

ADMINISTRATIVE POLICIES AND PROCEDURES

Child Discipline Policy

Our goal:

To provide a safe and healthy learning environment in which each child can feel secure.

To help children develop self-control, to recognize what is an acceptable and appropriate behaviour in a specific situation, to learn to express feelings appropriately and to be aware of other's people's feelings so they can negotiate their own conflicts and be responsible for their own behaviour.

Our philosophy:

To work in a positive way encouraging appropriate behaviour in every child care setting.

Each child will be encouraged and supported to develop positive relationships and social skills. Our primary form of discipline is "redirection". Any child disciplinary action taken must be reasonable in the circumstances.

If a situation arises where a child's behaviour is inappropriate, staff will help the child understand and deal with his/her feelings, taking into account the situation and reasons for misbehaviour, and will help the child communicate his feelings as needed.

Teachers will also speak to the child encouraging positive behaviour and will ask the child to think about the reasons why the behaviour is not appropriate and how to remedy the situation. The teacher will also remind him/her of classroom rules and the reason why those are important giving the opportunity to correct the behaviour.

If the child continues to misbehave he/she will be gently redirected into another activity.

Children are gently guided through their conflicts alongside a staff member and redirected as needed.

Classroom rules will be discussed with the children, who will be involved in the process of choosing our classroom rules. One of the aspects of the curriculum will be the subject of 'rules'. We will sing songs and act out the desirable behaviour frequently to make it second nature for the children.

It is important to respect children's feelings and to be sensitive to their emotional states. Some children may misbehave due to illness, being overtired, or large changes or events in their lives. We as child care givers would like to be aware of any events or problems that may affect your child's life in order to better understand them and determine the best way to help.

If Seedlings staff considers that an action plan for both home and school is needed in order to help the child to deal with a specific situation, this will be communicated.

If a child chronically exhibits constant unsafe or disruptive misbehaviour, even after a plan has been in place at home and school requiring greater care than the preschool can provide, or if the caregiver is not willing to

cooperate in resolving the problem, the child's enrolment at Seedlings is subject to termination.

Staff will make all reasonable attempts to work both with the child and the family and will keep the family informed of the progress of the child at school.

Staff members are responsible of keeping a record of student's unacceptable behaviours for discussion and resolution with caregivers.

Unacceptable behaviour includes: any kind of physical or verbal aggression towards him/her self, others or objects (pushing, grabbing, biting, kicking, hitting, yelling, exhibiting threatening attitudes, etc).

Staff members must not, with respect to a child in the program,

1. inflict or cause to be inflicted any form of physical punishment, verbal or physical degradation or emotional deprivation.
2. deny or threaten to deny any basic necessity, or
3. use or permit the use of any form of physical restraint, confinement or isolation.

The primary staff members have read and understand our discipline policy. The staff holds a minimum level 1 Childcare Orientation, where they learn important strategies for directing children's behaviour.

Off-site Activity and Emergency Evacuation

1. Children will be able to attend any off-site activity off the program premises only where
 - a. the child's parent has been advised of the activity, including the transportation and supervision arrangements with respect to the activity, and

- b. the child's parent has consented in writing to the child's participation in the activity
2. In case of an activity off the program premises or an emergency evacuation the licence holder or other care provider will take the portable record in respect of each child to be taken off the program premises.

The portable record of emergency information must include the following:

1. in respect of each child, the following information:
 - a. Child's name, date of birth and home address,
 - b. The name, address and telephone number of a person who can be contacted in case of an emergency,
 - c. Any other relevant health information about the child provided by the child's parent, including the child's immunizations and allergies, if any.
2. The telephone numbers of the local emergency response service and poison control centre. (Including: emergency medical service, ambulance service, fire department, police service, poison control centre, nearest hospital or emergency medical facility and child abuse hotline)

The Preschool teacher is responsible to ensure that the emergency telephone numbers are posted in the classroom and readily accessible at all times.

Emergency telephone numbers include: emergency medical service, ambulance service, fire department, poison control centre, nearest hospital or emergency medical facility, child abuse hotline and police service.

Evacuation procedures will be explained to all staff prior to commencing classes and to children where developmentally appropriate.

Accident or Illness

In the case of an accident or serious illness involving a child:

- a. the child's parent must be notified, and
- b. the child should immediately receive medical attention if necessary

The staff will phone the child's parents, if it is not possible to reach the parents by phone a message will be left and the emergency contact should be notified. If the child's parents are not reached by phone, an e-mail will be sent as soon as it is possible.

If the license holder is not in the premises, it is the Preschool teacher responsibility to notify the license holder as soon as possible regarding the accident or illness involving a child or staff.

Potential Health Risk

If a license holder or other care provider knows or has a reason to believe that a child may be suffering from a disease listed in Schedule 1 to the Communicable Diseases Regulation (AR 238/85), the license holder must ensure that the child's parent removes the child from the program premises forthwith.

Attached is a copy of the list in Schedule 1 – Communicable Diseases Regulation.

The following are symptoms that are grounds for excluding a child from the program: vomiting, fever, diarrhea, unexpected rash or cough or any other illness or symptom that leads one to believe that a child poses a health risk to other persons.

Staff with first aid will assess if a child is ill by observation of any of the symptoms listed above or observation of unusual behaviour such as tiredness, signs of headache, abdominal cramps, sore throat, not eating, by talking to the child and asking how is he/she feeling, observation of any rash, runny nose or cough and by taking the temperature of the child using thermometer under child's arm.

If a staff member know or have reason to believe that a child is exhibiting the signs or symptoms of illness she must ensure that the child's parent arrange for the immediate removal of the child from the program premises.

The child may return to the program if the child is symptom free for at least 24 hours or a parent has a physician's note stating that the child does not pose a risk to other people.

The primary staff is responsible to record and document children who are ill including the name of the child, date the child was observed to be ill, name of staff member who identified the child was ill, time the parents was initially contacted, name of staff person who contacted the parent, time the child was removed from the program and the date the child returned to the program. The staff is also responsible to fill in the Caregivers Report on Illness Form.

In the case that it is not possible to reach the child's parents by phone, a message will be left and the emergency contact will be notified in order to pick up the child. Parents will be informed by e-mail as soon as it is possible.

Prior to starting classes parents will be sent by e-mail the program's Management of children who are ill.

Supervised Care for Sick Children

Staff must ensure that a sick child is kept as far away as is practicable from the other children.

A sick child should be supervised at all times while in the premises by a primary staff member.

Staff should monitor child's temperature and symptoms.

Supervision Policy and Practices

Primary staff will observe children's play and behaviour at all times indoors and outdoors ensuring that they are safe and that is appropriate. Staff will encourage good behaviour and correct inappropriate behaviour accordingly with discipline policy.

Primary staff will always check the indoor and outdoor physical environment prior to starting and during the program to ensure a safe environment.

In the classroom they will make sure that the building is in appropriate conditions and that there are no hazardous objects within child reach and that indoor furnishing, equipment and materials are safe and appropriate for the children's needs.

Prior to outdoor activities the primary staff will do a quick check of the environment making sure that the play structures are safe and that there are no hazardous objects such as glass, tin cans, ... in the playground

The primary staff will never leave unattended children while they are both on and off program premises.

All children should be within eyesight when they are in the program premises. The layout in the classroom should always allow effective supervision.

When being off program premises the teacher will always have a list of the children that are in the program. Depending on how many children are in the program at that moment, the children would be divided in groups so each staff will be responsible of a small group. Each staff member will have a list of their group and all children should be within eye reach.

If children enter or leave a vehicle one of the primary staff will check the list of children making sure that all children get in the vehicle or out of the vehicle. Another primary staff will make sure that it is safe for the kids to move from a safe place to get in the vehicle and also getting from the vehicle to a safe place.

Primary staff should supervise the children in order to support and nurture children's emotional, physical, intellectual, social and creative needs by making sure that their environment is safe, that good behaviour is promoted, that appropriate and safe educational, art and play materials are available and appropriately used.

Parents will be sent by e-mail a copy of the Supervision Policies and Practices before starting the program.

Public Health Act

Schedule 1

(Notifiable Communicable Diseases)

(Section 6(1) of this Regulation;
Sections 20(1) and 22(1) of the Act)

Acquired Immunodeficiency Syndrome (AIDS)
Amebiasis
Anthrax
Arboviral Infections (including Dengue)
Botulism
Brucellosis

Campylobacter
Cerebrospinal fluid isolates
Chickenpox
Cholera
Congenital Infections (includes Cytomegalovirus, Hepatitis B, Herpes Simplex, Rubella, Toxoplasmosis, Varicella-zoster)
Dengue
Diphtheria
Encephalitis, specified or unspecified
Enteric Pathogens. See note below
Foodborne Illness. See note below
Gastroenteritis, epidemic. See note below
Giardiasis
Haemophilus Influenzae Infections (invasive)
Hemolytic Uremic Syndrome
Hepatitis A, B, Non-A, Non-B
Human Immunodeficiency Virus (HIV) Infections
Kawasaki Disease
Lassa Fever
Legionella Infections
Leprosy
Leptospirosis
Listeriosis
Malaria
Measles
Meningitis (all causes)
Meningococcal Infections
Mumps
Neonatal Herpes
Nosocomial Infections
Ophthalmia Neonatorum (all causes)
Pandemic Influenza
Paratyphoid
Pertussis
Plague
Poliomyelitis
Psittacosis
Q-fever
Rabies
Reye Syndrome
Rickettsial Infections
Rocky Mountain Spotted Fever
Rubella (including Congenital Rubella)
Rubeola
Salmonella Infections
Severe Acute Respiratory Syndrome (SARS)
Shigella Infections
Smallpox
Stool Pathogens, all types. See note below
Tetanus
Toxic Shock Syndrome
Trichinosis
Tuberculosis
Tularemia
Typhoid
Typhus

Varicella

Viral Hemorrhagic Fevers (including Marburg, Ebola, Lassa, Argentinian, African Hemorrhagic Fevers)

Waterborne Illness (all causes) See note below

West Nile Infection

Yellow Fever

NOTE: Enteric Pathogens, Foodborne Illness, Gastroenteritis, epidemic and Waterborne Illness include the following and any other identified or unidentified cause: Aeromonas; Bacillus cereus; Campylobacter; Clostridium botulinum and perfringens; E. Coli (enteropathogenic serotypes); Salmonella; Shigella; Staphylococcus; Viruses such as Norwalk and Rotavirus; Yersinia.

