons or levers in the car, ask permission if you want to change your area's air conditioning/ heat temperature or open the window. Also ask permission if you want your chair adjusted in a certain way. We are happy to help with anything you want, but remember: please and thank you...

- If you are uncertain of something you want to do in the car, the best thing is: **ask** 

If any of this rules are not followed, we remind the child about the importance of safety. If more serious behavioral issues arise we will stop the car and ask for a quiet time for things to calm down. If serious violent issues arise that may endanger the safety and wellbeing of others and the driver, we will stop the car and separate the child from the others, we will contact the parents and if the occurrence repeats for a second time the child will be removed from the program.

If a child is not respecting the rules and after a few times of being reminded he/she is causing damage to the car or other's property the parent is financially responsible for paying the damages in full.

Summer Camps drop off: at your house between 4:45 pm – 5:00 pm. Any late occurrences will be announced via messages or call.

### Part-time Care

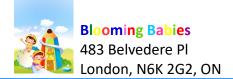
a) The following policy applies. For children attending daycare on a part- time basis child care fees are **\$45/day**. Part time schedules are contracted for specific days only. This schedule is to clearly dictate which days of the week the child will and will not be attending daycare. If you need care on a non-contracted day, it will be available on a "space available" basis at an additional daily charge, with charges due on that day. The schedule will not be open to modification (or termination) without a minimum of 30 calendar days notice. Such notice is due on the 1st day of a month to ensure that the entire following month is available to prepare for the upcoming change.

b) All policies regarding fees and termination of full-time care also apply with part-time care. We reserve the right to terminate a part-time care contract with a minimum of one full months notice if the opportunity arises to fill the spot with a full-time care contract.

c) Part time programs and occasional care are NOT eligible for vacation or sick days.

### **10.2 After Hours Care**

a) We are honored to provide you with after hours care. It is our pleasure to understand your pace and life style and do our best to accommodate to your needs. You can apply for Full Time Afternoon Care under same Terms and Conditions as Day Time Care (same rates and policy). Also you can apply for Part Time Afternoon Care under same Terms and Conditions as Part Time Day (rates and policy)



# 10.3 Walk-In Care

a) When space allows we do provide Walk-in care. Walk-in care fees: **\$9.5**/hour Monday-Friday and **\$14.25**/hour on Saturday and Statutory holidays or if needed for more than 4 hours the rate will be \$44 regardless number of hours if not exceeding 8 hours of continuous care. Fees and proper paper work are due on that day before dropping off. All other policies apply to this type of care as well except Withdrawal Terms and Conditions. You can withdraw your child at anytime.

# **10.4 After School**

Age: 4-9 years old. All children MUST be potty trained.

a) You can sign up for After School Care and that is \$16.60 and includes safe transportation from school, nutritious afternoon snack, play time and activities. You can opt out for us to drop off your child(ren) at your house directly.

b) After School Programs are bounded to all Terms and Conditions of the present Agreement including Withdrawal Policy.

c) After School Programs are offered upon availability.

d) After School Program is offered on a Full Time basis (5 days/week), Part Time basis (2-4 days/week) and Occasional (not more than once a month). For Full Time and Part Time payments are required to hold your spot and are due a week in advance. Full Time and Part Time spots are not eligible for vacation and sick days. There is no payment required during school vacations, PD days and Statutory Holidays.

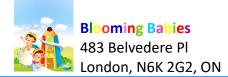
# 11. Communication

a) If you need to contact us during the daycare day please feel free to phone/e-mail/online forms at www.bloomingbabies.ca. If you get our voice mail please do leave a message in the daycare mailbox, as often we are out or busy with the children and unable to get to the phone at that moment. We do check messages and return phone calls as soon as we get the chance. In an emergency please call our regular phone number first and then our mobile phone number. Please note the mobile emergency number is reserved ONLY for emergencies and you are not to call this number for regular inquiries.

b) If you call outside of daycare hours please leave a detailed message. We don't usually return calls until 5 a.m. next daycare day.

# 12. Pick-up and Drop-off of the Child

a) Children will only be released to their parents/guardians or persons authorized by a parent/guardian to pickup the child. All persons authorized to pick up the child must be at least sixteen (16) years old. Identification will be required for persons picking up that the caregiver has not met before, for safety/security reasons. A "password" system can also be used. If there is a custody order or other such court order that prohibits any parent/person from contacting/ picking up the child a copy of this order MUST be kept at the daycare for "enforceability". In the event that an unauthorized person arrives to pick up the child, the child will not be released and the parent will be notified immediately.



b) Children will not be released to any person that appears to be under the influence of drugs or alcohol or otherwise appears incapable of providing safe care of the child for safety/security reasons. Instead another authorized contact person from the child's registration form will be contacted to come get the child and individual. In the event that there is no one available to come get the child, the Ministry for Children and Families and/or the Police will be contacted for further instruction. Such steps will also be taken in the event that a child is not picked up from child care at the end of the shift as stipulated in the contract, and all attempts to contact all other authorized contact persons has been made.

c) Parents must walk their children into the house, please do not send them to run in on their own. Please make sure the child care provider is aware they are here before you leave.

d) Children dropped off early (before 6:00am) or not picked up by (5:30pm) results in a late fee of \$5 each 5 minutes early or late or portion there of. Do not arrive early or late without prior approval except in extreme emergencies.

e) If you plan to arrive outside of your typical daycare hours (yet still within hours of operation) please advise us of this.

f) In the afternoon we will often stay at out to play when we pick up the older children. Please let us know if you are early or any changes came up. In the event you will pick up your child from school early please let us know so we don't waste time and money with a trip.

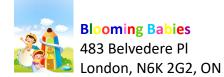
g) Our typical nap time is from 1:00 pm-3:00 pm. **Children may not be dropped off between 12:30 pm and 3:00 pm** as it is very disruptive to have children arriving during nap time (for both the children here and the child who has to arrive to either immediately go down for a nap, or then is required to be quiet while the younger ones sleep). If you are picking your child up between these times please do so quickly and quietly. Our walls are not very "sound proof" and so everyone needs to be quiet at nap time to allow the others to sleep. If you can let me know when you will be arriving at nap time to pick up your child I can wake them a minute or two early and get them ready for you, as this is usually the least disruptive way. Thank you, we all appreciate your understanding.

**Important**: It is normal for some children to have difficulty separating from parents, or cry when being dropped off. Please be very brief (no more than 5 minutes) during drop-off times; the longer you prolong the departure the harder it gets. A smile, cheerful good-bye kiss, and a reassuring word that you will be back are all that is needed. In my experience, children are nearly always quick to get involved in play or activities as soon as parents are gone. Please be assured that if your child is having a difficult time settling down and is crying for a prolonged period of time, I will contact you.

Please be very brief at pick-up times also. This is a time of testing when two different authority figures are present (the parent and the provider), and all the children will test to see if the rules still apply. Some children have a rough time with these transition periods. Please help show your child that you respect us, the rules of our child care, and our property by reminding them that the rules still apply when you are around. When you are here with your child, you are expected to discipline your child when their behavior warrants it. Often, the best way to solve behavioral issues at pick-up times is to call us 5 minutes prior your arrival so we can prepare your child and be ready to go. This method was studied and has the best results in correcting the so known "pick-up behavior".

# Withdrawal Of Services Policy

A MINIMUM 30 CALENDAR DAYS WRITTEN NOTICE is required for termination of childcare services. This NOTICE IS DUE BY THE LAST DAY OF A MONTH (ex. if terminating care for May 31st - notice must be given by April 30th or if



Termination Notice is given May 10th the 30 days are counted starting of June 1st and you are still responsible for paying the reminder of May and June). This ensures that the entire following month is available to prepare for the upcoming change and allows opportunity to attempt to acquire a new care contract, as it is necessary to maintain consistent finances to run child care. Child care services will not be terminated in the middle of a month. These fees are also due by the first day of the month. Any fees not paid on time with regards to termination of child care services will also be subject to daily late fees (2% per business day), until full payment is received. This is a non-negotiable policy. Subject to collections and reporting to the Credit Bureau.

In the event of any concerns (raised by staff, parents/guardians or even children) a meeting can be scheduled to address the issues. The meeting will involve staff and the parents/guardians involved. The concerns will be clearly stated (ex. late payment, failure to adhere to centre policies, behavioral problems etc.) and discussed. Solutions will be sought in a non-judgmental manner. A plan will be designed to resolve the issue. A second meeting will be scheduled to review the situation within a reasonable time frame. In the event the issue cannot be resolved to everyone's satisfaction, a 1 month written notice of termination of services will be given. This notice will also be given by the last day of a month

# **Custody/Guardianship Issues**

We aware that many children have parents that do not live together. In such situations we do our best to work in cooperation with and communicate with both parents about their child(ren)'s development and daycare news. When we prepare newsletters we will make a copy for each parent also they are available online at www.bloomingbabies.ca . Good communication between both parents and the daycare is in the child(ren)'s best interests. We encourage parents to supply us with copies of agreements or court orders that address matters pertaining to their children, especially if there is any level of conflict between the parents or minimal good communication between the parents.

In situations where both parents share custody and guardianship of the child(ren) we can work freely with both parents, sharing information and releasing the children to both parents. We cannot release the child(ren) to one parent if it is not that parent's time with the child(ren) as per an agreement or court order, unless the other parent consents.

In the event parents do not share custody, but do share guardianship we are free to communicate with the noncustodial parent as stated above. In the event parents do not share custody or guardianship, then we must follow the instructions of the child's sole guardian regarding communication with the other parent. We require a copy of the custody and guardianship agreement/court order and any instructions from the guardian in writing for the child's file. In most cases it is in the child's best interests for us to be communicating with both parents.

Also, in the event parents do not share custody of the child(ren) then we must follow the instruction of the custodial parent regarding the other parent calling or visiting the child(ren) while in our care (regardless of shared guardianship or not). Again we will need a copy of the custody agreement/court order and any instructions from the custodial parent in writing for the child(ren)'s file. In cases where such contact is permissible, we assure parents that we cannot and will not allow the non-custodial parent to remove the child from our care unless pre-approved by the custodial parent or unless court ordered (such as court ordered access time).



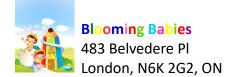
# Signature

You (the undersigned) have read the Blooming Babies Child Care Agreement and understand all the information, policies and procedures outlined above;

By signing this agreement you consent to all the policies and procedures of Blooming Babies Child Care and agree to them, including participation in daily outings, reading the daily report, consulting the menu, providing in a timely manner items requested by us in the daily report as described in the agreement. By signing this agreement you acknowledge that the information supplied in ALL forms regarding your child(ren) and the information supplied below is true and accurate to the best of your knowledge. You agree to be held responsible in conformity with all the rules and policies of Blooming Babies Child Care agreement for each child(ren) you have in our care included but not limited to those you mentioned in this agreement; for any child, children, beneficiary, beneficiaries, younger sibling that you the parent(s)/legal guardian(s), in any form including but not limited to written, e-mail, verbal, transfer of responsibilities, at any time and any place **asked us** to provide full time or/and par time child care services for.

By signing this agreement you also consent to pictures and movies being taken of your child(ren) for the center photo album/web site.

This Agreem	nent includes additior	nal children: Ye	s No		
Child's First Name:	hild's First Name: Child's		child's Last Name:		
Child Care Services S	Starting Date:	Ext	ended Hours: Yes	No	
Type of Services Rec	quired:		Address:		
City:	Province:	Phone: _			
Mother			Father		
First Name:	Last Name:		First Name:	Last Name:	
Phone:	Email:		Phone:	Email:	
Work place:	_ Phone:		Work place:	Phone:	
Emergency co	ontacts				
Name	Phone _		Relation t	o child	
Name	Phone _		Relation t	o child	
Name	Phone _		Relation t	o child	
Name	Phone		Relation t	o child	



# **Health Information**

Immunization information: Do you have all vaccines up to date?

Please provide us with a copy of your child's immunization Record (This information is very useful when we communicate with the hospitals and the Health Unit in case of an emergency).

Child's Health Card Nr.:	Family Dr. Name:
Family Dr. Phone: Ext:	Fax:
Allergies	
Is your child allergic? Yes No	
Food/Drug Allergy:	
Special instructions for allergic reactions:	
Please check communicable diseases your child has	had:
ChickenpoxMeaslesGermanMeasles	Mumps Whooping cough Other
Please check ailments your child is prone to:	
Stomach upsets Colds Ear infections S	Soar throat Headache Other
Habits and Routines	
Uses utensilSipper cupRegular cupH	ligh chairTableBottleOther
Food your child really dislikes:	
Favorite food:	
Resting/napping habits:	
Potty trained: Yes No	
Custody: Both Parents Mother Father	Other:
Legal guardian pick-up:	

Special custody orders according to the Court:\_\_\_\_\_



List the individuals allowed to pick-up your child:

Name	Driving license/ ID
Name	Driving license/ ID
Name	Driving license/ ID
Name	Driving license/ ID

Parent/Guardian	Blooming Babies Child Care
Print Name	Print Name
Signature	Signature
Date:// (YYYY, MM, DD)	Date:// (YYYY, MM, DD)
Parent/Guardian	
Print Name	

Signature\_\_\_\_\_

Date: \_\_\_\_/\_\_\_ (YYYY, MM, DD)