Family Space Quinte Inc.

Licensed Home Child Care Program

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July 30, 2026

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Licensed Home Child Care Program

Section:	**INTRODUCTION & PHILOSOPHY**	**Policy Number:**	**Section A**
Policy:	**Overview**	**Date Approved:**	**September 24 2003**
		Date Reviewed:	**March 24, 2026**

In 1984, Family Space Quinte Inc. was incorporated as a non-profit child care resource centre. One year later the Home Child Care Program was established. Over the years the Resource Centre Programs developed and expanded. The Resource Consultant Programs in Hastings County were consolidated, and Family Space Quinte Inc. became the sponsor agency in 1998. In 2025 the Resource Consultant Program became know as Special Needs Resourcing in a transformation of the program. At this time the title Resource Consultant was changed to Inclusion Coach.

In 2002, Family Space Quinte Inc. was designated as the lead agency for the Ontario Early Years Centre in South Hastings and Prince Edward Counties. The official opening of the Ontario Early Years Centre was in April 2002, the OEYC then became an EarlyON Centre in 2018. Family Space Quinte Inc. promotes and provides for inclusive environments in all the programs which include Licensed Home Child Care, Ontario Early Years Centre, and Special Needs Resourcing.

Licensed Home Child Care

Family Space Quinte Inc. established the Licensed Home Child Care Program in 1985. This program provides licensed child care in a Provider's home for children birth to twelve (12) years. The Licensed Home Child Care program operates within the legislative framework of the Child Care and Early Years Act, 2014 and County of Hastings Purchase of Service Agreement.

Providers, residents in the home over the age of 18 yrs, volunteers and alternate providers, regular visitors are required to review and sign off annually on Family Space's licensed home child care Program Statement. In some circumstances, Family Space may approve some individuals to only sign off on the Program Statement.

PROGRAM STATEMENT

Family Space's licensed home child care program believes that all children are capable and competent. We believe that children's skill development, confidence and self-esteem are fostered by environments rich in early learning resources and programming.

Our home child care agency offers an inclusive, child-centered program that celebrates diversity and fosters a sense of belonging for every child. We prioritize nurturing individual strengths and creating a supportive environment where all children can thrive and grow together.

We support the four foundations of *How Does Learning Happen? Ontario's Pedagogy for the Early Years*, Belonging, Engagement, Well-Being and Expression. We include this philosophy into every aspect of our program. Whether through nurturing relationships, fostering curiosity, supporting emotional and physical health, or encouraging each child's voice. We strive to ensure every moment is a meaningful opportunity for learning and growth.

Children are engaged in play-based learning that uses play as the primary method to explore, learn, and make sense of the world around them. Providers encourage children's developing sense of wonder by creating an environment that encourages exploration, curiosity, and discovery. Open ended play, providing toys and materials like blocks, water, sand, art supplies that can be used in multiple ways, spark imagination and experimentation.

Providers and Home Visitors encourage open, communication with children and families. Parents are supported with ongoing guidance through their search for child care and the registration process. Family Space reaches out to new families shortly after they begin care, and connects through quarterly newsletters, shares observations of quarterly home visits, inform of policy changes and provincial child care updates. Family Space welcomes connections from families whenever they have questions or concerns and can act as a liaison with parents and Providers.

Providers and families are encouraged to share children's experiences, social and emotional well-being, routines, developmental milestones, family values, culture and traditions. Daily communication between Providers and families offers peace of mind, stronger trust, and insight into development and consistency between home and child care.

This communication is one way to offer a sense of belonging to children and families. Providers create a warm, inclusive environment where each child feels seen, and respected. Consistent routines and personalized care help children feel safe, valued, and part of a close-knit community.

Providers offer environments that support the healthy development of children's emotional and physical well-being. Nutritious meals and snacks are offered daily, rest time that meets the individual needs of the children, outside programming that includes opportunities for gross motor development, fresh air, exploration of nature, and development of social skills. Manageable risks in outdoor play are those that offer children valuable leaning experiences while being reasonably controlled by supervision and safe environments. Manageable risks may include climbing, balancing, running on uneven surfaces, using tools under supervision, playing in puddles, tumbling, swinging, and sliding.

Providers receive informal training and resources on supporting children's co-regulation and self-regulation. Practices such as offering positive reinforcement, acknowledging children's emotions, encouraging communication and responsive caregiving are essential. Positive tones and positive guidance strategies help children develop their own self-regulation.

Practices including harsh tones, time out, spanking, degrading a child, withholding basic needs or confinement are strictly prohibited.

Family Space encourages ongoing professional learning for Providers and Home Visitors. The agency, in partnership with Hastings County Children's Services and the Home Child Care Association of Ontario offers frequent learning opportunities through virtual and in person workshops and meetings, conferences, written materials, and peer networking. Providers are invited to attend monthly Community of Practice meetings where they share knowledge, experiences and best practices. These gatherings foster professional growth, reduce isolation, and help Providers stay current with early childhood education standards. By collaborating regularly, home child care providers build a supportive network that enhances the quality of care and learning for the children they serve.

Home Visitors play a key role in monitoring and supporting the quality of care offered by Providers. Home Visitors conduct unscheduled and scheduled visits to ensure the home environment complies with licensing regulations, ratios are being followed, monitor the use of approved equipment, and observe children's interactions and engagement. Home Visitors offer support and coaching for providers on programming, child guidance, health and nutrition, give feedback on strengths and areas for improvement, and share updates from the agency or any regulatory changes.

By upholding high standards of care, professionalism, and continuous improvement, we strive to create a warm, home-like atmosphere where children feel valued, supported, and empowered to explore, grow, and reach their full potential.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**INTRODUCTION & PHILOSOPHY**	**Policy Number:**	**Section A**
Policy:	**Diversity, Equity, Inclusion**	**Date Approved:**	**September 24 2003**
		Date Reviewed:	**June 11, 2025**

DIVERSITY EQUITY INCLUSION-

"***Diversity*** focuses on representation and who is present. It is relational and shows up in groups. People alone aren't diverse: the communities they belong to are.

Inclusion addresses the quality of the experience that people in a group have. It is the degree to which someone can fully benefit from and participate in what the group is offering.

Equity acknowledges that different people have had different experiences and have different needs. Equity seeks to even the playing field and disrupts the idea that fairness means equal." P. 28. Coughlin & Baird (2022)

Family Space Organizational Commitment statement

Family Space is committed to a diverse equitable environment where all feel respected and valued. The dimensions of diversity include but are not limited to ancestry, culture, ethnicity, gender, gender identity, language, physical & intellectual ability, race, religion, sex, sexual orientation, and socio-economic status.

We're committed to being non-discriminatory and providing equal opportunities for employment, volunteering, and advancement in all areas of our work.

We respect the value that diverse life experiences bring to our organization through governance, leadership and education and we strive to listen to their views and give them value.

We're committed to modelling diversity, inclusion, and equity and maintaining fair and equal treatment for all.

OUR "WHY" STATEMENT – our statement that expresses our program's distinctive contribution and impact.

"To support, educate, and inspire Providers to offer safe, quality child care for families."

Section:	**INTRODUCTION & PHILOSOPHY**	**Policy Number:**	**Section B**
Policy:	**Terms and Definitions**	**Date Approved:**	**September 24 2003**
		Date Reviewed:	**September 9, 2024**

FAMILY SPACE QUINTE INC.: PROGRAMS

FAMILY SPACE QUINTE INC.

Licensed Home Child Care | Special Needs Resourcing | EarlyON Centre

Family Space Quinte Inc. provides the above programs for children, families, Providers and community child care programs.

LICENSED HOME CHILD CARE PROGRAM

The Licensed Home Child Care Program is licensed for up to 52 homes. Providers registered with Family Space Licensed Home Child Care Program provide care for children in their homes. The Home Visitors are responsible for the selection, ongoing support, inspection and monitoring of each of the homes to ensure compliance with the Child Care and Early Years Act, County of Hastings Purchase of Services Agreement, applicable bylaws, Fire Department and Hastings and Prince Edward County Health Unit. Copies of inspection issued by Health Unit on the premises will be uploaded in CCLS. Financial assistance in the form of a government subsidy may be available for parents who cannot afford to pay full base fees. Care is provided by self-employed Providers registered with Family Space Quinte Licensed Home Child Care Program. The Licensed Home Childcare Program is an inclusive program. Program policies will be reviewed annually by Providers, residents over 18, alternates and staff.

Child Care and Early Years Act, 2014

Provincial legislation that provides regulations and standards for centre-based care and licensed home child care programs under its jurisdiction in the Province of Ontario.

Fee Subsidy

Fee subsidy is a form of financial assistance to families to help pay for their child's care in a child care centre or in home care administered by a home child care agency. Parents with demonstrated financial need may receive financial assistance toward the cost of licensed child care services. Subsidy eligibility is income based.

The Canada Wide Early Learning and Child Care Strategy is a national program to offer financial relief to families in the form of a reduction to child care base fees within licensed child care programs. Family Space Licensed Home Child Care program has opted into this program.

Section:	**INTRODUCTION & PHILOSOPHY**	**Policy Number:**	**Section B**
Policy:	**Terms and Definitions**	**Date Approved:**	**September 24 2003**
		Date Reviewed:	**September 9, 2024**

Duty to Report
Responsibility to report a child in need of protection CFSA s.72(1) The Ontario Child and Family Services Act states the persons must report directly to a Children's Aid Society if they have reasonable grounds to suspect that a child is or may be in need of protection. The individual must make the report directly to a children's aid society. The person must not rely on anyone else to report on his or her behalf.

E.C.E. Qualifications
Qualifications in Early Childhood Education (E.C.E.) means that the educator has graduated from a two-year community college program or equivalent. In order to be recognized as having an ECE diploma, the individual must be a member in good standing with the College of ECE's. All permanent Early Childhood Educators who are staff of Family Space must maintain a membership in good standing with the College of ECE's.

Family
A fundamental social group in society typically consisting of one or two parents (guardian) and their children (Source: Webster's Dictionary)

Family-Centred Approach
Collaborative relationship between families and professionals in the continual pursuit of being responsive to the priorities and choices of families. (Source: Kennedy Institute on the Family)

Child with Special Needs
A child with special needs means a child whose cognitive, physical, social, emotional or communicative needs, or whose needs relating to overall development, are of such a nature that additional supports are required for the child.

Hastings County Purchase of Service Agreement
Signed contract between Family Space Quinte Inc and the funding body for licensed child care (County of Hastings). This Agreement stipulates the terms and conditions by which an organization can receive non base fee subsidy for the provision of childcare in the County of Hastings.

Home Child Care Agency
An agency approved by the Ministry of Education to operate a licensed home child care program. Financial assistance in the form of a government subsidy may be available for parents who cannot afford to pay full base fees as stipulated in the Hastings County purchase of service agreement

Home Visitor
An employee of Family Space Quinte Inc. is designated to ensure that the Licensed Home Child Care program is in compliance with the Child Care and Early Years Act, 2014 and the County of Hastings purchase of service agreement

Section:	**INTRODUCTION & PHILOSOPHY**	**Policy Number:**	**Section B**
Policy:	**Terms and Definitions**	**Date Approved:**	**September 24 2003**
		Date Reviewed:	**September 9, 2024**

How Does Learning Happen? Ontario's Pedagogy for the Early Years (2014)
It is the document to be used for the purpose of guiding programming and pedagogy in Family Space Licensed Home Child Care. It is a professional resource guide about learning through relationships for those working with young children and families. It is intended to support pedagogy and curriculum/program development in early year's programs.

Provider registered with Family Space Quinte Inc. Licensed Home Child Care
Refers to the person who provides direct care for children who are self-employed and are registered with Family Space Quinte Inc. Licensed Home Child Care Program.

Licensing
Licensing refers to a method of regulation whereby a minimum standard of care is established by a regulatory agency and a potential Provider.

Licensed Home Child Care
Licensed Home Child Care is the temporary care of children under 13 years of age, where such care is provided in a private residence by a self-employed individual registered with Family Space Licensed home Child Care Program. The regulations of the Child Care and Early Years Act, 2014 governs Licensed Home Child Care. The care provided is in a location other than the home of a parent or guardian of any such child, for a continuous period not exceeding 24 hours. The number of children permitted to be cared for is in accordance with the Child Care and Early Years Act, 2014. Only Licensed Home Child Care Agencies are deemed potentially eligible to receive non base fee subsidies for families and wage subsidies through a purchase of service contract with the County of Hastings.

Outcomes The intended result of an intervention.

Pedagogy
Pedagogy is "the understanding of how learning takes place and the philosophy and practice that support that understanding of learning".

Policy
Policy, as the term is used here, refers to a definite course or method of action, selected among alternatives and in the light of given conditions, to guide and (usually to) determine present and future developments.

Procedures
Procedures are statements related to specific policies of the organization that specify who does what, how and in what order (Source: Voluntary Sector Leadership)

Section:	**INTRODUCTION & PHILOSOPHY**	**Policy Number:**	**Section B**
Policy:	**Terms and Definitions**	**Date Approved:**	**September 24 2003**
		Date Reviewed:	**July 6, 2026**

Purchase of Service Agreement
Formal legal funding arrangement for the provision of services.

Quality Child Care
Quality child care is the provision of a safe, healthy, nurturing environment that provides opportunities for growth, interaction, independence and development. It is responsive to the needs and uniqueness of each child and to the values and needs of the parents.

Regulation
Regulation refers to any uniformly applied system of quality control. Regulations are generally comprised of three components: the establishment of standards, the application of standards to programs, and the use of sanctions or incentives to ensure that programs meet the standards.

Special Needs Resourcing
Inclusion Coaches from the SNR program work with providers and home visitors to support the development and implementation of inclusive practices for children and families. Families consent will be sought if individualized services are required to support a child. If families are interested in the service, they can speak with their provider, who can make a referral.

Inclusion Coach
The role of the Inclusion Coach follows a tiered system, with Tier 1 being Program/ Provider focused (not child specific), Tier 2 focusing on developmental goals for children on the Inclusion Coach's caseload, and Tier 3 supporting children with more complex needs who require specialized strategies and collaboration with other community agencies on the Inclusion Coach's caseload. Ongoing support and resources are tailored to each tier to ensure children's individual needs are met effectively.

Inclusion Coaches are in good standing with the College of Early Childhood Educators and have completed an approved post-secondary program that combines theoretical and practical learning, specifically focused on the needs of children with special needs. They hold valid certification in intermediate/standard first aid, including infant and child CPR, from a Workplace Safety and Insurance Board-recognized training agency, as well as additional specialized training relevant to their Special Needs Resourcing roles and responsibilities.

Serious Occurrence
A serious occurrence is defined by provincial and municipal governments.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM**	**Policy Number:**	**1.1**
Policy:	**Goals & Child Development: Individual Service Plans**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

Tier 3 children with Special Needs will have either a Developmental Inclusion Plan from an Inclusion Coach, an Anaphylaxis Plan, Individual Health Care Plan, or Individualized Service Plan. Individualized Service Plans are utilized for children who do not have a Family Service Plan, Anaphylaxis Plan, or Individual Health Care Plan, but require extra medial support or measures to be taken to ensure safety. Where appropriate, these plans will be utilized in the Provider's home, on outings, and part of evacuation plans.

Procedures

The Home Child Care Program complies with the Child Care and Early Years Act, 2014 and is licensed on an annual basis.

1.0 The Home Child Care Program complies with the regulations set forward by the County of Hastings in the Purchase of Service Agreement

Child Development: Looksee Checklist

Family Space Quinte Inc. provides information to parents and Providers to ensure that all are aware of developmental milestones that children should be reaching. The most effective way to ensure this happens is to make the Looksee Checklist available to all parents and Providers. Parents and Providers can access all of the Screens: 1 month, 4 month, 6 month, 9 month, 12 month, 15 month, 18 month, 2 year, 30 month, 3 year, 4 year, 5 year, and 6 year in the following locations:

Home Child Care Office
Provider's Home
Online: www.lookseechecklist.com

Families are encouraged to complete the appropriate age Developmental Screen on their child and discuss any findings with their Provider or Home Visitor.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM**	**Policy Number:**	**1.2**
Policy:	**Guiding Principles**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 6, 2025**

Policy

Family Space Quinte Inc. is committed to providing family-centred quality child care services and these values are reflected in the guiding principles of the organization. Providers represent Family Space and should always conduct themselves in a professional manner. Family Space believes in a family focused approach to child care and values reliable child care. Family Space may terminate a provider agreement if reliable child care is not being offered.

Procedures

1.0 The mission statement of Family Space Quinte Inc. is as follows:
To provide a variety of quality services and supports to enhance the well-being, development and education of all children, in partnership with Providers, parents and community.

The core values of the organization include the following:

All children are presented with the opportunity to have experiences which foster growth, development and learning.

All children and families will have barrier-free access to services.

We accept the challenge of providing high risk children with those early experiences which will enhance their life prospects.

Quality service is important. Indicators of quality will be used to evaluate the organization.

Providers will conduct themselves in a professional and respectful manner during hours of child care and off child care hours.

Providers will offer reliable child care to families and may have their agreement with Family Space terminated if reliability is not being offered.

Services will be provided by qualified individuals in a professional manner.

A range of services will be provided which are responsive to community needs and changing conditions.

Board, staff and volunteers will work cooperatively and collaboratively with parents, Providers and other members of organizations in our community.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM**	**Policy Number:**	**1.3**
Policy:	**Mandate**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

The mandate of the Licensed Home Child Care Program operated by Family Space Quinte Inc. is to provide supports to Providers registered with Family Space Licensed Home Child Care Program and families based on the following criteria:

(i) *Children and Families*
Families with children from birth to twelve years are eligible to apply to the Home Child Care Program.

(ii) *Providers*
Providers who meet the criteria set forth by the Child Care and Early Years Act, 2014 and the Purchase of Service Agreement from the County of Hastings for licensed Home Child Care are eligible to participate in the licensed Home Child Care program.

(iii) *Geographic Area of Service*
The geographic area of service of the Home Child Care Program is Hastings County.

(iv) *Type of Care Available* – ***These definitions are set out by the Purchase of Service Agreement from the County of Hastings.***
In order to meet the needs of families, Family Space Quinte Inc. offers care, which is flexible to parent's schedules. Care is available in the following ways:

Full days – 6 to 10 hours of care
Half days – 3 up to 6 hours of care
Hourly
Before School
After School
Before & After School
Premium Care: 6 to 10 hours (public holidays, weekends, or if the majority of care used falls before 7:00 a.m. or after 6:00 p.m.)

Providers registered with Family Space Licensed Home Childcare Program are independent contractors and self-employed. As such they set their own schedules and the hours and days they wish to provide care.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**PROVISION OF SERVICES**	**Policy Number:**	**2.1**
Policy:	**Providers Registered with Family Space Licensed Home Child Care Program**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 7, 2026**

Policy

The Provider registered with Family Space Licensed Home Child Care Program is deemed to be an independent contractor who must comply with conditions and expectations specified in the Child Care and Early Years Act, 2014, Purchase of Service Agreement with the County of Hastings, Hastings and Prince Edward Counties Health Unit, Fire Departments, Zoning Departments and Family Space Quinte Inc. Agency/Provider contractual agreement. Providers represent Family Space and should always conduct themselves in a professional manner.

Observations, reflections and goals for children and each Providers program are continually being explored and expanded upon. Providers document observations, reflections and goals using approved social media, learning stories, communication with families and home visitors, etc. There is an expectation that documentation be done weekly.

Procedures

The expectations of Providers are specified in a contractual agreement and include the following:

1.0 Vulnerable sector check for the Provider and everyone 19 or older living in the home and any alternate Providers

2.0 No person under the age of 18 is required to obtain a Vulnerable Sector Check. However, within one month after the person turns 18 years old, they are required to provide a statement that discloses every previous finding of guilt under the Youth Criminal Justice Act (Canada), if the person received an adult sentence.

3.0 Vulnerable sector screening checks every 5 years. An offence declaration in every calendar year after previous vulnerable Sector Screening Check and shall be current to within 15 days of the original vulnerable sector check or most recent offence declaration and shall address the period since the most recent offence declaration or vulnerable sector check. This is for the Provider and anyone 19 or older living in the home and any alternate Providers or anyone who visits regularly.

4.0 Will ensure that WSIB Intermediate/Standard First Aid including infant/child CPR is completed before providing childcare and must remain current. Failure to maintain current Intermediate/Standard First Aid and Infant/Child CPR will result in the termination of the agency/Provider agreement.

5.0 Will comply with the program statement including self-regulation and prohibitive practices developed by Family Space Quinte Inc.

6.0 Provide daily activities which support the goals of the pedagogy statement found in the Family Space Licensed Home Child Care policies.

7.0 Will provide programming of activities which are varied and flexible and is to include:
   a. group and individual activities
   b. activities designed to promote gross and fine-motor skills, language and cognitive, social and emotional development
   c. active and quiet play
   d. activities which provide experience with problem-solving and decision-making situations.

8.0 Will provide care for the children, plan and implement daily activities appropriate to the child's age or development and provide any snacks or meals agreed upon with the parent, according to Ministry and Health Unit Guidelines, and Canada's Food Guide, First Nations, Inuit and Metis, or Nutrition for Healthy Term Infants.

9.0 Will record each child/ren's attendance and follow policies and procedures outlined in the Current Fee Policy.

10.0 Will give parents TWO WEEKS' written notice for an interruption in care (i.e. vacation, appointments, etc.) or for a change in provider/parent agreement and also notify the parents and the Agency as soon as possible if illness, etc. prevents them from looking after the children. Will also notify all parents when any children in care have been exposed to a communicable disease.

11.0 Will notify parents in writing of any accidents or incidents involving their children.

12.0 Will allow parents access and welcome them into their home at any time that the parents have their children in care.

13.0 The Provider may seek out persons who may be used for alternate care when needed and ensures that their name and a copy of their criminal reference check, and vulnerable sector screening check and WSIB approved Intermediate/Standard First Aid/CPR according to policy is on file at Family Space Quinte Inc. before providing care.

14.0 The alternate care will take place in the Provider's home. The Child Care and Early Years Act, 2014, its regulations, Ministry guidelines, and the Family Space Quinte Inc. policies will apply to the Provider and alternates. This includes the capacity regulations. Parents and Family Space Quinte Inc. will be notified if any alternate person will be providing care.

15.0 Will report any child cared for privately.

16.0 Will not receive financial compensation for caring for their own children.

17.0 Will comply with Child Care and Early Years Act, 2014, Ministry of Education guidelines, Purchase of Service Agreement with the County of Hastings, Fire Department Regulations, Municipal Bylaws, The Hastings and Prince Edward Health Unit, and Family Space Quinte Inc. policies. This includes inspections by the Fire Department, Ministry of Education and The Hastings and Prince Edward Health Unit when requested.

18.0 Children are not to start care until the Provider receives approval via email from staff of Family Space to ensure that all required paperwork is submitted by parents. Any child returning to care after a 3 month break with a provider needs approval from the agency before care can commence. If a Provider starts a new or returning family without approval via email from Family Space they may not be paid for the care provided without approval. For example, children with medical plans, anaphylactic plans, custodial arrangements, dietary restrictions, allergies etc. must return to care with updated information. As well, sometimes information such as address, parent phone numbers, email addresses have changed before a child returns. When children return to care it is the provider's responsibility to ensure information is correct and up to date. Payment without notifying the agency after 3 months absence will be at the discretion of the Home Child Care Co-Ordinator.

19.0 Will care for no more than five or six (at the discretion of the Home Visitor) children in her/his home at any time.

20.0 Must agree to keep confidential all forms of information on both children in care and their families.

21.0 Providers will allow parental access during those hours that care is being provided at the parent's discretion into their home.

22.0 Ensure that at no time while providing care for children they are under the influence of alcohol, marijuana, or illegal drugs.

23.0 Any contravention of Family Space Policies, standards of quality including safety of children and families, Child Care and Early Years Act, 2014, County of Hastings, Health Unit, Fire, Police, etc. could result in the immediate termination of the agency/Provider agreement.

24.0 Final remuneration to Provider will be withheld by Family Space until the licensing green sign is returned.

25.0 Provider must have a printer and be responsible for all printing costs.

Section:	**APPLICATION AND ENROLLMENT**	**Policy Number:**	**3.1**
Policy:	**Application for Enrollment, and privately placed children**	**Date Approved:**	**November 2002**
		Date Reviewed:	**February 1, 2024**

Policy

Parents interested in licensed home child care must complete an online registration form. All records must be current for all agency children, and privately placed children. All child records must be retained for 3 years after the date of discharge. A "Change of Information" form is available on our website for families to complete and submit to the agency when applicable.

Procedures

1.0 A child care request form is available online for initial child care enquiries at www.familyspacequinte.com A Home Visitor will assess the needs of the family and give parents the names of any Providers available in the geographic area where they are looking for care. The parent contacts the prospective Providers to set up an interview time that is agreeable to all parties.

2.0 After the interviews the parent contacts the Home Visitor to advise which Provider has been chosen to provide care for the child(ren).

3.0 In some cases, the parents contact the Provider first, and in other cases the parents ask the Home Visitor to contact the Provider who has been chosen.

4.0 Both the parent and Provider have the option of changing their mind before care begins. In this circumstance, as much notice as possible should be given so the parents can make alternate arrangements. The Provider must receive approval from Family Space for the family to begin and have a signed parent/provider agreement if they wish to charge the parents 2 weeks notice.

5.0 A spot is not considered confirmed until all necessary paperwork has been submitted. If a parent withdraws at least 2 weeks before the scheduled commencement of child care, the parent will not be charged.

6.0 When information regarding a child's health, well-being, change of address, people authorized to pick up etc. changes, parents are required to complete a "Change of Information" available on our website and email the updated form to childcare@familyspace.ca.

Billing

For full fee base parents, child care used from the 1st to the 15th of the month will be debited on the 28th of the same month. Child care used from the 16th to end of the month will be debited on the 14th of the following month. For families in receipt of subsidy with a monthly contribution, the amount will be debited once on the 28th of the month. If the 14th or 28th falls on a weekend or bank holiday, accounts will be debited the following business day. Prior to a scheduled debit the office will email the families invoice for the period to review. Non payment on account can result in care being terminated.

Children's Records

Providers will be have access to children's files and emergency cards in SharePoint for each child in care, including privately placed children.

Records will include:

1. An online registration form
2. The name, date of birth and home address of the child.
3. The names, home addresses and telephone numbers of the parents of the child.
4. The address and telephone number at which a parent of the child or other person can be reached in case of an emergency during the hours when the child receives child care.
5. The names of persons to whom the child may be released.
6. The date of admission of the child.
7. The date of discharge of the child.
8. The child's previous history of communicable diseases, conditions requiring medical attention and, in the case of a child who is not in attendance at a school or private school within the meaning of the Education Act, immunization or required form completed by a parent or legally qualified medical practitioner as to why the child should not be immunized.
9. Any symptoms indicative of ill health.
10. A copy of any individualized plan.
11. Written instructions signed by a parent of the child for any medical treatment or drug or medication that is to be administered during the hours the child receives child care.
12. Written instructions signed by a parent of the chid concerning any special requirements in respect of diet, rest or physical activity.
13. A copy of any written recommendation referred to in subsection 33.1 (1) from a child's physician regarding the placement for sleep.

The children's records shall be accessible at the Providers home and at the home child care office.

Family Space will ensure that children's records will be kept for at least three years from the date the child is discharged from the agency.

Family Space ensures that the medical officer of health or his or her designate, upon producing proper identification, is permitted to inspect the records and that copies are provided upon request.

If information is not available, either because a certain section is not applicable to a given child or a parent does not wish to provide the information, Family Space and/or Providers must record the reason the information is not available by indicating “not applicable (N/A)” or “parent did not wish to provide.” This makes it clear to the Ministry of Education that the agency has made an effort to collect the information.

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**APPLICATION AND ENROLLMENT**	**Policy Number:**	**3.3**
Policy:	**Provider/Parent Agreement**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 10, 2026**

Policy

The role of the parent and provision of services of the Provider registered with Family Space Licensed Home Child Care Program will be specified in a contractual two week. No family will be approved to commence care until a completed agreement signed by a parent and Provider have been submitted to childcare@familyspace.ca.

Procedures

1.0 Prior to a child being placed with a Provider, the parent and Provider are required to complete and sign a Provider/Parent Agreement.

2.0 The Provider and the agency will have a copy of the signed agreement. The Provider will ensure parents have a copy of the signed agreement.

3.0 Two weeks written notice is required if either a parent terminates child care with their Provider, or a Provider terminates child care with the parent. This notice must also be given to the Agency. Two weeks termination starts on the day the notice is given regardless of the time of day it was given. For example, if notice is given on Monday, Monday counts as day 1.

4.0 Providers can invoice for a family that cancels the child care agreement within 2 weeks of care commencing as long as a Parent Provider Agreement has been submitted to office and the Provider has been given the approval from the office the child to begin.

5.0 When a Provider is notified of 2 weeks' notice from a family, they are required to contact the agency by email as soon as possible to advise of final charges.

6.0 Family Space offers a sample Parent/Provider agreement that Providers may consider when signing with Families.

7.0 All Provider/Parent agreements must be sent from Providers to the agency at childcare@familyspace.ca.

8.0 Agreements, and all forms must be signed with a digital or drawn or typed signature.

9.0 Any changes in the Provider/parent agreement need to be made in writing by filling out a new agreement.

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.0**
Policy:	**Inclusive Child Care Model**	**Date Approved:**	**January 1, 2021**
		Date Reviewed:	**January 1, 2021**

Policy

Individuals interested in providing licensed home child care with Family Space have options as to which model of care they choose to provide.

Providers will advise Family Space of all children in care and whether they are registered or private children.

Providers will advise Family Space of changes in children in their care as they happen to ensure accurate record keeping, stats, attendance, billing and compliance with regulations and policies including ratios.

All CCEYA regulations and Family Space policies regarding children and families are applicable to all children and families whether they are registered with the agency or private.

Procedures

Family Space Quinte Inc. Inclusive child care model offers 3 options.

1.0 **All Agency children. All children placed in the home are registered through Family Space.**

- Providers can care for a maximum of 6 children
- Family Space determines both parent and Provider fees
- Family Space collects parent base fees
- Providers comply with all Ministry of Education regulations in CCEYA and Family Space policies including attendance reporting
- Provider receives Ministry required quarterly inspection and supportive monthly visits
- Provider receives General Operating Grant (GOG) and Wage Enhancement Grant (WEG)
- Family Space will provide opportunities for professional development and team building
- Income tax receipts issued to Providers and families
- $0 monthly fee paid to Family Space for services and administration costs
- Non base Fee subsidy available for families

2.0 **Agency and Private children**

- Providers can care for a maximum of 6 children
- Family Space determines non base parent and Provider fees for agency registered children. Family Space collects parent base fees from agency registered families
- Provider sets and collects base fees for private families and must issue a receipt free of charge. Family Space will not provide administrative services regarding non base fee collection for

privately placed children and will not aid in any payment discrepancies with Providers in a private arrangement.

- Providers comply with all Ministry of Education regulations in CCEYA and Family Space policies including attendance reporting
- Provider receives Ministry required quarterly inspection and supportive monthly visits
- Provider receives General Operating Grant (GOG) and Wage Enhancement Grant
- Family Space will provide opportunities for professional development and team building
- Income tax receipts issued to Providers and agency registered families.
- $0 monthly fee paid to Family Space for services and administration costs
- Non base Fee subsidy available for families registered with Family Space

3.0 **Private Children Only**

- Providers can care for a maximum of 6 children
- Provider sets and collects base fees for private families and must issue a receipt free of charge. Family Space will not provide administrative services regarding non base fee collection for privately placed children and will not aid in any payment discrepancies with Providers in a private arrangement.
- Providers comply with all Ministry of Education regulations in CCEYA and Family Space policies including attendance reporting
- Provider receives Ministry required quarterly inspection and supportive monthly visits if requested or Home Child Care team deems necessary
- Provider receives Wage Enhancement Grant
- Family Space will provide opportunities for professional development and team building
- Income tax receipts issued to Provider
- $250 monthly fee paid to Family Space for services and administration cost.
- Non base Fee subsidy not available for private families
- Providers who offer private arrangements outside of their business hours with Family Space will ensure parents are aware that the provider is not offering licensed care at that time. For example, private arrangements on Friday nights/weekends etc. that are outside of scheduled agreements with parents registered with Family Space. Providers will not record attendance on Family Space records during private arrangements outside of business hours with the agency. Family Space is not responsible for the safety of children using any equipment on loan from the agency while the provider is offering private care outside of business hours with Family Space.

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.1**
Policy:	**Application & Conditions to be met**	**Date Approved:**	**November 2002**
		Date Reviewed:	**May 20, 2025**

Policy

Individuals interested in providing home child care with Family Space Licensed Home Child Care Program will be required to complete an application.

Procedures

1.0 Potential Providers with the Licensed Home Child Care Program are required to complete the Application to Provide Home Child Care which is available on the Family Space website

2.0 A Home Visitor will meet in the home of any potential Provider and ensure compliance with the Child Care and Early Years Act, 2014, County of Hastings Purchase of Service Agreement, all relevant bylaws, fire and health recommendations

3.0 Existing Providers who recruit new Providers are eligible for a Provider Referral Bonus. A $200 gift card will be issued to the Provider who referred a new Provider once the new child care Provider has been working for one pay period.

4.0 Family Space Licensed Home Child Care program offers a $2000 start up support for new Providers during the application process. This support is considered a deposit on future invoices. Family Space will issue $500 to Providers when their home has been approved by the agency. Upon approval of required vulnerable sector checks and Highland Shores Children's Aid Society reports the agency will issue another $1500. Once the Provider is actively providing child care the agency will deduct $84 from each invoice deposit for 23 consecutive deposits for a total of $1932.00. The final invoice deposit will include a $68 deduction as a final payment which will result in payment in full. If a Provider leaves Family Space Quinte Inc. before the full $2000 is repaid, the balance will be deducted from their final deposit.

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.2**
Policy:	**Initial Home Evaluation**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 3, 2025**

Policy

An initial evaluation of any potential Provider's home, who wishes to be part of Family Space's Licensed Home Child Care Program will be conducted by a Home Visitor.

Procedures

1.0 A Home Visitor will contact the potential Provider to arrange a convenient time to conduct an initial home evaluation.

2.0 A Home Visitor will conduct the evaluation and review any recommendations with the Provider.

3.0 A Home Visitor will approve the home when all recommendations have been addressed.

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.3**
Policy:	**Compliance with Provider Requirements & Monitoring**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

All Providers, alternates, individuals living in the home over the age of 18, and others who interact in the home with children must read, agree to abide by, and sign off on all Home Child Care policies. Others living in the home between the ages of 13-17 are encouraged to read the policy manual as well. Staff, volunteers and students involved in the Licensed Home Child Care Program must also read, agree to abide by, and sign off on all Home Child Care Policies.

The policy sets out how compliance and contraventions (non-compliance) with the policies, procedures and individualized plans will be monitored, recorded and addressed.

Procedures

1. **Monitoring and Observations**

- Family Space Quinte Inc. will monitor each home child care agency staff, Provider, student, volunteer and other person regularly present or ordinarily resident at a premises is to assess whether policies, procedures and individualized plans are being implemented, as follows:
- Home Visitor will observe and monitor the home child care Provider
- Family Space EarlyON Educator will observe and monitor placement students;
- Providers will observe and monitor volunteers; and
- Providers will observe and monitor the other persons regularly present or ordinarily resident in a home child care premises.
- Monitoring and observations will be conducted on an ongoing basis through various means including, but not limited to:
    - participating regularly and informally in the program at a home child care premises;
    - collecting feedback provided from families; and
    - reviewing written documentation (e.g. medication administration forms, daily written record, attendance records, etc.).
    - Home child care agency staff, students, volunteers, home child care Providers and other persons regularly present or ordinarily resident at a home child care premises are encouraged to raise questions or concerns to the Home Visitor about their own observations of others in order to encourage ongoing learning and constructive feedback.
    - Monitoring will be conducted at different times of the day (e.g. morning, afternoon, periods of arrival/departure, rest periods, meal times, outdoor play periods, transitions, etc.) to observe that policies, procedures and individualized plans are being implemented as required for different parts of the program and daily routines.

2. **Documentation and Records**
   - Monitoring and observations will be recorded. Records of monitoring and observations will be stored at the Agency.
   - Documentation of observations will be completed at the time the observations are made or at least 4 times a year and will include concrete examples of observed compliance and non-compliance.
   - All records will be stored at the Agency for at least three years from the date they are created.

3. **Follow-Up**
   - Any areas of concern with an individual's ability to comply with policies, procedures and individualized plans will be brought forward to the other Home Visitors and/or Executive Director.
   - Home Visitor and/or Executive Director will address their observations through a review and discussion with the individuals observed and will seek to or provide them with supports to achieve compliance as needed (e.g. additional training).
   - Providers will receive a copy of the quarterly checklist upon completion.

4. **Dealing With Contraventions Of Policies, Procedures Or Individualized Plans:**
   - Family Space Quinte will make every effort to clarify expectations, and encourages home child care agency staff, students, volunteers, home child care Providers and other persons regularly present or ordinarily resident at a home child care premises to raise their questions and concerns about implementing policies, procedures and individual plans on an ongoing basis. However, these individuals need to understand that all non-compliances will be recorded and addressed.
   - Progressive discipline, up to and including dismissal or agreement termination, may be used to address observed non-compliance with policies, procedures and individualized plans, taking into consideration the nature and severity of the incident, and the individual's history of previous non-compliances.

Where a home child care visitor, student or volunteer is observed to be non-compliant, the child care agency will take one or more of the following actions:

- Inform the individual that a non-compliance was observed, including the review of records or documentation that provide evidence of the non-compliance
- Re-review the relevant policies, procedures, and/or individualized plans with the individual
- Issue a verbal warning
- Issue a written warning
- Inform any relevant parties (e.g. College of Early Childhood Educators, College of Teachers, College of Social Work and Social Services, the contact person for the program from which a student has been placed, CAS, police, etc.); and/or
- Report violations with the College of Early Childhood Educators' Code of Ethics to the College.

Where a Provider and/or a person regularly present and/or ordinarily resident at a premise is observed to be non-compliant, the home child care agency will take one or more of the following actions:

- Inform the individual that a non-compliance was observed, including the review of records or documentation that provide evidence of the non-compliance;
- Re-review the relevant policies, procedures, and/or individualized plans with the individual;

  a. Issue a verbal warning;

b. Issue a written warning;

c. Temporarily close the home child care premises for a period of time based on the severity

d. Terminate the active agreement with the home child care Provider; and/or

e. Inform any relevant parties (e.g. College of Early Childhood Educators, College of Teachers, College of Social Work and Social Services, the contact person for the program from which a student has been placed, CAS, police, etc.);

Where an observed non-compliance meets the criteria for a reportable serious occurrence (e.g. an allegation of abuse or neglect), the serious occurrence policy and procedures will be followed.

Where appropriate, the home child care agency will follow up with the family of a child in accordance with our policies and procedures on parent issues and concerns.

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.4**
Policy:	**Orientation**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 25, 2026**

Policy

Providers registered with the Licensed Home Child Care Program of Family Space Quinte Inc. will be required to attend an orientation session.

Procedures

1.0 The Home Visitor will provide an orientation session, which is mandatory for all new Providers.

2.0 The orientation session will include the following topics:

- Overview of the Home Child Care Program
- Role and Expectations of the Provider
- Quality Home Child Care
- Home Child Care Program Operations including alternative Providers, home visits, attendance/invoices, payment, emergency procedures, health and safety, fire drills, menu planning, serious occurrences, posting of emergency numbers, first aid, outings and daily journal requirements.
- Effective Parent/Provider Communications
- Training for tablets on loan from Family Space
- Developing plans in the event of a missing child. Home Visitors will review the plans with various scenarios periodically with providers.

3.0 Electronic copies of Family Space Licensed Home Child Care policies are available on Family Space website. These documents contain Home Child Care Program policies and procedures and forms. Policy changes will be updated on the website as they occur.

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.5**
Policy:	**Provider/Agency Agreement**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

Providers registered with the Home Child Care Program of Family Space Quinte Inc. are deemed independent contractors and expectations will be specified in a contractual agreement.

Procedures

1.0 A Home Visitor will complete the Provider/agency agreement with the Provider.

2.0 A Home Visitor will ensure that the Provider receives a copy of the signed agreement.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**PROVIDER RECRUITMENT, SELECTION, ORIENTATION AND TRAINING**	**Policy Number:**	**4.6**
Policy:	**First Aid/CPR**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 6, 2026**

Policy:

The Licensed home child care agency shall ensure that Providers, emergency alternates and Home Visitors have a valid certification in intermediate/standard first aid, including infant and child CPR Level C, issued by a training agency recognized by the Workplace Safety and Insurance Board (WSIB)

Procedures:

1.0 Providers, alternates and Home Visitors must have valid certification in intermediate/standard first aid and infant/child CPR Level C issued by a training agency recognized by the WSIB before employment commences for Home Visitors, and

2.0 Before Providers begin to provide childcare on behalf of Family Space Quinte Inc.

3.0 Providers, alternates and Home Visitors are not permitted to allow their first aid and infant child CPR to lapse at any time. Providers cannot provide any care if their First Aid/CPR has expired.

4.0 A copy of valid certification must be submitted to the office at Family Space for Providers and alternates and be kept in the personnel file for Home Visitors.

5.0 Family Space funding will cover the expense of any new or existing Providers needing Intermediate/Standard First Aid and level C CPR certification in 2025. Existing Providers must be due for recertification in 2025 in order to be eligible for funding to cover the expense of the training. Providers will pay the initial fee, submit the receipt to Family Space and be reimbursed.

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.1**
Policy:	**Criminal Reference Check, Vulnerable Sector Check & Child Welfare Screen**	**Date Approved:**	**Feb 24, 1999**
		Date Reviewed:	**June 29, 2026**

Purpose

The purpose of this policy and the procedures outlined is to provide clear and transparent rules and processes for regularly collecting and using information in police record checks and offence declarations for home child care agency staff, students, volunteers, home child care Providers and other persons who may interact with children at a home child care premises.

This policy is intended to help protect the health, safety and well-being of children, families and those involved with the home child care agency by setting out measures to verify that individuals involved in providing child care in positions of trust are not prohibited doing so under the *Child Care and Early Years Act, 2014* (CCEYA) and do not have a criminal history that may put children in care at risk.

No Provider commences care until all Criminal Reference Checks, Vulnerable Sector Checks and CAS checks are completed. Individuals from outside agencies spending time in a providers home must submit an Attestation from their agency before attending the program.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for staff screening and police record checks for a home child care agency.

Policy

Vulnerable Sector Checks (VSCs)

Family Space Quinte/ Home Visitor/ Executive Director is responsible for obtaining a VSC from the following individuals in accordance with the timelines indicated below and the regulations of your local police department.

Individual	Timeline
Employees, volunteers, and students who interact with children	• Before beginning employment or otherwise interacting with children; • On or before the 5th anniversary after the date the most recent VSC; • After any break in the relationship with the licensee that has lasted 6 or more months, before the relationship resumes; and • After any break in the relationship with the licensee that has lasted less than 6 months, only if a VSC would have been required during the break, before the relationship resumes.

Providers Every person ordinarily resident at the premises Every person regularly present at the premises	• Before the home child care agency enters into an agreement with a new home child care Provider; unless approved additional measures are put in place by the agency due to a delay. • On or before the 5th anniversary of the date of the most recent VSC; • After any break in the relationship with the licensee that has lasted 6 or more months, before the relationship resumes. • After any break in the relationship with the licensee that has lasted less than 6 months, only if a VSC would have been required during the break, before the relationship resumes.
Every person who intends to become ordinarily resident at the premises A person who intends to be regularly at the premises	• Before the person becomes a resident or begins to be regularly present at the premises • Before the person begins interacting with children receiving care at the premises.

1. All VSCs will be reviewed by Home Visitor and/or Executive Director to ensure that they are:

   - conducted by a police force from the city or town in which the person lives, where applicable;
   - prepared no earlier than six months before the day it was obtained by the home child care agency (see exception below for students and volunteers);
   - the original documents (i.e. not a photocopy, see exception below for students and volunteers)
   - not altered;
   - clear and legible;
   - provided in English or French (otherwise a certified translated copy into [English and/or French] must be provided);
   - complete (i.e. no information missing or cut off);
   - inclusive of all information required about Criminal Code (Canada) convictions as required set out in section 9 of the CCEYA.

2. In the event that an existing Provider, student, volunteer, employee, resident over 18 or alternate provider in the Providers home requires a new (renewed) VSC/PRC the following procedures will apply if there is a delay in receiving the VSC/PRC: The person from whom the VSC/PRC is required must:

   ✓ Apply for a VSC/PRC from a local police department where the individual resides; submit the required fee

   ✓ Provide evidence of the application (where there is a delay in processing the application) to a Home Visitor or Executive Director

- ✓ The Home Visitor will ensure the individual's original VSC/PRC is maintained on file

Family Space may permit a Provider who has a resident over the age of 19 who has not provided a VSC/PRC to start providing home child care with the following conditions: a) the resident will be required to apply to obtain a VSC/PRC as soon as reasonably possible b) the length of time required to obtain the VSC/PRC justifies it c) Family Space puts additional measures in place to protect children who interact with the resident until the VSC/PRC is obtained i.e requiring that the individual awaiting their VSC/PRC is always supervised by the Provider when interacting with children. If additional measures are used, a Home Visitor will document the rationale for permitting the individual to interact with children prior to obtaining a VSC/PRC.

Family Space will determine whether they will approve interactions with children to begin or continue with additional measures on a case by case basis.

3. The following exceptions will be applied to volunteers and students only:

   - VSCs for volunteers and students that are performed more than six months before the day they are provided to the home child care agency will be accepted as long as the VSC is less than 5 years old from the date it was performed. In these cases, the volunteer/student will also be required to provide the home child care agency with an offence declaration addressing the period since the day the VSC was performed.
   - The home child care agency will accept a photocopy of a VSC from a volunteer or student as long as it is less than 5 years old from the date was performed.

4. A criminal record check (CRC) will only be accepted in the place of a VSC where:

   - any statute of Ontario or Canada prohibits the disclosure of information contained in a VSC in respect of a person (e.g. information about persons under 18 years of age, pardoned offences, etc.);
   - a police service will only issue a CRC, not a VSC, for an individual; and/or
   - a licensee is a corporation and the director or officer does not interact with children at home child care premises.

5. A Criminal Record and Judicial Matters Check will be accepted in place of a CRC but will not be accepted in place of a VSC

6. Any person who turns 18 while in a position where they interact with children receiving care at a home child care premises will be asked by Home Visitor provide a statement disclosing every previous finding of guilt under the Youth Criminal Justice Act (YCJA) if the person received an adult sentence. Where the individual confirms that there are no such findings, Home Visitor will document the request and the individual's confirmation in their file.

7. Any person who turns 19 while in a position where they interact with children receiving care at a home child care premises will be asked by to apply for a VSC within one month after their 19th birthday. That person must provide the home child care agency with evidence that they have submitted a VSC application.

8. VSCs provided to the home child care agency must be intended for the position that the individual will hold (i.e. employee and volunteer positions). Where the VSC has not been provided for the correct position, it will not be accepted. There will be no exceptions made for individuals to obtain a criminal reference check (e.g. for medical reasons).

OFFENCE DECLARATIONS (ODS)

Home Visitor and/or Executive Director Is responsible for obtaining an OD from the following individuals in accordance with the timelines indicated below.

Individual	Timeline
Employee Volunteer Students (including international students) Providers Persons ordinarily resident or regularly present at the premises who are over the age of 18 years	• Annually, no later than 15 days after the anniversary of the most recent VSC or OD; • Where a VSC has been provided by a student or volunteer that is more than 6 months old and less than 5 years old before the individual starts interacting with children; and • After any break in the relationship with the licensee that has lasted less than 6 months, only if an OD would have been required during the break, before the relationship resumes.

9. ODs will be obtained from the individuals mentioned above every calendar year except if the individual has to provide a VSC that year.

10. Any changes to the Offence Declarations must be reported to the agency within 30 days.

11. Any person from whom the home child care agency is required to obtain a VSC must provide ODs to Home Visitor and or Executive Director at the home child care agency as soon as reasonably possible any time they are convicted of any offence under the Criminal Code (Canada).

12. Infrequent visitors will provide Family Space an Offence Declaration and No Interaction With Children form as approved by the agency. These may include cleaning contractors, educational tutors or music instructors that have no interaction with day care children.

13. Home Visitor and/or Executive Director will ensure that every OD includes all of the following information:

- the name of the individual who is making the offence declaration;

- the date of the last VSC or OOD or date of 18th birthday (whichever is most recent);
- a list of all of the individual's convictions for offences under the Criminal Code (Canada), if any, from the date of the last VSC or OD (whichever is most recent), or a statement that the individual has t been convicted of any offences under the Criminal Code (Canada);
- the date the OD was made; and
- the signature of the individual who is making the offence declaration.

14. Home Visitor and/or Executive Director who received an OD from an individual will review it and keep it on file at the home child care agency in a secure location for three years after it was created.

Using Information Revealed in a VSC or OD and Confidentiality

No individual will be hired as an employee, accepted as a volunteer or student, contracted with to provide home child care, or be allowed to otherwise interact with children at the home child care agency or at any home child care premises if their VSC or OD reveals any of the following findings:

- Any conviction for an offence under the CCEYA;
- Any conviction under the following sections of the *Criminal Code* (Canada):
    - Section 151 (sexual interference);
    - Section 163.1 (child pornography);
    - Section 215 (duty of persons to provide necessaries);
    - Section 229 (murder); and/or
    - Section 233 (infanticide);
    - Section 170 parent or guardian procuring sexual activity
      - Section 171.1 making sexually explicit materials available to a child
      - Section 172.1 luring a child
      - Section 172.2 agreement or arrangement sexual offence against a child
    - Section 152 invitation to sexual touching
    - Section 153 Sexual Exploitation
    - Section 153.1 Sexual exploitation of a person with a disability
    - Section 160 (1)(2)(3) bestiality
    - Section 162 Voyeurism
    - Section 162.1 Publication of intimate image without consent
    - Section 271 Sexual assault
    - Section 272 Sexual assault with weapon, threats to a third party or bodily harm
    - Section 273 Aggravated Sexual assault
    - Section 281 abduction of person under 14
    - Section 286.1(1) obtaining sexual services for consideration
    - Section 286.1(2) obtaining sexual services for consideration from an individual under the age of 18

15. Providers are required to notify the agency immediately and cannot continue providing child care if they have been convicted of any of the criminal offences listed above. Providers are required to notify the agency immediately if any of their residents, volunteers, regular visitors or alternate providers are convicted of the criminal offences listed above. Providers are required to notify the agency if they or any of their

residents, volunteers, regular visitors or alternate providers are convicted of a DUI.

16. In addition, a person with other convictions under the Criminal Code (Canada) for offences that pose a high risk to the health, safety and well-being of children, families and other persons involved with the home child care agency may not be hired or retained as an employee, contracted with or kept as a home child care Provider, accepted or kept as a volunteer or student, or be allowed to otherwise interact with children at a home child care premises.

17. These include, but are not limited to:
    - Physical or sexual abuse or assault;
    - Manslaughter;
    - Indictable criminal offences for child abuse;
    - Convictions for any violent offence, whether it involved weapons;
    - Offences that indicate a pattern of behavior which could create risk in terms of the role the person is expected to fill in providing child care; and
    - Current prohibitions or probation orders forbidding the individual to have contact with children under 16 years of age.
18. Any person with a work permit or work visa that indicates that the individual is not permitted to work with children will not be hired or retained as an employee, contracted with or kept as a home child care Provider, accepted or kept as a volunteer or student, or be allowed to otherwise interact with children at a home child care premises.

19. Information about an individual's criminal record and history will be treated confidentially and every effort will be made to protect the privacy of employees, Providers, students, volunteers, and any other person mentioned in this policy except when information must be disclosed for the purpose of implementing the procedures in this policy and for legal reasons (e.g. to the Ministry of Education, College of Early Childhood Educators, law enforcement authorities or a Children's Aid Society).

20. All hard copies of CRCs, VSCs, ODs, and statements of findings of guilt under the YCJA will be kept in a locked filing cabinet at Family Space. Electronic copies will be stored in Providers electronic files.

Procedures:

In the event that an existing Provider, student, volunteer or employee or any resident over 18 or alternate's in the Provider's home requires a new (renewed) PRC the following procedures will be applied if there is a delay in receiving the PRC.

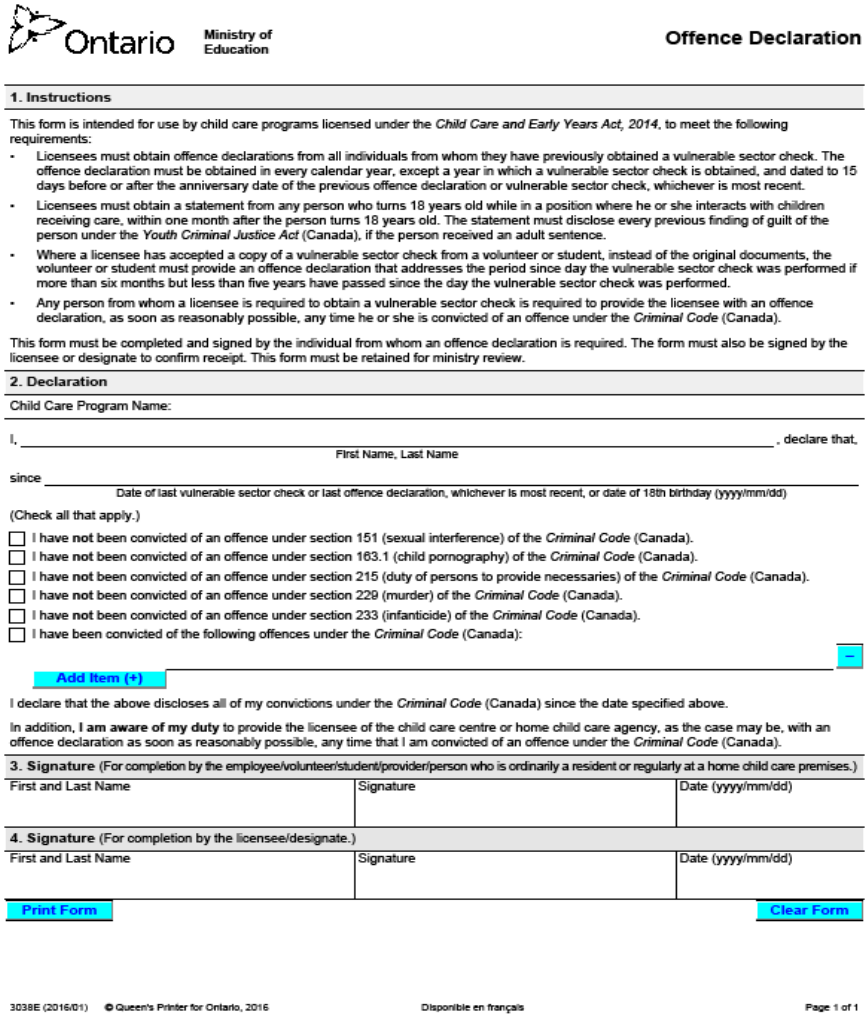
Action	Process and Responsibilities

A) Obtaining a PRC (i.e. VSC or CRC as applicable)	1. The person from whom a PRC is required must: **i.** apply for a PRC from the local police department where the individual resides, submit the required fee for a PRC; and **ii.** provide the evidence of application (where there is a delay in processing the application) to Home Visitor; or Executive Director **iii.** provide the original PRC to Home Visitor and or Executive Director for review prior to starting the position or otherwise interacting with children, or within [time period] if the person has been allowed to start interacting with children. 2. Upon receipt of a PRC, Home Visitor and/or Executive Director must: **i.** confidentially review the PRC to ensure that it meets the requirements outlined in this policy; **ii.** where the individual needs to keep their original PRC, create a true copy of the document to keep on file at the home child care agency for three years after the true copy was created; and **iii.** place the PRC (original or true copy, where applicable) in a secure location at the home child care agency with limited access. 3. 6 months before a new VSC is required, Home Visitor and /or Executive Director must: **i.** notify the individual(s) who need to provide a new VSC in writing and require them to apply for a new VSC; and **ii.** obtain a new VSC from the individual(s) no later than 15 days after the 5- year anniversary date of the most recent VSC. **How to create a true copy of a PRC:** 1. Make a complete and legible photocopy of the original PRC; 2. Make a true copy statement on the photocopy by: i. Writing "Original received and reviewed by:" and printing the full name of the individual who received and reviewed the original PRC; ii. Writing "Date received and reviewed:" and printing the full date the PRC was received and reviewed; and iii. Signing the true copy statement (the signature must be that of the individual who received and reviewed the PRC).

B) Submitting an Offence Declaration	1. Home Visitor and or Executive Director must: i. Provide copies of the OD template at each home child care premises to support access to the document for individuals who are required to complete an OD; and ii. When the anniversary date for a previous OD is approaching provide a reminder to the individual in writing and the OD template. 2. The individual who is required to provide an OD must: i. Complete either the template available online or at the home child care agency, or complete their own OD that contains all the required information; ii. Provide the completed OD to Home Visitor and or Executive Director no later than 15 days after the anniversary date of the most recent OD. 3. Upon receipt of an OD, must: i. confidentially review the OD to ensure that it meets the requirements outlined in this policy; and 2. place the OD in a secure location at the home child care agency with access limited.

Where the immediate health and safety of the children are a concern (e.g. a PRC, OD or attestation reveals that an individual has been convicted of child pornography), the licensee or designate will:

- follow the serious occurrence policies and procedures;
- notify the local Children's Aid Society immediately in accordance with "duty to report" obligations under the Child and Family Services Act or subsequent legislation; and
- notify other authorities (e.g., College of Early Childhood Educators, Consolidated Municipal Service Manager/District Social Services Administration Board, local police service, local public health, etc.), as applicable.
- Child Welfare (CAS) will be contacted in writing to provide the history on potential Providers, and any residents in the home over the age of 18 to determine if there is any previous involvement with child welfare, and/or child protection concerns. Family Space may deny a potential Provider a contract with the agency depending on the findings of the Child Welfare checks.
- Family Space may consider allowing a Provider who has applied for an out of province child welfare check to begin providing care one month after submission, if they and all other adults in the home have submitted VSC's and Highland Shores CAS checks that have been approved by the agency.



Ontario Ministry of Education

Offence Declaration

1. Instructions

This form is intended for use by child care programs licensed under the *Child Care and Early Years Act, 2014*, to meet the following requirements:

- Licensees must obtain offence declarations from all individuals from whom they have previously obtained a vulnerable sector check. The offence declaration must be obtained in every calendar year, except a year in which a vulnerable sector check is obtained, and dated to 15 days before or after the anniversary date of the previous offence declaration or vulnerable sector check, whichever is most recent.
- Licensees must obtain a statement from any person who turns 18 years old while in a position where he or she interacts with children receiving care, within one month after the person turns 18 years old. The statement must disclose every previous finding of guilt of the person under the *Youth Criminal Justice Act* (Canada), if the person received an adult sentence.
- Where a licensee has accepted a copy of a vulnerable sector check from a volunteer or student, instead of the original documents, the volunteer or student must provide an offence declaration that addresses the period since day the vulnerable sector check was performed if more than six months but less than five years have passed since the day the vulnerable sector check was performed.
- Any person from whom a licensee is required to obtain a vulnerable sector check is required to provide the licensee with an offence declaration, as soon as reasonably possible, any time he or she is convicted of an offence under the *Criminal Code* (Canada).

This form must be completed and signed by the individual from whom an offence declaration is required. The form must also be signed by the licensee or designate to confirm receipt. This form must be retained for ministry review.

2. Declaration

Child Care Program Name:

I, _____, declare that,
First Name, Last Name

since _____
Date of last vulnerable sector check or last offence declaration, whichever is most recent, or date of 18th birthday (yyyy/mm/dd)

(Check all that apply.)

- ☐ I have **not** been convicted of an offence under section 151 (sexual interference) of the *Criminal Code* (Canada).
- ☐ I have **not** been convicted of an offence under section 163.1 (child pornography) of the *Criminal Code* (Canada).
- ☐ I have **not** been convicted of an offence under section 215 (duty of persons to provide necessaries) of the *Criminal Code* (Canada).
- ☐ I have **not** been convicted of an offence under section 229 (murder) of the *Criminal Code* (Canada).
- ☐ I have **not** been convicted of an offence under section 233 (infanticide) of the *Criminal Code* (Canada).
- ☐ I have been convicted of the following offences under the *Criminal Code* (Canada):

Add Item (+) _____ –

I declare that the above discloses all of my convictions under the *Criminal Code* (Canada) since the date specified above.

In addition, **I am aware of my duty** to provide the licensee of the child care centre or home child care agency, as the case may be, with an offence declaration as soon as reasonably possible, any time that I am convicted of an offence under the *Criminal Code* (Canada).

3. Signature (For completion by the employee/volunteer/student/provider/person who is ordinarily a resident or regularly at a home child care premises.)

First and Last Name	Signature	Date (yyyy/mm/dd)

4. Signature (For completion by the licensee/designate.)

First and Last Name	Signature	Date (yyyy/mm/dd)

Print Form Clear Form

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Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.2**
Policy:	**Reference Checks**	**Date Approved:**	**Feb 24, 1999**
		Date Reviewed:	**November 12, 2025**

Policy

Family Space will contact references of potential Home Child Care Providers before they begin.

Procedure

All prospective Home Child Care Providers will submit to a Home Visitor a list of people they approve to be contacted as references. These may include previous employers, friends, coworkers, family, etc. The authorization form must be completed by the potential Provider before references are contacted.

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.3**
Policy:	**Automobile Car Seat Safety**	**Date Approved:**	**Feb 24, 1999**
		Date Reviewed:	**March 2020**

Policy

It is the responsibility of Providers registered with Family Space Licensed Home Child Care Program to ensure that children in their care are safe while they are in the Provider's automobile. This is a requirement of the Ministry of Transportation.

Procedures

1.0 Providers will provide the appropriate car seats and seat belts for the safe transport of children in care and ensure they are properly secured and used.

2.0 Providers must ensure the car seats meet the requirements specified in provincial law.

3.0 Providers must ensure forward facing car seats are tethered in.

4.0 Providers are encouraged to attend a "Car Seat Safety Clinic".

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.4**
Policy:	**Communicable Diseases and HIV Infection**	**Date Approved:**	**Feb 24, 1999**
		Date Reviewed:	**March 2020**

Policy

Family Space Quinte Inc. has an obligation to provide a safe and healthy environment for children, parents, Providers registered with Family Space Licensed Home Child Care Program, and the Family Space Home Visitor.

Procedures

A. Communicable Diseases

1.0 Providers need to contact the Home Visitor immediately if they or any person residing in their home, a family member, or a child placed in their care becomes ill with a communicable disease. Parents must notify the Provider if their child has been exposed to a communicable disease. As well, Providers must notify the parents if they or a member in their household has been exposed to a communicable disease. The ill child(ren) will be excluded from care during the contagious period and may be readmitted when no further symptoms of ill health are exhibited. Providers will record symptoms of ill health.

2.0 Family Space will notify the Health Unit in the case of communicable diseases when required.

3.0 Covid-19 – Providers and parents will complete daily Covid-19 screening and follow associated protocol as directed by Hastings Prince Edward County Public Health. Providers will post proper handwashing and diapering information where hands are washed and diapering is done. Providers will have individual paper towels and a garbage bin with a lid where handwashing occurs.

B. HIV Infection

To ensure protection from an HIV infection, the following “Universal Precautions” will be practiced by Providers registered with the Licensed Home Child Care Program of Family Space Quinte Inc.

(i) Children who are HIV Positive

(a) HIV antibody testing is not required for enrollment with Family Space Quinte Inc.

(b) Children infected with HIV have the right to attend child care, as long as they comply with the policy regarding illness and communicable disease.

(c) The child and his/her family have the right to privacy and confidentiality.

(ii) Providers who are HIV Positive

(a) HIV antibody testing is not required as a condition of acceptance as a Provider.

(b) Providers and the staff have the right to continue providing child care and working for as long as their health permits.

(c) Confidentiality will be maintained

If a Provider is going to have contact with blood, semen, vaginal fluid or other body fluids/stools, then the following should be implemented:

(i) Wear gloves
(ii) Wash hands – Hands should be washed with soap and water as soon as possible after touching blood or body fluids or after taking off your gloves.
(iii) Clean spills – Put on gloves. Wipe up the blood or body fluid with a paper towel. Wash the area with soap and water, then wipe it with a freshly made solution of 1 part chlorine bleach, to 9 parts water and allow to air dry for 10 minutes. Placed soiled gloves, towels, etc., in a plastic bag into a second plastic bag. Then place it in the garbage.
(iv) Wash hands.

Educational materials on HIV infections are available from the Hastings and Prince Edward County Health Unit.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.5**
Policy:	**Fire Safety and Evacuation**	**Date Approved:**	**Feb 24, 1999**
		Date Reviewed:	**March 25, 2026**

Policy

The Provider registered with Family Space Licensed Home Child Care Program shall ensure that a written procedure is established and posted with respect to evacuation in the event of fire as required by the Fire Department. The Fire evacuation plan must include critical indicators such as, evacuation paths indicated by red arrows to stairs and doorways as well as a written summary of the procedure.

Rooms without windows are not approved for children to sleep in.

Procedures

1.0 The Provider must have a fire extinguisher as recommended by the fire department and must also have their home inspected by the fire department.

2.0 The fire department will then send notification of the satisfactory inspection to Family Space Quinte Inc. or to the Provider who will submit it to the agency.

3.0 If there are actions that need attention, a Home Visitor will follow up with the Provider to ensure completion.

4.0 Providers are required to practice a fire evacuation monthly. Smoke detectors will be sounded so children become familiar with the sound. Drills are to be recorded in the dailTWy written log/Journal. Each Provider shall have an emergency shelter previously arranged. The Provider will notify the parents of the children in care as soon as possible in the event of a fire.

5.0 A fire is a serious occurrence, and the serious occurrence procedures must be followed.

6.0 The arrangement and cost incurred for the inspection is the responsibility of the Provider.

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.6**
Policy:	**Illness: Children**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**January 7, 2025**

Policy

Providers registered with Family Space Licensed Home Child Home Child Care Program are not expected to provide care for a child whom they feel is too ill to attend home child care. The Ministry of Education requires that all recommendations by the Medical Officer of Health and the Child Care and Early Years Act are followed.

Procedures

1.0 Alternate care for sick children must be arranged by the parent. If a child becomes ill during the day, Providers must contact the parents to arrange for the child to be picked up as soon as possible. If a Provider is unable to reach the parent, they will need to contact the parent's emergency backup person. In some cases, the Provider may have to isolate a sick child from other children, but not out of view.

2.0 A routine check each day upon arrival to detect symptoms of ill health may prevent exposure of other children to what could be a serious illness. Should a Provider detect any symptoms, they must complete the Symptoms of Ill Health Daily Observations form or email Symptoms of Ill Health to the Home Visitor.

3.0 Symptoms indicative of ill health may include: - Ministry Requirement

- elevated temperature defined by the Health Unit as a body temperature of 38 degrees Celsius that persists for 30 minutes or more, pallor, flushing
- vomiting, diarrhea
- redness, tearing, sensitivity to light discharge or puss from the eyes
- undiagnosed skin rashes
- an acute cold, nasal discharge, nasal discharge that is thick with mucus or coughing
- unusual irritability, fussiness or listlessness
- lice (pediculosis and scabies) itching, nits visible on hair shafts close to scalp

Anyone who is sick or has any new or worsening symptoms of illness should stay home until their symptoms improving for 24 hours (or 48 hours for nausea, vomiting, and/or diarrhea) and should seek assessment from their health care provider if needed.

Children can return to care when symptoms have improved, or the family confirms recommendation from a medical professional that the child can return to care.

Similarly, if the Provider's own child(ren) display symptoms of ill health the Provider should immediately notify the parents of children in her care to enable those parents to arrange for alternate care through the agency or privately.

Symptoms of ill health and absence for daycare children will be recorded in the daily journal by the Provider.

Providers can charge a family for absences due to illness when the absence occurs on the scheduled days before commencement. There must be a Provider Parent Agreement submitted to office and the Provider must have received approval from the office for the child to begin.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.7**
Policy:	**Illness: Provider**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**January 1, 2025**

Policy

Providers registered with Family Space Quinte Inc. licensed home child care program need to inform the parents and the Home Visitor if they are unable to provide care.

Procedures

1.0 Providers will inform parents and childcare@familyspace.ca immediately if they are unable to provide care due to illness.

2.0 A Home Visitor of Family Space Quinte Inc. is to be informed of the Provider's illness and will be noted in daily journal.

3.0 Providers may choose to use a billable closure on days that they are closed due to illness of their own or of their own children. Indicate this in the email to childcare.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.8**
Policy:	**Immunizations: Children**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**March 2020**

Policy

Parents must ensure that the Licensed Home Child Care Program of Family Space Quinte Inc. has a copy of their child's immunization record as outlined by the Ministry of Education and the Medical Officer of Health.

When exemptions from immunization requirements are being sought, a standardized, ministry-issued form must be completed. There will be **two types** of standardized forms that would need to be completed, depending on the type of exemption being sought:

1. A **medical exemption** form that would need to be completed and signed by a medical professional.
2. A form for **objections to immunization based on religious/conscience grounds**. These forms need be sworn or affirmed before a "commissioner for taking affidavits" (e.g. justice of the peace, lawyer, etc.). Both the parent of the child / adult seeking the exemption and the commissioner would be required to sign the ministry-issued form.

Procedures

1.0 Children enrolled in the Home Child Care Program must be immunized to protect all parties involved.

2.0 Parents are responsible to forward an up-to-date immunization record for their child to a Home Visitor. This form can be obtained from the Health Unit.

3.0 The immunization record needs to be submitted before a child begins care and before approval on file expires.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.9**
Policy:	**Health Assessments, Immunizations and TB Tests: Provider**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**March 2020**

Policy

Providers, each person over the age of 18 years who is ordinarily a resident of the premises, alternate providers, or volunteers must have a health assessment and provide an up-to-date immunization record including Tetanus/diphtheria/pertussis (TDP) and Mumps/ Measles/Rubella (MMR).
A TDP booster is required every 10 years.
A 2 step TB test is required for persons over 18 if they are at high risk of active tuberculosis as per the Canadian TB standards.

When exemptions from immunization requirements are being sought, a standardized, ministry-issued form must be completed. There will be two types of standardized forms that would need to be completed, depending on the type of exemption being sought:

1. A medical exemption form that would need to be completed and signed by a medical professional.
2. A form for objections to immunization based on religious/conscience grounds. These forms need be sworn or affirmed before a "commissioner for taking affidavits" (e.g. justice of the peace, lawyer, etc.). Both the parent of the child / adult seeking the exemption and the commissioner would be required to sign the ministry-issued form.

Procedures

1.0 An up-to-date immunization and health record must be completed for every adult (over 18 years).

2.0 These completed forms are to be submitted before child care can commence.

3.0 At high risk for TB as per Canadian TB standards include people that have lived and/or travelled outside of Canada to a country where TB is common and lived and/or worked in a first Nations Community.

4.0 If a 2 step TB test has been completed previously and written verification can be provided, only a 1 step test is required.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.10**
Policy:	**Medication Administration**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**June 29, 2026**

Policy

Providers registered with Family Space Licensed Home Child Care Program make the choice whether to assume the responsibility of administering prescription or emergency medication. **Over the counter medication may not be administered unless prescribed by a physician and approved by Family Space. Providers should contact a Home Visitor when considering the administration of Dr. prescribed over the counter medications.**

Procedures

If the Provider assumes the responsibility to administer *prescription* medication, then the following procedures are followed as required by the Child Care and Early Years Act:

1.0 Medications are supplied by the parent and have written authorization prior to administration. The time for administration, signs and symptoms to watch for, reason/diagnosis for medication, any special instructions and side effects must be documented on the Medication Authorization Form. Digital, typed or drawn signatures are required on all forms. Typed signatures will not be accepted.

2.0 Written medication authorization must accompany any anaphylaxis or medical plans requiring medication. For example, if a child requires use of an epi-pen or inhaler, a medication authorization form authorizing administration of the epi-pen or inhaler must be completed and submitted along with the anaphylaxis or medical plan.

3.0 The Provider completes the Medication Authorization Form and submits a copy to the agency. The Medication Authorization Form has been developed to include the additional information required by the Child Care and Early Years Act for recording the administration of narcotics. This includes:

The date the medication is received by the Provider
The name and address of the person from whom the Provider received the medication.
The name of the Provider who received the medication.
The name and quantity of medication received.
The amount given each time the medication is administered.

4.0 The Provider may only give the Prescribed medications in the original container with the legible pharmacist's label with:

i. Child's name
ii. The name of the medication
iii. The dosage
iv. The date the medication was dispensed
v. Instructions for storage and administration

Physician prescribed over the counter medications to be used only for that child for that specific condition. No blanket medication authorizations are permitted. Medications must be in the original container, marked with the child's name and expiry date.

Record all medications given on the Medical Authorization Form and Administration record. Use one sheet for each medication for each child.

Before giving each dose the Provider will check the following:

- ✓ The right medication (not expired)
- ✓ The right child
- ✓ The right dose (use measuring spoon)
- ✓ The right time
- ✓ The right route (administration e.g. oral, rectal, etc.)

Report at once to the parent any conditions which might be a side effect of a medication.

Never give ASA (e.g. Aspirin) unless you are certain that its use has been recommended by a physician.

If at any time medicine is given to the wrong child or a child has been given a wrong dose, this should be reported to the Home Visitor who should then notify the parent of the child right away. The provider should follow any instructions on the label related to accidental administration, including calling 911 or going to the nearest Emergency Room if required.

For long term medications, have the parent/guardian check with the doctor to see if the medication schedule can be arranged to allow the medication to be given at home.

Parents who wish their children to have sunscreen at the Providers should provide them with sunscreen with the child's name and expiry date written on it. If there is not an expiry date, discard after one year.

If a Provider is requested to administer a narcotic (some prescribed cough syrups may contain a narcotic) Providers must ensure the Medical Authorization Form and Administration Form is completed.

It is recommended that separate medication containers be used at child care and at home when possible.

The parent/guardian might request the pharmacist to dispense the medication in two containers.

Medications must be kept in a locked container or inaccessible and stored according to their instructions. Nothing except current medications should be in the containers.

Any unused medications must be returned to the parent/guardian.

Providers are permitted to carry some medications on them to ensure quick access in an emergency. These medications include emergency allergy and asthma medication, medications for epilepsy and diabetes, as well as any other medication that a prescribing medical professional determines must be readily available to prevent a significant risk to a child's health. Providers must carry these medications with them when off premises.

School age children can administer emergency allergy and asthma medication, medications for epilepsy and diabetes, as well as any other medication that a prescribing medical professional determines must be readily available to prevent a significant risk to the child's health. If a child carries and administers their own medication, the provider and the agency must have written permission from the parent and the Provider must supervise the administration. The parent and Provider must sign the written permission.

Children can only carry their own medication if they have written approval to self-administer the medication.

Providers and Home Visitors will discuss practices to ensure other children do not have access to medications carried by a provider or child. For example, medication in a zipped up fanny pack, medication in a backpack that stays on/beside the provider or child at all times, a zipped pocket.

MEDICATION AUTHORIZATION AND ADMINISTRATION FORM

To be completed by a parent before any medication is administered by a Provider.

I authorize the administration of _____
(Type of Medication)

to _____ by _____
(Name of Child) *(Family Space Provider)*

Time of Administration: _____

Signs and Symptoms:_____

Dosage: _____

Relevant side effects to be observed, if any: _____

_____

The authorization is in effect until: _____
(Date)

Medication is to be stored: _____

Parent's Signature: _____ Date: _____

ADMINISTRATION RECORD

Date Given	Time Given	Amount Given	Provider Signature	Comments

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.11**
Policy:	**Non-Smoking Environment**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**March 2020**

Policy

Family Space and Providers are required to comply with the requirements under the *Smoke-Free Act*, 2017 that prohibits smoking tobacco, holding lit tobacco, smoking medical/recreational cannabis and the use of electronic cigarettes in a place where home child care is provided whether or not children are present.
All staff, Providers and persons who are ordinarily residents or who are regularly at the premises or any other person at the premises must be notified that smoking and the use of electronic cigarettes is prohibited.

Procedures

Responsibility of Providers Registered with Family Space Licensed Home Child Care Program

- ✓ Ensure that everyone is aware that smoking is prohibited.
- ✓ Remove ashtrays and any object that serves as one.
- ✓ Ensure a person who does not comply does not remain on the premises.
- ✓ Post No Smoking signs at the main entrance that families use.

Enforcement

The Hastings and Prince Edward Health Unit will carry out inspections and investigate complaints in day nurseries and places where licensed private home day care is provided in order to enforce the act.

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.12**
Policy:	**Food & Menu Planning**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**January 22, 2026**

Policy

Providers registered with Family Space Licensed Home Care Program are expected to provide nutritious meals, snacks and beverages that meet the recommendations set out in the Health Canada documents "Eating Well with Canada's Food Guide – First Nations, Inuit and Métis" or "Nutrition for Healthy Term Infants", and the requirements of the Child Care and Early Years Act.

Procedures

1.0 Where the child is present at mealtime, a meal must be supplied and provided by the Provider. Any parent supplied food from home must be accompanied by written instruction from a parent including storage, preparation, amount and time of serving.

2.0 Where a child receives child care for six hours or more, the licensee or Provider shall ensure that the total food offered to the child includes, in addition to any meals provided, two snacks. Water is always to be made available.

3.0 Each Provider must develop menus in consultation with parent(s) of the child(ren) and the Home Visitor. These menus are to be available to parents by the end of each day.

4.0 For infants under 1 year old, a completed Infant Feeding Schedule signed by the parent is required including the type of food, feeding times, and quantities. The schedule should be reviewed monthly by the Provider and parent.

5.0 For infants and children who are not yet able to eat regular table foods, parents must supply the foods and liquids for bottles with written instruction regarding the feeding and scheduling. Formula shall be stored in the refrigerator until feeding time and where more than one infant is being cared for; the formula shall be individually labeled.

(i) Written instructions from a parent are required for any children under one year and any child who requires special dietary and/or feeding arrangements.
(ii) The container of food and/or drink supplied by a parent must be labelled with the child's name.
(iii) All food or drink must be stored, prepared and delivered so as to retain maximum nutritive value and prevent contamination.

6.0 Nutritious meals, snacks and beverages must meet the recommendations set out in the Health Canada documents "Eating Well with Canada's Food Guide", "Eating Well with Canada's Food Guide – First Nations, Inuit and Métis" or "Nutrition for Healthy Term Infants", and the requirements of the Child Care and Early Years Act.

7.0 A daily Menu Plan must be completed, shared with parents and Home Visitors.

INFANT FEEDING SCHEDULE

Child's Name: _____ Birth Date: _____Date: _____

Name of Provider: _____

The Child Care and Early Years Act require that all children under 12 months of age have a written feeding schedule completed by parents. Please give the schedule to your Provider and update regularly as you and your doctor decide to add new foods.

Food/Liquid	Kind, Amount and Time	Observations/Comments
Formula or Milk	Kind: _____ Amount: _____ Time: _____	
Juice	Kind: _____ Amount: _____ Time: _____	
Cereal	Kind: _____ Amount: _____ Time: _____	
Meat	Kind: _____ Amount: _____ Time: _____	
Vegetable	Kind: _____ Amount: _____ Time: _____	
Fruit	Kind: _____ Amount: _____ Time: _____	
Other	Kind: _____ Amount: _____ Time: _____	
Other	Kind: _____ Amount: _____ Time: _____	
Other	Kind: _____ Amount: _____ Time: _____	

Parent Signature:_____ Date:_____

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.13**
Policy:	**Pets**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**March 2020**

Policy

To ensure a safe and healthy environment for children, guidelines for pets in a Provider's home who is registered with Family Space Licensed Home Child Care Program have been determined by the Child Care and Early Years Act, Hastings and Prince Edward Health Unit, and applicable bylaws.

Procedures

1.0 The Hastings and Prince Edward Health Unit requires that all dogs, cats and ferrets kept on the Provider's premises must be inoculated against rabies either annually or on a veterinary recommended vaccination schedule. A record of these inoculations needs to be submitted to the agency.

2.0 Due to external regulations, all banned animals as determined by the Hastings and Prince Edward Health Unit, and applicable bylaws are prohibited from being kept in the home where child care is provided.

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.14**
Policy:	**Poisonous and Hazardous Products**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**June 29, 2026**

Policy

The Child Care and Early Years Act states that all poisonous and hazardous substances are inaccessible to children in attendance.

Procedures

1.0 All cleaning materials, medicines, vitamins, poisonous, hazardous products, matches and lighters etc. must be kept in a locked cabinet or cupboard or out of reach.

2.0 Sharp knives and alcohol must be inaccessible.

3.0 Toxic substances which are stored or transported in a vehicle (i.e. windshield washer fluid) must be kept locked in a trunk where possible, or inaccessible to children.

4.0 All firearms must be locked up and the key kept inaccessible to children as stated in the Child Care and Early Years Act. Ammunition must be stored separately according to Ontario Hunting Regulations.

5.0 Any items with a DIN (Drug Identification Number) must always be kept inaccessible to children ie. Diaper creams, sunscreen, etc.

6.0 Providers will provide a safe environment for children inside and outside of their home. Providers will regularly check for hazards i.e. unlocked pool gates, dead/hanging branches, loose or open well/sump pump/septic tank lids, medications, cleaning products, sharp items etc and act accordingly to ensure safety.

7.0 All septic system access points on the property of a licensed home child care provider must be secure, inaccessible to children and have a secondary safety device installed.

8.0 Cultivation of cannabis for non-medical purposes is prohibited.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.15**
Policy:	**Sanitary Practices**	**Date Approved:**	**February 24, 1999**
		Date Reviewed:	**May 16, 2022**

Policy

The Provider registered with Family Space Licensed Home Child Care Program shall ensure that sanitary practices are implemented in each home. Sanitary practices and procedures are set out by the Child Care and Early Years Act and the Hastings and Prince Edward Health Unit.

Procedures

A. Hand Washing

1.0 Hand washing is of particular importance for Providers and children during the following times.

- i Immediately after use of the toilet
- ii Prior to handling, preparing or eating food
- iii Before and immediately after diaper changing
- iv Before and after toileting a child
- v After contact with nasal or oral secretions (such as wiping noses, sneezing and coughing)
- vi After playing, especially if contact has been made with soil (including sand boxes)

2.0 Each person is to have their own hand towel. The use of paper towels is encouraged. Liquid soap is preferable to bar soap. These guidelines apply to Providers as well as to the children in care. Towels to be replaced with clean laundered towels daily.

3.0 Providers will implement the following hand washing procedures

- i. Wet hands, using warm running water
- ii. Soap (from a dispenser; bar soap should not be used as it can harbour bacteria)
- iii. Rub hands vigorously, including the back of the hand, wrist, between the fingers and under the fingernails. (For approximately 15 seconds)
- iv. Rinse well
- v. Towel dry using a clean disposable or personal hand towel
- vi. Turn off the taps using a disposable or personal hand towel. Do not use your bare hands to turn off hand controls.

B. Diaper Changing

4.0 Diapering must take place on a hard surface that can be disinfected.

5.0 Providers will set up a change area that is separate from the children's activity and food preparation area. A clean individual washcloth or commercial moist towelette shall be used for each diaper change and used only for diapering purposes. The change pad/ hard surface should be cleaned immediately after each

diaper change with hot soapy water and disinfected with a solution such as 1-tablespoon bleach or a comparable product to one quart of water to safeguard against the spread of bacteria. After these procedures the Provider should wash her hands.

6.0 Diaper pails should be emptied every day and thoroughly sanitized using a solution such as one tablespoon of bleach to 1 quart of water.

7.0 Providers will implement the following diaper changing procedures:

(i) Wash hands before each change and assemble supplies within easy reach.
(ii) Hold child away from your clothes as you place child on the clean change pad. Remove diaper. If pins are used, close immediately and place out of child's reach.
(iii) Clean child's skin with moist disposable cloth, wiping front to back. Remove all soil.
(iv) Wipe hands on clean disposable cloth and place in waste container.
(v) Diaper and dress the child.
(vi) Wash the child's hands.
(vii) Dump soil from diaper into the toilet. Avoid splashing. Place all disposable items in waste container lined with a plastic bag.
(viii) Place any soiled clothing in a plastic bag, and return to parent, daily. This includes soiled cloth diapers. Do not wash items soiled by stool if supplied by the parent.
(ix) Clean change surface with soap and warm water. Wipe dry. Apply sanitizer and allow to air dry.
(x) Wash hands with soap and warm water.

NOTE: Use skin care products only if requested by parents, and only for the designated child. Be sure supplies are labelled with the child's name.

C. Facial and Hair Hygiene

8.0 Disposable tissues should be used for cleaning noses. The tissue should be disposed of as soon as it is used. Combs and brushes should not be shared among the children. Ensure that each child has a toothbrush (recommended by Heath Unit) provided by the parent and labelled accordingly. These are to be stored separately. Store toothbrushes so that they do not come in contact with one another.

D. Dishwashing Procedure

9.0 Wash dishes in hot soapy water, rinse in warm clear water, soak for one minute, air dry. If a dishwasher is used, a chlorinated dishwashing detergent is to be used.

E. Food Preparation and Food Handling

(i) Providers will ensure that food preparation safety guidelines as recommended by the Health Unit are practiced when preparing meals and snacks. Ie: temperature of fridge, avoiding food cross contamination, proper food storage, etc.

F. Cleaning and Disinfecting Surfaces

10.0 Providers will implement the following cleaning procedures

- Clean all surfaces and articles first with soap and water.
- Rinse with clear water.

- Follow with a sanitizer (see mixture below) or follow manufacturer's recommendations.

Mixture Amounts for Bleach Solution
1/4 cup household bleach in 1 gallon of warm water
1 tablespoon household bleach in 1 quart of warm water
* make fresh solution daily
* store ready for use in spray bottle, clearly labelled
* store out of reach of children

- To be effective, sanitizer must remain in contact with the surface for at least two minutes.
- Rinse with clear water.

G. Toys, Furniture and Equipment

11.0 The floor is to be kept clean and carpets vacuumed regularly. Infant seats and eating surfaces should be cleaned thoroughly, daily after each use.

12.0 Toys that are mouthed by infants or toddlers need to be cleaned, disinfected and air-dried daily. Ensure that all children have their own sheet and bedding. Bedding used by children must be cleaned and disinfected weekly and kept in good condition.

13.0 All sandboxes must be covered when not in use.

14.0 Water retaining toys should not be used.

Family Space Quinte Inc.

Licensed Home Child Care Program

Child Care Centre Cleaning & Disinfection

HASTINGS PRINCE EDWARD Public Health

Listed are the minimum frequencies.

Clean and disinfect surfaces immediately if they become contaminated or are visibly soiled.

Area/Item	What to Do	Each Use	Daily	Weekly	Monthly
Infant/Todder					
Cloth/plastic bibs	Launder / Clean & Disinfect	X			
High chair trays/table tops	Clean & Disinfect	X			
Mouthed toys	Clean & Disinfect	X			
Diaper change mat	Clean & Disinfect	X			
Diaper hand wash sink	Clean & Disinfect		X		
Washrooms					
Cloth towels	Launder	X			
Potty Chair	Empty, Clean & Disinfect	X			
Hand wash sinks/toilets/floors	Clean & Disinfect		X		
Garbage containers	Empty & Clean		X		
Toothbrush storage unit	Clean & Disinfect			X	
General Child Care Rooms					
Absorbent materials (dress-up clothes, plush toys)	Launder / Clean			X	
Carpet/floors	Vacuum / Sweep		X		(SteamedX4 per year)
Fabric upholstered furniture	Vacuum			X	
All Toys/shelving	Clean & Disinfect			X	
Sensory play	Clean & Disinfect			X	X (sand)
Water Play Table	Clean & Disinfect	X			
Play dough (store bought)	Discard			X	
Play dough (homemade)	Discard		X		
Natural Items	Discard			X	
Cribs cots	Clean & Disinfect			X	
Bedding/blankets	Launder			X	

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.16**
Policy:	**Sleep Period/Extended Care/Supervision**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 25, 2026**

Policy

Providers must periodically perform a direct visual check of each sleeping child aged 2 and under. A direct visual check requires Providers to go over to the sleeping child and look for indicators of distress or unusual behaviour. This requirement applies to naptime or children who are in care overnight.

The Provider registered with Family Space Licensed Home Child Care Program will ensure that each child has an appropriate space such as a bed, playpen, sleep mat, cot, etc., which includes a washable sheet and blanket. Couches cannot be used for sleep for children under 6 yrs. Children will have individual beds/cribs/sleep mat/cot/playpens to use unless otherwise approved by Family Space.

Rooms without windows will not be approved for children to sleep in.

Procedures – Supervision

1.0 Daytime naps need to have a visual check performed at least once every hour for children 2 and under. This check must be documented with the date, time and observations in Provider journals. This will be recorded and available for the Home Visitors during quarterly inspections. For overnight care, a visual check needs to be performed a minimum of three times while the child is in bed ie: at the child's bedtime, when the provider goes to bed, and in the morning. The check must be documented with the date, time, and observations of when children fall asleep, when checks are completed and what time children wake up.

2.0 Children sleeping overnight/extended care will have an extended care plan completed and approved by the Provider, parent and Home Visitor. Consideration will be given to emergency evacuation, sleep furniture and supervision. When overnight care is provided, children 6 and older will sleep in a room with children of the same gender. Mixed genders of children over 6 yrs of age is permitted for siblings with written authorization from parents.

3.0 Sleep monitoring devices are to be checked daily to make sure they work and this check will be recorded daily in Provider's journals. These monitors cannot be used in place of the visual checks

4.0 Children 0-12 months are placed for sleep in a manner consistent with recommendations set out in the most current version of the ***Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada,*** a document endorsed by Health Canada. Parents must be advised of this requirement, and it can only be waived if a note from a medical doctor is submitted to the licensee and kept in the child's record.

5.0 Must be sufficient lighting in the sleeping area or room to conduct these direct visual checks.

Procedures: Sleep Period

1.0 Children will be assigned to individual cots or cribs (or mats where a director approval has been granted for children 18 months to 5 years old). A playpen or crib which complies with the standards of the Hazardous Products Act (Canada) and Consumers Protection Act shall be provided for each child under eighteen months of age.

2.0 Cots, beds or sleep mats will be provided for children 18 months old up to and including 5 year olds.

3.0 Playpens or CSA cribs will be provided for children 0-18 months of age.
4.0 When it best supports a child's ability to rest and regulate cots may be used for children 16 or 17 months of age with agency approval. Parents will provide approval in writing to the Provider and agency.
5.0 Once written approval by the parent has been received by the agency the Providers home visitor will sign off. Once this has been completed, the Provider may begin using the cot until the child turns 18 months.
6.0 In the case where a child aged 5 years or less unexpectedly falls asleep, the provider is expected to move the child to a sleep furnishing that meets the regulatory requirements according to the child's age.
7.0 For children aged 6 years or older, there are no requirements in the Regulation regarding the type of furniture on which such a child may sleep or rest.
8.0 Air mattresses are not approved for children younger than 6 years old to sleep/rest on.
9.0 There must be separate bedding for all children. Bedding must be laundered at least weekly. When soiled, bedding must be laundered daily.
10. Parents are responsible for providing and laundering their children's bedding.
11. Parents will be consulted respecting a child's sleeping arrangements at the time the child is enrolled and at any other appropriate time, such as at transitions between programs or rooms or upon a parent's requests.
12. Parents of children younger than 12 months will be advised of the licensee's obligation to ensure that children under 12 months old are placed for sleep in a manner consistent with the recommendations set out in the Joint Statement of Safe Sleep (i.e. placed on their backs)
13. Parents of children who sleep at the provider's premises will be advised of the agency's policies and procedures regarding children's sleep, including recorded observations of them during sleep and may result in changes in which the child is supervised during sleep.
14. The Canadian Dental Association recommends that children not be put to bed with baby bottles (with milk, formula or juice) to prevent early childhood tooth decay

JOINT STATEMENT ON SLEEP SAFETY

PREVENTING SUDDEN INFANT DEATHS IN CANADA

The Public Health Agency of Canada recognizes Sudden Infant Death Syndrome (SIDS) and other infant deaths that occur during sleep as major public health concerns. The Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada is part of the Government of Canada's continuing commitment to raise awareness of sudden infant deaths and safe sleeping environments. The purpose of this statement is to provide health practitioners with current evidence-based information so they may offer parents and Providers information and support to prevent deaths due to SIDS and unsafe sleeping practices, in Canada.

SIDS is defined as the sudden death of an infant less than one year of age, which remains unexplained after a thorough case investigation, including the performance of a complete autopsy, an examination of the death scene, and a review of the clinical history. Current medical and scientific evidence, explains SIDS as a multifactorial disorder arising from a combination of genetic, metabolic, and environmental factors. Terms such as sudden unexplained infant death (SUID) and sudden unexpected death in infancy (SUDI) have emerged in an attempt to group all infant deaths possibly related to the infant sleeping environment. Definitions of these terms have not been consistent enough to make them universally acceptable.

The actual cause or causes of SIDS is unknown. In 2004, SIDS accounted for 5% of all infant deaths (0 to 1 year of age) and 17.2% of post neonatal deaths (28 days to 1 year of age). SIDS can occur at any time during the first year of life but peaks between 2 and 4 months, with fewer SIDS deaths occurring after 6 months. Infants who are male, premature, or of low birth weight, as well infants from socio-economically disadvantaged and Aboriginal populations have a higher incidence of SIDS. Further research is necessary to increase our understanding of the biological causes and mechanisms that predispose some infants to sudden infant deaths relative to non-affected infants in seemingly comparable circumstances.

Large scale epidemiological studies over the last two decades have increased our understanding of SIDS and identified certain modifiable risk factors. The most important modifiable risk factors for SIDS are infants sleeping in the prone position and maternal smoking during pregnancy.

In 1993, the Government of Canada, along with other international organizations, recommended that infants be placed on their backs to sleep and in 1999, reinforced this message by launching the Back to Sleep campaign. The rate of SIDS has been declining since the late 1980's, but between 1999 and 2004, Canada observed a 50% decrease in the rate of SIDS. This decline may be attributable, in part, to changes in parental behaviour such as placing infants on their backs to sleep and decreasing maternal smoking during pregnancy.

Other causes of death that occur while an infant is sleeping may be difficult to distinguish from SIDS. While studying SIDS, researchers have identified additional risk factors in the infant sleeping environment that may contribute not only to SIDS, but to deaths from unintentional suffocation due to overlaying or entrapment. Factors associated with unsafe sleeping environments include infants sharing a sleeping surface with an adult or another child, and the presence of soft bedding.

PRINCIPLES OF SAFE SLEEP AND MODIFIABLE RISK FACTORS INFANTS PLACED ON THEIR BACKS TO SLEEP, FOR EVERY SLEEP, HAVE A REDUCED RISK OF SIDS.

Prone and lateral sleeping positions are linked to increased rates of SIDS, even for infants who regurgitate. Infants who normally sleep on their backs and are then placed to sleep on their stomachs are at a particularly high risk. This reinforces the importance to consistently place infants on their backs to sleep at home, in child care settings, and when travelling. Sleep positioners or any other infant sleep positioning devices should not be used as they pose a risk of suffocation. Once infants are able to roll from their backs to their stomachs or sides, it is not necessary to reposition them onto their backs.

Infants will benefit from supervised tummy time, when they are awake, several times every day, to counteract any effects of regular back sleeping on muscle development or the chance of developing plagiocephaly, commonly referred to as flat head.

PREVENTING EXPOSURE TO TOBACCO SMOKE, BEFORE AND AFTER BIRTH, REDUCES THE RISK OF SIDS.
Maternal smoking during pregnancy is an important risk factor for SIDS. The more a woman smokes during pregnancy, the higher the risk of SIDS. Women who reduce the amount of cigarettes smoked during pregnancy can reduce the risk of SIDS for their infants, and women who stop smoking can further reduce the risk. It is estimated that one third of all SIDS deaths could be prevented if maternal smoking was eliminated.

Infants who are exposed to second-hand smoke after birth are also at a greater risk of SIDS, and the risk increases with the level of exposure.

THE SAFEST PLACE FOR AN INFANT TO SLEEP IS IN A CRIB, CRADLE, OR BASSINET THAT MEETS CURRENT CANADIAN REGULATIONS.

When infants sleep on surfaces that are not designed for them, such as adult beds, sofas, and armchairs, they are more likely to become trapped and suffocate, in particular when the surface is shared with an adult or another child. Other than a firm mattress and a fitted sheet, there is no need for any extra items in a crib, cradle, or bassinet. Soft bedding such as pillows, duvets, quilts and comforters, as well as bumper pads increase the risk of suffocation.

Overheating is a risk factor for SIDS. Infants are safest when placed to sleep in fitted one-piece sleepwear that is comfortable at room temperature and does not cause them to overheat. Infants do not require additional blankets as infants' movements may cause their heads to become completely covered and cause them to overheat. If a blanket is needed, infants are safest with a thin, lightweight, and breathable blanket.

Strollers, swings, bouncers, and car seats are not intended for infant sleep. When sleeping in the sitting position, an infant's head can fall forward, and their airway can be constricted. This risk reinforces the importance to move an infant to a crib, cradle, or bassinet to sleep, or when the destination is reached.

INFANTS WHO SHARE A ROOM WITH A PARENT OR PROVIDER HAVE A LOWER RISK OF SIDS.
Room sharing refers to a sleeping arrangement where an infant's crib, cradle, or bassinet is placed in the same room and near the parent or Provider's bed. Infants who share a room have a lower risk of SIDS and will benefit from room sharing for the first 6 months during the period of time the risk of SIDS is highest. Room sharing facilitates breastfeeding and frequent contact with infants at night.

Bed sharing describes a sleeping arrangement where an infant shares a sleeping surface such as an adult bed, sofa, or armchair with an adult or another child. Sharing a sleeping surface increases the risk of SIDS and the risk is particularly high for infants less than 4 months of age. Sharing a sleeping surface with an infant also increases the risk of entrapment, overheating, overlaying, and suffocation. The risk of SIDS and other unintentional deaths that occur during sleep increase further when an infant shares a sleeping surface with a parent or Provider who smokes, has consumed alcohol, is under the influence of sedating drugs, or is overly tired.

Instructions:

As per the CCEYA, the Provider will perform direct visual checks hourly for children 24 months and younger while children are sleeping and record the times. Children sleeping overnight will be checked a minimum of 3 times. Each child who is 18 months or older but younger than 6 years old and who receives child care for six or more hours has a rest period not exceeding two hours in length.

Visual sleep checks will be documented in the daily journal.

Sleep monitoring devices are to be checked daily to make sure they work and this check will be recorded daily in the provider's journals. These monitors cannot be used in place of the visual checks.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.17**
Policy:	**Supervision: Provider's Home**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 25, 2026**

Policy

The Ministry of Education requires that every child in attendance is supervised by an adult at all times. An adult is defined as a person 18 years of age or older. Providers who are registered with Family Space Licensed Home Child Care Program must ensure that children are appropriately supervised at all times while in their care.

Procedures

A. Supervision in Provider's Home

1.0 The adult dropping the child off at the Provider's home must ensure that the child is released directly to the Provider.
2.0 At time of pickup, the Provider can only release the child directly to the adult authorized on the parent/Provider agreement.
3.0 Providers are responsible for ensuring that a child(ren) in their care is never left with anyone under the age of 18 years of age.
4.0 Providers are not permitted to visit other Provider's homes.
5.0 Children will not be left in the car without an adult present.
6.0 Children are not to be on a balcony at any time.

B. Outdoor Supervision

7.0 Effective March 25, 2026 no new Providers will be approved to have a septic tank in their outdoor play space.
7.0 A Home Visitor will review all outdoor supervision requests made.
8.0 Healthy children are to play outside for a minimum of two hours per day under the supervision of the Provider. The Provider is always required to remain with children under the age of six during outdoor play. The supervision of outdoor play for children ages six and older shall be agreed upon by the parent and the Provider and the Home Visitor. The Provider must always know the whereabouts of the children and must have appropriate contact with them as indicated by the parent.
9.0 Outdoor play for children is to be supervised in accordance with the Outdoor Supervision Plan agreed upon by the Provider, a parent and a Home Visitor

OUTDOOR SUPERVISION PLAN

I agree to the following outdoor supervision plan for my child(ren):
Child Name: Click or tap here to enter text. Age: Click or tap here to enter text.

Infants and toddlers must be seen; preschoolers seen or heard, School-Age – supervision for children 6 and older may be discussed and documented with the parent and Home Visitor.

Supervision	Activities
Within Visual and Audio Distance	
Other: Detailed Explanation	

X
Parent Signature

Date: Click or tap to enter a date.

X
Provider Signature

Date: Click or tap to enter a date.

X
Home Visitor Signature

Date: Click or tap to enter a date.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.18**
Policy:	**Supervision: Walking To and From School**	**Date Approved:**	**November 2002**
		Date Reviewed:	**August 31, 2023**

Policy

The parent is ultimately responsible for the child during the time that the child walks herself/himself to and from school. Children under 9 years of age must be escorted. Children 9 and older may walk to school unescorted with written approval from parents.

Procedures

1.0 An Escorting Children Consent Form must be filled out by the parent for all children who independently walk to and from school to the Provider's home.

2.0 A Home Visitor will review the Escorting Children Consent Form.

3.0 Parents must have requested and consented to children walking (or riding) unattended by an adult in writing prior to the child being allowed to do so.

4.0 The Provider and Home Visitor must sign the consent form indicating that they support the consent form.

5.0 The Provider is responsible for the children only after they arrive into the Provider's home or as agreed upon by both parties in the Provider/parent agreement.

ESCORTING CHILDREN CONSENT FORM

A. Children Eight Years of Age or Younger

This/these child(ren) will be escorted to and from school or bus stop as follows:

Child's Name: _____	Telephone: (____) _____
Name of School: _____	Telephone: (____) _____
Escort: _____	Telephone: (____) _____
Child's Name: _____	Telephone: (____) _____
Name of School: _____	Telephone: (____) _____
Escort: _____	Telephone: (____) _____
Child's Name: _____	Telephone: (____) _____
Name of School: _____	Telephone: (____) _____
Escort: _____	Telephone: (____) _____

B. Children nine years of age and older

☐ _____ does not require an escort.
(Insert Child(ren)'s Name)

☐ _____ does require an escort as follows:
(Insert Child(ren)'s Name)

Child's Name: _____	Telephone: (____) _____
Name of School: _____	Telephone: (____) _____
Escort: _____	Telephone: (____) _____
Child's Name: _____	Telephone: (____) _____
Name of School: _____	Telephone: (____) _____
Escort: _____	Telephone: (____) _____

Parent's Signature: _____ Date: _____

Provider's Signature: _____ Date: _____

Home Visitor's Signature: _____ Date: _____

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.19**
Policy:	**Equipment**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 10, 2026**

Policy

Equipment in the Provider's home will be safe and promote healthy child development. Providers registered with Family Space Licensed Home Child Care Program are required to utilize equipment necessary to providing care for children.

Toys and materials purchased with funding from Hastings County must be transferable.

Procedures

1. The Child Care and Early Years Act requires that all indoor and outdoor toys and equipment for children in the Provider's home are required to be clean and in good repair. Providers will inspect equipment regularly.
2. Resources, equipment and furnishings that become unsafe or pass the manufacturer's recommended expiration dates will be removed from the program immediately.
3. Providers will sign an Equipment for Loan agreement for any equipment on loan from Family Space and accept responsibility for equipment on loan that is damaged beyond normal wear.
4. A Home Visitor will, as part of home visits, will include addressing the safety of play materials, equipment and furnishings equipment through inspection.
5. All equipment for children (i.e. car seats, cribs) is required to meet CSA approved standards and any government regulations. It is the Provider's responsibility to ensure that all toys and equipment meet the required safety standards.
6. Outdoor equipment on loan from Family Space will be stored in a suitable location to maintain safety and quality of equipment i.e. garage, shed, tarp etc.
7. Baby walkers are not permitted to be used in the Provider's home.
8. Providers are to ensure there are adequate developmentally appropriate toys to serve the number of children receiving care to support the learning and development of each child. There must be a sufficient variety to allow for the rotation of the play materials in active use, and available and accessible to the children throughout the day. Resources must be of such type and design to allow the children to make choices and to encourage exploration, play, and inquiry
9. For each infant who receives home child care at the premises, a cradle or crib or playpen that complies with the standards for cradles, cribs and playpens in the regulations made under the *Canada Consumer Product Safety Act*, and bedding will be available.
10. For each child 18 months old up to and including five years old who receives home child care at the premises for six hours or more, a sleep mat, cot or bed and bedding is available.

11. When a Provider leaves the program they must give any equipment on loan from the agency to another Provider, with approval from the agency, or return to the agency within 3 business days of termination of their agreement. This includes green licensing decals and tablets or laptops. The deposit from a provider's final invoice will be withheld until all equipment has been given to another provider or returned to the agency.
12. Family Space is not responsible/liable for loaned equipment that is not returned to the agency upon termination of provider/agency agreement.

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.20**
Policy:	**Trips**	**Date Approved:**	**November 2002**
		Date Reviewed:	**August 21 2023**

Policy

Providers registered with Family Space Licensed Home Child Care must discuss with parents plans for outings and trips that may involve their child.

Procedures

Permission to travel with children in the Provider's vehicle is given by the parent on the registration form.

Trips outside of the Providers immediate community must be approved in writing by parents on a Family Space provided form before the trip occurs.

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.21**
Policy:	**Water Quality**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

Providers registered with Family Space Licensed Home Child Care in rural settings must test the quality of their water seasonally. The Hastings Prince Edward Health Unit states that well water is susceptible to pollution from numerous sources.

Procedures

1.0 All rural well water must be tested before a Provider begins providing care with the Licensed Home Child Care Program of Family Space Quinte Inc.

2.0 All rural well water must be tested seasonally at the Provider's expense.

3.0 Water bottles can be obtained from any Hastings and Prince Edward Health Unit Office.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**QUALITY HOME CHILD CARE**	**Policy Number:**	**5.22**
Policy:	**Water Safety**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

Ministry of Education requires that **no child under six years old in licensed home child care is permitted to use or have access to any standing or recreational body of water (ie: pools, ponds, hot tubs, beaches, etc) on the Providers premises.**

Children may have access to a pool off the Provider's premises only, as long as someone who meets the qualifications for a lifeguard set out in Ontario Regulation 565 (Public Pools) is present. Providers are responsible for following the safety rules and regulations at the recreational facility.
Children who are six years old and over are permitted to swim at beaches with their Provider where water quality is monitored, and lifeguards are present.

Procedures

1. If water facilities are used there must be a reaching tool near the water and measures need to be put in place to ensure children do not slip or fall.
2. Medication
3. authorization forms need to be signed by parents and parents need to give authorization in the parent/Provider agreement/contract outlining details regarding supervision
4. A phone needs to be within reach of the pool at all times
5. The Provider needs to have a written agreement with a Home Visitor to ensure the safety of all children before the pool can be used for children .
    a. All Provider homes that have standing bodies of water/swimming pools are in compliance with local by-laws requiring private residences with standing bodies of water/pools etc. in their catchment area to have an enclosure (e.g., fence and a latched gate).
6. Children 6 and older may only have access to a pool on a Providers premises if someone who meets the qualifications for a lifeguard set out in Ontario Regulation 565 (Public Pools) is present.

<u>Water Safety Best Practices for all licensed child care operators.</u>

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

2) Parents/guardians are advised of the field trip and have signed a consent form.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.1**
Policy:	**Emergency Alternate Providers, Home Visitor Alternate Care Coverage, Volunteers, Regular Visitors, Students & Others**	**Date Approved:** **Date Reviewed:**	**November 2002** **July 6, 2026**

Policy

Emergency alternate Providers can be used on a short and infrequent basis when the Provider has an emergency or an appointment. The Provider must ensure compliance with established guidelines for the use of emergency alternate Providers. Parents must sign an agreement with the Provider stating all emergency alternate Providers that may be used.

All emergency alternate Providers, students, volunteers, residents over the age of 18, and any adults who may have interaction with children in the Provider's home must review policies annually. Persons who are used as emergency alternate Providers must have WSIB approved Intermediate/Standard First Aid /and Level C CPR and a VSC. Providers are responsible for reviewing policies with all emergency alternate Providers, residents over the age of 18 annually. A Home Visitor will ensure sign off from students and volunteers. A VSC must be submitted to and approved by the agency for regular visitors before they visit.

In addition to policy sign off and VSC's **volunteers** are also required to submit proof of current TDAP immunization.

Procedures

The use of an emergency alternate Provider is to be for very short periods of time and is to be on an infrequent basis i.e. medical appointments, when the Provider walks children to and from school while younger children are sleeping, emergencies. In special circumstances, when it is for a non-emergency, a Provider may make a request to the Home Visitor to use an emergency alternate Provider.

1. Emergency alternates may not transport children into their vehicle at any time. The intent is if an emergency alternate has to be utilized, it is the emergency alternate who stays in the Provider's home while the Provider provides the transportation of children. I.e.: picking up children from school.

2. No child is supervised by a person less than 18 years of age.

3. Providers should have procedures for emergency evacuation and supervision that they review frequently. Providers can contact Family Space for emergency supervision when necessary.

4. Vulnerable sector screening checks every 5 years and statement Vulnerable Sector Screening Check – completed every 5 years. An offence declaration in every calendar year after initial vulnerable Sector Screening Check and shall be current to within 15 days of the anniversary date of the previous offence declaration or vulnerable sector check and shall address the period since the most recent offence

declaration or vulnerable sector check. This is for the Provider and anyone 19 years or older living in the home and any emergency alternate Providers.

5. No person under the age of 18 is required to obtain a Vulnerable Sector Check. However, within one month after the person turns 18 years old, they are required to provide a statement that discloses every previous finding of guilt under the Youth Criminal Justice Act (Canada), if the person received an adult sentence.

6. Emergency alternate Providers and others over the age of 18 years living in the Provider's home must submit to the agency proof of current immunization or objection.

Alternate Providers, Home Visitor Alternate Care Coverage, Volunteers, Regular Visitors and Students & Others

1. Emergency alternate Providers must have current WSIB approved Intermediate/Standard First Aid and Level C CPR

2. The individual plan (Family Service Plan) for a child with exceptionalities and/or anaphylaxis and the emergency procedures are reviewed and signed off by alternate Providers or volunteers or others who will be providing care or guidance in the Provider's home before they begin providing care and annually afterwards. These policies and procedures will be reviewed with alternate Providers or volunteers or others by the Provider registered with Family Space Licensed Home Child Care program. Family Service plans will not contain medical information without written consent from parents.

3. On occasion, Family Space may approve some college placement students to volunteer in a program. High school students are not approved. Some adults volunteering occasionally, not for compensation of any kind i.e. payment/volunteer hours, may be considered. For example, a providers own mother spending some time engaged in program with children.

4. Volunteers must be approved by Family Space before volunteering.

5. Students placed in the home of a Provider will attend orientation with the Home Visitor before beginning placement. Orientation will include review of all Family Space policies and procedures, program philosophy and the needs of individual children. During orientation students will review and sign off on Alternate Providers, Volunteers and Students policy as well as program statement including self-regulation and Anaphylaxis policies before placement in a Provider's home begins and annually afterwards. Students will receive a Parent Handbook during orientation.

6. Students, volunteers and regular visitors will not be left unsupervised by the Provider or alternate Provider with any child.

7. Alternate care must be provided in the Provider's home that has been approved by Family Space Quinte Inc.

8. Alternate Providers are not to administer medication to a child unless in the case of a life-threatening emergency.

9. Alternate Providers or volunteers and students are expected to comply with all policies and procedures in the Provider policy manual, review annually.

10. All parents who could be potentially affected on the given days must give written approval of the use of the alternate Provider.

11. If parents do not approve of the alternate Provider and choose not to bring their child to care on that day, the parent will not be charged for that day.

12. Parents must be notified in advance of all potential short-term Providers. They must give written agreement authorizing the alternate Provider to provide childcare to their child. These names will be listed on the Parent/Provider Agreement and must be updated by the Provider when names are added or deleted. These authorization forms must be completed and signed by the parent when any new alternate Providers are added.

13. Family Space Quinte Inc. does not have to be notified each time a short-term alternate Provider is used.

14. Providers may use other providers registered with Family Space as alternate providers. This may include last minute arrangements. When another Family Space provider is an alternate, they must have a copy of the child's registration form, custodial arrangements, any anaphylactic allergy plans or medical plans, and a printed emergency card before the child's arrival. Any dietary restrictions will be posted. The office must be notified of the alternate care arrangement.

15. Family Space will review the Alternate Provider, Volunteer and Students policy annually.

16. The Alternate Provider, Volunteer and Student policy will be reviewed and signed with alternate Providers by the registered primary Provider before alternate care is provided. Alternate Providers will review policies annually afterwards.

17. Regular Visitors are defined as someone who visits often enough that children in care can recognize them. Examples of a regular visitor would be a neighbour, friend, family member, child's tutor, repeated cleaning service etc. who are on the Provider's premises during the hours of care,

18. Parents of children in care are not considered regular visitors if they are only in care for drop off and pick up.

19. Any visitor staying in the home of a Provider for more than 2 consecutive weeks must have a VSC submitted to and approved by the agency before they visit.

20. The Parent Handbook is available on the Family Space website.

	Section: HOME CHILD CARE PROGRAM OPERATIONS	**Policy Number:**	**6.1a**
Policy:	**Home Visitor Well Being Coverage**	**Date Approved:**	**November 2002**
		Date Reviewed:	**April 7, 2026**

Home Visitor Well-Being Coverage
Policy:

Family Space supports Providers own well-being. To offer this support Home Visitors may provide alternate care for Providers while they attend medical, dental, or other approved well-being appointments for themselves. Approved appointments include doctor, dentist, chiropractor, registered massage therapy, physiotherapist, specialist, counselling, medical tests etc.
This coverage is not approved for pedicures, haircuts, shopping, attending their own children's field trips etc.

Home Visitors must comply with Ministry regulations regarding ratios. All children, including the Providers own children 4 – 12 years of age, must be counted in ratios when a Home Visitor is offering alternate child care.

Procedure:

Providers may schedule one visit every 3 months, up to 2.5 hours. Another visit can be scheduled any time within the third month from the last visit, it does not have to be exactly to the date.
If an appointment will be more than 2.5 hours Providers will have another alternate provider available for the duration of their appointment, or they will close for the day.

Providers must request coverage at least 2 weeks in advance of their appointment.

A well-being coverage form will be emailed to the provider when/if the request is approved. Completed forms must be submitted to the office within 3 business days of the appointment so home visitors have the information needed to best support the children in care.

Home Visitors will make their best attempt to accommodate providers requests, but there is no guarantee they will be able to meet those needs. Some requests may be declined due to scheduling.

Coverage will not necessarily be offered by a Providers Home Visitor that is typically assigned to them. Any of Family Space's Home Visitors may be available for appointment coverage.

Providers must inform parents in advance if a Home Visitor will be providing alternate care coverage. If parents choose not to attend on a day a Home Visitor is providing care, the parent will not be billed for the day as the Provider was not available as per the schedule in the parent/provider agreement.

Home Visitor Well-Being coverage is available any time between 8:00 a.m. and 4:30 p.m.

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Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.2a**
Policy:	**Attendance**	**Date Approved:**	**November 2002**
		Date Reviewed:	**February 3, 2026**

Policy

Providers registered with Family Space Quinte Licensed Home Child Care Program will record the daily attendance of children as required by the Child Care and Early Years Act, and Purchase of Service Agreement with the County of Hastings.

Procedures

1.0 Providers will record the daily attendance of children on the fillable Excel spreadsheet:

Provider Invoice – verifying the days and times care is utilized. These are to be filled out daily and are submitted twice per month on the 1st and 16th every month. Providers will not charge for more than 6 children at a time. If a child is absent and the Provider is billing for that child's absence, the Provider may not fill the spot with another child and bill them both. This is considered "double dipping" and is not permitted. If the Provider fills the spot of the absent child, the Provider will bill the family using care and not the absent child.

Attendance Record – to be filled out each day immediately as soon as children arrive, and immediately upon departure. The time of arrival and departure is to be accurately recorded. If a school age child accessing fee subsidy is absent on a day that school buses are cancelled due to inclement weather, Providers are required to record "buses cancelled" for the children affected in the notes section of their invoice

2.0 Invoices that are submitted beyond the deadline of the 1st and 16th **will not be** processed and deposited on the regular deposit schedule. Depending on when the invoice is received, providers may receive their deposits when processing can be completed, normally within a week. For example, if a provider invoice has not been received by the scheduled deadline of February 16th, they would not receive their deposit on February 25. The deposit could be a week later depending on submission and processing times. The office staff will not reach out to request and process late submissions. As independent business owners, submissions of invoices on time is the responsibility of providers.

3.0 Hastings County Children's Services dictates that the following codes must be used monthly to indicate funding requirement in order to accurately calculate client attendance.

Sick, absent, withdrawal, holidays, vacation days and billable scheduled closure days are to be recorded in the following manner by Providers:

a) The code "S" is for child is sick and be billed for a scheduled day
b) The code "A" is for child is absent and being billed for scheduled day
c) The code "BC" is used for billable closure days.
d) Highlighting the arrival cell is used for child's last day being billed.

**** Providers must report any absences of 3 consecutive days to their Home Visitor. ****

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.2b**
Policy:	**Safe Arrivals/Departures**	**Date Approved:**	**November 24, 2023**
		Date Reviewed:	**October 28, 2025**

Policy

This policy and the procedures within help support the safe arrival and dismissal of children receiving care.

This policy will offer Providers, staff (e.g., home child care visitor, home child care agency administrators, etc.), students and volunteers with a clear direction as to what steps are to be taken when a child does not arrive at the home child care premises as expected, as well as procedures to follow to ensure the safe arrival and dismissal of children.

This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for policies and procedures regarding the safe arrival and dismissal of children in care.

Procedures

Accepting a child into care

The Provider is responsible for signing children in on the attendance record as children arrive at the home premises where care is provided.

The Provider is responsible for ensuring any communication from parents related to drop-off or absences is noted in their daily journal.

Where a child has not arrived in care as expected

1. Where a child does not arrive at the home child care premises and the parent has not communicated a change in drop-off or that the child will be absent (e.g., sent a text, left a voice message or advised the home child care provider at pick-up) the home child care Provider must:
    - Contact the child's parent within 20 minutes of the child not arriving at the scheduled arrival time. Providers shall call, text, and/or leave voice messages to parents or guardians inquiring about the late arrival or absence.
    - Providers who do not hear back from a parent within 15 minutes will then reach out to other adult contacts and/or the emergency contact person listed on the registration form to inquire about the absence and ask for assistance in contacting the parent.
    - If the Provider has not received confirmation of the child's safe absence within 1 hour of the child's scheduled arrival, the Provider will reach out to a Home Visitor for guidance.

2. Once the child's absence has been confirmed, the Provider shall document the child's absence on the attendance record and any additional information about the child's absence in the daily written record.

Releasing a child from care

Providers shall only release the child to the child's parent or another individual that the parent has provided written authorization that the child may be released to.

Where Provider does not know the individual picking up the child, the Provider must ask the parent/guardian/authorized individual for photo identification and confirm the individual's information against the parent/guardian/authorized individual's name on the child's file or written authorization provided by parent.

Where a child has not been picked up as expected

1. Where a parent/guardian or authorized individual who was supposed to pick up a child from care and has not arrived by the end of the Providers day time hours, the Provider shall ensure that the child's basic needs are met i.e given a snack and/or activity, while they await their pick-up.
2. Providers will try to contact parents, guardian or authorized pick up individual to advise that the child is still in care and inquire their pick-up time.
3. Where the Provider is unable to reach the parent, guardian or authorized pick up individual, the Provider shall contact the emergency contact individual and a Home Visitor for guidance.
4. Where the Provider is unable to reach the parent/guardian or any other authorized individual listed on the child's file including emergency contacts by 8:00 p.m., the Provider, with a Home Visitor's guidance, may proceed with contacting the local Children's Aid Society (CAS) 1-800-267-0570. The Provider shall follow CAS's direction with respect to next steps. The Provider shall also advise a Home Visitor of CAS's direction and record the details of the situation in their daily journal.
5. If overnight children are not picked up on time the Provider will contact a Home Visitor for guidance regarding supervision, ratios, and next steps.

Dismissing a child from care without supervision procedures

Where a parent has provided written and signed authorization, that has also been signed by a Home Visitor, for their child to be released from care without supervision, the Provider must be responsible for dismissing the child from care. Prior to dismissing the child from care, the Provider shall review the written instructions for release provided by the parent and release the child at the time set out in the instructions. The Provider shall document the time of departure from care.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.3**
Policy:	**Care Capacity and Placement Limitations**	**Date Approved:**	**November 2002**
		Date Reviewed:	**April 8, 2025**

Policy

The maximum capacity of children in the care of a Provider will be in compliance with the Child Care and Early Years Act.

A Provider registered with a Family Space licensed home child care Provider can care for a maximum of 6 children under the age of 13 at any one time.

Providers must count their own children under the age of 4.

Providers may care for a **maximum of only 3 children under the age of 2** (including their own children).

A Provider's own children are counted in the maximum allowable care capacity if they are under 4 years of age.

The Provider/Agency agreement will establish a maximum capacity in accordance with the Act for each Provider registered with Family Space Licensed Home Child Care Program.

It is at the Home Visitor's Discretion (with consultation from the Executive Director) the number and ages of children each Provider may have enrolled at any one given time.

The overall safe accommodation for the children in care will be the primary consideration when determining the number and ages of children a Provider may have. Other considerations include:

1. The ages of the children in the group.
2. Any medical or special needs of the children in the group.
3. The ability of each child to evacuate independently in an emergency.
4. The experience and qualifications of the home child care Provider.
5. The physical environment of the premises, including the total amount and distribution of space in the premises

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.4**
Policy:	**Premium Care & Premium Billing Days**	**Date Approved:**	**November 2002**
		Date Reviewed:	**April 21, 2026**

Policy

Public holidays are considered billable closures for Providers. As independent contractors, Providers registered with Family Space Licensed Home Child Care Program, may use their own discretion with regard to providing care on public holidays or premium days. The County of Hastings through the Purchase of Service Agreement determines which days can be charged as premium days and as such Providers are able to charge a higher rate.

If a Provider chooses to provide care on a public holiday, families will be billed a premium rate and another day of the Providers choice will be considered a billable closure in lieu of the public holiday worked. If a public holiday lands on a day Providers do not offer care, the next business day, as recognized by Family Space, will be considered the holiday in lieu. The regulations of the Child Care and Early Years Act are to be followed when a Provider chooses to provide care which the County of Hastings deems as "premium" care.

Parents requesting care on a public holiday must complete a "Public holiday request form" before the holiday. If the correct form is not completed and submitted to the agency before the public holiday, providers will not be able to charge for the holiday.

Procedures

Providers are required to complete and maintain an accurate Parent/Provider Agreement. A copy of this agreement needs to be submitted to the agency.

1.0 The public holidays/ or premium days identified in the Province of Ontario and/or the County of Hastings are as follows:

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

It is assumed that care is not required on public holidays and 2 weeks notice of the interruption in care is not required if the Provider offers care on the holiday.

2.0 Premium child care rates are charged if Providers provide care on these days. Premium child care rates are also charged if care is provided on a Saturday or Sunday, or if the majority of care occurs before 7:00 am or after 6:00 pm

3.0 The Ministry of Education requires that when care is provided overnight, beds and mattresses are to be provided for children over 18 mos. of age.

4.0 Fire evacuation plans need to be discussed with a fire inspector to ensure they are adequate for extended hours of care.

5.0 When abnormalities outside of Family Space general billing structure arise, the home childcare team will decide on each situation. This may apply to multiple drop off and pick-ups in a given day. Providers will give 2 weeks written notice to families of any closures including Public Holidays.

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Licensed Home Child Care Program

Section:	**HOME CHILD CARE OPERATIONS**	**Policy Number:**	**6.5**
Policy:	**BILLABLE CLOSURES**	**Date Approved:**	**January 1, 2025**
		Date Reviewed:	**April 21, 2026**

Policy

CWELCC guidelines allow 20 billable days of closures in a calendar year, January 1 – December 31. The 20 days consist of:

- **11 Public Holidays**
- **Up to 9 Flexible Billable Closure Days**

Flex days can be used with 2 weeks notice for scheduled closures and no notice required for sick days.

These days cannot be accrued and cannot be carried over to the following year. If all 20 days are not used in a calendar year, there is no compensation of payment for unused days.

Providers will not receive the HCCEG during periods of Billable Closures as Providers are not open and available during these periods.

Individual families will not have to pay for more than 20 scheduled closures in a calendar year, regardless if they use more than 1 provider.

For split families with separate accounts, when a Provider is charging for their own billable scheduled closures, each parent will be billed for the days they are responsible for according to their agreement.

Families will not be charged for billable closures until after care commences.

Under CWELCC guidelines, Providers may not close for more than 10 consecutive billable days at a time.

For closures due to events outside a Provider's control (i.e., natural disaster/weather event, pandemic, school board strike) the days of closure are not counted toward the 20 paid full closure days.

This policy can change with the Ministry and County of Hastings funding allocation and policies at any time, and as per new funding guidelines.

Part days for billable closures are not permitted. Providers must decide if they are declaring the day as a billable closure or not. For example, providers cannot use a billable closure for most of the day, then provide after school or evening care. If afterschool or evening care is offered, it is not a billable closure. Special circumstances will be considered on a case by case basis for overnight care. Providers will consult with their home visitor for approval.

Procedures

Billable Closures are billed based on the current provider/parent agreement on file.

Closures with notice: Providers are required to give parents 2 weeks written notice of scheduled days i.e vacation, a day for appointments etc. Providers will email the office at childcare@familyspace.ca when giving notice to the agency.
Closures without notice: In the event of closures due to illness of a Provider or Provider's own child 2 weeks notice is not possible, therefore not required. Closing for the day requires provider to report to parent, their home visitor, childcare@familyspace.ca and **note if they are billing or not for the sick day**.

Pro-Rated Closures
Billable closures are **pro-rated** for:

- Providers working fewer than 5 days/week
- Providers active for only part of the year

Examples:

- 4 days/week: **7 days** (9 × 4 ÷ 5)
- Active 9 months of the year: **7 days** (9 × 9 ÷ 12)

Family Space will calculate and confirm all pro-rated amounts.

New Providers – Flex Day Eligibility by start date

- Jan–Mar: **9 days**
- Apr–Jun: **6 days**
- Jul–Sep: **4 days**
- Oct–Dec: **2 days**
- All new Providers may bill **public holidays**

Pro-Rating for Multiple Providers
If a family has an agreement with 2 or more Providers at a time, the family will not be charged more than the 9 flexible days total. The 9 days will be pro rated as per the parent/provider agreement as to how many days each provider will charge. Family Space will calculate the pro rated days and share them with the providers.

Pro-Rating Summer Care
Families using summer care only will be pro rated at approximately 1.5 days per month for the billable closure days they will be charged for. For example, a family using summer care only, whose child is not in care at all the other 10 months of the year, will only be charged for a maximum of 3 provider billable closures.

Occasional back up providers are not eligible for the pro rated calculation, only providers offering a regular schedule of care. If a family switches Providers part way through the year, the family will still only be charged for 20 days in the entire year; depending on how many they have paid for before switching Providers will determine how many the second Provider may charge for.

Billing Rules
When recording the closure days, Providers will complete invoices using the code BC to specify scheduled closure days. In supporting providers independence and accountability, Billable Closures that are not clearly marked BC on invoices will not be questioned or corrected. If the invoice is processed and a provider realizes later she should have marked BC on a stat, the provider will not receive earnings for this day and the day will be forfeited

from the total of 20 Billable Closures**. Providers are responsible for recording BC even on stats**. The total on the invoice summary is what they will receive.

Providers must notify the agency at childcare@familyspace.ca and their home visitor when they are closed. Failure to report a closure will result in the BC being removed from the invoice. Billable closures that are not stats and were not reported that have been removed from the invoice will not be forfeited and can be used at another time in the same calendar year.

School aged children regularly scheduled for Before and After school care on the day the public holiday falls will be billed the Before and After school rate, not a full day rate. The exception to this is public holidays that occur in the summer if the Provider/parent agreement includes scheduled full days for the day of the public holiday. For example, if Canada Day, August Civic holiday and Labour Day fall on a scheduled full day according to the agreement, Providers can charge a full day for the billable closure.

Another exception will be Christmas break. If a child is scheduled for all the Christmas break except for the stats (7 days of care) the provider can charge a full day code for the stats. If a family is scheduled for less than 7 days of care during the Christmas break, the provider will charge their regular before and after school rate for the stats.

If a Provider is open and provides care on a public holiday, the premium rate will be charged to families and the Provider may choose another day to use in lieu that calendar year as a billable closure. Parents will complete a "Public holiday request form" before the holiday if care is required on the public holiday. The office must receive the public holiday request form and give approval to the provider before care on the stat can be offered.

When a family withdraws from care, and the child will not be returning after the billable closure, the provider will not charge the family for the billable closure as the child is no longer considered an active child in care. There will be no charge after the child's last day in care.

If a family has a varying schedule, the Provider will charge according to the weekly average of the month prior unless otherwise stated in the Provider/Parent agreement.

Billable closures on public holidays will be invoiced at the regular rate. If a public holiday lands on a weekend, the next business day, as recognized by Family Space, will be considered the public holiday. For example, if Canada day/Christmas day/Boxing day/New Years day land on a Saturday or Sunday, Monday will be recognized as the public holiday.

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**HOME CHILD CARE OPERATIONS**	**Policy Number:**	**6.5**
Policy:	**SHORT TERM VACANCIES**	**Date Approved:**	**May 9, 2024**
		Date Reviewed:	**November 4, 2025**

Policy

Effective January 1, 2026 Short Term Vacancy funding is available to new Providers only, through the Canada Wide Early Learning and Child Care system (CWELCC). Short Term Vacancies are defined by Hastings County as a CWELCC-eligible space in which no revenue is collected by Family Space for a period no longer than 2 weeks. This applies to new Providers only. New Providers may claim vacancy funding for up to two weeks for CWELCC spaces that have yet to be filled. The Provider must be actively trying to fill the space(s).

This policy and procedures are dependent on funding allocation by the Ministry of Education and Hastings County. This policy and procedures can change at any time as per any new funding guidelines.

Procedure

1. Short Term Vacancy Funding will only be available for actual vacancies in the new Providers home. If a new Provider has two vacant spaces they are offering, they will be eligible for funding for those two spaces.

2. New Providers will not collect other non base fees, private or through Family Space, for space they are receiving Short Term Vacancy funding for.

3. New Providers are required to record how they are looking to fill the available space on the vacancy tab on the invoice to support compliance. For example – May 16, 2024 advertised in Quinte Child Care on FB. Advertising in the closed FB group or their own personal FB group, telling Home Visitor/office, or telling current families is not considered sufficient advertising. This only notifies a small handful of people; providers need to advertise their space to the community. New Providers must include a clear screenshot of their advertisement with their invoice when reporting vacancies and include the schedule and spaces available. This ad must be posted prior to submitting a claim for vacancy. For example, if a new provider claims vacancy space on April 1, the screenshot of the advertisement of space must be posted prior to April 1. If the screenshot of the ad is posted on April 3, providers would be eligible for only 8 of the 10 vacancy days.

4. New Providers cannot claim vacancy for days they are closed.
5. New Providers will claim Short Term Vacancies on the vacancy tab of their electronic invoice using the code of the vacancies they are trying to fill. Short term vacancies are paid for with the regular pay schedule. New Providers will document how they are trying to fill their vacancies on the vacancy

tab of their invoice. On the Vacancy tab under Vacancy to fill, New providers can list Vacancy to Fill as Space 1, Space 2, Space 3 etc.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.6**
Policy:	**Base Late Fees and Billing During Uncontrolled Closures**	**Date Approved:**	**September 2019**
		Date Reviewed:	**November 4, 2025**

Purpose:

To give Providers registered with Family Space Licensed Home Child Care the ability to charge non base late fees to parents should they wish to implement and collect.

Policy:

Providers can charge non base late fees to families to ensure that their time with their own family is respected. The Providers set their own individual rules related to time charged, when charged and non base fee charged. The Providers must collect the non base fees directly from the parents. It is not related to Family Space billing for care used.

Providers cannot bill to hold a space for a new child registration that has not yet started.

Procedures:

1. Providers may consider developing and signing a separate contract, aside from the Family Space Parent/Provider agreement outlining their non base late fee policy including non base fees and conditions.

2. Providers will distribute a receipt for non base late payment fees to parents.

3. There will be no charge for the receipt.

4. Effective November 14, 2022, in the event of an uncontrolled closure such as a pandemic, natural disaster, school strike etc., 2 weeks notice of an interruption in care from families is not required. Providers will receive compensation for one week from the beginning of the interruption according to their children's scheduled contract. The situation will be re-evaluated after one week and on an ongoing basis.

5. Family Space will seek funding from Hastings County Children's Services to support parent base fees during this time.

	Section: HOME CHILD CARE PROGRAM OPERATIONS	**Policy Number:**	**6.7**
Policy:	**Base Fees, No wait List, Provider Payment Policy**	**Date Approved:**	**November 2002**
		Date Reviewed:	**May 28, 2025**

Policy

Providers registered with Family Space Licensed Home Child Care Program are required to submit attendance and billing information based on the defined process to ensure accurate and timely compensation for child care services provided. Parents with Family Space Licensed Home Child Care Program are required to pay base fees based on the defined process to ensure continuity of childcare without disruption as per our NSF policy.
For any NSF payments, a two-week notice of termination of care will be given to the parents and providers starting on the debit date of the invoice. It is the parent's responsibility to ensure that they pay in full by e-transfer to childcare@familyspace.ca the amount owing plus $30.00 non base NSF fee before the two weeks has lapsed to ensure that there is no interruption of care. If care is terminated, families will need to confirm space is still available before they can return to care.

Providers will not receive earnings for any scheduled billable closures until after care has commenced with a Provider.

If a parent has 3 NSF payments, care may be terminated immediately, without notice. Individual cases will be reviewed by the agency to determine whether care may continue or not.

Flexibility is offered through Licensed Home Child Care to families. As independent contractors, Providers are able to determine whether or not they will take children who are looking for care. As a result, there is no waiting list for services. Child care inquiries will be accepted by the agency, and an attempt will be made to meet the family's child care needs. When a suitable space is available, the agency will make the family aware of the space. If no suitable space is available, the family may try back again at a later date. Providers are encouraged to connect with the agency regarding past child care inquiries to fill their spaces as they become available.

As independent contractors, Providers are fully responsible for paying any applicable taxes pertaining to their child care business.

Procedures for Providers Invoices:

1.0 The rate for the next age group will come into effect as of the first day of the month following a child's birthday. **Children turning 6 between January 1 and June 30 will remain under CWELCC rates until June 30.** For example, if a child turns 6 February 3, they will remain under CWELCC rates until June 30. Children turning 6 after June 30 will pay full non base fee at the first of the month following the child's sixth birthday. For example, if a child turns 6 on October 16, they will fall under CWELCC rates until November 1 when they will begin paying full non base fee.

2.0 Family Space does not permit additional imposed restrictions outside of the schedule in the signed Parent/Provider agreement. For example, a day that a Provider is not available for a full day of care, as per the schedule of care in their Provider/Parent agreement, the Provider can only bill for the hours of care they provided. If a family chooses not to attend care on a day the Provider is not available for the scheduled care, the parent will not be billed.

Procedures for Administration:

1.0 Invoices will be emailed to childcare@familyspace.ca on the 16th and 1st of every month.

2.0 Incorrect invoices will be addressed with a TIME SENSITIVE email requesting information.

3.0 Providers will be paid on the 10th and 25th of the identified invoice period. If these dates fall on a weekend or holiday, they will be paid the business day prior.

Procedures for Parent Base:

1.0 Upon enrollment base fee paying parents must complete Plooto registration with Family Space. The link will be sent to families during the registration process.

2.0 Child care used from the 1st to the 15th of the month will be debited on the 28th of the same month. Child care used from the 16th to end of the month will be debited on the 14th of the following month. An invoice will be emailed to parents with amount to be debited prior to due date.

3.0 Parents with Family Space Licensed Home Child Care Program are required to pay base fees based on the defined process to ensure continuity of child care without disruption as per our NSF policy. For any NSF payments, a two-week notice of termination of care will be given to the parents and Providers. The 2 week notice of termination of care begins on the scheduled debit date. It is the parent's responsibility to ensure that they pay in full by e-transfer to childcare@familyspace.ca the amount owing plus $30 non base NSF fee before the two weeks has lapsed to ensure there is no interruption of care. If care is terminated, parents will need to confirm space is still available before they can return to care. If a parent has 3 NSF payments, care may be terminated immediately, without notice. Individual cases will be reviewed by the agency to determine whether care may continue or not.

Procedures for Administration:

1.0 Invoices from Providers registered with Family Space Licensed Home Child Care program are due to Family Space office as specified on an annual basis.

2.0 Invoices will be received on the 1st day and 16th following the end of the invoice period.

3.0 Providers will be paid on the 10th and 25th of the identified invoice period. If these dates fall on a weekend or holiday, they will be paid the business day prior. If invoices are not received on the due date listed above you may not being paid on schedule.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.8**
Policy:	**Canada Wide Early Learning and Child Care system**	**Date Approved:**	**August 18 2022**
		Date Reviewed:	**January 21, 2025**

Policy

CWELCC – Canada Wide Early Learning and Child Care system

Family Space has opted in for the Canada Wide Early Learning and Child Care System. The CWELCC system will offer financial support for families accessing care within our program.

In April 2022 the Ministry of Education put a fee freeze on licensed child care. Parents registered with Family Space, who pay base fees to Family Space are paying the same rates as they were when the fee cap was put in place.

Parents that have a private arrangement with their provider (all financial arrangements including base fees and payments are between parent and provider, no financial involvement with the agency) should be aware that their private base child care fees must be capped at the providers rate as of March 27, 2022.

If the provider joined the agency after March 27 2022 the base fee charged for this private arrangement must be capped at the agency base rate for children over 6 and the CWELCC parent rate for children under six.

Effective January 1, 2025 the parent fee portion may not exceed $22.00 per day, provincially, for children under 6 years of age.

Families with children under the age of 6 yrs. old are eligible to receive CWELCC. Families with children who turn 6 between January 1 and June 30 are eligible to receive CWELCC until July 1 of that calendar year at which point they will be required to pay full base fees.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.9**
Policy:	**Wage Enhancement/Home Child Care Enhancement Grant (HCCEG) & General Operating Grant (GOG)**	**Date Approved:**	**November 2002**
		Date Reviewed:	**February 1, 2025**

Policy

Wage Enhancement/ Home Child Care Enhancement Grant (HCCEG) and General Operating Grant (GOG) is provided by the County of Hastings and their policies and procedures will be followed. Family Space is required by our funders to display these amounts separately for Providers.

Procedures for Wage Enhancement Grants:

Providers must hold a contract with a licensed home child care agency and provide services to one child or more (excluding Provider's own children) to receive HCCEG & GOG funding.

Wage enhancement Funding (HCCEG) will be issued to Providers with each invoice based on the following:

To be eligible to receive the **full HCCEG of $20 per day**, home child care Providers must:

- Provide on average **full-time services** (6 hours or more hours per day on average per invoice period)
- Receive less than $318.10 per day in base fees (include GOG, Private and Vacancy earnings)
- Eligible for partial HCCEG if between $318.10 and $338.10 per day in base fees (include GOG, Private and Vacancy earnings)
- Ineligible for HCCEG if at $338.10 or greater in base fees (include GOG, Private and Vacancy earnings)

To be eligible to receive the **partial HCCEG of $10 per day** home child care Providers must:

- Provide on average **part-time services** (less than 6 hours per day on average per invoice period)
- Receive less than $192.86 per day in base fees (include GOG, Private and Vacancy Earnings in base fee)
- Eligible for partial HCCEG if between $192.86 and $202.86 per day in base fees (include GOG, Private and Vacancy Earnings in base fee)
- Ineligible for HCCEG if at $202.86 or greater in base fees (include GOG, Private and Vacancy Earnings in base fee)

If at any point a home child care Provider stops serving children or earns more than the cap, the home child care agency must terminate the transfer of HCCEG funds to the Provider.

Providers will not receive the HCCEG during periods of Billable Scheduled Closures as they are not open and available to provide care during these times.

Procedures for General Operating Grants:

12% GOG is included in base rates to Providers. Each Provider invoice payment outlines the breakdown between base funding, GOG funding HCCEG Funding & Vacancy Funding. 72% of the agency's GOG funding is distributed

to Providers. Lump sum payments are discouraged; however, if at year end, there are excess GOG funds, they will be distributed to any Providers who provided care with Family Space Quinte Inc. during that fiscal year based upon the care provided during the year. Providers must be active at the time of distribution. If further GOG funding is distributed at year end it would be labeled GOG top up.

	Section: HOME CHILD CARE PROGRAM OPERATIONS	**Policy Number:**	**6.10**
Policy:	**Provider Records**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 6, 2026**

Policy

Family Space Quinte Inc. will maintain a record of each Provider in the Home Child Care Program.

Procedures

1.0 The Provider record will contain the following information:

- Application to Provide Home Child Care
- Initial Home Evaluation
- Fire Department Inspection
- Immunization
- Criminal Reference Check/ Vulnerable Sector Screening (every 5 years)
- Offence Declaration
- Immunization Record of Provider's Own Children
- Written Proof of General Liability and Automobile Insurance
- Written Proof of Pet Inoculation
- Signed Oath of Confidentiality
- Policy and Program Statement Sign Off for anyone over the age of 18, alternate Provider, regular & visitors.
- Agency/Provider Agreement
- Proof of current Intermediate/Standard First Aid/CPR
- Equipment release waiver
- Highland Shores Child Welfare Check (everyone over 18)
- Alternate Provider
- Void cheque
- Notice with respect to the collection of personal information
- Home Visit Reports, Quarterly Home Visit Reports, Communications/Correspondence
- Water sample records
- Photo/video release
- Reference Checks

2.0 Provider records are the property of Family Space Quinte Inc.

3.0 Provider records are confidential and are kept locked in a filing cabinet or securely stored in Family Space data base, on the server. Provider records are the property of Family Space Quinte Inc. These records will be maintained for three years after the Provider has left the agency.

4.0 Providers may review the contents of their record in the presence of the Home Visitor. Information may not be removed from the record. A copy of information in the Provider record will be provided to Provider upon request.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.11**
Policy:	**Extended Care**	**Date Approved:**	**November 2002**
		Date Reviewed:	**June 29, 2026**

Policy

Extended hours of care may be available. Extended care is defined as when a child's care exceeds 12 consecutive hours, or a child is in care overnight. Providers and Parents will develop a plan for extended hours, considering health, safety and supervision. Consistent with the Child Care and Early Years Act, continuous care beyond 23 hours and 59 minutes requires Ministry of Education approval.

Procedures

1. Each parent requesting care beyond 23 hours and 59 minutes will be reviewed on a case to case basis and will be requested from the Ministry individually.
2. Each home operating extended hours has an evacuation plan that includes the extended hours portion of the program.
3. Local fire departments will be advised of any homes operating extended hours and local protocols will be followed.
4. Anaphylaxis -Individual extended hours plans will be created by a Provider and the parents including after hours contact information for children with life threatening allergies.
5. Bedtime/rest time routines
    - Children will engage in quiet activities to settle for bedtime.
    - Infants will be provided with cribs/playpens: toddlers, preschool and school age children will be provided with a mattress/bed/cot.
    - Children who change from clothing to pajamas independently will be given privacy in a bedroom or bathroom.
    - Children will brush their teeth in a bathroom before bed.
    - Toothbrushes will be stored separately.
    - Individual face cloths, towels, bedding and pillowcases will be used. A new face cloth and towel will used daily and bedding washed at least weekly or more often if necessary.
    - All bedding including pillowcases will be washed/changed between children
    - Males and females over the age of 6 will sleep in separate rooms unless a parent provides written consent for male and female siblings over the age of 6 to sleep in the same room.
    - Visual sleep checks will be done according to Family Space sleep check policy.
6. Maximum hours of care
7. Providers can sleep during the night shift and be available to provide care during the day
8. Entrance and exit areas must have adequate lighting
9. Family Space record of active homes will identify those in which extended hours of care is being provided.
10. Family Space's insurance company is aware that care is provided during extended hours
11. Contact information for the Agency is available during extended hours

12. Children's emergency records must always include information about how to reach a parent/guardian, including during the extended hours portion of the program.
13. Attendance records must confirm the actual hours of care of each child including AM or PM.
14. Emergency phone numbers including poison control, EMS and a taxi service is available during extended hours
15. Home Visitor - In addition to quarterly visits made during regular hours additional quarterly visits will be made by a Home Visitor during the extended hours while children are in care.
16. The checklist used by the Home Visitor will be inclusive of any additional requirements for extended hours care.
17. Supervision - If the Provider will be sleeping during the night while providing care, a supervision plan must be established between the Provider, the parents and a Home Visitor that considers the location of where children are sleeping and the process for monitoring children overnight.
18. Nutrition- Meals will be supplied if child attends mealtime.
19. Menus will be planned in consultation with Home Visitor and parent and available for review.
20. Program Outdoor play for children participating in extended hours of care will take place during daylight hours.
21. Consideration will be given to seasonal conditions, time of day and adequate lighting for appropriate supervision.
22. Health and Medical – Secure storage for medical supplies and medication, as well as a first aid kit and manual, must be readily accessible to the Provider during extended hours program.

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.12**
Policy:	**Home Visits and Communication with Parents and Providers**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 25, 2026**

Policy

The Child Care and Early Years Act requires that the Provider's Home including outdoor play space is inspected by a Home Visitor employed by Family Space Quinte Inc. These inspections are carried out without prior (unscheduled) notice to the Provider's home at least one in every quarter of each calendar year. Quarterly home visits will be completed by the 25th of every month unless otherwise approved by the Co-Ordinator.

Home Visitors will share some observations from all quarterly home visits with all families.

Family Space Home Visitors will schedule additional home visits with providers when extra support is needed. Scheduled home visits will happen more frequently with new providers. Unscheduled quarterly home visits will take place at varying times throughout the year for each provider and will not all take place around the same time. For example, providers offering full day care will receive unscheduled morning and afternoon visits each year.

When communications or observations may include areas of concern, Home Visitors will review the information with the HCC team and include the Executive Director.

When providers are offering extended care (evenings and/or weekends) an unscheduled quarterly home visit will be conducted during the extended hours at least one time per year.

Home Visitors whereabouts must be documented. Communication between parents, Providers and the Agency is essential for a successful child care experience.

Procedures

1.0 On a regular basis, a Home Visitor will conduct scheduled and unscheduled visits to a Provider's home. A checklist provided by the Ministry of Education will be utilized to ensure that an accurate record is made of each unscheduled quarterly inspection.

2.0 While children are being cared for, it is necessary for the Provider to allow Home Visitors access to her home.

3.0 Parents will receive quarterly newsletters from the Licensed Home Child Care program.

4.0 Email is the primary method of communication between the agency and Providers. Providers must check their Family Space email account daily to ensure they are up to date with any information shared by the agency. Questions sent to providers from the agency are expected to be answered withing 24 hours. The agency strives to reply to providers questions within 24 hours.

5.0 Home Visitors will record their home visit schedule on the shared HCC calendar at the office. If the location of the visit changes, Home Visitors will notify someone on the HCC team or other staff at the office.

6.0 Home Visitors may text or call Providers within a few minutes of entering their premise if they feel it is in the interest of their own safety and comfort to ask the Provider to ensure their dog/s is secured before entering.

7.0 A parent is notified when an incident affecting the health, safety or well-being of a child occurs.

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.13**
Policy:	**Inactive Providers**	**Date Approved:**	**November 2002**
		Date Reviewed:	**May 5, 2026**

Policy

Providers registered with Family Space Licensed Home Child Care Program that have completed registration and given approval to begin but are not currently providing care are considered “inactive” Providers.

Procedures

1.0 Family Space Quinte Inc. considers a Provider approved by the agency who is not currently providing care as inactive. This includes Providers that are not providing care as they have had a baby and are taking some time off, other personal or medical time off, or approved to begin but do not have children started yet.

2.0 Providers can maintain an “inactive” status for up to 3 months. After 3 months, Providers wanting to return to the program may be considered if space is available within the license capacity.

3.0 Inactive Providers are still on the Family Space roster of Providers.

4.0 Home Visitors and Executive Director of Family Space Quinte Inc. reserve the right to determine who may return to the agency as a Provider.

5.0 Providers who have been inactive for more than 3 months are required to sign and submit a new agency/provider agreement before providing care.

6.0 Providers who are considered inactive will be removed from the closed Face Book group until they become active again.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.14**
Policy:	**Insurance**	**Date Approved:**	**November 2002**
		Date Reviewed:	**April 18, 2023**

Policy

Family Space Quinte Inc. maintains an insurance policy that includes comprehensive general liability coverage and abuse coverage.

Family Space Quinte Inc's Insurance Broker requires that Providers registered with Family Space Quinte Inc. Licensed Home Child Care Program acquire and maintain home/tenant/condo insurance policy to cover their personal liability, personal contents and building structure (if required). Providers should also let their insurance company know that they are operating a daycare out of their home. Providers will submit appropriate automobile insurance to the agency before travelling in their vehicles with day care children.

Procedures

1.0 The Provider must provide to a Home Visitor written proof from an insurance agency/broker of the specified insurance coverage.

2.0 Automobile liability insurance submitted to a Home Visitor.

3.0 It is the Provider's responsibility to provide written proof to a Home Visitor of the annual renewal of the specified insurance coverage.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.15**
Policy:	**Interruption of Care & Vacation**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 30, 2025**

Policy

Written notice must be given by the Provider registered with Family Space Licensed Home Child Care Program to parents at least two weeks prior to a scheduled interruption of care.

When a Provider gives a family 2 weeks written notice of termination of care and the family chooses not to use care during the notice period, the family will not be charged.

Procedures

1. Providers will give two weeks written notice of a scheduled interruption in care to parents.
2. Providers will confirm a families notice of termination with the agency by emailing childcare@familyspace.ca
3. Failing to give two weeks written notice may result in the parent being charged for two weeks from the day that written notice is received. Family Space will review situations case by case.
4. In the event of a split family, each parent will submit their own registration form and their own Parent/Provider agreement. They will be considered 2 separate families in 2 separate files at the agency. When a Provider is charging for their own billable scheduled closures, each parent will be billed for the days they are responsible for according to their agreement.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.16**
Policy:	**Private Care**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 3, 2023**

Policy

The Hastings and Prince Edward Health Unit requires immunization records for all children not yet enrolled in school. A Provider registered with Family Space Quinte Licensed Home Child Care Program must inform the Home Visitor of any private children already in care to ensure compliance with Health Unit regulations.

Procedures

1.0 Before children are placed into the Provider's home, copies of private children's Immunization Assessment records must be provided to a Home Visitor of Family Space Quinte Inc.

2.0 Children being cared for privately must be counted in the Ministry of Education ratios.

3.0 Children cared for privately, must complete and submit the following to the Agency:

- A registration form
- immunization record
- Any medical or individual service plans
- Providers must submit any incident reports, serious occurrences, and attendance

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.17**
Policy:	**Termination of Provider Agreement Appeal Process**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

A Provider/Agency Agreement may be terminated for failure to comply with the conditions and/or the policies/procedures of Family Space Quinte Inc.

Procedures

1.0 The Provider/agency must inform the other party that the agreement is terminated and the reasons for the termination

2.0 A Provider can appeal a decision made by the Home Visitor or Executive Director, to terminate the Agency/Provider Agreement, the appeal must be made in writing to the Board of Directors within thirty (30) days of termination of agreement.

3.0 The name, address and telephone number of the president of the Board of Directors of Family Space Quinte Inc. is available to those Providers who wish to appeal a decision to terminate the Agency/Provider Agreement.

4.0 In the written appeal, the Provider can request to meet the Board of Directors or a Board designated committee.

5.0 The Board of Directors will respond to the written request for a meeting within seven (7) business days. The Executive Director will be part of this process.

6.0 After meeting with the Board, there will be a written response within seven (7) business days.

7.0 The decision of the Board of Directors is final.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.18**
Policy:	**Quality Control Measures**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

The County of Hastings through the Purchase of Service Agreement has requirements that must be met related to Quality Control.

Procedures

A Service Provider is required to maintain a clear License with the Ministry of Education. Any revision to the Service Provider's license status due to a contravention of the Child Care and Early Years Act may lead to the termination of the Purchase of Service Agreement.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.19a**
Policy:	**Confidentiality of Information & Social Media**	**Date Approved:**	**November 2002**
		Date Reviewed:	**April 3 2023**

Policy

This policy offers guidance for Providers use of technology loaned to them by Family Space and to ensure that professionalism and safety are maintained.

All staff, volunteers and Providers registered with Family Space Licensed Home Child Care Program are required to complete an oath of confidentiality.

Procedures

The following principles apply to professional and personal use of technology and social media when referring to Family Space Quinte.

1.0 Providers, emergency alternates and staff should maintain professional and ethical standards in posting material that is neither inappropriate nor harmful to Family Space Quinte, its caregivers, employees, families or participants.

2.0 Comments, expressions, and other postings on social media must be honest and respectful of others, respect confidentiality, personal information, and comply with applicable local, provincial, and federal laws and Family Space Policies.

3.0 Although not an exclusive list, some specific examples of prohibited social media conduct include posting commentary, content, or images that are defamatory, pornographic, proprietary, harassing, or that can create hostility.

4.0 Release of family/child information is done only with the written consent of the child's parent/guardian

5.0 Access to a child's records without parental consent may only be given to officials of the following jurisdictions: Coroner's Office, Courts, in response to a warrant or court order, Ombudsman Authorities vested in Provincial or Federal statutes (e.g. Public Health Nurse), minister of Education, and officials to whom she/he has delegated the authority (i.e. program advisor)

6.0 All Providers must ensure that the parents have completed a Photo/Video/Social Media/Testimonial Release form before utilizing their child's picture (i.e: Family Space Provider closed Facebook group) It is recommended that Providers obtain their own written permission from parents to post children's photos/videos in the Providers own social media groups.

Confidentiality Form

Providers will observe and hear many things of a confidential nature at Family Space.
Care must be taken to ensure that these matters remain confidential. Personal information about clients or their families must be held in strictest confidence. Care must be taken regarding conversations in the home and in the community. Where confidentiality has been breached, serious action will result.

Confidentiality Agreement

I understand that all information about the Licensed Home Child Care Program as it pertains to families is confidential.

I will not divulge confidential agency information or material from clients' records to any individual or agency.

_____ _____

Parent's Signature Date

Photo/Video/Social Media/Testimonial RELEASE FORM

I hereby grant *Family Space Quinte Inc.* permission to use my likeness/testimonial in a Family Space Quinte Inc. photograph/video/social media website, without payment or any other compensation.

If the participant is under 21, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent/guardian of (Child(ren)'s Name):

_____, _____,

_____, _____,

_____, _____,

and do hereby give my consent without reservation to the foregoing on behalf of this person _____.

(Patent/Guardian Print Name)

_____ _____
(Parent/Guardian's Signature) (Date)

I am 21 years of age and am competent to contract on my own behalf. I have read this release form before signing below, and I fully understand the contents, meaning, and impact of this release.

_____
(Print Name)

_____ _____
(Signature) (Date)

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.19b**
Policy:	**Borrowed Technology**	**Date Approved:**	**November 2002**
		Date Reviewed:	**October 10, 2024**

Policy

Home Child Care Providers will use technology on loan by Family Space to assist with documentation and paperwork expectations. Careful use of borrowed technology will be a priority.

Procedures

1.0 Home Child Care Providers will use technology provided by Family Space Quinte to assist in their daily documentation, program planning and research to effectively create quality early learning programming.

2.0 Tablets/Laptops will be loaned to Providers to support the Ministry of Education's requirements for documentation. Providers will use a Family Space address assigned to them. This address does not deem Providers as Family Space employees.

3.0 Technology will be used to maintain accurate record keeping and submit required paperwork.

4.0 Technology equipment is provided in good repair. It is expected the equipment will be returned upon request or within 3 days of the termination of your agreement with Family Space. Earnings from a providers final invoice will not be deposited until the tablet has been returned to the agency.

5.0 It is expected that the equipment be used solely for work purposes and maintained in good working order.

6.0 There is an agent installed on all Family Space owned and maintained computers and electronic devices. This agent also allows the ability to remote in without consent. This agent also can provide MicroAge – Family Space IT company, at a glance, applications on computers and electronic devices internally and remotely. Software records all copies of email messages sent or received by addresses within the agency.

7.0 If technology is broken or in need of repair, Providers will contact a Home Visitor to discuss next steps.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.20**
Policy:	**Substance Abuse by Providers**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

No Provider registered with Family Space Licensed Home Child Program will provide care for children while under the influence of alcohol, recreational cannabis or illegal drugs.

Procedures

Family Space Quinte Inc. may terminate the Agency/Provider agreement even if substance abuse does not result in a clear impairment but the consumption is noticeable while children are in care.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.21**
Policy:	**Child Protection: Duty to Report**	**Date Approved:**	**November 2002**
		Date Reviewed:	**March 2020**

Policy

Any staff, Provider registered with Family Space Licensed Home Child Care Program, volunteers and students of Family Space Quinte Inc. have a legal responsibility to report if a child appears to be in need of protection.

Procedures

Home Child Care Program: Duty to Report

1.0 Persons must report directly CFSA s.72 (3) the person who has the reasonable grounds to suspect that a child is or may be in need of protection must make the report directly to a children's aid society. The person must not rely on anyone else to report on his or her behalf.

2.0 Upon suspicion of maltreatment the Provider registered with Family Space Licensed Home Child Care Program is to report the incident directly to the Children's Aid Society.

2.0 CAS guidelines state that you do not need to be sure that a child is or may be in need of protection to make a report to a children's aid society. "Reasonable grounds" are what an average person, given his or her training, background and experience, exercising normal and honest judgement, would suspect.

3.0 If a parent suspects a Provider registered with Family Space Licensed Home Child Care Program of maltreatment it is their responsibility to contact the Children's Aid Society. Parents are requested to also inform the Home Child Care Visitor of Family Space Quinte Inc. If a Home Visitor suspects a Provider registered with Family Space Licensed Home Child Care Program of maltreatment it is their responsibility to contact the Children's Aid Society, and the Executive Director of Family Space Quinte Inc.

4.0 Parents are asked to report the incident to the Home Visitor.

5.0 The Home Visitor and Executive Director of Family Space Quinte Inc. will support both parties involved until the Children's Aid Society has completed their investigation of the allegations. All children in the Provider's home will be immediately removed; the Provider and the parents of the children will be notified concurrently if any allegation or investigation takes place. Children will not be placed back into care until the investigation is complete and all allegations have been cleared. The Provider will not receive pay during the investigation period, since the parents will not be paying base fees for that Provider to provide care.

6.0 Legal counsel shall be consulted in cases where the suspected maltreatment occurred while the child was in the care of an individual affiliated with the licensed home child care agency

7.0 The Executive Director will complete a serious occurrence report and submit to the Ministry of Education and/or the County of Hastings.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.22**
Policy:	**Safety, Protection and Abuse**	**Date Approved:**	**February 6 2023**
		Date Reviewed:	**July 30, 2026**

Policy

Family Space will not tolerate any form of abuse to a child by any Provider, alternate Provider, resident, volunteer or staff member.

Definition

The term “child abuse” refers to the violence, mistreatment or neglect that a child may experience while in the care of someone they trust such as a child care provider, alternate provider, volunteer, parent or staff. Abuse is defined as emotional, physical, sexual or neglect.

Procedure

Any individual suspecting a child may be in need of protection must report their concerns to Highland Shores CAS. If allegations of abuse by a Provider, alternate Provider, volunteer or staff are reported, a Program Co-Ordinator and the Executive Director of Family Space will be made aware of the report and events will be documented in detail. Legal consultation will be obtained and followed.

Any allegations of abuse by a Provider, alternate Provider, volunteer or staff may be reported to Family Space Insurance company promptly.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.23**
Policy:	**Self-Regulation**	**Date Approved:**	**November 2002**
		Date Reviewed:	**June 29, 2026**

Policy

Staff, and Providers registered with Family Space Licensed Home Child Care Program will promote positive approaches to managing behaviour that comply with the stated standards and requirements in provincial government legislation and regulations. Staff and Providers interact with children in a way which will encourage them to interact and communicate positively and assist them to increase their ability to self-regulate.

Definition

Self-regulation defines how a child is able to deal effectively with stressors. When children are involved calmly in activities which engage their attention, they are much better equipped to deal with stressors which could result in negative behaviour. The acquisition of self- regulation skills for a child allows them to manage their emotions, pay attention, ignore distractions, and exhibit impulse control. This allows them to increase empathy for others which in turn allows them to assess the consequences of their actions, and understand what others are thinking and feeling.

Procedures -Preferred Practice

1. Child guidance used by Providers registered with Family Space Licensed Home Child Care Program, during program operation should be:
   (i) related to the nature of the troublesome behaviour;
   (ii) appropriate to the development levels of the child;
   (iii) used in a positive and consistent manner;
   (iv) designed to assist the child to learn appropriate behaviour;
   (v) implemented as soon as possible after the troublesome behaviour; and
   (vi) discussed with a parent(s) if a difficult situation arises with a child.

2. Providers registered with Family Space Licensed Home Child Care Program are expected to give children in their care the skills and abilities to learn self-regulation. Some examples of practices to assist Providers during stressful times for children are as follows:
   (i) channelling the child's energy to another area – diversion
   (ii) ignoring inappropriate behaviour
   (iii) positive verbal reminders regarding inappropriate behaviour
   (iv) redirection to a closely supervised activity
   (v) positive reinforcement of desired behaviour - both verbal and non-verbal

3. An environment filled with opportunities for exploration, ample resources, and positive interactions with adults reduces the need for intervention by the Provider.

Prohibited Practices

Providers registered with Family Space Licensed Home Child Care Program, staff, volunteers, regular visitors, students who are on an educational placement, or any persons who have interactions with a child during program operation shall NOT be permitted to inflict:

(a) corporal punishment of the child;

(b) physical restraint of the child, such as confining the child to a high chair, car seat, stroller or other device for the purposes of discipline or in lieu of supervision, unless the physical restraint is for the purpose of preventing a child from hurting himself, herself or someone else, and is used only as a last resort and only until the risk of injury is no longer imminent;

(c) locking the exits of the child care centre or home child care premises for the purpose of confining the child, or confining the child in an area or room without adult supervision, unless such confinement occurs during an emergency and is required as part of the licensee's emergency management policies and procedures;

(d) use of harsh or degrading measures or threats or use of derogatory language directed at or used in the presence of a child that would humiliate, shame or frighten the child or undermine his or her self-respect, dignity or self-worth;

(e) depriving the child of basic needs including food, drink, shelter, sleep, toilet use, clothing or bedding; or

(f) inflicting any bodily harm on children including making children eat or drink against their will.

(g) time out

(h) sexual abuse, sexual misconduct and prescribed sexual acts (as defined under the Early Childhood Educators Act, 2007)

Monitoring of Practices

The following practices are in place to help ensure that Providers understand the ongoing goal of assisting children to build their self-regulation skills. Communication with parents is a key piece of the successful acquisition of these skills for children:

(i) A comprehensive discussion with Providers registered with Family Space Licensed Home Child Care Program before the agency/Provider contract is signed to ensure compatibility with the Child Care and Early Years Act requirements. These discussions will be ongoing, and reviewed at each home visit, and at annual policy review at a minimum.

(ii) Providers registered with Family Space Licensed Home Child Care Program will be made aware of the agency's policies and procedures through the review and sign off procedure on the program statement, of which self-regulation is a key component.

(iv) After reviewing the policies and procedures, each Provider registered with Family Space Licensed Home Child Care Program and all persons living in their home that are over the age of 18, and alternate Providers must sign and date the program statement annually.

(v) Parents are made aware of the policies regarding self-regulation and are expected to not use prohibited practices during the operation of the program.

(vii) All complaints regarding self-regulation and prohibited practices made by anyone including Providers registered with Family Space Licensed Home Child Care Program will be investigated and acted upon by the Home Visitor, Executive Director and if necessary, the Board of Family Space. Serious occurrence procedures will be followed when required.

4. The Home Visitor will discuss with new Providers registered with Family Space Licensed Home Child Care Program accepted and prohibited practices before signing the agency/Provider contract, during quarterly visits, and at annual policy review at a minimum.

5. All records related to the review and sign off program statement including self-regulation policy will be kept on file at the Family Space Quinte Inc. for three years after the provider agency contract is terminated.

Contravention of Practices

1. For Providers registered with Family Space Licensed Home Child Care Program, failure to comply with the program statement, including self-regulation and prohibited practices could result in:

   (i) Termination of Agency/Provider Agreement

2. For others including parents:

   (i) A verbal warning.
   (ii) Written warning
   (iii) Other action as deemed appropriate by the Executive Director/Board including, but not limited to, the person not being permitted on the premises

3. Failure of Providers to comply with the requirements of the Child Care and Early Years Act with respect to the program statement, including self-regulation and prohibited practices may result in termination of Agency/Provider Agreement. Various criteria will be considered when determining the disciplinary measures to be taken. The criteria may include:

   (i) Seriousness of the offence;
   (ii) Actual or potential risk, or harm to the child;
   (iii) Past performance of staff or Provider in general;
   (iv) Recent performance;
   (v) Frequency of occurrence; and
   (vi) Previous compliance issues

Family Space Quinte Inc.

Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.24**
Policy:	**Incident/Accident Reporting**	**Date Approved:**	**November 2002**
		Date Reviewed:	**October 28, 2025**

Policy

Any incident or accident involving children/families/Providers registered with Family Space Licensed Home Child Care Program, will be documented. It is recognized that incidents may result in a serious occurrence that is defined by the Ministry in the Child Care and Early Years Act.

Procedures

1. An incident/accident is defined as an occurrence in which a child/parent/Provider is injured and/or behavior which presents either an immediate or potential threat to the safety and welfare of children/families/Providers registered with Family Space Licensed Home Child Care Program.
2. The Providers registered with Family Space Licensed Home Child Care Program who witnessed the incident/accident takes immediate action to handle the situation, ensuring safety and wellbeing of the parties involved. Action that could be taken includes providing immediate medical attention when warranted; taking steps to address any continuing risks to the individual's or to other's health/safety. In cases involving death the police are immediately notified.
3. The Provider registered with Family Space Licensed Home Child Care Program informs a Home Visitor.
4. Incident reports should only include the name of the child whose parent is signing the form. Other children's names should not be included, **not even initials**. For example, "A child bit Mary on the arm" would be on the incident report for Mary's mother to sign. Do not put "*Sally* bit Mary." Using other children's names or initials would be considered a breach of privacy. Incident reports are only done for the child who got hurt, not the child who pushed/bit etc.
5. In situations of a serious incident, then the Serious Occurrence procedures are followed.
6. Incident reports are maintained on file by the organization for a minimum of three years after the termination of the Provider/agency contract or the withdrawal of the child.
7. Parents, will receive a copy of the incident report. Providers and Home Visitors have access to incident documentation in SharePoint.
8. Incident report must be recorded in your daily journal.
9. A parent is notified when an incident affecting the health, safety or well being of a child occurs as soon as possible.
10. Digital or drawn signatures are required. Typed signatures will not be accepted.

Family Space Quinte Inc.

Licensed Home Child Care Program

Incident Report

Date:	**Time:**
Provider registered with Family Space Licensed Home Child Care Program:	
Date of Incident/Accident:	**Time of Incident/Accident:**
Location:	

Description of Incident/Accident:

_____

Precipitating Factors:

_____

Action Taken:

_____

Further Action Recommended:

_____

_____ _____

Provider Signature Date

_____ _____

Parent Name Please Print Date

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.25**
Policy:	**Serious Occurrence Reporting: Licensed Home Child Care Program**	**Date Approved:**	**November 2002**
		Date Reviewed:	**July 6, 2026**

Policy

SERIOUS OCCURRENCE

Any serious occurrence that occurs during participation in the ***Licensed Home Child Care Program*** operated by Family Space Quinte Inc., must be reported to the ***Ministry of Education*** within twenty-four (24) hours on the Child Care Licensing System (CCLS). This includes any serious occurrence on the premises of the home of the Provider registered with the Licensed Home Child Care Program including children who are deemed private. Providers must notify the agency as soon as possible and the agency will provide help as needed. Annual review of serious occurrences will be conducted by Family Space with the intent to minimize the chance that incidents will occur again in the future.

Extensive mandatory training will be provided to home child care providers during on boarding. This training will include what constitutes as a serious occurrence, reporting timelines and hypothetical scenarios.

REPORTING PROCEDURES ON CCLS

- Within 24 hours, Home Visitor (s)/ Executive Director or designate will file a report on the Child Care Licensing system (CCLS) website using the One-key identification for our account.

- Instructions can be found in All on Server – Home Child Care – Licensing and Serious Occurrence Reporting. Please follow the step-by-step instructions.

- If the individual cannot access the CCLS, they must notify their program advisor via telephone or e-mail within 24 hours of becoming aware of the incident and complete a Serious Occurrence report in the CCLS as soon as the system becomes available.

ONGOING MONITORING

Serious Occurrence Procedures are reviewed at orientation, and again annually by all childcare Providers, employees, volunteers, and students. Family Space will monitor our performance on an ongoing basis with respect to reporting, management, and follow-up of serious occurrences. Compliance will be reviewed at licensing renewal time.

A SERIOUS OCCURRENCE IS DEFINED UNDER THE CCEYA AS:

a. The **death of a child** who receives child care at a licensed home premises or child care centre;

b. **Abuse, neglect or an allegation of abuse or neglect** of a child while receiving child care at a home premises or child care centre;

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

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

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

f. Health Unit mandated closure of home due to Covid 19 protocol

PROCEDURES

Serious Occurrence Response - Actions to be taken if a serious occurrence has occurred or is suspected include the following:

a) The child will be provided with immediate medical attention when warranted.

b) Appropriate steps will be taken to address any continuing risks to the child's and/or other children's health or safety.

c) If there is a reason to suspect that a child has been abused and/or is in need of protection, it is the person who has reasonable grounds to be suspicious who is legally obligated to make a report to the CAS and/or police.

d) If there is reason to suspect that a child has been abused and/or is in need of protection, as a result of maltreatment by a Provider registered with Family Space licensed home child care program, the Home Visitor/Director or designated person will ensure immediate contact with the Children's Aid Society, and/or police.

e) In all cases involving death, regardless of the location or circumstances, the local Coroner is notified immediately.

f) The Provider or any other person witnessing or having knowledge of the occurrence shall report the matter to the Home Visitor/Executive Director or the person designated by the Executive Director to conduct a serious occurrence inquiry

g) The Home Visitor/Director or designated person shall immediately begin a serious occurrence inquiry, in accordance with the following steps. The purpose of the inquiry is to gather information regarding actual or alleged occurrence(s).

h) The inquiry information gathered by the designated person will form the basis of the *Serious Occurrence and follow up in the CCLS website.* The inquiry should include as many of the following details as possible at this time:

- Description of the occurrence
- Person's allegation (if applicable)

- Date, time, place where it occurred
- Time occurrence was reported
- Reason for the occurrence (if known)
- People involved- The summary would not include identifying information (ie: names and ages of children, staff, Provider) and will contain gender neutral language.
- Action taken
- Current status
- Parties notified (Chairperson, police, CAS, Coroner, parents/others as appropriate)
  Further action recommended: Specific to the immediate situation; and/or related to potential underlying factor (e.g. review of particular internal policy/procedure, review of program, staff training need, modification of physical environment etc.)

If the preliminary inquiry is conducted by a designated person, the Executive Director or Home Visitor should be notified immediately.

UNDER NO CIRCUMSTANCES IS THE PROVIDER REGISTERED WITH FAMILY SPACE HOME CHILD CARE PROGRAM TO LEAVE CHILDREN UNSUPERVISED.

Providers should always have an emergency back-up person to help supervise other children and to provide support following a serious occurrence. (If the Provider's own child is injured or ill and must go to the hospital, the emergency back-up person will remain with the other children)

Where maltreatment by a Provider registered with Family Space Quinte Inc. licensed home child care program, is alleged, the possible termination of their Provider/agency agreement is to be reviewed by the Executive Director and the Board of Directors.

STAFF/PROVIDER TRAINING

These procedures will be reviewed with staff upon employment and at least annually thereafter and with Providers during orientation and at annual policy review.

Providers must contact one of the following to report a serious occurrence as soon as possible so that it may be reported on CCLS. In the event that the serious occurrence happens outside of normal business hours, the Home Visitor/ED will ensure that staffs of Family Space are trained on CCLS to ensure reporting requirements are met.

During Business Hours Call:	Lisa Elliot, Home Visitor 613-966-9427 Ext. #223 Tracey Wells, Home Visitor 613-966-9427 Ext. #238 Nicole Whyte, Home Visitor 613-966-9427 Ext. #225 Sarah Reed, Home Visitor 613-966-9427 Ext. #242 **or** Diana Beatty, Executive Director at Ext. #232 or press 0 and speak to any Family Space Staff

After Business Hours Call:	(C) 613-848-8290 - Lisa Elliot, Home Child Care Coordinator (C) 613-885-4208 - Tracey Wells, Home Visitor (C) 613-242-6293 - Nicole Whyte, Home Visitor (C) 705-769-6143 – Sarah Reed, Home Visitor (C) 613-813-5641 - Diana Beatty, Executive Director

POSTING SERIOUS OCCURRENCE

Serious Occurrences need to be posted in the Provider's home and in the office of Family Space, Home Child Care in a conspicuous space within 24 hours of being reported. The Home Visitor will fill out the form and ensure that it is posted for a minimum of 10 business days in each location. The form is part of this policy. If there are updates with additional information such as additional actions taken by the operator, the form remains posted for 10 days from the date of the update with the updated information. The form must be kept for at least three years from the date of the occurrence and the forms are available for current and prospective parents, licensing and the County of Hastings upon request.

Serious Occurrence Notification Form

Program name/Nom du programme: Click here to enter text.

Date: *(yyyy/mm/dd)/(aaaa/mm/jj)* Click here to enter text.

Date of occurrence: *(yyyy/mm/dd)* **Date de l'incident :** *(aaaa/mm/jj)* Click here to enter text.

Type of serious occurrence: Click here to enter text.

Description:
Click here to enter text.

Action taken by Licensee/Outcome:

Click here to enter text.

Name/Nom: Click here to enter text.

Date: (yyyy/mm/dd)/(aaaa/mm/jj) Click here to enter text.

Signature

Family Space Quinte Inc.
Licensed Home Child Care Program

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.26**
Policy:	**Parent Issues**	**Date Approved:**	**August 2016**
		Date Reviewed:	**March 25, 2026**

Policy

Family Space encourages parents/guardians to take an active role with their Provider, and regularly discuss their child's experiences. All issues and concerns raised by the parents/guardians are taken seriously by Family Space and will be addressed.

Procedure

a) Issues/concerns may be brought forward verbally or in writing. Responses and outcomes will be provided verbally, or in writing upon request. Issues/concerns from either parent/guardian, Provider, or staff which cannot be resolved through open communication that has not been successful the following steps may be taken:

b) The person who raised the issue/concern will be kept informed throughout the resolution process verbally and if requested in writing. Investigations of issues and concerns will be fair, impartial and respectful to parties involved. When A Home Visitor is contacted regarding concerns, the Home Visitor will review the concerns with the HCC team and include the Executive Director.

c) A Home Visitor, if necessary, can convene a meeting between the two parties if not initially resolved through phone or face to face contact. A Home Visitor will respond to the complaint made by a parent or Provider within five (5) working days. The action taken detailing the resolution, or if no resolution is found is recorded in the Daily Written Record at the office by the Home Visitor, and the Daily Written Record at the Provider's home if applicable. The parent/Provider involved will be verbally updated and e-mail resolution sent to all parties if deemed appropriate.

d) If resolution is not achieved, the Executive Director, or designate will be engaged to assist in the resolution of the issue within five (5) working days if the Home Visitor has not successfully resolved the issue. This outcome is recorded in the Home Visitor's Daily Written Record and the resolution, or of no resolution is found, is e-mailed to the Home Visitor, and the parent/Provider if deemed appropriate.

e) If resolution is still not achieved, a complaint, or appeal, in writing can be submitted to the Board of Directors of Family Space. The appeal must be made within thirty (30) days of meeting with the Executive Director or designate. The Board Chair shall convene a meeting of all parties to review the concern (within 10 working days). A decision shall be rendered within five (5) working days from the date on which the meeting was convened. Failing settlement:

f) The complainant shall request a hearing of his/her appeal before the Board of Directors. This hearing shall be held no later than the next scheduled Board of Directors meeting. The decision will be recorded in the board minutes. The decision, which will be final and binding, shall be rendered within ten (10) days of the completion of the hearing, and will be submitted in writing to the parties involved, including Executive Director, and Home Visitor. The final resolution will be recorded in the Home Visitor's Daily Written Record as well.

Confidentiality will be maintained, and every effort will be made to protect all involved except when the information must be disclosed for legal reasons (i.e.: MOE, College of ECE, CAS, Law Enforcement). Positive communication & interactions will guide the process. Harassment and discrimination will not be tolerated from any party. If anyone in this process feels uncomfortable, threatened, abused or belittled, they may immediately end the conversation and report the situation to the Home Visitor and/or Executive Director.

If at any time during this process, a complaint about service standard falls into the category of serious occurrence, or child protection issues, the policies will be followed for reporting. For issues related to compliance requirements set out in CCEYA the Ministry of Education Child Care Quality Assurance and Licensing Branch should be contacted. Other concerns/issues can be reported to other relevant regulatory bodies.

Issues/concerns related to compliance with requirements set out in CCEYA should be reported to Ministry of Education Child Care Quality Assurance and Licencing branch.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.27**
Policy:	**Individualized plans for children with medical needs, Anaphylaxis Plan, Dietary Restrictions and allergies**	**Date Approved:**	**November 2002**
		Date Reviewed:	**February 4, 2026**

Dietary Restrictions and Other Allergies

Providers will post any children's dietary restrictions and other allergies in their kitchen and playroom. They will also be recorded on emergency cards. Providers will check with all families regularly to confirm if there have been any changes or new restrictions/allergies.
Family Space will connect will families who have children with anaphylaxis plans approximately every 6 months to confirm if there have been any changes.
When an occasional child attends care it is the providers responsibility to ensure there have been no changes to the child's dietary restrictions, or if there are changes, that they have the accurate information. Providers will get written confirmation of dietary restrictions from parents before the child arrives for care. This may be in the form of a text message. The written confirmation will be forwarded to the agency

Overview - Anaphylaxis

In our Licensed Home Child Care Program, we have at times children who are at risk for potentially life-threatening allergies. Anaphylaxis is a severe allergic reaction that can be caused by foods, insect stings, medications, latex or other substances. While anaphylaxis can lead to death if untreated, anaphylactic reactions and fatalities can be avoided. Education and awareness are key to keeping children with potentially life-threatening allergies safe.

Providers registered with Family Space Licensed Home Child Care Program are expected to create an "allergy-safe" environment. It is unrealistic, however, to expect an "allergen-free" environment.

Family Space Licensed Home Child Care Program anaphylaxis plan is designed to ensure that children at risk are identified, strategies are in place to minimize the potential for accidental exposure, and Providers registered with Family Space Licensed Home Child Care Program are trained to respond in an emergency situation.

Signs and Symptoms of an Anaphylactic Reaction

A child having an anaphylactic reaction might have ANY of the following signs and symptoms:

- **Skin:** Hives, Swelling, Itching, Warmth, Redness, Rash
- **Respiratory (breathing):** Wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay-fever like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing.
- **Gastrointestinal (stomach):** Nausea, pain/cramps, vomiting, diarrhea.
- **Cardiovascular (heart):** Pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock.

- **Other:** anxiety, feeling of "impending doom", headache.

Anaphylaxis - Identification of Children at Risk

At the time of registration, parents are asked about medical conditions, including whether children are at risk of anaphylaxis and asthma. Home Child Care Staff, Providers and their families must be aware of these children.

It is the responsibility of the parent to:

1. Inform a Home Visitor and Provider of their child's allergy (and asthma).

2. Before the child attends the program complete medical forms and the Anaphylaxis Emergency Plan which includes a photograph, description of the child's allergy, emergency procedure, contact information, and consent to administer medication. The Anaphylaxis Emergency Plan will be posted in the Provider's kitchen and in an easily visible location in rooms used for play. A copy will be attached to the child's emergency cards.

3. Ensure that updated medications are provided to the Provider before existing medications reach their expiry date. Children with expired medication will not be accepted into care. Any child with an epi pen prescribed by a doctor will not be accepted into care without the epi pen.

4. Parents are required to advise their Provider and Family Space in writing if their child has outgrown an allergy or no longer requires an epinephrine auto-injector. (A note from the child's allergist or physician is also required.) An auto-injector is a medical device designed to deliver a single dose of a particular lifesaving drug.

5. Parents should be encouraged to have their child wear medical identification (e.g. Medic Alert ® bracelet). The identification could alert others to the child's allergies and indicate that the child needs or carries an epinephrine auto-injector. Information accessed through a special number on the identification jewelry can also assist first responders, such as paramedics, to access important information quickly.

Availability and Location of Epinephrine Auto-injectors

1. Store out of reach of children but make easily accessible to Providers (i.e. not locked). Providers working directly with the child may carry the auto-injector in a "fanny pack." All Providers must know the location of the auto-injectors. When participating in outdoor play, the Provider must bring the EPIPEN outdoors. It should ideally be stored in a cool dark place at room temperature- 15 to 25 degrees Celsius (ie. Thermos)

2. If appropriate, a school-aged child may carry their own asthma medication or emergency medication as long as procedures established in the Child Care and Early Years Act is followed.

3. Posters which describe signs and symptoms of anaphylaxis and how to give an epinephrine auto-injector will be posted in the Provider's kitchen and in an easily visible location on every floor of the Provider's home that is used for child care. A copy will be attached to the child's emergency cards.

4. Additional auto-injectors should be brought on field trips. If the location is remote, it is recommended that the Provider carry a cell phone and know the location of the closest medical facility.

Emergency Protocol

1. An individual anaphylaxis emergency Plan must be signed by the child's parent and parents have the option to consult a physician. A copy of the Plan will be posted in the Provider's kitchen and in an easily visible location on every floor of the Provider's home that is used for child care. A copy will be attached to the child's emergency cards.

2. The individual Anaphylaxis Emergency Plan must be developed, signed and dated by parent or guardian before a child begins at the home, or at the time the child is diagnosed with anaphylaxis. The plan may be made in consultation with the child's physician, The plan must be reviewed, updated where applicable, and signed again by the parent or guardian at least annually. Where changes (other than the expiry date of the epinephrine or the emergency contact information) are made to the individual anaphylaxis Emergency Plan it must be signed and dated by the parent or guardian of the child.

3. Providers need to listen to the concerns of the child at risk, who usually knows when a reaction is occurring, even before signs appear. A copy of the individual anaphylaxis plan and epi-pen must be taken on all outings and are part of an evacuation plan.

4. To respond effectively during an emergency, a routine has been established and will be practiced, similar to a fire drill.

During an emergency:

- The Provider stays with the child.
- Before administering epinephrine check for;
    - the right medication
    - the right dose
    - the right route of administration

Administer epinephrine at the first sign of reaction. The use of epinephrine for a potentially life-threatening allergic reaction will not harm a normally healthy child, if epinephrine was not required. Note time of administration.

- Call 911. Have the child transported to an emergency room even if symptoms have subsided. Symptoms may recur hours after exposure to an allergen. If the child has a back-up epinephrine auto-injector it should also be taken along.

- Contact the child's parents.

- The Provider or alternate Provider must stay with the child until a parent or guardian arrives.

Training

- Providers registered with Family Space Licensed Home Child Care Program, persons living in their home that are over the age of 18 years, volunteers, students, and the Home Visitor will review and sign the anaphylactic policy before commencing care and at least annually thereafter.

- When a child with an anaphylactic allergy is attending a Provider's home, there will be training provided for that Provider, persons living in their home who are over the age of 18, and the Home Visitor. This training will provide a review of the child's individual anaphylaxis Emergency Plan which includes monitoring and avoidance strategies for the child, signs and symptoms of an anaphylactic reaction, the emergency procedures to be followed in the event of an anaphylactic reaction, and a demonstration on the administration of epinephrine for the child.

The training will be provided by the parent of the child with an anaphylactic allergy, an individual having received the train the trainer model from Anaphylaxis Canada, a physician, a designate from the health unit or another individual who has certification as an epinephrine auto-injector instructor. It must be provided to the Provider. Providers will in turn, provide this training to persons living in their home that are over the age of 18, and the Home Visitor who have not received training in the administration of epinephrine by one of these individuals within the past year.

- **The two components of training are;**
  a) A review, with the Provider of the child's Individual Anaphylaxis Emergency Plan by the child's parent or physician: This plan provides information on signs, symptoms and responses to an anaphylactic reaction. This training will be provided by the parent or physician of the child with an anaphylactic allergy, who in turn will provide training to the Provider, persons living in their home over the age of 18 and the Home Visitor.
  b) The demonstration of the administration of epinephrine: As there are standard methods of administering epinephrine, this training may be provided by the parent of a child with an anaphylactic allergy, and an individual having received the train the trainer model from anaphylaxis Canada, a physician, a designate from the health unit, or and individual who has certification as an epinephrine auto-injector instructor. It must be provided to the Provider, all persons living in the home who are over the age of 18 years, and the Home Visitor, if they have not received training in the administration of epinephrine by one of these individuals within the past year.

- When a child with an anaphylactic allergy is receiving care in the home of a Provider registered with Family Space Licensed Home Child Care Program the training outlined above will be provided for the Provider and persons living in their home over the age of 18, and the Home Visitor before care commences and at least annually thereafter. A training sign -off sheet will be signed when training is received by Providers, persons living in their home over the age of 18, and the Home Visitor.

- All Providers and alternate Providers who provide or may provide care for a child with an anaphylactic allergy for any period of time will review the anaphylaxis policy and be provided with training in the details of children's individual Anaphylaxis Emergency Plan by the parent of the child with the anaphylaxis allergy, a physician, a designate from the health unit or other individual who has certification as an epinephrine auto-injector instructor. They will also be provided with training in the administration of epinephrine to be able to respond in the event that a child has an anaphylactic reaction.

- Providers registered with Family Space Licensed Home Child Care Program who are providing alternate care for a child who is at risk for potentially life-threatening allergy must be aware of the child's Anaphylaxis Emergency Plan. They must follow Family Space Anaphylaxis Policy.

- Parents are responsible for ensuring that alternate Providers have sufficient copies of the Anaphylaxis Emergency Plan

- Providers will have opportunities to practice using an auto-injector trainer, (i.e. device used for training purposes) and are encouraged to practice with the auto-injector trainer throughout the year, especially if they have a child at risk in their program.

- Each parent enrolling their child in Family Space Licensed Home Child Care Program will receive a parent handbook which includes information regarding life-threatening allergies including anaphylactic allergies.

- Parents will be made aware if a child with anaphylactic allergies is in attendance in their Provider's home and receive information to promote an "allergy-safe" environment.

Creating an Allergy-Safe Child Care Environment

Special care is to be taken to avoid exposure to allergy-causing substances. Parents are asked to consult with the Provider before sending food to the Provider's home. The risk of accidental exposure to a food allergen can be significantly diminished by means of such measures.

Given that anaphylaxis can be triggered by minute amounts of an allergen when ingested, children with a food allergy must be highly supervised and encouraged to follow certain expectations:

1. Wash their hands before and after eating.
2. Not to share food, utensils or containers.
3. To place food on a napkin, wax paper or plate rather than in direct contact with a table.

Each parent enrolled in any home of a Provider registered with Family Space Licensed Home Child Care Program that has a potentially life-threatening allergy will receive a letter that includes information regarding life threatening allergies including anaphylaxis allergies.

When an occasional child attends care it is the providers responsibility to ensure there have been no changes to the child's Anaphylactic Allergy plan or medical requirements, or if there are changes, that they have the accurate information. Providers will get written confirmation of accuracy of plans and information from parents before the child arrives for care. This may be in the form of a text message. The written confirmation will be forwarded to the agency

ANAPHYLACTIC COMMUNICATION PLAN

Date:

Dear Parent/Guardian:

Within our Licensed Home Child Care Program there is a child who has a potentially life-threatening allergy (anaphylaxis) to foods, predominantly _____
_____.

We feel the best way to reduce the risk of accidental exposure to this child is to ask for the cooperation of the parents/guardians within our program.

Please avoid sending _____or products with _____ listed in the ingredients. All parents are asked to advise their Provider in advance of sending in food to celebrate a childs' birthday or other special occasion.

We have attached our program's anaphylaxis policy which will help us provide an "allergy-safe" environment for children at risk of anaphylaxis. Please read the policy carefully.

If you have any questions, please feel free to contact Family Space. Your cooperation and understanding in this matter is greatly appreciated.

Thank you,

INDIVIDUAL ANAPHYLAXIS PROVIDER TRAINING REVIEW

I have reviewed the individual Anaphylaxis Emergency Plan for _____
And have been provided with training on the procedures to be followed in the event of this child having an anaphylactic reaction, including the administration of epinephrine.

Name (please print)	Signature	Date	Training Provided By

Family Space Quinte Inc.
Licensed Home Child Care Program

Family Space INDIVIDUALIZED PLAN AND EMERGENCY PROCEDURES FOR A CHILD WITH AN ANAPHYLACTIC ALLERGY

Child's Name:
Child's Date of Birth (dd/mm/yyyy);
List of allergen(s)/causative agent(s):

Photo of Child (recommended)

Asthma: ☐Yes (higher risk of severe reaction) ☐No
Location of medication storage:
Epinephrine auto-injector brand name:
Epinephrine auto-injector expiry date (dd/mm/yyyy):
Other emergency medications*:
Emergency Services Contact Number: 911

A child having an anaphylactic reaction might have ANY of these signs and symptoms:

- **Skin:** Hives, swelling, itching, warmth, redness, rash
- **Respiratory (breathing):** Wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay-fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing
- **Gastrointestinal (stomach):** Nausea, pain/cramps, vomiting, diarrhea
- **Cardiovascular (heart):** Pale/blue colour, weak pulse, passing out, dizzy/light-headed, shock
- **Other:** Anxiety, feeling of "impending doom", headache

CHILD'S SPECIFIC SIGNS AND SYMPTOMS OF A NON-LIFE THREATHING ANAPHYLACTIC REACTION: *(specific to the child, e.g. wheezing and itchy skin)*

CHILD'S SPECIFIC SIGNS AND SYMPTOMS OF A LIFE THREATHENING ANAPHYLACTIC REACTION: *(specific to the child, e.g. inability to breathe, sweating)*

DESCRIPTION OF PROCEDURE TO FOLLOW IF CHILD HAS A NON-LIFE THREATENING ANAPHYLACTIC REACTION:

DESCRIPTION OF PROCEDURE TO FOLLOW IF CHILD HAS A LIFE THREATENING ANAPHYLACTIC REACTION:
Early recognition and immediate treatment could save a child's life.
Act quickly. The first signs of a reaction can be mild, but symptoms can get worse very quickly. A copy of this plan and epi-pen must be taken on all outings and part of an evacuation plan.
1. Give epinephrine auto-injector – at the first sign of a reaction occurring in conjunction with a known or suspected contact with allergen. Give a second dose in 10 to 15 minutes or sooner IF the reaction continues or worsens.
2. Call 911. Tell them someone is having a life-threatening allergic reaction. Ask them to send an ambulance immediately.
3. Call contact Parent

STEPS TO REDUCE RISK OF EXPOSURE TO CAUSATIVE AGENT/ALLERGEN: (e.g. nut-free environment)

ADDITIONAL NOTES (if applicable): (e.g. use of other emergency allergy medication(s) to implement the emergency procedure)

Family Space Quinte Inc.
Licensed Home Child Care Program

Parental Statement

I_____ (parent/guardian) hereby give consent for my child_____(child's name) to (check all that apply):

□carry their emergency allergy medication in the following location (e.g. blue fanny pack around their waist):

□self-administer their own medication in the event of an anaphylactic reaction

AND/OR

I_____ (parent/guardian) hereby give consent to any person with training on this plan at the home child care premises to administer my child's epinephrine auto-injector and/or asthma medication and to follow the procedures set out in my child's individualized Anaphylaxis Plan and Emergency Procedures.

Parent/Guardian initials: _____

EMERGENCY CONTACT INFORMATION

Contact Name	Relationship to Child	Primary Phone Number	Additional Phone Number

HEALTHCARE PROFESSIONAL CONTACT INFORMATION: (optional)

Contact Name	Primary Contact Number

SIGNATURE OF HEALTHCARE PROFESSIONAL (optional)

Signature: Date:

SIGNATURE OF PARENT/GUARDIAN (required)

Print Name: Relationship to Child:

Signature: Date:

SIGN OFF FOR THE ADMINISTRATION OF EMERGENCY MEDICATION *Sign off for each medication given to child*

Child's Name	
Date and Time Administered	
Name of Medication And Dose Given	
Symptoms	

_____ _____

Provider's Name Printed Provider's Signature

Family Space Quinte Inc.

Licensed Home Child Care Program

Child's Name	
Date and Time Administered	
Name of Medication And Dose Given	
Symptoms	

_____ _____

Provider's Name Printed Provider's Signature

*****After administration of medication, child must go to hospital immediately.*****

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.27**
Policy:	**Individualized plans for children with medical needs and Anaphylaxis Plan**	**Date Approved:**	**November 2002**
		Date Reviewed:	**January 14, 2025**

Individualized Plans for Children with medical and/or special needs

Policy

All children who have an identified special need or require extra support to be included in a licensed child care setting must have adequate documentation to ensure that the health care and developmental needs of the child are met. The documentation will be either a Developmental Inclusion Plans, Consultation Notes – developed in coordination with Family Space Special Needs Resource Program (Inclusion Coach), or an Individualized Plan for children with medical needs.

Family Space will connect with families who have children with Health Care plans approximately every 6 months to confirm if there have been any changes.

Procedures:

1.0 When a child with special needs has been identified by either the parent or the Provider, a referral (with the parent's consent) is made to Family Space Special Needs Resourcing Program.

2.0 A Developmental Inclusion Plan is developed within 3 months of a child in tier 3 being referred to the Special Needs Resourcing Program in coordination with the family, Provider, Inclusion Coach, and Home Visitor. The Developmental Inclusion Plan must be updated at least every 6 months, and a copy of the plan needs to be in the Provider's home, and in the child's file at Family Space.

3.0 For children who have an identified medical, or other exceptional need, and the family is not involved in the Special Needs Resourcing Program, an individualized plan for a child with medical needs must be completed. A copy will be kept at the Provider's home, and in the child's file at Family Space. These plans must be reviewed on an annual basis.

4.0 In the case of evacuation, the Provider will ensure individual plans for a child with medical needs and service plans should be close to the door for easy retrieval if possible.

5.0 When an occasional child attends care it is the providers responsibility to ensure there have been no changes to the child's Health Care plan or medical requirements, or if there are changes, that they have the accurate information. Providers will get written confirmation of accuracy of plans and information from parents before the child arrives for care. This may be in the form of a text message. The written confirmation will be forwarded to the agency.

Family Space Quinte Inc.
Licensed Home Child Care Program

INDIVIDUALIZED PLAN FOR A CHILD WITH MEDICAL NEEDS

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

Child's Full Name: Click here to enter text.

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

Date Individualized Plan Completed: Click here to enter text.

Photo of Child
(Recommended)

Medical Condition(s):

☐ Diabetes ☐ Asthma
☐ Seizure ☐ Other: Click here to enter text.

PREVENTION AND SUPPORTS

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

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

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

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

SYMPTOMS AND EMERGENCY PROCEDURES

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

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

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

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

Additional Information Related to the Medical Condition (if applicable):
Click here to enter text.

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

Parent/Guardian Signature:

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

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

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

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

Special Instructions:

- *Acute: a condition that is severe and sudden in onset that, if left untreated, could lead to a chronic syndrome.
- **Chronic: a long-developing syndrome that can develop or worsen over an extended period of time.
- Each child with medical needs requires their own individualized plan. If significant changes and updates are required to this individualized plan, a new individualized plan must be completed.
- An additional individualized plan is not required for a child with an anaphylactic allergy, if the child does not otherwise have a medical need, as these children must already have an individualized plan under the anaphylactic policy.
- Children's personal health information should be kept confidential.

EXAMPLES

Family Space Special Needs Resource Program – Developmental Inclusion Plan
Referral made to the Special Needs Resource Programs Inclusio, and an Inclusion Coach is actively involved.

Individualized Plan for a child with medical needs- Ministry form
Children with: diabetes, seizures asthma, other acute or chronic medical conditions such that he/she requires additional supports, accommodation or assistance.

** Anaphylactic forms are separate

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.28**
Policy:	**Signage**	**Date Approved:**	**August 2015**
		Date Reviewed:	**Oct 10, 2024**

Policy

The Ministry of Education provides signage to be distributed to all Providers registered with Family Space Licensed Home Child Care Program. This signage is to indicate that the Provider is with a licensed agency.

Procedure:

The signage is to be posted in a conspicuous place in the Provider's home at the front entrance of their home. The sign may never be duplicated or published.

Return of signage

A license or signage that was provided to a person for the purposes of the Act shall be returned, as required, in the following circumstances:

- Family Space shall return the license and signage within 30 days after the day the home child care license expires and is not renewed;
- the license is revoked; or
- Family Space voluntarily ceases operating the agency in respect of which the license was issued.

A home child care Provider shall return signage to Family Space before final renumeration for care provided is completed or within 3 days of termination of the contract with the agency, whichever comes first.

Section:	**HOME CHILD CARE PROGRAM OPERATIONS**	**Policy Number:**	**6.29**
Policy:	**Administrative Penalties**	**Date Approved:**	**October 2018**
		Date Reviewed:	**March 2020**

***Subsection 13.2 – Administrative Penalties**

Child Care and Early Years Act, 2014 Notice of

administrative penalty

39(1) A director or inspector may issue a notice in writing requiring a person to pay an administrative penalty in the amount set out in the notice if the director or inspector is of the opinion that the person has contravened this Act or the regulations.

Content of notice of administrative penalty

39(6) A notice of administrative penalty shall,

(a) contain or be accompanied by information setting out the nature of the contravention including, if relevant, the date on which and location where the contravention occurred;

(b) set out the amount of the penalty to be paid and specify the time and manner of the payment; and

(c) inform the person of his, her or its right to request a review of the notice by a designated senior employee.

Ontario Regulation 137/15

Amount of administrative penalty

78. (1) The administrative penalty for the first contravention of a provision set out in an item of Table 1 or Table 2 to this section is the amount set out for that item in Column 3 of the Table.

(2) If, within three years after the first contravention of a provision set out in an item of Table 1 or Table 2, a subsequent contravention of the provision occurs, the administrative penalty is,

(a) for the second contravention, twice the amount set out for that item in Column 3 of the Table;

(b) for the third contravention, three times the amount set out for that item in Column 3 of the Table; and

(c) for each contravention after the third, four times the amount set out for that item in Column 3 of the Table.

(3) If a contravention of a provision set out in an item of Table 1 continues for two or more successive days, the administrative penalty is the amount determined under subsection (1) or (2) multiplied by the number of successive days that the contravention continues.

(4) If the amount of an administrative penalty calculated under this section for the contravention of a provision set out in an item of Table 1 or Table 2 exceeds $100,000, the amount is deemed to be $100,000, subject to any reduction of the amount under subsection 39 (4) of the Act.

(5) **TABLE 1**

Item	Column 1 Contravened provisions	Column 2 Description of contravention	Column 3 Amount of administrative penalty, in dollars
1.	Act, s. 6 (1), read with s. 6 (3) subparagraph 1 i	Prohibition – provision of home child care, total number of children	2000 × number of children that exceed the number specified in the Act
2.	Act, s. 6 (1), read with s. 6 (3) subparagraph 1 iv	Prohibition – provision of home child care, number of children younger than two	2000 × number of children that exceed the number specified in the Act
3.	Act, s. 6 (1), read with s. 6 (3) subparagraph 1 iii	Prohibition – provision of home child care, advising home child care agency	1,000

4.	Act, s. 6 (1), read with s. 6 (3) subparagraph 2 i	Prohibition – provision of unlicensed child care, total number of children	2000 × number of children that exceed the number specified in the Act
5.	Act, s. 6 (1), read with s. 6 (3) subparagraph 2 iii	Prohibition – provision of unlicensed child care, number of children younger than two	2000 × number of children that exceed the number specified in the Act
*6.	Act, s. 7	Prohibition – operation of home child care agency	2,000
7.	Act, s. 8	Prohibition – operation of multiple unlicensed premises	2,000
*8.	Act, s. 9	Prohibition – past conduct, child care Providers, etc.	2,000
9.	Act, s. 10	Prohibition – preventing parental access to the child and premises	1,000
10.	Act, s. 11	Prohibition – use of terms re licensing	750
11.	Act, s. 12	Duty to disclose if not licensed	750
12.	Act, s. 14	Duties re posting, returning and copying licences	750
13.	Act, s. 15	Duty to provide receipt for payment	500
*14.	Act, s. 31 (4)	Obligation to produce and assist	2,000

15.	Act, s. 35	Obligation to provide criminal reference checks	2,000
16.	Act, s. 76	Prohibition – obstruction of inspector	4,000
17.	Regulation, s. 8	Ratios and maximum group sizes, child care centre	2000 × number of children that exceed the number specified in s. 8
18.	Regulation, s. 8.1	Licensed family age groups	2000 × number of children that exceed the number specified in s. 8.1
19.	Regulation, s. 9	Home child care group sizes	2000 × number of children that exceed the number specified in s. 9
20.	Regulation, s. 11	Supervision by adult at all times	2,000

TABLE 2

Item	Column 1 Contravened provisions	Column 2 Description of contravention	Column 3 Amount of administrative penalty, in dollars
*0.1	Regulation, s. 11.1(1)	Supervision of volunteers and students at all times	1,000
*0.2	Regulation, s.15(2)	Designated spaces and items inaccessible to children	1,000
*0.3	Regulation, s. 30.1(1) and (2) (a)	Bodies of water	1,000

*0.4	Regulation, s. 31	Hazards	1,000
1.	Regulation, clause 38 (b)	Reporting of serious occurrence	2,000
2.	Regulation, subclause 40 (1) (b) (ii) and clause 40 (1) (d)	Administration of drugs or medications	2,000
3.	Regulation, s. 48(1)	Prohibited practices, licensee	2,000
*3.1	Regulation, s. 60, 61.1 and 63	Duty to obtain reference check	1,000
4.	Regulation, s. 72 (1), (2), (3)	Records re children	750
5.	Regulation, s. 74	Records re home child care Providers	750
6.	Regulation, s. 75	Copies of agreements	750

Intent

As per the Act, administrative penalties are intended to encourage compliance and prevent individuals from deriving economic benefit from contravening the Act or the regulations.

Special Instructions
An administrative penalty can be issued to any person, including the licensee, home child care Provider, Home Visitor or others.

Subsection 13.3– Right to Review

Chid Care and Early Years Act, 2024 Right to review

39 (7) A person who receives a notice of administrative penalty may require a designated senior employee to review the notice by applying to the designated senior employee for a review in a form approved by the Minister,

(a) within 15 days after the notice is served; or

(b) within a longer period specified by the designated senior employee, if he or she considers it appropriate in the circumstances to extend the time for applying.

If no review requested

(8) If a person who has received a notice of administrative penalty does not apply for a review, the person shall pay the penalty within 30 days after the day the notice was served.

If review requested

(8) If a person who has received a notice of administrative penalty applies for a review, the designated senior employee shall conduct the review in accordance with the regulations.

Designated senior employee's decision

(10) Upon a review, the designated senior employee may,

(a) find that the person did not contravene the provision of this Act or regulations specified in the notice of administrative penalty, and rescind the notice;

(b) find that the person did contravene the provision of this Act or regulations specified in the notice of administrative penalty and affirm the notice; or

(c) find that the person did contravene the provision but that the penalty is excessive in the circumstances or is, by its magnitude, punitive in nature having regard to all the circumstances, and in that case the employee shall amend the notice by reducing the amount of the penalty.

Decision final

(13) The designated senior employee's decision is final.

Intent

To provide a fair process, an individual or licensee has a legislated right to request a review of the notice of administrative penalty.

Subsection 13.4 – Notice to Parents

Child Care and Early Years Act, 2014 Notice to

parents, etc.

39(10) Within 30 days after serving a notice of administrative penalty, a director shall,

(a) post a summary of the notice of administrative penalty, in a manner approved by the Minister, at the premises where the child care is provided; or

(b) provide a summary of the notice of administrative penalty to the parents of the children for whom the care is provided.

Removal of posted notice

39(11) No person, other than a director or inspector, shall remove a notice posted under clause (10) (a) unless the person is authorized to do so by a director or inspector or the circumstances prescribed by the regulations exist.

Intent

This requirement provides transparency for parents and access important information regarding the child care program.

Subsection 13.5– Protection Orders

Child Care and Early Years Act, 2014 Protection

orders

37(1) If, upon conducting an inspection, a director or an inspector believes on reasonable grounds that there is an imminent threat to the health, safety or welfare of any children for whom child care is provided, the director or inspector shall make a protection order as follows:

1. If the child care is provided at a child care centre, the order,

i. shall order the licensee to stop operating the child care centre until the director is satisfied that the order has been complied with,

ii. shall order the licensee to eliminate the threat by taking any steps set out in the order, and

Intent

iii. shall suspend the licence.

2. If the child care is home child care or an in-home service, the order,

i. shall order the child care Provider to stop providing the child care until the director is satisfied that the order has been complied with,

ii. shall order the child care Provider and the home child care agency to eliminate the threat by taking any steps set out in the order,

iii. may order the home child care agency to stop operating until the director is satisfied that the order has been complied with, and

iv. may suspend the home child care agency's licence.

3. If paragraphs 1 and 2 do not apply, the order,

i. shall order the child care Provider to stop providing the child care that is the subject of the order until the director is satisfied that the order has been complied with, and

ii. shall order the child care Provider to eliminate the threat by taking any steps set out in the order.

The purpose of this provision is to eliminate the threat to the health, safety, or welfare of the children; or to protect the children from such threat. A protection order requires that the provision of child care cease immediately until such time as the Ministry is assured that the threat is resolved.

***Subsection 13.6– Offences**

Child Care and Early Years Act, 2014 List

of offences

78(1) Every person who contravenes or fails to comply with any of the following provisions of this Act is guilty of an offence:

1. Subsection 6 (1) (Prohibition re operation of child care centre).
2. Section 7 (Prohibition re operation of home child care agency).
3. Section 8 (Prohibition re operating multiple premises).
4. Subsection 9 (1) or clause 9 (3) (a) (Prohibition re past conduct of Provider).
5. Subsection 10 (1) or (2) (Prohibition re preventing parental access).
6. Subsection 11 (1), (3) or (4) (Prohibition re use of licensing terms, etc.).

7. Subsection 14 (6) (Duty to return licence and signage).

8. Section 16 (Accrediting programs and services).

9. Subsection 17 (1) or (3) (Prohibition re use of accreditation terms, etc.).

10. Subsection 73 (1) (Prohibition re Ontario education numbers).

11. Section 76 (Prohibition re obstruction of inspector).

12. Subsection 77 (1) or (2) (Prohibition re false or misleading information).

13. Any other provision of this Act or the regulations prescribed by the regulations.

Penalties for offences

79 A person convicted of an offence under this Act is liable to a fine of not more than $250,000, imprisonment for a term of not more than one year, or both.

9 (1) No individual shall provide child care, operate a premises where child care is provided or enter into an agreement described in section 7 if:

1. The individual has been convicted of any of the following offences:

    i. An offence under this Act.

Ontario Regulation 137/15

Prescribed Offences

*88.1 The following provisions are prescribed for the purposes of paragraph 13 of subsection 78 (1) of the Act:

1. Section 12 of the Act (Duty to disclose if not licensed and to retain record of disclosure).

2. Section 15 of the Act (Duty to provide receipt for payment).

3. Section 8 of this Regulation (Ratios and maximum group sizes, child care centre).

4. Section 11 of this Regulation (Supervision by adult at all times).

5. Section 48 of this Regulation (Prohibited practices).

6. Section 60 of this Regulation (Duty to obtain initial reference check). O. Reg. 126/16, s. 48

7. Subsection 31 (4) of the Act (Obligation to produce and assist).

8. Section 35 of the Act (Criminal reference checks).

Intent

The purpose of offences is to provide the Ministry with additional tools apart from the revocation of a licence to protect the health safety and well-being of children in all child care settings.