



primrose
place
FAMILY CENTRE

External and Internal Manual



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Our Values

We value communities through building a supportive family environment.

We value growth through learning and discovery.

We value relationships through trust and collaboration.

These values will be instilled in the work we do with children, parents, and amongst our team to make the best PRIMROSE we can.

Image of a Primrose Educator

We are creators of dynamic and diverse relationships.

We are imaginers of astonishing possibilities.

We are researchers of the workings of the world.

We are learners in harmony with the children.

All of these qualities make us Early Learning Professionals

Image of a Primrose Child

When you fail, try again, and ask for help,
We are committed to letting you persist.

When you acknowledge another child's sadness with a hug,
We adore your caring demeanor.

When you joyfully live in the moment,
We feel the contagiousness of your playfulness.

When you observe, engage, and share with others,
We value your participation.

When you are filled with wonderment and questions,
We cherish the way you are constantly seeking.

All these qualities make you,
a strong, capable citizen.

Image of our Primrose families and Community

Together we are building a sustainable future for our children.

Together we are understanding each other's traditions, cultures, and family practices.

Together we are combining our wisdom, strengths, and innovations to build a healthy community.

Together we role model social responsibility and justice.

All of these qualities make our community a place of vitality

Executive Director Welcome

I would like to welcome you to Primrose Place Family Centre (PPFC). It is my pleasure to have you join the team. Since the beginning of PPFC's activities, I have always attributed our success to the dedication and collaboration of our staff.

Whether you are a new employee or have been working for a few years at PPFC, this Employee Handbook ("Handbook") is intended to answer questions you may have about PPFC. It is intended to be a working tool that you can refer to when necessary to learn about or remember many aspects of your work environment.

Our mission, values, organizational structure, policies, procedures and current practices, summary of benefits (if applicable) are elements that shape the organizational culture of PPFC.

Management can also provide you with information and guidance on how the organization works. Please note that we reserve the right to revise, at any time, the nature and content of our policies, practices and benefits (if applicable) in line with financial capabilities and market developments.

Please also note that the Licensing, [Alberta Employment Standards Code](#) and [Health and safety code](#) will always take precedence over this document. Should you wish to make any suggestions and/or comments to improve the quality of your work environment and the diversity of services offered, we invite you to discuss them with management.

I am pleased to have you on board, and I hope that your experience with our team will be a rewarding one. If you have any questions or recommendations regarding this Handbook, please do not hesitate to contact me or any member of the management team.

Lana Fletcher

Lana Fletcher - Executive Director

Mission

PPFC meets the needs of families by providing a healthy and safe environment in which the children optimize their potential to become creative, confident, and independent contributing members of society.

Our non-profit centre is staffed by highly motivated, early childhood Educators dedicated to promoting the social, emotional, physical, and Intellectual development of children. We encourage cooperation with parents and the community to make optimal use of all available resources.

We are dedicated to providing high quality programs and services. The services provided are geared to developing individual and group skills needed for healthy and productive community living.

History of PPFC

PPFC is a non-profit organization that provides childcare to approximately 70 children, ages 11 months to 6 years. Founded in 1967, the Centre has offered top-quality programming to Edmonton families for over fifty years.

To find out more about PPFC, we invite you to visit our website at www.primroseplace.org

Force of Polices

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Contact Information

Daycare

Address: 6311 92 Avenue, Edmonton Alberta, T6B 0S3

Phone: 780-469-0663

Website: www.primroseplace.org

Director: primrose_director@primroseplace.org

Assistant Director: PPFC@primroseplace.org

Out of School Care

Address: 6811 92A Avenue, Edmonton Alberta, T6B 2C7

Phone: 780-243-0663

Email: outofschoolcare@primroseplace.org

Website: www.primroseplace.org

Program Lead: outofschoolcare@primroseplace.org

Director: primrose_director@primroseplace.org

Assistant Director: PPFC@primroseplace.org

Hours and Days of Operation

We provide early learning and childcare from **7:00am to 5:30 pm, Monday to Friday.**

Closure Dates and recognized holidays:

- New Year's
- Family Day
- Good Friday
- Easter Monday
- Victoria Day
- Canada Day
- Heritage Day
- Labor Day
- Thanksgiving Day
- Professional Development Day (third Friday in October)
- Remembrance Day
- Christmas Day
- Boxing Day

All closures dates will be posted externally and communicated upon yearly planning.

Open Door Policy

Purpose

At PPFC, we value our community through building a supportive family environment and building relationships through trust and collaboration. We believe that an open-door policy will enable trust, communication, and feedback to the centre.

Authority

Executive Director

Policy

Primrose Place Family Centre is committed to an open and accessible environment for employee and family communication, feedback, suggestions, and complaints. This communication may be provided by email, text, verbally, or phone.

We have instituted an Open Door Policy to ensure that employees and families feel comfortable and safe bringing forward items that may need attention in the business.

An Open Door Policy also means that in the event that an employee is nervous to bring a concern forward to a specific person, they may bring it forward to another person in the organization without fear of repercussion.

*Please note that in the event that a complaint involves any element relating to discrimination, violence, or harassment, the investigation procedures in those applicable policies (Anti-Violence Policy, Anti-Harassment Policy, Human Rights Policy, etc.) will be followed rather than what is outlined in this policy.

Child Guidance Policy

Purpose

To create a supportive environment where all parties involved are aware of the positive guidance techniques used on day-to-day basis in Primrose.

Authority

Executive Director/ Assistant Director

Policy

At Primrose Place Family Centre, we will use the continuum framework for responding to children as a guideline. Educators focus on preventative strategies and use various positive guidance techniques when intervention is required to assist children in developing positive social skills. As educators, we know each child has their own learning style, own personality, and temperament. This being said all educators have a variety of tools to implement at a variety of times. We believe the least amount of adult intervention is necessary unless children are at risk or in danger.

Educators strive to be warm, caring, nurturing, respectful and supportive of the children's overall development.

Although methods vary depending on children's abilities and each individual situation, key goals of child guidance are to teach problem-solving skills and to instill an intrinsically motivated sense of 'right' and 'wrong'.

Child guidance strategies will always be reasonable in the circumstances.

This policy applies to all children from 12 months to 6 years of age.

The Child Guidance Policy will be included in the Parent Handbook and reviewed with parents at the time of registration. All educators are required to read the Child Guidance Policy and have access to the policy for review at all times. The policy will be reviewed with the educator during the orientation process and periodically thereafter.

Procedures & Approaches for Guiding Children's Behavior

The following approaches will NOT be used.

- Using any form of physical punishment, restraining or neglect
- Making harsh, belittling degrading, statements of threats
- Withdrawing or using items such as food, clothing shelter and security items in order to change behaviour.
- Isolating the child from the group (time out) as punishment
- Listed below are the strategies and tools we will use on a regular basis in the daycare.

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Consistent

- Educators will be consistent in their approaches with the children. They will provide children with a sense of routine, predictability and rationality by being consistent with them. This will help children develop feelings of security, safety and stability in their lives.
- Responding in a way that children are able to understand depending on children's development and age

Observe and Respond to Behaviors

- Educators will observe and monitor behaviors, it is often recognized that there is a goal behind how children behave. Deciphering these messages will help educators to understand what children want or need because children may lack the communications skills to tell us. Educators will spend a great deal of time reviewing the behaviors of children in order to derive messages behind them

Proximity

- Being near the situation to assist/facilitate if need be
- Example: Child is starting to put sand on the floor you may go closer to the situation to see if the child will change his behavior before having to use other tools

'A word'

- These words are known as cue words, act as a simple reminder
- Help children realize they should change their behavior or action
- Example: Child is starting to push sand on the floor you may say "Sand" or "Uh-oh and point to the sand"

Active Listening

- Is a form of communication that allows you to communicate that you've understood
- Often can be seen as a reflect and repeat
- Shows the child/children your invested and care
- Example: Friend takes a toy from a child. Child is crying. Educator response: It seems like your sad that your friend took your toy. Give time for child to respond. Educator: Let's go get your toy back.
- Example: Child states "I drew some spaghetti: Educator response: "Wow. You drew some long spaghetti!"

I messages

- Express feelings, what's happening, and the reason they need to change it
- Ensure it's real and tangible
- Role modeling care of feelings, and a trusting relationship
- Example: It scares me when I see you climbing on this table because it's not strong and you could get hurt.

You can diagram an I-Message this way to demonstrate the three parts:

It scares me

(your feelings)

when I see you climbing on this table

(what's happening)

because it's not strong and you could get hurt.

(the reason)

When kids throw sand, I worry that

(what's happening) (your feelings)

it will hurt someone's eyes.

(the reason)

It upsets me to see a book on the floor

(your feeling) (what's happening)

Because it might get torn.

(the reason)

Descriptive Feedback

- Describes what children are doing, or how they appear
- Can be seen as positive reinforcement

- May be a large part of the educators day
Example: Child arrives to daycare smiling. "It is so exciting to see all your friends in the morning. You have a big smile."

Positive Reinforcement

- Positive communication is a tool to reinforce desired behaviors and diminish undesirable behaviors; it builds self-esteem and inspires confidence in children.
- Children's feelings of esteem are very highly influenced by their interaction and relationship with the educators.
- Tone of voice conveys comfort and sense of belonging
- The educator will make a point of giving positive reinforcement and encouragement to children who are interacting with each other positively.
- Example: "You're holding hands. That helps us stay together as a group." "Wow. Look at all the lines on the paper. You are working really hard!"

Redirection

- Redirection is a technique that helps children learn appropriate behavior but still maintains their sense of exploration and discovery. Educator can use redirection to prevent personal injury, promote desirable behavior and reduce negative interactions between the children and themselves.
- Tell children what they are able to do, and can do
- Verbal redirection tells the children what is or is not acceptable. When used appropriately verbal redirection is a way to direct the child's attention and behavior to more acceptable activities.
- Example: "I see you climbing on the table. I'm afraid you might fall. Let's go find the climber."

Natural Consequences

- Educators will apply natural or logical consequences to help children gain self-confidence and opportunity. Educators will assist children to recognize what outcomes will naturally occur for behaviors they choose. Once they know what the natural consequences are, then educators allow the children to make their own decision to do or not do the targeted behaviors. If they do the behaviors, then allow the children to experience the natural consequences.
- Example: A child doesn't want to take his coat outside even though it is cold. "I see you are not putting your coat on. I am afraid you might get cold. You can take your coat with you, and if you get cold put it on." The natural consequence is he is cold.

Problem Solving

- Children are encouraged and assisted to use a problem-solving approach to resolve their conflicts (for example they are assisted/supported to identify the problem, to talk about it and to develop a mutually acceptable solution.)
- Story time, puppets dramatic play and or other experiences are used to help children to develop an understanding of how people may feel in a range of social situations and how to respond positively. When a child's behavior with another child is unfair or hurtful, the educator will point out in a non-blaming way that the child's actions or words have hurt the other child. In the course of daily activities, educators will assist children to respect the rights of others allowing children to express his or hers opinions.

- Example: A child is playing with three cars and a friend goes up to them and states “I want a car” Educator response: It sound like one of your friends is asking for a car. What can you do to help him out? Child may just respond and give car. Child may respond and say five minutes and I will give him the blue one. Child may state no. I’m playing with my cars. Educator may respond: It sounds like he is still playing with them. Let’s go see if there is any more cars.

Choices

- Giving children choices will empower them to have a sense of control, gain autonomy and be involved in the process.
- Children will always be exposed to a variety of experiences indoors and outdoors which allows them freedom and a sense of ownership in every day experiences.
- When limits are being set with children they must be allowed to have choices within those limits. Educators will need to be careful what choices they are giving children. They need to be able to live with either choice that the child is choosing. (Even if it is not what the educator wanted them to choose.) Children need to have the freedom to make those choices and not be burdened by guilt, fear of loss of approval or rejection if their choices do not please you. The use of natural and logical consequence (choices) will assist children to become good problem solvers capable of making decisions in a rational way.

Responding to the many reasons of biting

- Biting is common among toddlers. It happens for many different reasons with children and different circumstances.
- **Exploration** -Toddlers learn by touching, smelling hearing and tasting.
- **Teething** – swelling gums can be tender and can cause a great deal of discomfort. Sometimes the object that gets chomped on is a person.
- **Cause and Effect** – a toddler may discover that when they bite someone, they get a loud reaction.
- **Attention** – toddlers may sometimes bite to get attention. If they aren’t receiving enough attention, they often find a way to make others sit up and take notice. Biting is a quick way to become the center of attention – even if it is a negative attention.
- **Imitation** – toddlers love to imitate others. Watching others and trying to do what they do is a great way to learn something new. Sometimes children see others bite and decide to try it themselves.
- **Independence** – toddlers are trying so hard to be independent. “Mine” and “me do it” are favorite words. Learning to do things independently are part of is growing up. Biting is a powerful way to control others.
- **Stress** – a toddler’s world can be stressful if there is a lack of routine interesting things to do, divorce or changes in their lives, biting is one way to express feelings and relieve tension.

If educators are aware of these different causes of biting, then it is easier to deal with:

- When biting occurs and the cause is exploration or teething, you may provide the child with a cloth or teething ring to gnaw on.
- If the child seems to bite when tired or hungry, you may want to look at your daily routines to be sure that he is getting enough sleep and nourishment.

- If biting occurs when two children are fighting over a toy, you may want to purchase extra toys. It doesn't work when you make very young children share. Toddlers don't have the skills to negotiate or understand another child's perspective.
- If attention seems to be the main reason for biting, try to spend time with the child when she is doing positive things.
- If the child is experiencing a stressful situation you will want to make everyday life as supportive and normal as possible. Routines and lots of support often help. Providing sensory experiences and gross motor activities are a great way to relieve tension.
- When biting occurs, a child needs to hear with a firm voice that biting is unacceptable. Speak firmly and look directly into the child's eyes. "Biting is not ok. That hurts my friend. I can hear Johnny crying." Go to the child who was bitten and comfort the child. You may get the two children to use words such as "That hurts" or "stop." If the child cannot speak then you can use sign language along with the word. The child who bit can help comfort the other child by holding the ice pack on the other child.

Programming Policy

Initial observations

- Every educator should be making and taking observations of what is happening during play/interactions at the daycare/OSC, as well as discussing with families about what is happening at home.
 - Note taking in a personal notebook.
 - Use of sticky notes on board
 - Should take 2-3 weeks.
- Provocations during these 2-3 weeks should be theory- testing, intentional provocations to give children opportunity to engage in what you are "naming and noticing" in the children's play.
 - Must be documented on mind maps every week(described and detailed)
- Planning sessions should be used for reflection and discussion amongst co educators to dig deeper into what is actually happening in your program and how the children are interacting who your theory- testing provocations.
- By week 4 a big idea/play topics should be established easily.

Define and Expand

Concept Map/Word Cloud and post-it stage

- Research the definition of your big idea/play topic.
- Set a time(usually 1-2 minutes) and write down everything that possibly comes to mind when you think of your topic on post-its.
- Once post-its are complete- categorize them as a group using a flowchart inspiring questions as a guide/ inspiration. (see the handout for flowchart inspiring questions)
- This should take one planning session.
- Continue theory- testing provocations and documenting them on your individual mind-map during this time period.

Constellation of Possibilities/ flow chart stage

- Create your constellation of possibilities using the categories you made at your last planning session. Your goal as a team is to write down as many possibilities you can think of- fill your web!
 - These are experiences and provocations you can come up with that would fit into your categories.
 - Remember, you want to think of all possibilities.
 - Big and small
 - All areas of the room (Sensory/tabletops/dramatic/outdoor/etc)
 - Inside and outside
 - Your environment and the surrounding communities.
 - This should one planning session-however, experiences and ideas can constantly be added to this chart over the duration of your exploration.

Mind-mapping stage

- Once your constellation of possibilities/flow chart is filled in, use the experiences your team has written down to fill in your individual mind maps each week.
 - Always date every experience you do.
 - Add extension notes/observations/ideas/provocations to the experiences you complete.
 - These tasks should be completed during your first 5-10 minutes of every planning session.
- The last 40 minutes of your planning session should consist of you and your co educators reflecting together about what is actually happening in your program.
 - How your intentional provocations played out.
 - Sharing your learning stories and extension ideas
 - Things happening inside and outside of daycare/OSC that are affecting a child and /or children.
 - Discussing upcoming events(weekly walks, park trips, collaborations with other classrooms, celebrations, PD plans. Etc.

Exploring your big idea/plot topic should be taking months. If you've reflected as a team and put in the work during your observation stage- "you will have hit the nail on the head" when it comes to following your children's interests.

Further your documentation

- Learning stories
- White board
- Pannels
- Displays
- Celebrations

Continue to explore play possibilities by adding them to your planning guide. As the children's interest evolve and change, observations and experiences will be removed, and new observations and experiences will be added. The planning guide is always evolving and

changing to follow the children's leads. Renovate and re-explore previous experiences to see how children's play has evolved.

Flowchart Inspiring Questions

- Who in the community can children participate with to connect __ (insert play topic) __?
- What spaces might invite children to revisit, reshape, and rework theories and ideas related to __ (insert play topic) __?
- What ways can children imagine, create and invent worlds that extend from __ (insert play topic) __?
- How can we nurture children's caring for the community, others, and self-related to __ (insert play topic) __?
- How can children use materials to express, explore and investigate ideas, thoughts, and feelings that relate to __ (insert play topic) __?

Supervision Policies

Purpose

Health and Safety is one of the main pillars that play a very important role in achieving success for PFFC. Our management is committed to providing and maintaining a safe and healthy environment for the children, Educators, and families.

Our policy and procedures follow Childcare Licensing Regulations, and The Early Learning Curriculum Framework "[The Flight](#)".

Authority

Executive Director. Assistant Director and program Liaisons

Philosophies

Building relationships: We spend time with each child's family to familiarize them with our supervision policies and learn about the child's favorite things, interests, fears, joys, hopes, culture and traditions. Our goal is to obtain a blending between a family's belief and values and the philosophy of the daycare program. Educators and families work together to discover and celebrate each child's uniqueness.

The Educators take time to get to know each child in our care. We monitor and observe experiences and actions of the children for messages contained in their behaviors. By knowing the children - if one becomes ill or has unusual behaviour, the Educator is able to act upon it by taking the child's temperature, etc.

Our environment: Educators are always aware of our physical environment as we believe the environment is the third Educator. We want children to feel secure, confident and to experience success. We recognize children's developmental abilities, and we accept children for who they are. We acknowledge that children are growing and learning about the world around them and how to interact with materials and others. Our environment is thoughtfully set up for safety, ease of supervision, and based on the children's interests.

Assessment of Supervision

Our Centre assesses our supervision practices at planning meetings with classroom Educators, at monthly professional learning meetings, and daily through the communication binder. Yearly, we review our supervision policy and procedures to ensure everyone knows what it is and is up to date.

Parents are informed of the program supervision policy and procedures through the External and Internal Manual.

Indoor Supervision

Safety Inspections

A safety inspection of the indoor/outdoor play space will be completed daily before children enter the play area. Safety concerns will be noted in the opening duties checklist. Any potential hazards that can be remedied by an educator will be dealt with immediately. The Executive Director will be informed of any hazards that cannot be addressed by an educator and the appropriate action will be taken in a timely manner. Children will be kept out of the unsafe area until the hazards are remedied.

The Environment

- A minimum net floor area of 3 square meters per child
- Doors are locked always
- Parents and Visitors must buzz in and identify themselves
- All windows accessible to children are screened, or are limited to opening less than 15 centimeters
- All electrical outlets have child safety locks built in
- Electrical cords are covered and secured to prevent tripping hazards
- Floor coverings are secured to the floor or backed with non-skid materials
- Heaters, heating appliances, hot water pipes, heated radiators and similar equipment are inaccessible to the children
- At least one person who knows how to use the Centre's fire extinguisher is present in the room whenever children are present

Safe Play Materials

- Play materials that contain toxic substances are never used.
- Labels for art supplies are carefully read to ensure they are non-toxic and safe for the children to use.
- New play dough will be made weekly and stored in the fridge when not in use, to reduce the growth of bacteria.

Indoor Sandboxes

- Only pre-packaged sand that is sealed and labelled "play sand" is used
- Wet play sand will be kept uncovered to air dry overnight
- Sandboxes and sand toys are cleaned and disinfected weekly.
- Sand is to be replaced monthly, or as often as required.

Hazardous Materials

The following materials will not be used when children are present in the Centre:

Pesticides: If wasps and Bees become a problem in the children's play areas, the daycare will Contact the city of Edmonton, pest control department to exterminate them due to the potential for allergic reactions or harm that may cause to children or adults. In the event a pesticide is applied, the children will return to play area only when health authorities recommend safe to do so.

Herbicides: will not be used, if the city of Edmonton uses herbicides, children will not be allowed to play in those areas for the recommended time period.

Poisonous Plants will not be allowed in the daycare or OSC. Any plants that are brought into the daycare will be checked to ensure they are not poisonous.

Chemicals will be labelled with contents and will be stored out of reach of the children.

Appliances

- The fridge temperature will be checked daily
- Appliances will be maintained in good condition, if they are not working properly they will be promptly repaired or replaced

Outdoor Safety Procedures

Leaving the Play Space

- Children will wear orange pinnies when leaving the premises – Green pinnies at the Out of school care
- One educator must carry their own personal cellphone
- Educators must take their room's backpack which contains (at minimum) the following items;
 - Attendance list
 - First Aid Kit
 - Emergency Information Binder
 - Hand Sanitizer
 - Tissues
 - Emergency Medication

Environment

- Accommodates at least 50% of the licensed capacity at a level of not less than 2 square meters for each child under 19 months of age and not less than 4.5 square meters for each child who is 19 months or over
- The outdoor play space is fenced in – Out of school care does not have an outdoor play space attached
- Daycare outdoor play space is fenced in.
- Outdoor sandbox is covered when not in use.

- Daycare outdoor space accommodates at least 50% of the licensed capacity at a level of not less than 2 square meters for each child under 19 months of age and not less than 4.5 square meters for each child who is 19 months or over.
- Out of School Care will use green spaces attached to the church on school days. Educators and children wear pinnies to maintain visibility. Pylons are used to create boundary along sidewalk.
- Out of School Care will use school/community parks, playgrounds, and greenspaces during non-school days.

Park/Playground Equipment

- The Centre uses school/community playgrounds, parks, and green spaces which are inspected for hazardous materials before the children enter the area.
- School and community playground structures are required to meet Canada Safety Standards

Leaving the Play Space

- Children at the Daycare will wear orange pinnies when leaving the premises.
- Children at the Out of School Care will wear green pinnies.
- One educator must carry their own personal cellphone.
- Out of School Care educators must carry their walkie talkie.
- Educators must take their room's backpack which contains (at minimum) the following items:
 - Attendance list
 - First Aid Kit
 - Disposable gloves
 - Disposable bag for garbage
 - Emergency Information Binder
 - Hand Sanitizer
 - Emergency Medication
 - Bottle of water for eye flushing
 - Water for the children

Weather Conditions

- The weather network will be used to monitor weather conditions
- When temperatures combined with humidity and wind, exceeds 30°C or goes below -23°C, classrooms will proceed with caution and reduce time outdoors or stay inside.

- During atypically warm, cold, or rainy days where these temperatures are observed, the management team and educators will monitor weather conditions and factors to assess whether outdoor play is safe.
- If outdoor play is deemed appropriate educators will continue to apply normal safety measures in addition to the following:
 - Assessing children's preparedness and proper clothing for the conditions present
 - Reduce time outside
 - Possibly reduce group size taken outside
 - Monitor children's engagement in play
 - Monitor children's social and emotional well-being; resilience, behaviour, and energy
- Out of School Care will maintain bussing and walking procedures through most weather. Once the weather reaches -35°C we encourage families to drive children to school. This is to keep walking and bus wait times outdoor minimal. Once the temperature drops to -45°C or lower we will not walk children between school and the program or wait outside for the bus in the morning.

Heat Exposure

- UV Index: In general, the following guidelines will be used
 - 0-2 Low: use sunscreen if in the sun for more than 1 hour
 - 3-5 Moderate: use sunscreen if in the sun for more than 30min
 - 6-7 High: use sunscreen and seek shade
 - 8-10 Very High: we will keep children indoors
- **Access to Water: In Moderate to Very High UV Indexes, children should drink water every 30 minutes.**

Air Quality

Air quality monitored by the Management Team and outdoor activities will be limited to their discretion using the Alberta Air Quality Health Index (AQHI):

1-3 Low Risk – no precautions necessary

4-5 Moderate Risk- **Reduce** consecutive time spent outside to a **max of 1.5 hours**. Monitor closely for symptoms like coughing, wheezing, irritated throat. **If children experience symptoms they will be brought inside.**

6 Moderate Risk - **Reduce** consecutive time spent outside to a **max of 1 hour**. Monitor closely for symptoms like coughing, wheezing, irritated throat. **If children experience symptoms they will be brought inside.**

7-10 High – Only small groups of children **with no existing conditions** to participate in an intentional facilitated experience that is not strenuous with reduced time to a **max of 30min**.

11+Very High Risk – Children will be kept indoors

Sun Safety

Parents are required to send hats for children to wear in the summer.

Families must provide sunscreen with a minimum SPF 20 during the summer months.

Parental permission is required for the application of sunscreen to the children.

Sunscreen will be applied to children 30 minutes prior to going outdoors in the summer between the hours of 10:00am- 4:00pm

Insect Repellents

In the summer, parents can provide non-aerosol spray insect repellent for their children (pump spray is acceptable) appropriate for the child's age.

Insect repellent will be applied only if insects are a problem or if a parent requests that insect repellent is applied due to a child's sensitivity to insect bites.

Written permission is needed in order for the educators to apply the insect repellent on the child.

Educators must wait at least 30 minutes after applying sunscreen and before applying insect repellent.

Insect repellent must not be applied over cuts, irritated or sunburned skin or skin with eczema

To apply insect repellent over a child's face, the educator must spray it on his/her hands and then apply it to the child's face.

Ottewell Park Supervision

When children from all rooms are at the Ottewell Park playground, educators are to be positioned as follows:

- One educator positioned at 93 Ave. & 58 St. exit
- A second educator to be at the 93 Ave. entrance (by the parking lot)
- Infant and toddlers (shale, quartz and younger sandstone) need to stay within the cemented and black asphalt sand area.

When using the water park, a maximum of 2 educators are to be in the water.

Offsite Supervision

Offsite Activity

Purpose

Field trips and excursions are planned to enhance the program by taking children out in the community. The value of the experience and the safety of the children are of prime consideration when planning off site experiences.

Authority

Executive Director, Assistant Director

Policy

Primrose will pay facility admission for all volunteers needed for ratio. Any parents wanting to come when not needed for ratio, will need to pay the Executive Director before the field trip.

Educator Responsibilities

The Educator will assign someone to be responsible for contacting site security/police in the case of an emergency. Attendance must be taken before leaving the Centre and before boarding the bus. Children are not allowed to go into public washrooms without being accompanied by an adult from the group. No hot beverages on the bus or on the field trip as hot spills are a safety hazard. The children must always wear orange or green pinnies (wet or dry) for ease of identifying our children in large groups of children.

Educators must bring backpacks to their room with portable emergency information, as well as a cell phone. Personal cell phone usage is prohibited when supervising children on a field trip.

Parent/volunteer Responsibilities

Parent/volunteers will be responsible for a group of children as assigned by the day care Educator.

Parent/volunteers are expected to model appropriate behaviour (smoking is not allowed, eat only foods or drinks provided by the daycare). All parents/volunteers are to follow instructions from the Educator. It is requested that all parents/volunteers wear name tags. If water play is included, parents/volunteers as well as children must always wear shoes in the water.

Procedure

- Visit the field trip site by Educator, prior to taking children to assess:
- Age/developmental appropriateness
- Washroom/water availability
- Telephone availability
- Check for any potential safety hazards.
- Shaded rest area
- Wheelchair/stroller accessibility

Obtain site map

- Choose Method of Transportation
- Public transportation vs. walking distances

Charter bus

- Ensure the bus carries no more than the allotted number of passengers it is licensed to transport.
- Transportation used will meet safety rules that comply with Transport Canada guidelines – written verification will be requested.

Notifying Parents

- Notify parents immediately regarding the field trips. This gives the parents the opportunity to plan for volunteering opportunity.

Obtaining Consent

If a parent doesn't want their child to participate on the field trip, the parents will be required to make alternative childcare arrangements. Ensure all parents have given written permission for their child to participate on field trip on the Field Trip Consent. (Include destination, method of transportation, date, time of departure and return to Centre, and any other special requests such as long pants, hats, bathing suits, mittens, snow pants etc.)

Plan for Supervision

- How many Educator/volunteers will be needed to adequately supervise the numbers of children participating in the field trip?
- When deciding the need for Educator over and above the primary Educator: child ratio, consider:
 - The ages and needs of the children involved.
 - The type of activity
 - The environment in which the activity is taking place.
 - Any other relevant criteria

For all field trips, decide on the ratios that are required for safety of the age group especially for water field trips.

Daycare Ratio

19 months to 2 years: 1 to 1
3 years to 4 years: 1 to 3
4 years to 6 years: 1 to 3

Out of school Ratio

Kindergarten: 1 to 10

Grades 1-6: 1 to 15

Swimming Field trips ratio is 1 to 5

If these ratios are not met, then the room cannot go on the field trip.

One additional adult must be on the field trip outside of ratio.

Field trip Check List

Educators complete the field trip check list prior to leaving on field trips.

Pack Supplies

- Backpacks (attendance list, First Aid kits, portable emergency information binder, hand sanitizer, tissues, emergency medication, if any)
- Extra orange pinnies
- Hats for children and Educator
- Bus driver's phone number
- Extra change of clothes (one set per room)
- Cell phones - one for each room. Educators may use their personal phones.
- Food and water
- Wet ones
- Sunscreen and insect repellent for reapplication

Explain the Field Trip

Talk with the children and let them know where they are going and what to expect. Give enough information to make children feel secure and comfortable.

Plan with the children and set up crafts and experiences in the rooms that will enhance the field trip experience. For example: practicing safety rules or posting and discussing pictures of animals if visiting the zoo. Discuss any applicable safety rules with all Educators, parents, and children including a designated meeting point and time if needed.

Prepare children before going on a field trip or excursion about what to do if they are separated from the group or lost.

Children should know these four rules:

- Stay put. (We will be looking for you and it will be much easier to find you if you stay where you are.)
- Stay calm. (We will find you soon.)
- Wait for an Educator. (Do not go with anyone else.)
- Ask for help if you see police or a firefighter in uniform.

Prior To Leaving

- Ensure each child has sunscreen and insect repellent on before going out on field trip.
- Wash children's hands with antiseptic hand sanitizer before eating.

Discuss any applicable safety rules with all Educators, parents and children including a designated meeting point and time if needed.

Loading and Unloading the Bus

Load and unload bus according to rooms: oldest to youngest (Jasper to Shale) and to ensure that all children, volunteers, and Educator are a counted for, sit according to rooms.

Out of school Care

An Educator will be at the front and an Educator will be at the back to ensure that all children, volunteers, and Educators are counted for.

Upon Arrival and During Field Trip

- Know the times for departure and where to meet.
- Review what the expectations are on the fieldtrip with parents and children.
- Check if children need to use the bathrooms. Do not allow children to go into public washrooms without being accompanied by an adult from the group. Allow parents to take children to the washroom instead of leaving a large number of children with a parent.
- Take attendance regularly throughout the fieldtrip.
- Help answer children 's questions and point out things of interest.
- Encourage compliance of the rules for example: walking, quiet voices, not touching displays. Role model appropriate behaviour.

Upon Departure

- Be sure to take attendance before leaving the field trip and before boarding the bus.
- Steps to take when a child is injured.

Accident/Injury

- An Educator comforts the injured child and administers First Aid
- Another Educator calls Primrose to speak with the Executive/Assistant Director (The Executive/Assistant Director phones parents immediately and informs them of the situation and asks parents to take the child to get medical attention if necessary or asks parents to come to the Centre)
- If unable to contact the parents or emergency contacts, call 911 and ensure you have all the emergency information.
- Complete an Incident/Accident Form immediately before parents arrive.

Serious Injury

- If the injury is serious, call 911, and ensure all emergency information is available.
- Phone Primrose to speak with the Executive/Assistant Director (The Executive/Assistant Director phones parents and advises them on the situation and the name of the hospital)
- Educator to complete an Incident/Accident Form immediately.
- If an Educator is available, they will go to the hospital with the child.
- Try to stay calm

Lost Child

- Educator Responsibilities within the First 15 Minutes
- The educator in charge should have maps of the site with them.
- Leave one Educator with the group.
- Take your cell phone.
- Conduct a brief search of the immediate area - then get help from the nearest Educators or security officer.
- Check the designated meeting place.
- Keep calm but move quickly.
- Call the Centre or have someone else call.
- If you see other Educators, tell them about the missing child.
- As other Educators find out about the missing child, double up the supervision of the remaining group of children, so the rest of the Educators can join the hunt for the child.

Field Trip Supervisor's Responsibilities After 15 Minutes

- Phone Primrose to speak with the Executive/Assistant Director (The Executive/Assistant Director will contact the Child and Family Services Authority)
- Phone police at "911". Tell them who you are, where you work, and that you need help locating a missing child. Give them your location and cell number.
- Phone the parents, guardian, or emergency contact.

Educator Responsibilities After Incident is Over

- Educator completes an Incident/Accident Form report.
- Executive Director ensures Educators, children, and parents have a chance to debrief and discuss their thoughts about the incident.
- Provide additional counseling or support if needed.
- Review the incident and identify what may have led to the occurrence.
- Review procedures and make necessary changes to avoid future such incidents

Ratios and Maximum Group Sizes

When there are only 6 children at the daycare or OSC, only one educator is required for supervision. This mainly applies to opening and closing times. When there are 7 or more children in our care, there are at least 2 educators required to supervise the children.

We have four rooms in the Centre. The ages of children overlap to accommodate developmental needs and enrollment fluctuation:

Ammolite Room 12- 19 months

Shale room: 17 months – 2 years

Quartz Room: 2- 3 years

Sandstone Room 3- 4 years

Jasper Room 4-5 Years

In rooms where there are children from 2 different age group ratios, supervision must adhere to the group ratio that has the largest number of children in it. If the room has an equal number of children in each age group, the ratio of the younger group must be adhered to.

Daycare

Age group ratios are as follows:

Infants 12 months to less than 19 months 1:4 Max group size 8

19 months less than 3 years 1:4 Max group size 12

3 years less than 4.5 years 1:8 Max group size 16

OSC

Kindergarten 1:15 Max group size 30

Grades 1- Grade 6 1:15 Max group size 30

(current as of September 2023)

Nap time

Primrose believes rest is very important to the developing brain and research demonstrates that children need periods of rest and quiet time for brain growth and development.

Each room has developed a nap routine specific to their classroom. All children will begin the period sleeping or resting on their beds. If a child is outgrowing naps or a parent has requested the child not to sleep; then educators, and parents will collaborate and make a sleep/wake up plan for that child. This may include beginning to offer quiet play experiences and reflect on the environment of the classroom.

If a child falls a sleep regardless of being offered opportunities to stay awake, then that child has a need to sleep. Educators will give time to rest before trying to wake them up. The time frame

can be discussed and agreed upon between parents and educators. Once a plan is made any changes that are needed, should be discussed with the educator. Only long-term changes will be implemented.

Sleep times are as follows:

Ammolite:	12:00-2:30
Shale:	12:00 – 2:30
Quartz:	12:30 – 2:30
Sandstone:	12:30 – 2:30
Jasper:	12:30 – 2:30

Sleep ratios are as follows:

11 months to less than 19 months	1:8
19 months less than 3 years	1:12
3 years less than 4 years	1:16
4 years and older	1:20

Educators should be in a sitting position during transition and sleep time, in order to establish room awareness.

Nutrition

Purpose

Nutrition is an essential factor in each child's growth and development. The first few years of a child's life are critical years for growth and brain development. It is also a time when children begin forming eating habits that last a lifetime.

Authority

Executive Director and assistant Director

Policy

PPFC is committed to meeting the children's nutritional needs and promoting healthy eating habits. We maintain awareness of the changing nutritional guidelines of research and Canada's Food Guide to support children's healthy development. Nutritious meals and snacks are provided to the children based on the guidelines of the most current Canada Food Guide using only quality products and ingredients. Foods and drinks containing excess sugar, salt, additives, preservatives and colourings are avoided.

The Centre, along with our food providers, strives to serve foods the children enjoy, taking family and children's preferences into consideration when planning menus. Families are kept informed of all foods served at the Centre allowing parents to see what the child has been served when planning meals at home.

The social aspects of mealtimes are also important. Educators strive to establish a pleasant social atmosphere in which children can enjoy their meals and snacks and learn social skills, self-help skills and learn about good nutrition.

Allergy lists are posted in each childcare room and given to the food provider so that alternative meals and snacks can be provided to children with allergies.

Procedures

Menus and Variety

- Menus are posted on the bulletin boards at the front entrance for the current and following week. Any substitutions will be noted on the posted menus.
 - A morning snack consisting of at least two different food groups, as well as milk, is offered to the children between 8:00 am and 9:00 am.
 - Lunch is served daily between 11:30 am and 12:00 pm and consists of 4 food groups, as well as milk.
 - An afternoon snack consisting of at least two food groups is offered to the children between 2:30 pm and 3:15 pm. Water is offered with snacks.
 - The menus include foods from a variety of cultures.
 - Food and drink containing excess sugar, salt, additives, preservatives and added food coloring will be avoided.
 - All snacks and meals are completely nut free.
 - A cycle menu of three weeks or longer that changes with the seasons is used. Repetition of food items is minimal during the cycle.
 - Special dietary and feeding arrangements are to be carried out in accordance with the written instructions of a parent for the child.
 - Drinking water is always available, both indoors and outdoors.
1. Meals and snacks are reviewed every 6 months by the Executive Director or Assistant Director to ensure that they meet the most up to date nutritional guidelines according to Health Canada.
 2. Menus are kept at least 30 days after the last day for which they are applicable.
 3. An accurate record is maintained of any food substitutions made so that the food intake of children may be traced.
 4. All food and beverages are stored to retain maximum nutritive value and prevent contamination. Hot foods are kept hot, and cold foods are kept cold.

Mealtime Environment

- Children are required to be seated at the table while eating and drinking.
- Educators allow children to decide how much to eat, and what to eat
- Children are encouraged to try each food served but are never forced to eat.
- Educators join children at the table for meals and snacks.
- Educators are encouraged to eat the snacks, meals and drinks provided by the children.
- Educators must not consume other foods or drinks in the presence of children.
- Meals are served family style and children are encouraged to serve themselves with adult facilitation.
- Food is never used to reward positive behaviour.
- Displays and play food items support healthy eating.

Foods from Outside the Facility

- If families provide food and drinks for children, they are encouraged to follow the recommendations of the Canada Food Guide.
- Food treats brought into the Centre by parents, educators and volunteers are discouraged except for special occasions. All treats brought into the Centre must be bought and approved by the Executive Director or Assistant Director.
- Any food containing nuts is not allowed. A nutritious supplement will be provided if the food provided by the family does not meet the Canada Food Guide guidelines. If a child has special dietary requirements, the family may be required to bring food to the Centre for the child.
- When parents bring food or drinks into the Centre for their children, it must be labeled with the child's name.

Food Safety Policy

Purpose

Children ages five and under are at an increased risk for complications from food poisoning (food borne illness) and choking.

Young children's immune systems are still developing, and they are unable to fight off infection as well as adults can. Young children also produce less of the stomach acid that kills harmful bacteria, which makes it easier for them to get sick.

Reference: www.healthycanadians.gc.ca

Authority

Executive Director

Policy

- Food is always prepared under sanitary conditions that do not expose foods to the risk of contamination.

- All educators are provided with information and training in safe handling of foods. We will also expect similarly high standards from our suppliers and contractors.
- Alberta Health has issued the Centre a Food Preparation license which is renewed annually.
- Only licensed food suppliers or food preparation establishments will be used when food is brought into the Centre.

The Executive Director is responsible for ensuring safe food handling practices are established and maintained consistently to ensure foods served to the children are safe.

Foods Storage & Cleaning

- All foods and baking supplies are stored in airtight containers and labelled.
- Hot foods will be kept hot in the warmer and foods requiring refrigeration are delivered on ice. Leftovers are returned to the food provider.
- The refrigerator temperature will be maintained at 4oC (40oF) and the freezer at -18oC
- The expiry dates on perishable foods are checked before use.

Food Precautions

Foods Not Served:

- Nuts and seeds.
- Foods containing raw eggs (e.g. cookie dough, cake batter)
- Unpasteurized milk
- Raw alfalfa or bean sprouts (Raw sprouts have been linked to outbreaks of Salmonella and E. coli infection. Cooked sprouts are safe to eat)
- Hard candies, caramels/toffee, chewing gum, popcorn, gumdrops, jellybeans.
- Snacks made with toothpicks or skewers.

Caution Foods

- Egg dishes will be thoroughly cooked. Eggs should be cooked until the yolk is firm.
- Wieners and sausages will be cut in half lengthwise.
- Grapes will be cut in half.
- Hard vegetables and fruits and other foods are served that may present a choking hazard will be shredded or cut into small pieces.
- Foods with pits such as cherries, plums and peaches will have the pits removed prior to serving.
- Fish with bones will not be served.

Food Supply Policy

Purpose

To ensure proper nutrition at the centre

Authority

Executive Director

Policy

In the rare event of Food Supplier disruptions, notification will be given that lunches and snacks will need to be packed with the child on a daily basis.

Procedure

Notification will be provided with estimation of impacted length and if parental fees are being impacted. Acceptable items will be given at this time. All food sent will be required to be packed with an ice pack to ensure proper temperatures are maintained. No microwave will be available for heating food for consumption.

Manner of Feeding Policy

Purpose

The potential for choking is much greater when not seated while eating.

Authority

Executive Director

Policy

Children will always be seated while eating and drinking. No beverages (including bottles) are provided to children while they are napping.

Procedure

Children will be redirected if they get up from the table while eating or drinking. If the child is refusing to sit then food or drink will be put away until they are ready to sit down.

The educators will encourage children to eat by themselves once it is developmentally appropriate.

Health Care Policy

Purpose

Our goal is to provide a healthy place for children to learn and grow. PPFC acknowledges that keeping a sick child home from daycare is difficult for a working parent, but it is the number one contributing factor to the cycle of illness that can occur in a childcare centre.

Authority

Executive Director

Policy

PPFC is committed to promoting the health and well-being of children, families, and educators. The Executive Director strives to stay current with best practices in health and safety as recommended by the Licensing and Health. Will keep the Board of Directors, programs and policies updated.

Parents play an important part in preventing the spread of illnesses in the childcare settings by keeping their child at home while he or she is sick. Parents are informed of the Health Policy at the time of registration and the Health Policy is included in the Handbook.

The parents authorize PFFC to call 911 in the event of an emergency for their child, and the cost is that of the parents/guardian. First Aid will be administered by an educator at the Centre, as necessary.

Procedure

All health and safety policies and procedures are reviewed with the educator during the orientation process. All educators are responsible for consistently implementing the safety policies.

The Executive Director will ensure that all educators maintain current certification in First Aid, CPR, Child Intervention Check, and a Criminal Record Check with Vulnerable Sector Check.

Illness Policy

Subject to licensing subsection (3), where an Educator knows or has reason to believe that a child is exhibiting signs or symptoms of illness as set out in subsection (2).

(2), the license holder must ensure:

- That the child's parent will arrange for the immediate removal of the child from the program premises,
- That the child does not return to the program premises until the license holder is satisfied that the child no longer poses a health risk to persons on the program premises.

Signs or symptoms of illness exhibited by a child include the child:

- Vomiting
- Having a fever over 38 degrees Centigrade/100.4 degrees Fahrenheit
- Diarrhea or stools that contain blood or mucus.
- Diarrhea is defined as loose bowel movements that is not the normal consistency and pattern for the child.
- Undiagnosed rash or cough
- Difficulty breathing
- Thick mucus or pus draining from the eye (note: red eye with watery discharge does not require exclusion)
- Mouth sores associated with drooling.

Known communicable diseases as per Alberta Health Services Healthy

- Requiring greater care and attention than can be provided without compromising the care of the other children in the program,
- If the child's parent provides written notice from a physician indicating the child does not pose a health risk to persons on the program premises, they may attend care.

Children cannot attend the Centre if illness prevents their ability to participate in regular daily routines.

Once sent home from the childcare program, a child will not be permitted to return until the license holder is satisfied that the child no longer poses a health risk to persons on the program premises (typically 24 hours after symptoms subside or the Centre receives a note from the child's physician).

Gastrointestinal Illness: Stay home until 48 hours after all symptoms have resolved.

- Children will be sent home/should not attend care if they have:
- Two or more episodes of diarrhea in a 24-hour period OR
- Two or more episodes of vomiting in a 24-hour period OR o
- One or more episodes of vomiting AND diarrhea in a 24-hour period OR
- One episode of bloody diarrhea OR o Laboratory confirmation of a known enteric pathogen

Respiratory Illness: Stay home until all symptoms have improved, feeling well enough to resume normal activities, and be fever-free for 24 hours without using fever-reducing medications.

Children will be sent home/should not attend care if they have new onset of two or more symptoms from the list below:

- Cough - Shortness of breath
- Sore throat
- Loss or altered sense of taste/smell.
- Runny nose / nasal congestion
- Fever - Fatigue (significant and unusual)
- Muscle ache / joint pain
- Headache
- Nausea/diarrhea

Rash Illness: Stay home for the length of time recommended by the AHS Public Health Outbreak Team or doctor. How long to stay home depends on the cause of the rash.

Supervised Care for a Sick Child

Parents will be informed immediately by phone, using the emergency contact information provided by the parent, that their child is sick and should be removed from the program.

Sick children will be provided with a quiet, comfortable environment away from other children to rest until they are picked up from the Centre.

Potential Health Risk Policy

Purpose

Having sick children at the centre poses an increased risk to the sick child, to other children and educators at the centre, as well as to family members.

Authority

Executive Director, Assistant Director

Policy

In keeping with Licensing Regulations, children who are displaying signs or symptoms of an illness or have any contagious conditions cannot be at the Centre.

Signs or symptoms of illness exhibited or if one or more of the following diagnoses from a physician or other health professional include:

- Undiagnosed or unexplained open sores or rash
- Temperature, with a fever of 38.0° C or higher
- Vomiting with two or more episodes of vomiting in the last 24 hours
- Diarrhea or loose stool (the child should be excluded for 48 hours until symptoms are resolved or assessed by a physician)
- Wheezing/persistent coughing (the child should be excluded until assessed by a physician or the symptoms are resolved)
- Mouth sores with drooling (the child should be excluded until a physician has determined that the symptoms are non-infectious)
- Rash, with fever or behavioral change (the child should be excluded until a physician has determined that the symptoms are non-infectious)
- Symptoms of possible severe illness, such as lethargy, uncontrolled coughing, irritability, persistent crying, difficult breathing, and/or wheezing (the child should be excluded until assessed by a physician or the symptoms are resolved)
- Chickenpox (the child can be permitted to return to the program when he or she feels well enough to participate in all activities, regardless of the state of the rash and as long as the child returns to the same group, they were with one to two days before the onset of the rash)
- Scabies, head lice, or other infestation (the child should be excluded until appropriate treatment has been completed)
- Impetigo (the child should be excluded until 24 hours after antibiotic treatment has been initiated)
- Measles (the child should be excluded until four days after the appearance of a rash)
- Mumps (the child should be excluded until nine days after onset of parotid gland swelling)
- Pertussis, or whooping cough" (the child should be excluded until five days after antibiotic treatment has been completed, until three weeks after onset of symptoms, or until the coughing has stopped)
- Purulent conjunctivitis, or red/pink eye (the child should be excluded until 24 hours after antibiotic treatment has been initiated)

- Rubella (the child should be excluded until at least four days after onset of the rash, or up to five to seven days at the option of local health authority)
- Strep throat or other streptococcal infection (the child should be excluded until 24 hours after appropriate antibiotic treatment and cessation of the fever)
- Hepatitis A (the child should be excluded until 14 days after onset of illness or seven days after onset of jaundice)
- Tuberculosis (the child should be excluded until a physician has approved his or her return)

A child is displaying any other illness or symptom the educator knows (or believes) may indicate that the child poses a health risk to persons at the Centre

A child requiring of greater care and attention than can be provided without compromising the care of the other children in the program

*Source: Health Childcare, Healthy Child – A Guide to Promoting Health & Preventing Illness in Early Learning & Childcare Settings, Government of Alberta, Sept 2011

Procedure

Parents will be notified and asked to pick up the child immediately and seek medical attention as required. If parents cannot be contacted or if parents have not picked up the child within one hour, emergency contacts will be called to pick up the child.

Children may return to the Centre when they are symptom free for 24 hours, or 24 hours after antibiotics have been administered, or if the parent provides a written statement from the child's physician indicating that the child is no longer contagious to others.

Reducing Cross-Contamination

When a sick child uses a cot, the cot must be wiped with a bleach solution and left to air dry as soon as the child leaves. The blanket used by the sick child must be placed in a bag, sealed and sent home with the family of the sick child to be laundered. Cot sheets used by sick children must be placed into a bag and the bag must be sealed. The Centre will launder the cot sheet.

Required Reporting of Illnesses

If two or more children have influenza-like symptoms, such as a sudden high fever, dry cough, headache, muscle ache and feeling very weak and tired that started within 48 hours of each other it is a potential "outbreak" in the program. All outbreaks, including an outbreak of any of the communicable diseases, must be reported by the Executive Director (or person in charge) to the local Alberta Health Services public health office. Once a report has been made, Alberta Health Services will help in assessing and preventing further illness in the Centre. A list of diseases and guidelines that require the notification of the local Public Health Centre is available at www.health.alberta.ca under the "Health Professionals" tab and "Manuals and Guidelines" section.

Documentation

A Childcare Facility Illness Incident Log Sheet will be used to document children's illnesses including the name of the child, the date the illness was first observed, a description of the illness, action taken, educator/parent who reported it, date the child was removed from the program and the date the child returned to the program.

A notice will be posted on the Parent Information Board/s to inform families when a child enrolled in the Centre has any contagious condition.

A Childcare Facility Illness Incident Log Sheet will be used to document educator's illnesses including the name of the educator, the date the illness was first observed, a description of the illness, action taken, who reported it, and the date the educator returned to work.

Managing Cross Contamination Policy

Purpose

Infection prevention is essential in the childcare environment. Young children transmit infections in any group setting by doing what comes naturally to them - mouthing toys, sharing utensils, playing closely, holding hands, drooling, and sometimes forgetting to wash their hands.

Authority

Executive Director

Policy

Preventative measures are practiced based on Alberta Health Services guidelines to reduce the spread of germs and ensure the environment is maintained in a clean and sanitary condition. The management strives to stay current with best practiced in health and safety as recommended by Alberta Health Services and the Public Health Agency of Canada and implements best practices into policies and practices.

Procedures

- Cleaning and Sanitizing the Environment
- Daily, weekly, monthly, and long-term disinfecting and cleaning schedules for cleaning furnishings, equipment and play materials are prepared by the Executive Director. The educator notes on the checklists when the cleaning has been completed.
- Bed linens are laundered weekly.
- Cots are disinfected weekly.
- Wash cloths are put into the laundry after each use
- paper towels are discarded after each use.
- Garbage & Storage of Soiled Linens & Clothing
- Garbage is stored in plastic lined containers with a tightly fitting cover.
- Soiled linens are stored in a plastic lined container with a tightly fitting cover.
- Soiled clothing is placed into a plastic bag, closed securely, kept out of reach of the children and sent home with parents for laundering.

Children's Personal Items

- Children's bottles must be labeled with the child's name and stored in the fridge.
- Families provide blankets for nap time.
- Children's belongings must be labeled
- Blankets will be taken home every Friday for laundering.
- In the event a child has his/her own personal grooming items at the Centre, these items must be labeled with the child's name.
- Each child has his own labeled sleeping cot that is sanitized weekly.

Hand Washing

Regular and thorough hand washing using soap and water is the most effective way to control the spread of germs and diseases. The more often everyone's hands are washed throughout the day, the less likely it is that educators and children will become ill or pass illness along to others. Educators play an important role in encouraging the habit of hand washing in children by role modeling and teaching good practices. Teaching children to wash their hands regularly is required of educators and will benefit the health and wellness of everyone in the childcare setting.

Steps to Effective Hand Washing

- Turn on warm water to a comfortable temperature.
- Wet hands and apply liquid soap.
- Rub hands together vigorously for no less than 15 seconds, covering all areas of the hands and wrists including the palms, between fingers, backs of hands, fingertips, and nails. Be sure to wash the palms, between the fingers, backs, wrists, thumbs, fingertips, and nails.
- Rinse hands under warm water until soap and dirt are rinsed away. Leave the water running while you dry your hands.
- Dry hands with a disposable paper towel or with a clean, single use cloth towel.
- Turn water off using a paper towel instead of your bare hands. (Turning the taps off with your bare hands will allow germs and bacteria to re-infect your hands.)

Educator Hand Washing

The educator practices mandatory hand-washing routines, using warm water and soap when:

- Arriving at the Centre
- Before and after eating
- Before and after food preparation or any kind of food handling
- Before and after feeding a baby or small child
- Before giving medication
- Before and after diapering
- After using the toilet and after assisting a child using the toilet
- After wiping noses
- After sneezing or coughing into hands, including when tissues are used

- After handling any kind of body fluids (of the adult and children) – from open sores, blood, etc.
- After handling pets or any animals
- Before playing with media such as play dough, moon sand, goop, etc.
- After playing in the sandbox or in the water table with children
- After handling garbage
- After coming into contact with detergents or bleach while cleaning the Centre
- Whenever hands are soiled

Children's Hand Washing

Children are taught by caregivers to sneeze and cough not into their hands, but into the inside of their upper arm. With this method, children and caregivers can lessen the chance of infecting others with their germs.

- Children wash their hands:
- Upon arrival to the Centre
- Before and after eating or handling food
- After diapering and after using the toilet
- After sneezing or coughing into hands
- After wiping their noses
- After handling pets or other animals
- After playing outside
- Before and after playing in sand and water
- Before playing with media such as play dough, moon sand, goop, etc.
- Whenever hands are soiled

Hand Sanitizers

Washing with plain soap and water is the best way to stop the spread of infections.

- Alcohol based hand sanitizers are used only when soap and water are not nearby, such as on a community playground or excursion and on field trips. They do not work if the hands are greasy or visibly dirty.
- Hand sanitizers use will be at least 60% alcohol to be effective.
- The only active ingredient in sanitizer used is alcohol (ethanol, propanol, non-propanol). These products do not cause antibiotic resistance. Sanitizers containing triclosan will not be used as these products cause antibiotic resistance.
- Alcohol free hand sanitizers are not effective and will not be used.

Precautions with Hand Sanitizer

Alcohol in the hand rub is poisonous if ingested but is safe for children if used with supervision.

- Children should not put their hands in their mouths until the alcohol evaporates (about 15 seconds).
- Wall dispensers and free-standing containers of alcohol-based hand sanitizers must be out of the reach of small children.
- Alcohol based hand sanitizers are flammable and must not be placed near a source of heat or above an electrical outlet.
- Alcohol based hand sanitizers do not work if your hands are greasy or visibly dirty.

Diaper Changing Guidelines

Purpose

Provide a sanitary and safe environment for all children at the Centre

Authority

Executive Director

Policy

Parents provide diapers and/or pull-ups, wipes, and diaper cream. If providing cloth diapers a labelled bag must be provided.

A child will never be left alone on the changing table. The educator must always keep one hand on the child.

Diaper changing tables are sturdy and are at a convenient height (28"-32"). They are equipped with a safety strap and a waterproof pad in good repair. The table is placed on a floor surface that can be easily cleaned and sanitized (no carpets nearby). The diaper change table is positioned to allow for supervision of all children.

The following Diaper Changing Procedure is posted in all rooms:

1. Assemble all supplies necessary for a diaper change beforehand.
2. Wash hands and use gloves if preferred.
3. Clean the child's diaper area (genitalia and buttocks) from front to back removing urine and stool, using a moist disposable paper towel or new clean wipe as needed. Use care not to get stool or urine on wipe container. Use soap only if it's needed to remove stool. Dry well, patting rather than rubbing.
4. Use diaper cream only if there's redness or a rash. Remove cream from a container with a tissue, Q-Tip, tongue depressor or Popsicle stick to avoid contamination and apply the cream with your fingers. Do not double-dip to prevent contamination
5. Place soiled diapers, wipes, and gloves into a plastic bag. Tie and dispose of in a hands-free plastic lined garbage container with a tightly fitting cover
6. Place soiled clothing in a plastic bag. Tie securely and store out of children's reach to be sent home with parents
7. Clean and disinfect the change table with a bleach water solution between uses for different children. The bleach solution must sit on the change mat for at least 2 minutes before being wiped off
8. Ensure children's hands are washed thoroughly with running water after diapering or toileting
9. Wash hands with running water and soap for at least 15 seconds
10. Spray Odor destroyer (ZEP product) into the garbage container as needed. This helps contain odors

Toilet Learning Guidelines

The educator and the parents work together to assist children in successful toilet learning. Group care also offers the advantage of toddlers imitating their peers who may be making “toilet tries” or who are now able to use the toilet. Children develop at different rates. We wait to see that the child is ready and then work with parents so that the child has consistency from home to the Centre.

- Child sized toilets are available for children. Potty chairs are not used.
- Children are required to wash their hands after toileting and will be supported by the educator as required. Educators must wash their hands with running water and soap for at least 15 seconds after helping a child with toileting.

Medication Policy

Purpose

Administering medication is a serious responsibility that requires attention to detail and accurate recordkeeping. Incorrect administration has potential health risks.

Authority

Executive Director, Assistant Director, Team Lead

Policy

Prescribed medications, over the counter medications and herbal remedies will be administered when they are in the original containers with attached directions for administration.

Parents are required to properly document their requirements and educators must ensure this has been done before any medication is administered. Records are maintained of the details of medication that has been administered by First Aid only.

Policies and procedures are strictly adhered to, to ensure medications are administered safely.

Procedure

General Procedures

Medication must be given directly to the educator of the child's room or to the Executive/Assistant Director/Team Lead

The educator will provide the parent with the appropriate Medication Administration form. Medication will be administered only if the form is completed. The parent will give written consent which will include:

- Child's name
- Name of medication
- Dosage required
- Time to be administered
- Last dosage and time given prior to arrival at the daycare
- Parent's signature

Medications administered will not exceed the labeled directions and will not be administered on an "as needed" basis.

Over the counter medications will not be administered more than three (3) days without a physician's order.

All medications must be in the original container with the label and directions attached. Prescribed medications must be labeled with:

- Child's name
- Doctor's name
- Name of medication
- Dosage and times to be taken

Parents are asked to provide the educator with the medication of any information regarding potential side effects of medication. This includes medication that has been administered by the parent before the child arrives at the Centre.

Educator Directions

- Only educators with valid First Aid certificates will administer medication.
- Educators are required to wash their hands with soap and water or use hand sanitizer before administering medication.
- Medication must not be mixed with food or drinks.

The educator administering the medication must follow "the five rights" when administering medication.

1. Right medication
2. Right amount
3. Right time
4. Right child
5. Right method

The educators are required to do three (3) checks of medication

1. When taken out of the storage cupboard/fridge
2. When taken out of the storage container/box
3. Prior to administering

The educator will complete the form with the following information once the medication has been administered:

- Name of medication
- Time of administration
- Amount administered
- Initials

Educators will observe the child for allergic reactions for one (1) hour after administering medication. The educator will initial the medication administration form after observing the child.

Medications must be returned to families when the authorized administration period has ended.

All medications used by educators must be inaccessible to the children and stored either in a locked educator locker or in the educator room out of reach of children.

Emergency Medications

All children requiring emergency medication (i.e. asthma inhalers, epi-pens, etc.) will have action plans completed and posted in the child care room with the allergy lists and a copy filed in the emergency book.

Emergency medications will be stored in the child's classroom in the emergency backpack, inaccessible to children where it can be accessed quickly by the educator. The backpack travels everywhere the child goes.

The Assistant Director will ensure the educator is informed of which (if any) children use emergency medications, where the medications are stored, and how to administer them if necessary. The Educator will then familiarize themselves with the emergency medication in each classroom

On the first day of each month the Assistant Director or Family Liaison will check expiry dates on all emergency medications that are stored in the backpacks and initial on the bottom of the allergy lists. Parents are informed of medications expiring and any expired medications will be returned to parents.

Emergency medication will be easily accessible to all educators. All emergency medication will be stored in the classroom, in the backpack, which travels everywhere the child goes.

All children requiring emergency medication such medications include Ventolin, allergy medication or epi-pens will have action plans completed and put up in the room and put into emergency books. All emergency actions will be on the allergy lists that all rooms receive. On the first of each month the Team Lead will check all expiry dates on all emergency medications that are stored in the backpacks and then initialed on the bottom of the allergy lists. During the orientation process, all educators will be informed of the children that have emergency medication and where the medication is stored.

Information regarding the potential side effects of medication must be given to the educator administering the medication. This includes medication that has been administered by the parent before the child arrives at the Centre. Educators will watch for any side effects when administering medication up to an hour after medication is given.

Storage of Medication

All non-emergency medications will be stored in a manner appropriate to the medication (i.e. refrigerated or room temperature) in locked boxes and inaccessible to the children. No medication can be stored in a child's backpack, diaper bag or locker. Emergency medication will be stored in the emergency back packs that travel everywhere the child goes.

Medication Return

All educators must return prescribed medication to the family when the authorized period has ended as per the medication form. All other over-the-counter (including non-prescribed herbal remedies) must be returned to the family at the end of each day.

Special Health Care Needs Policy

Purpose

PPFC is an inclusive program and strives to meet the needs of all children.

Authority

Executive Director

Policy

The Executive Director, the parent/s and the child's educators will work together to ensure the educator responsible for the care of a child who requires additional care (above giving medication) is trained in the proper method of administering the type of health care required by the child. The type of health care required by the child and this training is documented in the educator's file as well as the child's file.

Procedure

The parent/s will provide details of the type of health care required by the child

The parent/s is asked to make suggestions to the Executive Director as to where we can access the training required

Professionals specializing in the specific type of health care required by the child will train the educators. Parents are asked to participate in the training and provide input as to the individual child's needs or preferences

Training will be documented in the educator

Incident Reporting Policy

Purpose

Childcare programs are required to report to their Licensing office every time a serious illness, injury to a child or any other incident occurs that may seriously affect the health or safety of a child.

Authority

Executive Director and assistant Director

Policy

The Executive Director is responsible for maintaining a record of critical incidents and reporting according to the requirements outlined in the Childcare Licensing Regulations. Critical incidents will be analyzed to determine if actions need to be taken to reduce the incidence of illness or injury.

The following critical incidents must be reported to the local childcare Licensing office:

- An emergency evacuation
- Unexpected program closure

- An intruder on the program premises
- A serious illness or injury to a child that requires the program to request emergency health care and/or requires a child to remain in the hospital overnight
- An error in the administration of medication by educators or volunteer resulting in the child becoming seriously injured or ill and requiring First Aid, or the program requesting emergency health care and/or requiring the child to remain in the hospital overnight
- The death of a child
- An unexpected absence of a child from the program (i.e. lost child)
- A child removed from the program by a non-custodial parent or guardian
- An allegation of physical, sexual, emotional abuse and/or neglect of a child by an educator or volunteer

The commission by a child of an offence under an act of Canada or Alberta and/or a child left on the premises outside of the programs operating hours.

Procedure

The Executive Director or designated person in charge in the absence of the Executive Director will immediately report critical incidents such as serious illness, injury to a child or any other incidents that may seriously affect the health or safety of a child. By using the form supplied by Licensing, reports can be made by telephone, or e-mail to the local CFSA Licensing Office. If faxing or e-mailing, the Centre is required to speak to a Licensing educator member to confirm the report was received.

The Incident Report form located on the Human Services website www.humanservices.alberta.ca will be used for reporting critical incidents to the local CFSA Licensing Office within two (2) days of the critical incident.

- A copy of the child's enrollment form must be attached to the report.

CFSA Licensing Office contact information

Phone: 780-427-0444

Fax: 780-427-1622

E-Mail: HS.Reg6cccincident@gov.ab.ca

The childcare services office is open to receive your reports Monday to Friday from 8:15 am to 4:30 pm. Most Critical Incident Reports can be followed up with the Licensing office the following day. If reporting a critical incident outside these hours, please contact the Child Abuse Hotline at 1-800-387-5437.

The following information will be included in the report:

Program's name and contact information

Child's name

Date and time of incident

Action taken by the license holder as a result

Copy of the child's profile information form

Each year on the anniversary month of the daycare license the Executive Director will submit an Incident Reporting Annual Summary and Analysis Report using a specific form for this purpose. The form is available at www.child.alberta.ca/chidcare

Late Pick up Policy

Purpose

It is in the best interest of the child and closing educator that parents pick up their children in a timely manner. Parents are encouraged to call and keep communication lines open should they be running late. This policy is included in the Parent Manual

Authority

Executive Director, Assistant Director

Policy

The Centre closes at 5:30 pm. using the clock from the computer. Within each calendar year, parents will be allowed one late pick-up of no more than 10 minutes without penalty. Parents who exceed this allowance will be charged:

5:30 pm to 5:45 pm - \$ 5 for every five minutes, or part thereof

5:45 pm to 6:00 pm - \$20 for every five minutes or part thereof

6:00 pm to 6:30 pm - \$30 for every five minutes or part thereof

If children have not been picked up by 6:30 p.m. and the parents or the emergency contacts have not been reached; educator will contact Emergency Social Services at 780-427-3390 to have the child picked up.

An appeal procedure is available for those who, due to genuine circumstances or misfortune (i.e., traffic accidents) are late. Every effort should be made to contact the Centre in case of such an incident and all appeals can be made in writing to the Executive Director.

Collection of Late Fee

Late charges will be collected from the parent the next day or added on to your account and withdrawn at the end of the month.

Child attendance may be denied if collection arrangements are not made. The educator or management and parent will be asked to sign a log of the activity. In the event of late payments, the logbook will be sent to the Executive Director for review.

Procedure for Late pick ups

- Phone the family if they haven't called. Check in to see why they are late.
- Document the Late arrival in Late pick-up book.
- If it is 6pm and family has not come, please contact Executive Director
- Executive director will provide extra instructions.
- Check in the following morning with Executive Director.

Late book stored.

The Late pick-up book is stored on the shelf behind the assistant director desk next to the incident/accident and medication forms.

Parent Concern and Follow up

Policy:

At Primrose Place Family Centre, we believe that building strong relationships will result in a better environment. As with all relationships, we anticipate that there may be times when conflict arises between parents/guardians and Primrose. It is important to provide a process for parents/guardians to communicate complaints relating to the operation of the childcare program.

Primrose is committed to responding to complaints or concerns in a timely manner.

Procedure:

In the event of a parent/guardian concern at Primrose Daycare or Out of School Care, the following steps will be taken:

STEP #1: Try and resolve the conflict directly with the other person involved

Parents/guardians must first raise concerns/complaints with their child's immediate educator if it involves classroom issues (ie/lost mittens). Parents will determine the appropriate time to bring this to the educator's attention and give time for the educator to respond or to determine a solution. The educator will attempt to resolve the issue raised and report to management.

STEP #2: Talk to the Director/Assistant Director about the conflict

If the concern is regarding the centre as a whole and it directly deals with management or if the

parent/guardian is not comfortable bringing forward the issue directly to educator, parent/guardians will raise their concerns/complaints with the Director or Assistance Director involved (ie/ concerned with operations).

Or if a parent/guardian is not satisfied that the issue has been addressed after speaking with the immediate educator, they may wish to discuss their concerns with the Director or Assistant Director.

STEP #3: Write to the Chair of the board

The final step is to be taken only when Steps 1 and 2 have been completed or the parent/guardian does not feel comfortable bringing forward the issue to the Director or Assistant Director. A concerned parent/guardian may email the board chair at Boardofdirectors@primroseplace.org outlining the concerns and why the remedial steps taken by management are not satisfactory.

Once the email to the board chair has been received, the Executive Committee or a delegated subcommittee will review the written concerns, and the remedial suggestions that were taken by the parties in the conflict, and management.

The Executive Committee or the delegated subcommittee will then:

- Refer the matter back to management to implement the original remedial suggestions that have been made; or
- Recommend new solutions for management and/or parties in the conflict to implement; or
- Recommend management engage a neutral party to investigate the concerns by interviewing and taking written statement from all parties involved and making detailed recommendations for remedial action relating to the concern; or
- The Executive Committee or delegated subcommittee will engage a neutral party to investigate the concerns by interviewing and taking written statement from all parties involved and making detailed recommendations for remedial action relating to the concern.

The Board Chair or a delegated Executive Committee member will provide a written response to the parent/guardian who raised the concern within thirty days of receiving the email.

The Executive Committee will determine the appropriate communication to the Board regarding the concern.

Scent Free Policy

Policy:

Due to the health concerns arising from exposure to scented products, Primrose has instituted this policy to provide a scent-free environment for all employees.

Procedure:

Employees will be informed of this policy through the educator manual and will receive this policy during orientation and training.

When exposure to the ingredients or chemicals in scented products has been blamed for adversely affecting a person's health, some or all of the following symptoms are typically reported:

- headaches
- dizziness, light headedness
- nausea
- fatigue
- weakness
- insomnia
- numbness
- upper respiratory symptoms
- shortness of breath
- skin irritation
- confusion
- difficulty with concentration

ingredients or chemicals used to produce scents are present in a very large range of products, including (note that these lists are not inclusive and other products may trigger a response):

- shampoo and conditioners
- hairsprays
- Stick or spray deodorants
- colognes and aftershaves
- fragrances and perfumes
- lotions and creams
- potpourri/ Scentsy
- industrial and household chemicals
- soaps, detergents, fabric softeners
- cosmetics
- air fresheners and deodorizers
- oils
- candles

All products used by Primrose are scent free and provided by Zep. If you are unsure about scents or products, please ask Assistant director.

Admission Policy

Purpose

The admissions policies and processes are to continually improve the quality and responsiveness to admission process.

Authority

Executive Director, Assistant Director

Policy

There will be no discrimination based on race, religion, colour, creed, or national origin.

Part-time children will be accepted on a full-time basis.

A \$100 nonrefundable fee will be asked for, along with half of the first month fee which goes toward the month starting. This is also nonrefundable.

Procedure

Before a child can be admitted to the Centre, the parent(s) shall: participate in an interview and tour with the Executive Director/Assistant Director to determine their child's eligibility for the Centre.

The Child Profile must be completed with the child's name, date of birth and home address, parent's name, home address and telephone number and the name, address and telephone number of a person who can be contacted in case of an emergency.

Any other relevant health information about the child will include written consent for health care provided to the child.

Arrangements will be made for visits with the child to the homeroom prior to the child's starting date.

The parent package must be completed prior to attendance.

Permission to Photograph

During various times of the year PPFC will photograph educators participating in different events and work-related activities. It is part of the PPFC culture to communicate with the community through pictures, presentations, workshops and events that are reflective of Primrose.

It is up to the individual educator to grant permission for PPFC to take pictures and/or videos of them. They will sign a consent form upon hiring.

Meeting the Developmental Needs of Children

Purpose

PPFC aim is to provide a learning environment that meets the needs of the children, in each area of development.

Authority

Executive Director, Assistant Director

Guidelines

PPFC 's target is to provide a learning environment that meets the needs of the children, in each area of development, as follows: social and emotional, physical, intellectual, and creative development

Social and Emotional

Children are encouraged to develop appreciation and respect for themselves and for each other by sharing their thoughts and feelings, taking turns, listening, and respecting others and materials at the centre. Cooperative play takes place at the centres as well during the day. Children learn and practice decision making and problem solving. Children learn self-help skills in the areas of nutrition and hygiene.

Meeting Time/Team Time

Meeting time allows children to engage in in-depth play. During this time experience may include singing, musical instruments, puppets, storytelling, finger plays, show and share, and introducing new big ideas based on the children's interest. Meeting time often promotes social skills like turn taking, listening to others, and working together in a process.

Transitions

Educators will remain calm and relaxed during transitions and response to children's needs for assistance. Transitions will be organized and handled in a way that minimizes the amount of time children spend waiting to move from one activity to another. Educators will remind children who are involved in an activity when a transition is about to occur and give the children an opportunity to finish their activity. Transitions will be organized to accommodate the needs of individual children who require more warning time or who need more time to move through the transition.

Toileting Routines

This is a time when children are encouraged to work on their self-help skills like hand washing, toileting and socializing. During these times of trial and error, and accomplishments, children gain a sense of pride.

Self-Help Skills

Children are assisted and encouraged to use self-help skills such as hand washing, wiping up spills, dressing and undressing themselves, setting up tables, serving themselves and picking up

toys. The educator will encourage children to practice skills so that they will become more confident.

Napping

Naptimes are an opportunity for children to rest. The lights are off; blinds closed and soft music playing. Blankets and soft toys from home help the children settle down and feel comfortable. The educators rub children's backs to help them settle down. As children wake up, wake up toys and books are given to the children to play on their mats.

Snacks and Lunches

These experiences are an opportunity for educators to role model appropriate behaviour by sitting and eating with the children. Great opportunity for socializing and language building and talking about the food, textures, tastes or what the children did the night before. This will allow for pleasant conversation among children and educators during the meals. Children can eat until they are full. They are encouraged but not pressured to try new food. Children may leave food on their plates when they feel they have had enough or if they dislike specific food. Children will be allowed to leave the table when they are finished eating. The educators will provide quiet activities that can be done by children who leave the table before everyone has finished eating.

Physical

Large muscle activities are experienced throughout the day such as running, jumping, climbing, walking, hopping, crawling, dancing, and movement. The children have access to the outdoor play space, the community playgrounds, as well as walks around our community.

Children develop a greater awareness of their own bodies and how to care for them through fine motor activities such as coloring, cutting tracing, painting, lacing, threading and buttoning.

Intellectual

Science in our world: A variety of sensory activities are set up in our classroom's centers to engage the children's thinking and questioning process, such as play dough, sand, water, goop and art experiences.

Experimenting with cause and effect, creating patterns, sorting, and expanding vocabulary are some of what takes place during our play activities, daily.

Language in our world: We promote language development by using books, finger plays and songs appropriate to the children's development.

Learning stories are available to encourage conversations and expand on play experiences.

Book Corner/Cozy Corner

The rooms have quiet areas for relaxation and comfort for those children who need time from the bustle of the room with books, soft furnishings such as cushions, rugs, puppets and soft toys.

Math in our World

Children discover mathematics in their world by sorting and experimenting with shapes, sizes, space, patterns, sequencing, creating designs, counting, grouping, developing number recognition, one to one correspondence, measuring, graphing and problem solving.

Creative

Children are encouraged to express themselves creatively by building and constructing in sand, water, blocks and other building materials, experimenting with a variety of art media, participating in music and movement, role playing and sharing.

Music

Various kinds of music are often played during the day to enhance the atmosphere. This informal play time fosters co-operative play and socialization. Music will reflect diversity within the classroom by incorporating it into daily activities. Musical toys such as pots, pans, and instruments are provided. Educators will encourage children to explore music by clapping, tapping, drumming and imitation.

Music classes will be provided every second Friday by a music educator. During this time, the music educator brings in novel instruments like a guitar and encourages new sing-along and movement songs.

Interest Centres

The children are encouraged to make choices about what play areas and activities they would like to participate in. The play spaces are open, and the children may come and explore each space on their own or in small groups. The educators move freely around the classroom observing, facilitating and engaging in play with the children. They encourage children to use their imaginations and creatively use open-ended questions. This is an excellent opportunity to model appropriate language, behaviour and share new concepts. Play spaces are set up based on the children's interests. Play spaces include dramatic, sand, water, science, block, manipulative, books and art.

Program Evaluation and Improvement Policy

Purpose

PPFC undergoes an annual survey program review to respond to the needs, desires, beliefs and concerns of the families, educators and the community and continuously work towards enhancing the quality of the program.

Authority

Board of Directors

A formal program review involving families, educators and an external assessment will be conducted annually to monitor program quality. Parents are invited to provide feedback and

input at any time. Goals and action plans will be developed to ensure quality is not only maintained but continuously enhanced.

Procedure

Opportunities for parent feedback and input are provided with regular verbal communication, informal surveys, Email, and a suggestion back

Parents and educators will have the opportunity to complete annual surveys. A section is included in the surveys for general comments in addition to specific questions.

Outcomes of the parent and educator surveys will be compiled on and shared with the board, families, and educators.

PPFC will develop a strategic plan and goals based on outcomes of the surveys.

Each year on the anniversary month of the center's license, the executive director will submit an incident reporting annual summary to Licensing,

Each year in June the Assistant Director will submit an annual report on the quality enhancement plan.

All policies will be reviewed regularly at a minimum of once every three years and updated based on current best practices. Including board activity and involvement and evaluation process.

Family Privacy Policies

Purpose

Records are always maintained in compliance with Licensing requirements and are available for inspection by Licensing.

Authority

Executive Director

Policy

Up-to-date records are maintained for each child and are kept on the program premises in the office where they are stored in a secure manner. (2) A license holder must ensure that (a) the records referred to in subsection (1) are always available for inspection by the statutory director and (b) available for viewing by children's parents/guardians at reasonable times. (3) Records referred to in this section may be in either physical or electronic form. Records no longer required will be shredded after 7 years.

The Executive Director and the parents have access to the child's files.

Parents must notify the Executive Director or Assistant Director should any information on the child's profile change.

Children's records will be updated twice each year, normally in May and November. A formal request for updating the children's registration information will be sent out to families.

Storage

Children's records are stored in a locking file cabinet in the Executive Director's office and include:

The child's profile information form with the child's name, date of birth and home address; the parent's name, home address and telephone number; the name, address and telephone number of a person who can be contacted in case of an emergency

Any other relevant health information about the child provided by the child's parent, including the child's immunizations and allergies, if any

- A completed enrolment forms
- A parental consent form allowing us to call 911 in case of an emergency
- Daily attendance of each child, including arrival and departure times
- Medication administration consent forms when applicable
- Medication administration record:
- Written consent of the parent
- Name of the medication
- Date and time of administration
- Amount administered
- Medication administered by parents/guardians prior to the child's arrival at the Centre
- Initials or signature of the person who administered the medication

Healthcare records:

- Written consent of the parent
- Description and process of any health care provided to the child in the nature of First Aid
- (if applicable) regular special health care, a record of training provided to the educator in the proper method of administering the type of health care required by the child

Children's Electronic Attendance Records

Parents or educators sign their children in and out daily on the computer. If the computer is not working, child attendance hours will be recorded on paper and entered in the computer as soon as possible. Child attendance records will be retained for at least two years.

Children's Portable Records

Portable records of current emergency information in respect of each child are maintained in each classroom where they are always easily accessible to the educators.

Each classroom has 2 backpacks that contain portable emergency records, action plans and emergency medication (if applicable).

Portable emergency records are updated every 6 months. Educators are required to take the backpack containing the children's emergency records when they go to the gym or off site.

Portable records include:

- Child's name, date of birth and home address
- Parent's name, home address and telephone number
- Name, address, and telephone number of a person who can be contacted in case of an emergency
- Any other relevant health information about the child provided by the child's parent, including the child's immunizations and allergies, if any
- an Emergency Contact List with the telephone numbers of the local emergency response service and poison control centre

Personnel Records Policy

Policy

The director shall ensure that a confidential personnel file for each employee is created and maintained in keeping with legal requirements for the provincial and federal governments and the protection of personal information. All information contained within the file must be work-related and factual. An Educator may, upon giving 24 hours written notice to the Executive Director, view his/her confidential file.

The Executive Director/ Assistant Director shall ensure that a personnel file with the same information set out above is kept for each Educator. The Board Chair and Vice Chair may view the Executive Director's personnel file at any time.

Authority

Board of Directors for Executive Director

Executive Director, Assistant Director

Procedure

- Personnel files are kept on the program premises in the office where they are stored in a secure manner
- Personnel files/ records will be reviewed and updated semi-annually
- Records no longer required will be disposed of in a way that ensures confidentiality is maintained
- All Educators sign in and out daily on the computer using timesavr program (or applicable tool)
- If the computer is not working, Educator attendance hours will be recorded on paper and entered on the computer as soon as possible
- The confidential personnel file for each person shall contain but is not limited to the following.
 - Educator Resume
 - Relevant medical reports
 - Emergency contact information
 - Documents required by provincial and federal government
 - Letter of employment outlining start date, salary, compensation, benefits, etc.
 - Performance evaluation

- Corrective action

Community Resources Policy

Purpose

Good relationships among children, educators, families, and the community are the cause of any quality childcare setting. Positive outcomes for children, families and educators are promoted when community resources are utilized.

Authority

Executive Director / Assistant Director

Policy

Collaborative relationships within the community are established and maintained as the child is seen as part of a family and community. Resources are utilized to develop a sense of community, to enrich the children's program and to support children, families and the educator.

Resources

- Community resources that the centre uses include but are not limited to the following:
- Local Parks such as: Ottewell, Kenilworth, St Brendan's and Clara Tyner
- [Capilano Library](#) facilitates a literacy program with our children and families at our Centre and our older children go to the library. Our educators also use the library for resources
- Alberta Health Care Services: for resources such as Healthy Children in Preschool Settings, [Alberta Nutrition Guidelines](#) for Children, pamphlets for our educators and parents, etc.
- Supported Childcare Program: to support inclusive childcare
- Grant MacEwan University: [Early Learning & Child Care](#) student placements and workshops and the Childcare Conference for the educator. Our educators also supervise students from the university
- Greater Edmonton Foundation: [Intergenerational Programming](#)
- [Music with Dawn](#)

Various Community Resources:

- [GRIT](#) Getting ready for inclusion today

Release of Children Policy

Purpose

In accordance with childcare regulations, a child in our care will only be released to the enrolled parent/ legal guardian or alternate authorized persons listed on the child's registration form and card.

Authority

Executive Director and Assistant Director

Procedure

If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

The child is always supervised.

Educator attempted to contact the parent(s) or person(s) authorized by the parent(s); and

An hour after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s) have failed, the educator will call Child Intake Crisis lines 1-800-422-4453 extension 2

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or educator, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:

The child may not be released to such an impaired individual

Educators attempt to contact the child's other parent, or an alternative person(s) authorized by the parent(s)

If the center is unable to make alternative arrangements, an educator will 911

Restraining Orders/Custody Agreements

In the case of custody disputes, each parent will be granted access to the child/children except when a copy of a court order is provided. Such information will be included on the child's emergency sheet. It is the parent(s)'s responsibility to produce a copy of a court order

Waitlist and Temporary Suspension Policy

Purpose:

Waitlist Policy, and

Policy for determining how to proceed when a family wishes to:

Temporarily suspend a child's participation in PPFC programming (daycare & Out of School Care).

Temporarily suspend payment during the period, and

Maintain the child's spot in the daycare or OSC.

Waitlist Policy

There is typically a 1-2 year wait time depending on the age of the child and when care is needed. Space can be offered at any time, the most movement occurs in July, August, and September. Priority is given to parents who currently have a child enrolled in the centre and children of educators who have celebrated their two-year anniversary.

Applying for the waitlist will not guarantee a childcare space. Parents are encouraged to keep in contact (every 3-6 months) to update their form and interest in a space, as well as to communicate flexibility with regard to start dates. If your desired starting date passes without a space being offered, your child will remain on the wait list, unless parents communicate otherwise.

Upon being offered a childcare space within the Centre, the family will be invited to come in for a tour. Once the tour has been complete the family will have two (2) business days to respond to confirm acceptance. If the family fails to confirm their interest to secure the position, their application will be closed, and the next wait list family will be contacted.

Temporary Suspension

Families who wish to temporarily suspend participation in PPFC programming (daycare or out of school care) for any reason*, must continue to make *full payment in order to maintain the child's spot in the daycare or OSC. If the family does not continue payment for the period of the absence, the child's spot will not be held. The family will be placed on the general waitlist and will receive priority amongst other community families. If the space can be filled before the family is ready to resume their child's participation, it will be filled by a community family.

* We will bill the family the full amount through our payment system and record attendance as normal.

*This applies to temporary suspension due to any reason including holiday travel and summer break.

Child Abuse Policy

Purpose

The purpose of our abuse Policy is to clearly outline the position of PPFC on Abuse.

Authority

Executive Director, Assistant Director

Policy

PPFC is committed to a proactive approach regarding the prevention of child abuse and the Primrose's position on how allegations are handled.

This commitment is adhered to through

The continual observation of the children in the Centre's care

Continued education, training, and communication with Educators and volunteers with respect to identification, response, and adherence to legal obligations, including reporting of any suspected abuse, and

Support for the child, their family, and other affected parties

Procedures

As part of PPFC commitment and approach to preventing child abuse the following policies and procedures are implemented into the regular operations of the Centre:

All Educators must read, understand, and acknowledge this Primrose Child Abuse Policy prior to employment at Primrose

All Educators are educated and trained to identify signs and symptoms of abuse and are instructed on the correct procedure for reporting any suspected abuse

Criminal background checks and/or Child Welfare checks are submitted for all Educators and volunteers in regular contact with the children at Primrose

When at all possible one-on-one contact between Educators and children is avoided, requiring two adults to be present with the children

All visitors of Primrose, including Educators and parents, are required to identify themselves prior to entering PPFC (Example: the entrance door is locked from the outside and an intercom is used to communicate who is visiting and what child they are visiting.)

Parents are encouraged and welcome to drop in to visit their child and/or discuss their child's care with the Educators of Primrose

Children are not left unattended at any time while in the care of Primrose

Parents must identify authorized individuals to pick up and drop off their child

Parents and any additional authorized individuals are made known to Primrose Educators both in the office and in the room in which the child is assigned to (Valid government identification, such as a driver's license must be shown to the Educators to verify the identity of any additional authorized individuals)

Children are signed in and out of Primrose every day to ensure that the authorized person is picking up the child and to ensure that the whereabouts of each child is known and documented

Daily experiences and food are documented and reported to parents each day to identify and ensure a safe environment is being kept for each child

Parents, children, Educators, and volunteers are all encouraged to take responsibility for identifying signs of abuse and reporting these situations in the appropriate manner

A copy of the Primrose Abuse Policy is included in the Educators Handbook and copies are held in the office

This policy is reviewed with Educators and volunteers on a regular basis and when deemed necessary by the management of Primrose

Definitions of abuse & Legal Requirements

(Summarized from section 4 of the Child, Youth and Family Enhancement Act)

A child is defined by the Government of Alberta as a person under the age of 18.

The Government of Alberta Children and Youth Services defines child abuse as "any act of maltreatment of a child by a parent or guardian that results in injury or harm." The Child, Youth and Family Enhancement Act further defines the four main types of abuse as neglect, emotional injury, physical abuse, and sexual abuse.

The Child, Youth and Family Enhancement Act identifies a child is neglected if the guardian:

is unable or unwilling to provide the child with the necessities of life,

is unable or unwilling to obtain for the child, or to permit the child to receive, essential medical, surgical or other remedial treatment that is necessary for the health or well-being of the child, or

is unable or unwilling to provide the child with adequate care or supervision.

The Child, Youth and Family Enhancement Act identifies a child is emotionally injured:

if there is impairment of the child's mental or emotional functioning or development, and

if there are reasonable and probable grounds to believe that the emotional injury is the result of: rejection,

- emotional, social, cognitive, or physiological neglect,
- deprivation of affection or cognitive stimulation,
- exposure to domestic violence or severe domestic disharmony,
- inappropriate criticism, threats, humiliation, accusations, or expectations of or toward the child,

- the mental or emotional condition of the guardian of the child or of anyone living in the same residence as the child.
- chronic alcohol or drug abuse by the guardian or by anyone living in the same residence as the child

The Child, Youth and Family Enhancement Act identifies a child is physically injured if there is substantial and observable injury to any part of the child's body as a result of the non-accidental application of force or an agent to the child's body that is evidenced by a laceration, a contusion, an abrasion, a scar, a fracture or other bony injury, a dislocation, a sprain, hemorrhaging, the rupture of viscose, a burn, a scald, frostbite, the loss or alteration of consciousness or physiological functioning or the loss of hair or teeth.

The Child, Youth and Family Enhancement Act identifies a child is sexually abused if the child is inappropriately exposed or subjected to sexual contact, activity or behaviour including prostitution related experiences.

Reporting a Child in Need

Obligation to Report: In accordance with the Child, Youth and Family Enhancement Act, any person who has reasonable and probable grounds to believe that a child is in need of intervention shall report the matter.

Confidentiality

The information on which the belief is founded is confidential and its disclosure is prohibited. As per the Child, Youth and Family Enhancement Act no action lies against a person reporting a child in need unless the reporting is done maliciously or without reasonable and probable grounds for the belief.

Failure to Report

Any person who fails to report their belief that a child is in need pursuant to the Child, Youth and Family Enhancement Act is guilty of an offence and liable to a fine of not more than \$2000 and in default of payment to imprisonment for a term of not more than 6 months.

Abuse Reporting Procedures

Any Educator/student/volunteer who suspects that a child has been abused or is at risk of abuse should inform the Director of the intention to immediately call the Child Abuse Hotline (1-800-387-5437). The person who suspects the abuse must call him/herself- do not ask anyone else to help you decide if a report should be made or to make the report for you. Do not discuss your suspicions with anyone else until you have spoken with someone from the Child Abuse Hotline.

If necessary, access immediate medical attention if a child has sustained injuries. Where injuries have been suspected to have been caused by child abuse, do not inform the parent of the intention to access medical care for the child, until you have spoken with a Worker from the Child Abuse Hotline.

If there are any concerns or doubts regarding making a report of suspected abuse, the Educator/student/volunteer will be encouraged by the Director to consult with a worker from a Child Abuse Hotline. If the allegation is against another child in the Centre, the Director will

consult with a Worker from the Child Abuse Hotline as to how to best protect, supervise and support both the alleged victim and abuser, and other children.

It is the responsibility of the person who suspects child abuse to follow through on the report to the Child Abuse Hotline, and the Director will provide support and direction. When making the report, give your name, the Centre's name, your position and phone number to the Worker from the Child Abuse Hotline.

No Educator/student/volunteer or member(s) of the Board of Directors will advise someone not to report suspicions of child abuse, or to try to stop the person from reporting or consulting with the Child Abuse Hotline. There will be no sanctions or reprimands for anyone who consults/reports suspicions of child abuse. However, disciplinary action will result if there is an attempt to stop someone from following through on the legal duty to report suspected child abuse.

If an Educator/student/volunteer has any further suspicions of abuse or new information with respect to a child, s/he must immediately make another report to the appropriate Child Abuse Hotline, regardless of any previous reports.

Information considered confidential cannot be kept in confidence if it is related to a suspicion of child abuse- all Educators/students/volunteers must follow through on the legal duty to report.

Discussing the Situation with a Parent/Caregiver

An Educator/student/volunteer who suspects abuse will not tell a parent/caregiver or child about the suspicion, intention to report or that a report has been made until after consultation with a Worker from the Child Abuse Hotline and confirmation that it would be appropriate to tell. Discussing any suspicions of child abuse with a parent/caregiver/child before consulting with a Worker from the Child Abuse Hotline could jeopardize the child and/or contaminate the investigation.

In situations where the cause of the child's injuries, the nature of the child's disclosure, or the behaviour observed are not clear, consult with a Worker from the Child Abuse Hotline before speaking to a child/parent, to discuss the appropriateness of clarifying a situation and to obtain direction. If it is appropriate to clarify any information this should be done in a non-threatening casual way.

For example, asking a child "how did you get that bruise?", or asking a parent "Billy said that you and he are going on a trip. Where to?"

- Use an interested and concerned tone of voice
- Avoid accusatory questions or statements
- Ask what happened, and how it happened, rather than why
- Ask open-ended questions.

If someone other than the parent/caregiver is the suspected abuser, consult with the Child Abuse Hotline as to who should notify the child's parent/caregiver. If it is decided that it is appropriate for the Educator to inform a parent(s)/caregiver of the report, emphasize to the parent/caregiver both the concern for the child and the legal obligation to report suspicions of child abuse.

If an Educator/Student/Volunteer is Suspected of Child Abuse

If an Educator/student/volunteer/parent suspects another caregiver in the Centre of abusing a child (or children) in care, s/he should inform the Director of their intention to call a Child Abuse Hotline. If the allegations are made by a parent, inform the parent of his/her duty to report to a Worker from the Child Abuse Hotline, and the Director's obligation to also speak with a child protection worker.

The Educator with whom, the parent spoke to will immediately inform the Director of the parent's allegation. If the Educator suspects abuse, the Director, then the Chair of the Board should be informed. The Educators/student/volunteer making the allegation will follow the reporting procedure outlined above and will complete the necessary documentation.

The person suspected of abuse will not be told by anyone about the suspicion, the intention to report or that a report has been made until after the Director has consulted with a Worker from the Child Abuse Hotline for directions.

The Director will consult with a child protection worker as to what if anything should be done to protect a child (or children) at the Centre from further contact from the alleged abuser.

The Director will notify the proper authority, within 24 hours of the occurrence, and submit the necessary reports to the City within 5 working days.

The Director will immediately notify the Chair of the Board of Directors, who in consultation with the Director, Child Abuse Hotline and legal counsel will determine what action, if any, will be taken with respect to the suspected person's job responsibilities.

The Director will immediately contact the Centre's insurance company when abuse by an Educator is suspected.

The Director will meet with the suspected person to discuss any procedures for change in duties, responsibilities, etc. The Director will follow-up with a written confirmation of any decisions and the reasons for such, a copy of which is given to the suspected person, and a copy retained on file

Welcome to Parenthood

Congratulations on the new journey that you are about to embark on! This is a very special time for you and your loved ones. It is also a time that will bring many changes in your life. This package is attended to provide you with valuable information relevant to becoming a parent. This package includes your employment rights, details about maternity and parental leave, as well as additional resources you may find beneficial.

We hope this package can assist you in making the journey a little easier. We are here to support and help you along the way. We encourage you to ask any questions you may have along the way. Congratulations and best wishes!

Sincerely,

Primrose

Parental and Maternity Leave

What is Maternity Leave

Under Alberta's Employment Standards Code, unpaid job protected maternity leave, or time off from work, is available to eligible employees for a period before and after the birth of a child. Maternity leave is different from maternity benefits.

Maternity benefits are a form of employment insurance and are given only to the person who will be taking maternity leave, otherwise known as the one who is pregnant or has given birth. This person is also eligible for parental benefits.

How do I qualify for Maternity Leave

To qualify for maternity leave under the Employment Standards Code, Employees are eligible for maternity or parental leave if they've been employed at least 90 days with the same employer.

Employees with less than 90 days of employment may still be granted leave. However, their employers aren't required under employment standards legislation to grant them leave.

If both parents work for the same employer, the employer isn't required to grant parental leave to both employees at the same time.

How much time can I take for maternity leave?

Birth mothers can take up to 16 consecutive weeks of unpaid maternity leave. The number of weeks of leave exceeds the Employment Insurance benefit length by one week in recognition of the waiting period. Employees should be aware of this before taking their leave. Leave can start any time within the 13 weeks leading up to the estimated due date and no later than the date of birth. If pregnancy interferes with the employee's job performance during the 12 weeks before their due date, employers can require that the employee start maternity leave earlier by notifying the employee in writing. Birth mothers must take at least 6 weeks after birth for health reasons, unless:

The employer agrees to an early return to duties, and the employee provides a medical certificate stating the return will not endanger her health.

Parental leave

Birth and adoptive parents can take up to 62 weeks of unpaid parental leave. The number of weeks of leave exceeds the Employment Insurance benefit length by one week in recognition of the waiting period. Employees should be aware of this before taking their leave.

Parental leave can be taken by:

- the birth mother, immediately following maternity leave,
- the other parent,
- adoptive parents, or
- both parents, shared between them,

Leave can start any time after the birth or adoption of a child but must be completed within 78 weeks of the date the baby is born or placed with the parents.

Parental benefits

Parental benefits are available to the parents of a newborn or newly adopted child.

You must choose between 2 options:

standard parental benefits: within 52 weeks (12 months) can be paid for a maximum of 35 weeks and must be claimed within a 52-week period (12 months) after the week the child was born or placed for the purpose of adoption. The benefits are available to biological, adoptive, or legally recognized parents at a weekly benefit rate of 55% of the claimant's average weekly insurable earnings up to a maximum amount. The 2 parents can share these 35 weeks of standard parental benefits.

extended parental benefits: within 78 weeks (18 months) can be paid for a maximum of 61 weeks and must be claimed within a 78-week period (18 months) after the week the child was born or placed for the purpose of adoption. The benefits are available to biological, adoptive, or legally recognized parents at a weekly benefit rate of 33% of the claimant's average weekly insurable earnings up to a maximum amount. The 2 parents can share these 61 weeks of extended parental benefits.

Your choice determines the number of weeks and the weekly amount you'll receive.

If sharing, each parent must choose the same option and submit their own application. Parents can receive their weeks of benefits at the same time or one after another.

Although you don't have to take weeks of parental benefits consecutively, you must take them within specific periods starting the week of your child's date of birth or the week your child is placed with you for the purpose of adoption.

Before you apply, consider carefully whether standard or extended parental benefits are better for you. Once a parental benefits payment has been made for the birth or adoption, the option (standard or extended) can't be changed.

The number of weeks of EI maternity or parental benefits you are entitled to receive does not change, even if you have a multiple birth (twins, triplets, etc.) or if you adopt more than 1 child at the same time.

Maternity and parental benefits overview

Figure 2: Table to Explain Maternity and Parental Benefits

Benefit name	Maximum weeks	Benefit rate	Weekly max.
Maternity* (for the person giving birth)	up to 15 weeks	55%	Up to \$650

Standard parental	up to 40 weeks can be shared between parents, but one parent cannot receive more than 35 weeks of standard benefits	55%	up to \$650
Extended parental	up to 69 weeks can be shared between parents, but one parent cannot receive more than 61 weeks of extended benefits	33%	up to \$390

Maternity Leave Notices

Medical certificate

Employers can require employees to submit a medical certificate, confirming pregnancy and estimated delivery date. A medical certificate may be issued by a nurse practitioner or physician.

Starting leave

Employees must give employers written notice at least 6 weeks before starting maternity or parental leave. Employees aren't required to specify a return date at that time but may wish to do so.

If they fail to give notice for medical reasons or a situation related to the birth or adoption, parents are still eligible for leave:

Maternity leave: provide written notice and a medical certificate to the employer within 2 weeks of mother's last day at work, or as soon as possible.

Parental leave: provide written notice to the employer as soon as possible.

A birth mother on maternity leave isn't required to give her employer notice before taking parental leave, unless she originally arranged to only take 16 weeks of maternity leave.

Parents who intend to share parental leave must advise their respective employers of their intention to do so. Two employees working for the same employer may combine parental leave for a maximum of 62 weeks.

Ending leave

Employees must give their employer's written notice at least 4 weeks before they:

return to work,

will not be returning to work after their leave ends.

Employers aren't required to reinstate employees who fail to give notice or report to work the day after their leave ends, unless the failure is due to unforeseen or unpreventable circumstances. If an unexpected circumstance occurs, employers can approve an extension of leave, but aren't obligated to do so.

Vacation days and pay

Annual vacation earned prior to leave must be taken within 12 months after it was earned. If this time falls while the employee is on leave, the employee must:

take the remaining vacation time at the end of their leave, or

get approval from the employer to take the vacation time at a later date.

Employment Insurance (EI) Benefits

Employees may be eligible for maternity or parental benefits under the federal EI program.

It is important to be aware that the eligibility requirements for Employment Insurance benefits and eligibility to take a job-protected leave in Alberta may be different. For more information on Employment Insurance, contact [Government of Canada](#).

What do I need to include with my EI application?

To apply for EI, you will need to provide the following information:

Your Social insurance number (SIN)

A ROE1 from each job you held during the previous 52 weeks (Primrose files your ROE on Electronically)

your gross salary within the previous 52 weeks, income for your last week of work (from Sunday to the last day worked), gross amounts received or to be received (vacation pay, severance pay, pension, pay in lieu of notice or layoff) and other monies.

Name and SIN of the other parent when applying for parental benefits. 2

Bank account information, or preferably a voided cheque, so payment of benefits can be made directly to your current bank account.

Pregnancy loss

A pregnancy loss is any situation where a pregnancy ends other than in a live birth.

If pregnancy loss occurs within 16 weeks of the estimated due date, the employee is still entitled to maternity leave but is not entitled to parental leave. The leave will end 16 weeks after it begins.

Bereaved employees impacted by pregnancy loss may also be entitled to [bereavement leave](#)

If pregnancy loss occurs within 16 weeks of the estimated due date, the person who was pregnant may also be eligible for [maternity leave](#).

Resources

[Family Futures Resource Network](#)

<https://familyfutures.ca>

Pregnancy Connect care you anticipating the birth of a baby? Join this social and informative prenatal group for expectant caregivers to discuss and learn about prenatal attachment and

bonding, mental and physical health, birth choices, postpartum preparation and much more. This is a great place to connect with other caregivers and talk about things that are important to you during this time.

Breast feeding Clinic

[Home - Edmonton Breastfeeding Resource.](#)

Navigating the options for infant feeding help in Edmonton can feel confusing. The purpose of this site is to present all the options available and help you make decisions for what route(s) are best for you and your family.

Post Partum Depression

[Postpartum Depression | Alberta Health Services](#)

After your baby is born, the first few days are often filled with a wide range of emotions.

During the first 2-3 weeks after your baby is born, you may feel sad, cry for no reason, feel very tired or have trouble concentrating. This is common. If you feel like this, it's a good idea to talk to someone about your feelings. If these feelings last for more than 2-3 weeks and you don't feel better with rest, sleep or support from others, you may have postpartum depression/anxiety.

If you are struggling, you are not alone. There are resources available to support you and your family.

Prenatal Classes

[Edmonton Prenatal Classes – Public Health | Birth & Babies \(birthandbabies.com\)](#)

Information on pregnancy, labour, birth and beyond

Health Care Contact

Health Link Alberta provides health advice and information through a toll-free phone number to all Albertans. Access is 24-hour, 7 day a week and support is provided by experienced registered nurses and other health care professionals. Call 811

