



ROCKING HORSE MONTESSORI

PARENT HANDBOOK

1. INTRODUCTION

Welcome to the Rocking Horse Montessori School and Nursery. Our large, bright classrooms have been prepared where children can explore, discover, and learn at their individual pace to reach their full potential. Our programs meet the needs of infants, toddlers, preschoolers and kindergarten-aged children (from three months to six years of age. *How Does Learning Happen?* Ontario's pedagogy for the Yearly Years (2014) is the document used by Rocking Horse Montessori School. This document focuses on four foundations that are considered essential to the learning and healthy development of the child. The specific curriculum and activities will be Montessori in nature however will be organized based on the foundation of belonging, wellbeing, engagement and expression. Rocking Horse Montessori School and Nursery is licensed by the Ministry of Education and our facility and programs comply with The Child Care and Early Years Act of Ontario. This parent handbook has been prepared to enable you to have a better understanding of how our center functions. It will introduce you to our philosophy, goals, policies, procedure and regulations. It will answer many questions you may have as a Parent. It will outline what is expected from parents, children, and staff. We ask that you please read this handbook carefully which is available on our website. Please sign the General Consent Information Form acknowledging that you have read this handbook.

2. PROGRAM STATEMENT POLICY

Rocking Horse Montessori School interpretation of Montessori pedagogy and programming is consistent with the Minister of Education's Policy Statement as set out in "*How Does Learning Happen (HDLH)?*" It is important to note that Montessori pedagogy often describes children's activities as 'work' where HDLH describes children's activity as 'play' but the activities, as experienced by a child, are one in the same.

In keeping with HDLH, Rocking Horse Montessori School holds the view that *all children are competent, capable, curious and rich in potential*. Rocking Horse Montessori Policy Statement, together with the Ministry's Regulations that guide program development, pedagogy and practice, is intended to strengthen the quality of our program. To ensure high quality experiences that lead to positive outcomes in



relation to children's learning and development, HDLH describes the *Four Foundations of Belonging, Well-being, Engagement and Expression*.

Rocking Horse Montessori sets out goals to guide programming and teaching within the HDLH framework and the approaches implemented to meet those goals. Rocking Horse Montessori will document and review the impact of the strategies (below) on the children and their families through observation, conversation, meetings, surveys and other means deemed appropriate. The items below will support staff to further develop the program, encourage ongoing reflection and discussion in all areas of the program.

A. Promote the Health, Safety, Nutrition and Well-Being of the child

The school setting promoting the child's wellbeing includes a focus on basic practices such as supervising children adequately, ensuring the safety of all equipment and the environment, good hygiene and safe sleep procedures, managing illness and injuries effectively and meeting children's nutritional needs. Daily meals are cooked at the school based on the Canadian Food Guide and making sure all food groups covered within our menu and adequate access to drinking water during the day.

A strong sense of wellbeing is fundamentally connected to the child's sense of belonging, being and becoming. Children can participate fully in the daily routines, plays and experiences when they feel well, happy, and secure.

B. Support positive and responsive interactions among the child, parents, child care providers and staff

All office staff and teaching staff will encourage children to interact and communicate in a positive way. The school will hire qualified, and well trained educators who support the families in their role as the primary child caregiver and will establish open communication in many forms such as e-mail, meetings, phone calls, and notes. Staff will listen to any concerns, suggestions and ideas that parents have regarding the needs of each child as an individual.

C. Encourage the child to interact and communicate in a positive way and support their ability to self-regulate

By having all of the staff follow the same guidance approach, they will create an environment that will reduce stressors by having fewer transitions, be responsive and attuned to the cues and arousal states of the children. These strategies will be changed as needed based on the children's needs and wants. Each child is competent, curious and rich in potential. With this knowledge, staff will support the self-regulation in the



child as the child gains control of bodily functions, manages powerful emotions and maintains focus and attention.

D. Foster the child's exploration, play and inquiry

The teachers will foster the child's exploration, play and inquiry by trusting the child with various activities, materials, and giving the child choices and encouraging active play. The child will be given the chance to as opposed to the teacher doing it for them. In order to widen the child's knowledge and life experiences, the staff will introduce new ideas, interests, facts, concepts and skills.

E. Provide child initiated and adult supported experiences

The staff will encourage conversation among the children whether it's verbal or non-verbal and allow children to initiate their own conversation and play within the classroom and outdoors. The Educator will observe the child and use that information to plan and create positive learning environment that is based on the interests of the child, and supported by all the adults in the child care environment. Educators will be responsible for introducing supported experiences.

F. Plan for and create positive learning environments and experiences in which each child's learning and development will be supported

By allowing for uninterrupted play and letting the children explore their learning environment in many ways such as investigating, using their senses, communication and problem solving.

G. Incorporate indoor and outdoor play, as well as active play, rest and quiet time, into the day, and give consideration to the individual needs of the child receiving child care

Each child will have two hours of outdoor play (weather permitting) daily. The staff will engage in the outdoor play with the child and provide choices for outdoor play activities. There will be nap time as well as quiet time always being mindful of the child's needs and the parental direction.

H. Foster the engagement of and ongoing communication with parents about the program and their child/ren

By involving parents in observations, daily activities (bringing in materials), sharing documentation (pictures), interviews, report cards and generally asking for their feedback.



I. Involve local **community partners** and allow those partners to support the child, their families and staff

Resources outside of the centre such as speech therapists, occupational therapists and counselors will be made available to the parents to support the child and the family if required. Community partners will be engaged in our programs by sharing knowledge and learning from others in the community.

J. Support staff or others who interact with the child in relation to **continuous professional learning**

Staff will attend workshops throughout the year and workshops will be brought into the centre. Staff meetings will be held regularly and new information will be shared as needed. The workplace will be a collaborative atmosphere of honesty and respect encouraging growth and offering support and mentorship.

K. Document and review the **impact of the strategies** set out in (A) to (J) on the child and the families;

Our program focuses on our core values. We believe that children are important. We feel that children need the opportunity to discover how to interact with others in a safe and nurturing atmosphere as they develop their self-worth, confidence, and communication skills. Expressing their thoughts, feelings and acceptance of others is encouraged through our programming. Those with different abilities and capabilities are welcomed, accepted, and valued equally. Our teaching staff uses their observational skills to document each child's progression with regard to each goal. We can measure the achievement of the goals through these observations and documentation and by communicating and listening effectively and purposefully with families and fellow educators



3. HOURS OF OPERATION AND HOLIDAY

School Hours	7:00 a.m. — 6:00 p.m.
Before and After School	Bus drop offs and pick- ups before and after school (7:00 - 9:00) (3:00 – 5:00)
Extended Hours:	5:00 pm— 6:00 p.m. (monthly flat fee)
Extra-Curricular Programs:	Programs including languages such as French, and arts and crafts are available during the school year. Information on these programs, as well as other programs from time to time, is available at the school office.
NAP Times	Morning and Afternoon nap, as needed.
Infants:	
Toddlers:	12:30 p.m. - 2:30 p.m. (as needed)
Casa:	12:30 p.m. - 2:30 p.m. (as needed)

Please ensure that your child is in the classroom by 9:00 a.m. for full day programs. Also, please ensure that your child is picked up by 5:00pm. The School academic year is from September to June, and the summer camp encompasses the summer months.

The school will be closed only on the following days and in the event of inclement weather only if the YRDSB is closed.

- Labour Day
- Thanksgiving Day
- Christmas/ New Year Holiday (Christmas Day, Boxing Day, New Year)
- Family Day
- Good Friday
- Easter Monday
- Victoria Day
- Canada Day
- August Civic Day
- June 30 & August 31 (CASA classes only)



ROCKING HORSE MONTESSORI

Tuition Fee Schedule 2023-2024

Infants 3-18 Months	Full Fee	Incentive \$4 daily	Reduction after incentive	Reduction after 52.75%
5 full days	\$1,595.00	\$88.00	\$1,507.00	\$712.00
3 full days	\$1,350.00	\$48.00	\$1,302.00	\$615.00
2 full days	\$1,110.00	\$32.00	\$1,078.00	\$509.00

Toddlers 18-30Months	Full Fee	Incentive \$2 daily	Reduction after incentive	Reduction after 52.75%
5 full days	\$1,490.00	\$44.00	\$1,446.00	683.25
3 full days	\$1,125.00	\$24.00	\$1,101.00	520.20
2 full days	\$900.00	\$16.00	\$884.00	417.70

Casa 2.5-6 Years	Full fee	Reduction after 52.75%
5 full days	\$1,375.00	\$649.70
3 full days	\$1,065.00	\$503.20
2 full days	\$860.00	\$406.35

Extended Hours 5:00 – 6:00 PM

Monthly \$100.00

After School program 6+ Years

Monthly \$585.00



4. Canada-wide Early Learning and Child Care (CWELCC)

We are happy to inform you that we have signed the CWELCC funding agreement.

The Canada-wide Early Learning and Child Care (CWELCC) system will:

- give families access to more affordable and high-quality child care options
- help lower child care fees for parents of children under the age of six
- increase child care spaces
- support the child care workforce
- support inclusive child care
- decrease fees for parents by 50% at our daycare as of December 2022

Licensed child care providers can participate in the CWELCC system to help reduce fees.

Licensed child care providers must inform parents about their decision to:

- participate in the CWELCC system and the expected or actual date of application
- not participate in the CWELCC system

If your licensed child care provider does not participate, your fees will not be reduced.

As a parent or guardian of a child under the age of six, you do not need to apply to get a fee reduction.

What This Means for Parents and Families

Parents or guardians of children under the age of six do not have to apply to receive a child care fee reduction.

You may be eligible for reduced fees if:

- you pay more than \$12 per day for child care and your child:
- is under the age of six
- turns six years old and is enrolled in a licensed preschool, kindergarten or family age group or a licensed home child care premises, until June 30
- your licensed child care provider chooses to enroll in the CWELCC System



The amount that you will save depends on the current fees your child care provider charges and may vary by region.

It may require some time for your child care program to enroll in the new system. If your child care provider applies in 2022, the fee reduction will be retroactive to April 1, 2022. This means that you will be eligible to receive a credit or refund for the higher fees you have paid once your program is fully enrolled.

5. WAITLIST POLICY

ONTARIO REGULATION 137/15; Subsection 75

ONTARIO REGULATION 137/15; Subsection 75

Rocking Horse Montessori School abides by the Licensing Regulation that governs the number of children in a licensed child care centre.

Rocking Horse Montessori School will form a Wait List when full enrollment has been reached at the Centre. No fees or deposits will be required to place a child on the wait list.

The waitlist will be made available for families who inquire about their position on the list; this will be done in a manner that maintains privacy and confidentiality of the other families on it.

Wait List Procedure:

1. Each age group at the centre has its own Wait List;
2. A child is put on the waitlist when contact is made with the Supervisor/delegate of the Centre. This can be done over the phone, by email or in person;
3. Children are categorized on the list based on date of initial contact and the type of care required (Infants/Toddler/Casa/B/A School);
4. Families will provide the required information (below) for their child's file on the waiting list;
5. Families are responsible to contact the centre and update contact information, if changes are made;
6. There is no specified length of time families need to be on the list to be offered a space;
7. Spaces are created when a family or child leaves the centre. There is no specific time and spaces can be available at any time of the year/month;
8. Families will be contacted 2-4 weeks before a space becomes available;



9. The Supervisor/delegate will call all families that are eligible to start in the age group. All families who are waiting for a particular month are contacted when spaces are available;
10. Once a family is called from the waiting list they are given a specified time frame to return the call/email and express continued interest in the available space;
11. Families with the highest seniority date will have first official refusal of the available space;
12. Once a family is officially offered a space, if accepted, families are required to fill out all necessary documentation and post-dated cheques;
13. A Non-Refundable Registration Fee of \$300 and one month deposit is due upon acceptance of a space;
14. For those families that express continued interest in a space and are not successful, the Supervisor/delegate will inform them of remaining on the waiting list;
15. If families are called for a space and do not wish to take it at the time, the place/seniority on the waiting list remains the same;
16. Families will remain on the centers wait list or removed for the following reasons:
 - Families request in writing;
 - Child is over 12 years of age;
 - Family has moved away or phone number is out of order (the client is then unreachable)

The prospective parents on the wait list fill out an information sheet that will be kept in a binder in a manner that maintains the privacy and confidentiality of the children.

A separate wait list sheet will visibly show the position of the parents first name and last name initial with be filled only. Prospective parents can view this list upon request to ascertain their position on the wait list.

Information for Child's file on Wait List

1. Parents/Guardians first and last names;
2. Best contact telephone number(s) and or email addresses;
3. Expected start month;
4. Child's name;
5. Date of Birth (unborn children may be added to the list with expected month and year of birth);
6. Program (Infants/Toddler/Preschool ,B/A School Full/Part time)
7. Date of Birth (unborn children may be added to the list with expected month and year of birth);
8. Program (Toddler/Preschool, Full/Part time)



6. ADMISSION AND DISCHARGE

Admissions will be accepted as long as there are openings in our center. Discharge of a child will occur if he/she does not seem to be able to adjust to the program or if, for any reason, you wish to withdraw your child from the program. A written notice of 30 days is required in both cases. The placement of the child is based on the following criteria:

1. The welfare of the child;
2. Maintaining the Montessori principle of the three-year age mix;
3. Developing balanced classroom related to age, gender, maturity,
4. Toilet training, personality etc. Observations and placement are made by the Supervisor, and classroom teachers.

7. ENROLMENT REQUIREMENTS

To register and reserve a position for your child, the following forms and documents must be completed and in the possession of the School office before your application can be processed

1. Application for Enrolment form for new students or Application for Re-Enrolment form for returning students, including **General Consent Information Form**
2. Emergency Contact form
3. Copy of Child's Personal Immunization Record
4. Anaphylaxis Forms, (if applicable)
5. Health information
6. Copy of child's Birth Certificate
7. A non-refundable application fee of \$300.00 cash for new students;
8. Two deposit cheques equivalent to your monthly tuition for first and last month – dated the day your application is received .This deposit is not transferable or refundable, should you wish to withdraw your child , school needs one month notice (Beginning of the month).
- 9.Ten (10) post-dated cheques .

** The NSF fee is \$50.00 for a cheque that has been returned from the bank. **



THE FIRST DAYS

Infant, Toddler, and Casa children are just learning to separate from their parents. If parents linger, these children may get mixed messages. They may translate their parents' hesitation to leave as fear. For some young children, the early days of the school experience may create anxiety as they leave their parent for the first time or adjust to their new school. To help ease the transition at drop off times and minimize separation anxiety, we recommend the following:

We ask you to visit the school with your child prior to his/her first day. This gives your young child an opportunity to see his/her new teacher, to see the other children at play, and to transition into the school program.

- On the first days, make your arrival relaxed and unhurried to avoid provoking anxiety and stress in your child. It has been our experience that once children begin school, brief drop-off times encourage a positive adjustment to school. Sending your child to class with a smile, a kiss, and encouragement to have fun reassures your child that you approve. When leaving your child at school, always say goodbye and assure your child that you will return.
- It is important that you give your child the message that it's okay to be at school. Your calm demeanor and smiling facial expression will provide this positive message which the child will translate as trust.
- Please make your departure as quick as possible at drop-off time. The longer you stay with your child, the harder the transition to school routines becomes. After your departure, your child will have a valuable and important opportunity to bond with the teachers and classmates.
- We understand how difficult and emotional it may be for both you and your child during the first few days of school. Please be assured that our nurturing staff will make every effort to help your child adjust to his/her new environment.
- At a later date, you will be allotted a half-hour to monitor your child's class. Above all, keep in mind that children do cry, and adjusting to a new environment is part of their learning process.



8. CLOTHING AND POSSESSIONS

Help your child dress for the activities of the Montessori classroom, both indoors and outdoors. Please remember that the children will be painting, sitting on the floor, participating in physical education activities, as well as working and playing outdoors during a typical day. All Children should have spare clothes at school. For Toddler and CASA students, please dress your child in clothing which your child can manage by himself / herself. Practice with your child at home to enhance self-dressing skills. Your child needs your patience, encouragement, and consistency. The following is a recommended list of items for each child to have at school. These items should be kept in a large bag in your child's cubby. Please check these items regularly to ensure they are available if they are required for your child. Otherwise, you may be called to pick up your child if needed items are not available. The children play outdoors throughout the year and should be dressed appropriately for the weather.

Daily Items:

- Water Bottle and Milk Bottle (infants)
- Formula (if applicable)
- Soft-soled (not leather soled), non-marking, indoor shoes should be left at school
- Extra pair of underwear & socks
- Extra pair of shorts/pants
- Extra T-shirt, blouse, or dress

- Diapers (Infants and Toddlers) or Pull-ups (some Casa) & Wipes (if needed)

We will pack your child's clothing if it is soiled and send it home with you.

If your child is still in diapers, please ensure that you provide an adequate supply of diapers on a weekly or daily basis.

The children's cubbies are disinfected every weekend, so please ensure that everything, including snow boots and clothing of any kind, are removed from the cubbies each Friday. Your child will be playing outdoors for at least two hours a day. It will be necessary for him/her to be dressed appropriately. If your child has a documented health problem, which will be aggravated by cold air, please give us a doctor's report and we will keep your child indoors.



Seasonal Items

Fall

- Cap
- Sunscreen
- Jacket

Winter

- Snow boots
- Winter pants (snow suit)
- Water-proof gloves
- Warm Jacket
- Warm hat

Spring

- Cap
- Sunscreen
- Jacket

Summer

- Cap
- Sunscreen

Please label all clothing, footwear and other personal items clearly with your child's first name and last name

9. DROP-OFF AND PICK-UP POLICY

Parents must pick up and drop off at the main door in the presence of one designated staff member. That designated staff member will be wearing appropriate PPE and assess the health of the child. Once the child is assessed he/she will be taken into the classroom. The parents will no longer be allowed to enter the school premises. The drop off times is 7:00am to 9:00am. Each class has their own time slot to drop off their child. If a parent arrives after 9:00 am the parent is required to phone the school so that the staff member is ready to assess the child and then escort the child into the classroom.

Pick up times are 3:00pm to 5:00pm. If pick up will be done prior to 3:00pm the school must be notified that morning.



10. ABSENCES OR MID-DAY APPOINTMENT POLICY

If your child is going to be late, has a mid-day appointment or will be absent due to vacation or for any other reason, please notify the school no later than 9:30 a.m. In case of absence due to illness, please inform the office regarding the nature of the illness and obtain a doctor's notice as necessary. This allows the school to track any incidents of illness.

11. Field Trips and Parent Participation, Student and Volunteers

Throughout the year, our staff and Casa students go on scheduled school field trips which are designed to complement the school curriculum goals and enhance the students' learning experience, (Infants and Toddlers do not participate in field trip outings). Parents will be notified of each field trip in advance of its scheduled trip date. Individual field trip permission forms must be signed and returned to the School office with applicable fees (for entrance fee /ticket cost and bus cost) before children can participate. We welcome parent participation on these field trips, whenever possible. If you wish to volunteer for a trip, please let your classroom teacher know as soon as the trip notification is received. There are only a limited number of parent volunteers that can be accommodated for each trip.

Parents / Volunteers / Placement Students will not be left alone with the children at any time and must satisfy all of the following;

- Be 18 years of age or older
- Any person who provides child care or other services to a child in the center must satisfy the following:
 - Offence Declaration obtained directly from the person
 - Attestation must be obtained from the person's employer or the person who retained the person's services indicating the following:
 - the employer, person or entity has retained and reviewed a vulnerable sector check from that person;
 - the vulnerable sector check was performed within the last five years; and
 - the vulnerable sector check did not list any convictions for any offences under the Criminal Code (Canada) listed in subparagraph 1 ii of subsection 9 (1) of the Child Care and Early Years Act, 2014



- Review Anaphylaxis and Emergency Procedures, (as well as annually thereafter)
- Review Policies & Procedures
- Review the School Discipline Plan, as stated in this Handbook
- Are responsible for maintaining the confidentiality of all privileged information that they are exposed to while serving as a Volunteer / Placement Student. Failure to maintain confidentiality may result in termination of the Volunteer / Placement Student's relationship with the school and other corrective action.
- Will be supervised and mentored by a qualified school / teaching staff member at all times, and should follow their Leader.

Parents not allowing their child to participate on a field trip must arrange alternate care at their own expense while the associated classroom students and staff are away on the trip.

12. SERIOUS OCCURENCES

Definitions of Serious Occurrences:

1. **Death of a Child** – who receives child care at a child care centre, whether it occurs on or off premises.
2. **Abuse, Neglect or Alleged Abuse or Neglect of a Child** – while receiving child care at a child care centre.
3. **Life-threatening Injury or Illness of a Child** – who receives child care at a child care centre.
 - a. Injury
 - b. Illness
4. **Missing or Unsupervised Child(ren)** – an incident where a child who is receiving child care at a child care centre
 - a. Child was found
 - b. Child is still missing
5. **Unplanned Disruption of Normal Operations** – of a child care centre that poses a risk to the health, safety or well-being of children receiving child care at the home child care premises or child care centre.
 - a. Fire
 - b. Flood
 - c. Gas Leak
 - d. Detection of Carbon Monoxide
 - e. Outbreak
 - f. Lockdown
 - g. Other Emergency Relocation or Temporary Closure



SERIOUS OCCURRENCE PROCEDURES

1. The child shall be provided with immediate medical attention when warranted.
2. The appropriate steps shall be taken to address any continuing risks to the child's health and safety.
3. The staff, any witness or persons having knowledge of the occurrence shall report the occurrence immediately to the Director or designate.
4. The Director or designate notified will conduct a preliminary inquiry immediately.
5. All persons having knowledge of the occurrence will remain at the program location until they are excused by the Director or designate conducting the preliminary inquiry.
6. The preliminary report shall be written and signed by the Director or designate before staff involved goes off duty. See attached Initial Notification Form.
7. The Director or designate will report the occurrence to the Ministry of Education in CCLS within 24 hours of the licensee or supervisor becoming aware of the occurrence.

Where applicable and possibly after consultation with the Ministry, contact Police and Fire, Children's Aid Society or a Coroner.

To support increased transparency and access to information, a "Serious Occurrence Notification Form" must be posted at the centre location in a visible and accessible area for 10 business days; this includes any allegation of abuse or neglect. The summary does not include any identifying information and shall be updated as new information is obtained.

ON-SITE PROCEDURES

For any accident that occurs at the School, the staff member who witnessed the accident must fill out an accident form.

The staff member who witnessed the accident and informed staff are responsible for making the parent(s) aware of the occurrence, insuring the accident form is signed by the parent(s) and a copy is given to parent(s).

In the event of a major accident where it is judged by the Executive Director or designate that a trip to the hospital is required, the following procedure will apply:

1. The child should be taken to the nearest hospital by ambulance. The child's emergency file containing the emergency consent form and medical record must accompany the child to the hospital, along with a staff member.



2. The parent or Guardian should be contacted immediately to meet the staff and child at the hospital.

OFF-SITE PROCEDURES

For any accident, which occurs on a field trip, the staff member who witnesses the accident must fill out the accident form.

The staff member who witnessed the accident is responsible for making the parent(s) aware of the occurrence, insuring that the accident form is signed by the parent(s) and a copy is given to the parent(s).

In the event of a major accident where it is judged by the Executive Director or designate that a trip to the hospital is required, the following procedure will apply:

1. Take the child to the nearest hospital by ambulance.
2. Supervisor or designate will contact parent(s) to meet the child and staff at the hospital.
3. Supervisor or designate will meet staff at hospital with child's file.

Staff will not leave the School without "Emergency File Cards" for each child.

Missing Child Procedure:

A protocol for staff is provided to respond to a situation where a child has gone missing while receiving care at a child care centre.

These guidelines should take into consideration the age of the child who is missing, and can include steps to:

- Alert all staff
- Immediately search the child care premises, including outdoor areas

(e.g. playground)

- Have a staff member who is not searching the premises immediately alert the child's parents

(in case parents have additional information about child's whereabouts)

- Advise the police by telephone



ALLEGATIONS OF ABUSE

Timing of posting

Serious Occurrence Notification Forms pertaining to allegations of abuse are posted within 24 hours of the occurrence.

- The Children's Aid Society (CAS) has concluded its investigation and the allegation is either verified or not verified; or
- CAS has determined that an investigation will not be conducted; and
- The Ministry has investigated any associated licensing non – compliances.

Information to be included

- Once investigation are completed, the form should provide clear, concise information for the parent
- The Description section will include information about whether CAS conducted an investigation into compliance with related licensing requirements.
- The form will identify whether:
 - CAS verified the allegation;
 - CAS has not verified the allegation
- The operator has taken action on any other directions given by CAS, if applicable

13. ANNUAL SUMMARY AND ANALYSIS REPORT

Licensees are required to conduct an annual analysis of all serious occurrences that occurred in the previous year. The annual analysis is to be used as a method of identifying issues, trends and actions taken. The analysis and record of actions taken in response to the analysis must be kept on file at the child care center. In addition to ongoing reviews and follow-up to serious occurrences, licensing ministry staff will review the serious occurrence annual analysis during the license renewal inspections.



Category instructions:

Program Name	Provide the name of the child care centre
Date:	Provide the date that the Serious Occurrence Notification is posted on site
Date of Occurrence:	Provide the date that the serious occurrence happened
Type:	<p>Provide the type of serious occurrence according to the definitions set out in the CCEYA Serious Occurrence reporting Procedures. The operator uses one of the following terms:</p> <ul style="list-style-type: none"> • Death of a child • Abuse, Neglect or Alleged Abuse or Neglect of a Child • Life-threatening Injury or Illness of a Child • Missing child/Unsupervised Child(ren) • Unplanned Disruption of Normal Operations
Description:	<ul style="list-style-type: none"> • Provide description on the occurrences • Sample wordings (not intended as a comprehensive list – for illustration purposes only)
Actions Taken by Operator / Outcome: (add update if applicable)	<p>Provide a description of the action taken by the operator. This section will include the operator’s longer term plans and additional outcomes to minimize recurrence of the occurrence.</p> <p>Examples:</p> <ul style="list-style-type: none"> • The operator sought medical attention for the child’s injury • The child was transported t the hospital by ambulance, treated and released that day <p>If an update is made to add additional actions taken/ outcomes the operator will indicate the date of the update</p>
Signature:	The operator or designate (e.g. the child care centre supervisor) sign the Serious Occurrence Notification Form



The following practices are strictly prohibited:

1. Corporal punishment of a child;
2. Physical restraint of the child, such as confining the child to a high chair, car seat, stroller or other device for the purposes of discipline or in lieu of supervision, unless the physical restraint is for the purpose of preventing a child from hurting himself, herself or someone else, and is used only as a last resort and only until the risk of injury is no longer imminent;
3. Locking the exits of the child care center or home child care premises for the purpose of confining the child, or confining the child in an area or room without adult supervisor, unless such confinement occurs during an emergency and is required as part of the licensee's emergency management policies and procedures;
4. Use of harsh or degrading measures or threats or use of derogatory language directed at or used in the presence of a child that would humiliate, shame or frighten the child or undermine his or her self-respect, dignity or self-worth;
5. Depriving the child of basic needs including food, drink, shelter, sleep, toilet use, clothing or bedding ;
6. Inflicting any bodily harm on children including making children eat or drink against their will.

When an infant is crying, give the baby appropriate personal attention (check diaper, baby's temperature, make sure he/she is not hungry or thirsty, hold the baby and offer a toy, blanket, or favorite item).

14. MEDICATION POLICY

Should your child require medication to be administered while at school, the following measures must be taken in accordance with requirements under The Child Care and Early Years Act in order to protect your child and Staff:

1. Only medication prescribed by a physician indicating the drug administration and duration can be administered.
2. Medication, as defined by The Child Care and Early Years Act, includes vitamins.
3. The parent must sign, provide a doctor's note and provide written instructions on the Medical Authorization Form available at the school office for this purpose. The form must accompany every medication. The form must be submitted to the Supervisor. If Supervisor not on site the person's name in charge is on the Medication Authorization Form.
4. All medication brought to school, (such as cough medicines, decongestants, and vitamins) are only administered if in the original container with an attached label having the child's name, the name of the drug, the date of purchase, and the dosage prescribed by a doctor. They must be given directly to the school office or staff in charge.



5. The Parent must complete a Medication Authorization Form each time your child requires medication at school, (prior to your child starting his / her day), giving permission to administer medication to the child.
6. ALL Antibiotics must be administered first at home by the parents, before being administered at school, (just in case there is any allergic reaction).
7. Any unused medication will be returned to the parent in the original container.
8. Expired drugs of any type will not be administered under any circumstances. Although the school staff will check medication and advise the parents to replace when necessary, it is the parent's responsibility to ensure that non expired medication is available at the school for their child's safety.
9. Medication will be kept in a locked box in the office cabinet out of reach of children, except medication which requires refrigeration which will be kept in a locked box in the school refrigerator.
10. Epi- Pens will be stored in a pouch that will be placed in the appropriate classroom emergency bag, and brought wherever the child who is in need will be located.
11. Only the Supervisor or the staff designate will be in charge of administering the medication. Medication found in a child's possession will be removed and stored in a locked box, noted in the daily log and discussed with the Parent.

Immunization information must be provided by parents before the first day of class.

Subsection 4.4 - Immunization of Children Ontario Regulation 137/15 35(1) Every licensee shall ensure that before a child who is not in attendance at a school or private school, within the meaning of the Education Act, is admitted to a child care centre it operates or to a premises where it oversees the child care, and from time to time thereafter, the child is immunized as recommended by the local medical officer of health. 3002E (2016/08) Table of Contents Page 50 of 143 (2) Subsection (1) does not apply where a parent of the child objects to the immunization on the ground that the immunization conflicts with the sincerely held convictions of the parent's religion or conscience or a legally qualified medical practitioner gives medical reasons to the licensee as to why the child should not be immunized. (3) Objections and medical reasons under subsection (2) shall be submitted in a form approved by the Minister. (4) An exemption under subsection (2) that was made before August 29, 2016 shall expire on September 1, 2017 unless a new objection or medical reasons are submitted in a form approved by the Minister before that date.

All allergies must be listed on the student's Enrolment and Emergency Consent forms. If your child develops any new allergies not listed on the form, please notify the office and the classroom teacher(s) immediately for the safety of your child.



Head Lice

The School has a "nit free" policy. Parents of children who have lice or nits (lice eggs) in their hair will be called and asked to take their child home immediately. Children may return to school after the lice treatment has been given to kill live lice and the hair has been combed free of nits. Following school policy, administration will check the child's hair before admitting the child in the School. The School may conduct periodic checks for head lice.

Communicable Diseases

The School follows the guidelines as set out by the York Region Board of Health.

Children who have contracted any of these communicable diseases must bring a note from their physician indicating that they are in good health and able to return to school. The Public Health Act requires that children do not attend school when suffering from any communicable disease. In accordance with recommendations from the Public Health Guidelines for Common Communicable Diseases Day Nurseries Resource the recommended period of exclusion for some common diseases is as follows:

***** See Appendix A *****

Parents are reminded that the above is a guideline which reflects infectious periods only. In some cases, even if your child is not required to be excluded from school, the Supervisor will contact parents if their child exhibits discomfort or any symptoms of illness.

Generally, children should be kept at home until they are 24 hours fever-free without using any fever-reducing medication, 24 consecutive hours free of diarrhea, until they do not have green fluid discharge from their nose which is a sign of infection, and, until they are well enough to cope with the daily routine including outdoor play, lunch and scheduled activities.

Please note that in the event of Communicable Disease outbreak, the school will report the outbreak as a Serious Occurrence. For more detailed information on communicable diseases, please refer to the York Region Public Health at 905-830-4444.



15. SMOKE AND CANNABIS FREE POLICY

The School is a smoke free and Cannabis free environment. The School's Smoke Free Policy is in accordance with the Smoke Free Ontario Act (2006) which prohibits smoking in a day nursery licensed under The Child Care and Early Years Act. As such, the entire premises are to remain smoke free at all times. NO SMOKING signs are posted to this effect and individuals contravening this policy cannot remain on the premises.

16. ALLERGIES - ANAPHYLAXIS

All allergies (severe or mild) must be recorded on the Application form. It is the responsibility of the parents to inform the office of any changes in this information in writing so that our records can be updated promptly for the safety of your children. Children with allergy or food restrictions will be provided with alternative lunches by the school when needed.

The office notes the children's allergies and/or restrictions by the food serving area and binders of each class.

Peanut allergies are of great concern. An anaphylactic reaction to peanuts or their by-products can result in death. The School has a strict "nut-free" policy and this policy must definitely be followed.

Anaphylaxis - Life Threatening Allergies

In compliance with Sabrina's law, our goal is to ensure that all children enrolled at The School are not at risk of exposure to anaphylaxis causative agents. For every child with life-threatening allergies, our policies include the development of an in depth, individual ANAPHYLAXIS EMERGENCY PLAN with input from the child's physician and family. This plan includes a description of the child's allergy, monitoring and avoidance strategies, signs and symptoms, and any action that needs to be taken in the event that the child has an anaphylactic reaction.

Staff members are trained yearly on the procedures to be followed in the event of a child having an anaphylactic reaction, how to recognize the symptoms, and how to administer medication.

Parents are required to provide written consent to administer medication, if needed. If the child develops a life-threatening allergy or any other allergy once enrolled in our program, it is the parents' responsibility to promptly advise The Rocking Horse Montessori, which will then proceed with an individual plan for their child.



THE SCHOOL OPERATES IN A NUT-FREE ENVIRONMENT. OUR FACILITY PROVIDES "NUT-FREE" LUNCHEAS AND SNACKS

The School is a "nut-free" school, since some students have very severe, life threatening anaphylactic allergies. They are in danger when they come into contact with peanuts (or any nuts) and their products such as peanut oil, (i.e. potatoes fried in peanut oil). Furthermore, some students are allergic to shellfish, eggs, milk, wheat gluten, various fruits etc. Supervisor/Operator will notify the parents of all allergens by email so they are aware of what allergies are within the center and updated parents as needed when allergens change.

Please use the following guidelines when bringing additional food to the school, including snacks or cakes for parties and birthday celebrations.

Children are not to share their food with others or to bring gum or candy to school. Please advise the school of ANY allergies or special dietary requirements for your child. We know that if your child had such an allergy, you would expect the same type of protective policy. We sincerely appreciate your anticipated cooperation in this matter.

Parent Responsibilities Related to Anaphylaxis Emergency Plan

The School requires that parents of children with a potentially life-threatening allergy are responsible for adhering to the procedures below as part of the Anaphylaxis Emergency Plan:

1. Upon registration, indicate child's medical condition on the registration form.
2. Attend a meeting with administrators and staff to review child's history, symptoms and pertinent information relating to the individual child.
3. Parents to provide training to the Supervisor who then trains the staff, students & volunteers on emergency plan to be followed should their child have an allergic reaction.
4. Complete & sign the form entitled: ANAPHYLAXIS EMERGENCY PLAN.

The form includes: child's name, photo, allergy, type of auto-injector and dosage, expiry date of auto-injector, emergency contact information.

5. Provide the staff with medication .
6. Communicate all changes in allergy, medical condition, symptoms etc. in writing to the school. Changes in our records will be made and updated as required, as well as a Medication / Treatment record for Emergency circumstances.



7. The Epi-Pen will be kept in the child's classroom for the school year, and will accompany him/her when outside on the playground and on Field trips.
8. If the Epi-Pen is taken home for any reason, it must be brought back to the school when the child attends school.
9. Parents should ensure that the school has an up-to date Epi-Pen at all times.
10. As per Ministry guidelines, an anaphylactic summary sheet including a photograph of each child requiring an Epi-Pen will be posted in the child's classrooms.
11. Parents will be asked to fill out a special dietary form prior to the start date.

17. ACCIDENTS / INCIDENT POLICY

The staff will make every attempt to ensure that the children are learning and playing in a safe environment. The following outlines the procedures of the School in the event of illness or injury at the school or while attending school events off school premises:

- If it is a head injury, the parent(s) are always contacted, even if the injury is deemed to be a minor one.
- If the school feels the injury is serious enough to have the child seen by a doctor, the parent(s) are notified immediately. If the school feels the injury requires emergency treatment, 911 is called and the parent(s) are notified immediately.

In the event a child receives a minor injury at school:

1. A qualified teacher will administer first aid and make the child as comfortable as possible.
2. The parent(s) or contact person will be notified immediately by telephone. (This is why it is extremely important that Parents notify the School of any changes of home, business or cell phone numbers or any change in other information supplied earlier to the school.)
3. An Accident Form will be filled out to inform parent(s) of the details, signed by the teacher present at time of event and signed by the Office.
4. Upon arrival or pickup of child, parent will be asked to read and sign the form to signify that they have been informed of the details.
5. The accident or incident report is placed in the child's school file.



In the event a child receives a major injury at school:

1. A qualified teacher will administer first aid and make the child as comfortable as possible. The staff is trained in Emergency First Aid and CPR.
2. An ambulance will be called (if necessary). A teacher will accompany the child (with the Child's Emergency form) in the ambulance to the hospital and stay with the child until a parent arrives.
3. Parents of the child will be notified of the accident/incident and asked to pick child up from school or meet the teacher at the hospital.
4. An Accident Form will be filled out to inform parent(s) of the details, signed by the teacher present at time of event and signed by the Office.
5. The child's parent will be asked to read and sign the form to signify that they have been informed of the details.
6. The accident or incident report is placed in the child's school file.

The School officials will act on behalf of the parents / guardians in case of an emergency. Parents understand that during the child's daily activities at school, injuries may occur. In order to take the best possible action on behalf of the parents/ guardians, the parents/ guardians agree to release and indemnify the School from any and all claims for damages arising as a result of any accident or injury sustained by the child while participating in any school activities that are not caused by a direct negligent act/omission of the School or any of its staff.

18. EMERGENCY / FIRE EVACUATION PROCEDURE

EMERGENCY SHELTER

Raywall Kitchen Centre, at the northwest corner of Green Lane and Guardsman Road.

The School has clearly defined, written instructions identifying emergency exits and delineating procedures in case of fire or other emergency.

In case of emergency evacuation, the staff will take the children to the designated emergency shelters. The teachers will bring emergency contact information with them to the shelter and will contact the parents to pick up the children.

The evacuation routine procedures are posted in each room and in the hallway. In the event that we have to leave the centre, we will go to the Raywall Kitchen Centre, at the northwest corner of Green Lane and Guardsman Road



19. HEALTHY EATING & NUTRITION - SNACKS and LUNCH

The school provides daily mid-morning and mid-afternoon nutritious snacks to all the students. Therefore, parents do not need to send snacks to school. The School also has hot nutritious morning snacks, afternoon snacks and lunches available to all fulltime students these menus are developed by a Registered Dietician who ensures that the menus meet the dietary and nutritional needs of young children in accordance with The Child Care and Early Years Act and the Canada Food Guide.

They are prepared on site. The menu will be online weekly and posted on the bulletin board in the hallway just outside the kitchen. The meals and snacks are nutritious and well balanced. Food from home will only be accepted when there is a specific reason.

Infants have a slightly different menu, suited to their age. If your child requires formula or any specific food, please leave it with the teacher in the morning. We will supply fresh milk 2% and homo.

20. SANITARY PRACTICES

The janitorial and teaching staffs strive to maintain the school in a clean and germ-free condition for the well-being of students and adults.

- All tables are cleaned and disinfected frequently.
- Staff and children wash their hands with soap before meals.
- The temperature of the food is taken and recorded to ensure that the food is at the proper serving temperature as set out by the Public Health Department.
- Any food that is to be served cool is stored in the kitchen refrigerator.
- Children are allowed to use the washroom upon request.
- Children are encouraged to use toilet paper, wash hands with soap, dry hands with paper towels and flush toilets.
- Staff ensures that the washrooms are disinfected daily, and additionally if required.
- Frequently touched surfaces will be cleaned and disinfected at least twice a day as they are most likely to become contaminated (for example, doorknobs, light switches, toilet and faucet handles, electronic devices, and tabletops).
- outdoor toys will be sanitized between usage by one cohort group
- playground equipment will be sanitized upon the usage by one cohort group



21. BIRTHDAY CELEBRATIONS

Due to health concerns from parents, we request that you bring nutritious snacks such as cheese and crackers or a store-prepared vegetable/fruit tray for your child's class. Your child's classroom will be making cupcakes/cake for the party. Party loot bags & gifts, containing **NO FOOD ITEMS** are permitted. Speak with your child's teacher about this special day ahead of time.

Please note that children are very sensitive about birthday invitations, especially if they do not receive one. If you wish to distribute personal party invitations, they must be for the whole class. Otherwise, selective invitations must be distributed off the school property.

22. PICTURES and VIDEO CAMERAS

The school may take various pictures and videos throughout the course of the school year that may be displayed in the school, on the school's website, or on promotional material. These pictures can be from class trips or various school related activities that the children participate in throughout each week.

Class Photos:

Class and individual photos are taken in the fall of each year and prints are available from the photographer. Parents will be notified of the exact date.

23. COMMUNICATIONS

Parent Teacher interviews

Scheduled interviews are held after the parents have received their child's progress report. Teachers are available to meet with parents throughout the school year. Contact the administrator or speak directly with your child's teacher that you wish to meet.

Newsletters

The newsletters will be published regularly through HIMAMA.

E-mails

Parents will receive regular e-mails from their child's teacher with pictures or any information for the parents. In the Infant and Toddler room the teacher's will e-mail the parents Daily Reports about their child's day.



Pictures

Pictures will be posted on HIMAMA and in the child's classroom boards.

Meeting's/Phone meetings

These can be arranged with the teacher's if the parents would like to have a discussion.

Parent notes

We will be sending home reminder notes or letter's if the parents need to bring in materials, letting them know about different events, activities and more to keep them in the loop.

Parent Concerns & Feedback

In the event that a parent has any kind of concern with RHMS or wishes to speak on any matter concerning your child or school policy, that parent is asked to discuss that concern with the administrator or the Director in person. If necessary, a parent may write a letter by hand it into the office, deposit it in the office mailbox or e-mail it.

24. SECURITY

In order to monitor persons entering the school, all doors leading into the building are locked. Entry to the school is gained by ringing the bell at the front entrance. There are numerous video surveillance cameras throughout the school classrooms, hallways, entrances and grounds which are monitored.

For added precautions to enhance students' safety, please ensure that the school access doors close behind you when you enter or leave the building and also note other persons around you.

Please notify the school in writing if there is a change in authorized persons picking up your child. We WILL NOT let your child leave the school premises with anyone who is not on the contact list. Unknown persons picking up children must provide identification. These precautions are for the safety of your child!



25. WITHDRAWAL POLICY

Enrolment at the School involves a commitment to the full academic year, September to June inclusive, with optional attendance in July and August. A permanent space cannot be guaranteed if you wish to temporarily withdraw your child for any reason. School fees are based on registration for a full year and any temporary absences or holidays scheduled by you does not necessitate a refund or transfer of fees. In the event of a student's withdrawal from the school, a minimum advance written notice of thirty (30) days must be given to the school office by letter or email. If you wish to withdraw your child, you must let the office know at the beginning of the month. Which would mean your child's last day would be at the end of that month. Full program fees will be charged until written notice is provided to the school office, and tuition will be due for the thirty days following proper, written notification even if the student is no longer attending the school. All postdated cheques beyond the 30 days will be returned.

The Application Fee is not refundable. The Deposit Fee provided with your child's application is applied to the last month your child is at the school or else it is non refundable.

It is important for your child to be given an opportunity to say good-bye and have a sense of closure when leaving. Please let your child and our staff know in advance so that the transition can be a positive experience for all. In the event a withdrawn student wishes to re-enroll, the standard application process must be followed.

26. TAX RECEIPT

If you require a Tax Receipt for the previous year please contact the office at the beginning of the year. You would need to let the office know whose name to be on the Tax Receipt and the correct spelling of the name.

27. SCHOOL CONTACT INFORMATION

The following methods are available to parents and others wishing to contact the school:

- Visiting with the school office, generally between 9:00 a.m. and 4:00 p.m.,

Monday to Friday inclusive.

- Telephone: (905) 764-3933
- Email info@rockinghorsemontessori.com



28. SLEEPING POLICY

An employee periodically performs a direct visual check of each sleeping child by being physically present beside the child while the child is sleeping and looking for indicators of distress or unusual behaviours; the child will be observed every 20 minutes for Infants and 30 minutes for casa / Toddlers children by the employee and check marked and documented. This documentation will be the property of the school and will be filed in a binder in each respective sleep room

There is sufficient light in the sleeping area or room to conduct direct visual checks

The sleeping policy includes the following:

- Each child will be assigned to individual cribs or cots in accordance with the Act.
- parents will be consulted and fill up the information on the enrollment package respecting a child's sleeping arrangements at the time the child is enrolled and at any other appropriate time, such as at transitions between programs or rooms or upon a parent's request
- parents of children younger than 12 months will be advised that each child is placed for sleep in a manner consistent with the recommendations set out in the document entitled "Joint Statement on Safe Sleep: Preventing Sudden Infant Deaths in Canada", published by the Public Health Agency of Canada, as amended from time to time, unless the child's physician recommends otherwise in writing.
- the observance of any significant changes in a child's sleeping patterns or behaviours during sleep will be communicated to parents and will result in adjustments to the manner in which the child is supervised during sleep.



29. PARENT ISSUES AND CONCERNS –POLICIES AND PROCEDURES

These are the following measures that Rocking Horse Montessori School takes in regards to parents' issues and concerns. Rocking Horse Montessori School may wish to consider providing parents with direction on who will be contacted in the following situations:

- (a) the steps for parents to follow when they have an issue or concern to bring forward to Rocking Horse Montessori School;
- (b) the steps to be followed by Rocking Horse Montessori School and its staff in responding to an issue or concern brought forward by a parent; and
- (c) when an initial response to the issue or concern will be provided.

1. If the concern or issue is directly related to a classroom, it will be addressed directly with the classroom Head Teacher. The issue or concern needs to be logged in the Daily Logbook and the office must immediately be aware of any parents' issues or concerns in regards to the classroom.
2. If the concern is regarding a staff member, it will be addressed with the supervisor.
3. If the concern is regarding the supervisor, it will be addressed with the Directors.
4. If the concern is related to an allegation of abuse, Children's Aid Society would need to be contacted.
5. When determining when an initial response will be provided to a parent, Rocking Horse Montessori School will have a timeframe of 24 hours to acknowledge the issue/concern



Procedures for parent concerns and issues

Issue or Concern	Steps for Parent and/or Guardian to Report Issue/Concern:	Steps for Staff and/or Licensee in responding to issue/concern:
<p>Program Room-Related</p> <p>E.g: schedule, sleep arrangements, toilet training, indoor/outdoor program activities, feeding arrangements, etc.</p>	<p>Raise the issue or concern to the classroom staff directly</p> <p>or</p> <p>the supervisor or licensee.</p>	<p>Address the issue/concern at the time it is raised</p> <p>or</p> <p>arrange for a meeting with the parent/guardian within 2 business days.</p> <p>Document the issues/concerns in detail. Documentation should include:</p>
<p>General, Centre- or Operations-Related</p> <p>E.g.: child care fees, hours of operation, staffing, waiting lists, menus, etc.</p>	<p>Raise the issue or concern to the supervisor or licensee.</p>	<p>the date and time the issue/concern was received;</p> <p>the name of the person who received the issue/concern;</p>
<p>Staff-, Duty parent-, Supervisor-, and/or Licensee-Related</p>	<p>Raise the issue or concern to the individual directly</p> <p>or</p> <p>the supervisor or licensee.</p> <p>All issues or concerns about the conduct of staff, duty parents, etc. that puts a child's health, safety and well-being at risk should be reported to the supervisor as soon as parents/guardians become aware of the situation.</p>	<p>the name of the person reporting the issue/concern;</p> <p>the details of the issue/concern; and</p> <p>any steps taken to resolve the issue/concern and/or information given to the parent/guardian regarding next steps or referral.</p> <p>Ensure the investigation of the issue/concern is initiated by the appropriate party as soon as reasonably possible thereafter. Document reasons for</p>



Issue or Concern	Steps for Parent and/or Guardian to Report Issue/Concern:	Steps for Staff and/or Licensee in responding to issue/concern:
<p>Student- / Volunteer- Related</p>	<p>Raise the issue or concern to</p> <p>the staff responsible for supervising the volunteer or student</p> <p>or</p> <p>the supervisor and/or licensee.</p> <p>All issues or concerns about the conduct of students and/or volunteers that puts a child's health, safety and well-being at risk should be reported to the supervisor as soon as parents/guardians become aware of the situation.</p>	<p>delays in writing.</p> <p>Provide a resolution or outcome to the parent(s)/guardian(s) who raised the issue/concern.</p>

30. EMERGENCY MANAGEMENT POLICY AND PROCEDURES

The Supervisor and/or The Director will contact parents/families via phone call if there is an Emergency that occurs. The teacher's have the children's emergency contact forms in their binder in the bag that they bring with them. The purpose of this policy is to provide clear direction for staff and Rocking Horse Montessori School to follow proper procedures in dealing with emergency situations. The procedures set out steps for staff to follow to support the safety and well-being of everyone involved. Clear policies and procedures will support all individuals to manage responses and responsibilities during an emergency, resulting in the safest outcomes possible.

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

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



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

For situations that require evacuation of Rocking Horse Montessori School, the meeting place to gather immediately will be located at: Raywal Kitchens at 68 Greenlane Road 905-889-6243.

For any emergency situations involving a child with an individualized plan in place, the procedures in the child's individualized plan will be followed. If any emergency situations happen that are not described in this document, Rocking Horse Montessori School will provide direction to staff for the immediate response and next steps. Staff will follow the direction given. If any emergency situations result in a serious occurrence, the serious occurrence policy and procedures will also be followed. All emergency situations will be documented in detail by Rocking Horse Montessori School Supervisor in the daily written record.

31. Rocking Horse Montessori School Safe Arrival and Dismissal Policy and Procedures

This policy and the procedures within help support the safe arrival and dismissal of children receiving care. This policy will provide staff, students and volunteers with a clear understanding of their roles and responsibilities for ensuring the safe arrival and dismissal of children receiving care, including what steps are to be taken when a child does not arrive at the child care center as expected, as well as steps to follow to ensure the safe dismissal of children. This policy is intended to fulfill the obligations set out under Ontario Regulation 137/15 for policies and procedures regarding the safe arrival and dismissal of children in care.

Policy General

Rocking Horse Montessori School will ensure that any child receiving child care at the child care centre is only released to the child's parent/guardian or an individual that the parent/guardian has provided written authorization the child care centre may release the child to. Rocking Horse Montessori School will only dismiss children into the care of their parent/guardian or another authorized individual. The centre will not release any children from care without supervision. Where a child does not arrive in care as expected or is not picked up as expected, staff must follow the safe arrival and dismissal procedures set out below.

Procedures Accepting a child into care

1. When accepting a child into care at the time of drop-off, program staff in the room must: a. greet the parent/guardian and child. b. ask the parent/guardian how the child's evening/morning has been and if there are any changes to the child's pick-up procedure (i.e., someone other than the parent/guardian picking up). Where the parent/guardian has indicated that someone other than the child's parent/guardians will be picking up, the staff must confirm that the person is listed on application or where the individual is not listed, ask the parent/guardian to provide authorization for pick-up in writing (e.g., note or email). c. sign the child in on the classroom attendance record.



Where a child has not arrived in care as expected

1. Where a child does not arrive at the child care centre and the parent/guardian has not communicated a change in drop-off (left a voice message or HIMAMA message or advised the closing staff at pick-up), the staff in the classroom must:
 - a. inform the supervisor, and they must commence contacting the child's parent/guardian/ Emergency contacts no later than 10:30 am .
 - b. supervisor call parent/guardian or email via HIMAMA, if no response is received Before 12.30pm supervisor must make contact with licensee and Police.

Once the child's absence has been confirmed, supervisor shall document the child's absence on the attendance record and any additional information about the child's absence in the daily Log book.

Releasing a child from care

1. The staff who is supervising the child at the time of pick-up shall only release the child to the child's parent/guardian or individual that the parent/guardian has provided written authorization that the child care may release the child to. Where the staff does not know the individual picking up the child (i.e., parent/guardian or authorized individual),
 - a. confirm with another staff member that the individual picking up is the child's parent/guardian/authorized individual.
 - b. where the above is not possible, ask the parent/guardian/authorized individual for photo identification and confirm the individual's information against the parent/guardian/authorized individual's name on the child's file or written authorization.

Where a child has not been picked up as expected (before centre closes)

1. Where a parent/guardian has previously communicated with the staff a specific time or timeframe that their child is to be picked up from care and the child has not been picked up within one (1) hour the program staff or supervisor, shall contact the parent/guardian by phone call, text message or HIMAMA app message and advise that the child is still in care and has not been picked up.
 - a. Where the staff is unable to reach the parent/guardian, staff must call the parent again and leave a message for the parent/guardian. Where the individual who is picking up the child is an authorized individual and their contact information is available, the staff shall proceed with contacting the individual to confirm pick-up as per the parent/guardian's instructions or leave a voice message to contact the center.
 - b. Where the staff has not heard back from the parent/guardian or authorized individual who was suppose to pick up the child the staff shall call the emergency contact until program closes and then refer to procedures under "where a child has not been picked up and program is closed".



Where a child has not been picked up and the centre is closed

1. Where a parent/guardian or authorized individual who was supposed to pick up a child from care and has not arrived by 6.00 pm, staff shall ensure that the child is given a snack and activity, while they await their pick-up.

2. One staff shall stay with the child, while the Director proceeds with calling the parent/guardian to advise that the child is still in care and inquire their pick-up time. In the case where the person picking up the child is an authorized individual, the staff shall document the name of the person in school log book and release the child.

3. If the staff is unable to reach the parent/guardian or authorized individual who was responsible for picking up the child, the staff shall call the next authorized individuals until someone picks up.

4. Where the staff is unable to reach the parent/guardian or authorized individual who is listed on the child's file (emergency contacts) by 6:00pm, the staff shall proceed with contacting the local Children's Aid Society (905) 895-2318. Staff shall follow the CAS's direction with respect to next steps. Dismissing a child from care without supervision procedures 1. Staff will only release children from care to the parent/guardian or other authorized adult. Under no circumstances will children be released from care to walk home alone.

32. INCLEMENT WEATHER POLICY

SAFETY IS PRIORITY.

Our staff understands that our decision to open, close or delay school opening during inclement weather often disrupts family schedules. We also understand that our children are better served – academically, emotionally and socially – by being in school. But, as always, our top priority is the safety of our children and staff, so the decision to close or delay opening is not an easy one.

HOW DO WE MAKE OUR DECISION?

Please understand that we make the decision to open or close the center in bad weather based on a careful analysis of all relevant factors, including:

- Information on road conditions from transportation staff and from local law enforcement and road crews
- Amount of snow and/or ice accumulated
- Whether precipitation will continue throughout the day
- Temperature and wind chill
- Weather predictions (including those from a weather alert service)
- Storm timing, trajectory and projection
- Building conditions (such as whether our building's electricity and/or



heat service is disrupted)

- Parking lot conditions



***Generally, Rocking Horse Montessori will be closed or delayed for inclement weather when local school districts are closed or delayed. Still, our school has its own exclusive circumstance. Please call us for the most up-to-date information in each unique situation: (905)764-3933.**

WHO MAKES THE DECISION?

Ultimately, Rocking Horse Montessori directors are responsible for the final decision based on the above factors.

WHEN IS THE DECISION MADE?

We strive to make the decision to close by 6:00 a.m. or earlier so we can notify parents immediately via HiMama. Please keep in mind that unusual weather conditions may force us to make the decision after this time

WILL WE CLOSE RHMS IN CONDITIONS WORSEN?

Even if the weather conditions worsen, we cannot reverse our decision in the morning without endangering the children and staff. If conditions worsen throughout the school day, we may need to have an early dismissal, but we will give as much notice as possible through the previously mentioned methods of communication. However, it is very important for parents to have plans in place in case the decision needs to be made later. We encourage you to consider driving conditions. Always allow yourself plenty of time in the afternoon to pick up your child when the center closes early.

Although we do our absolute best in this process, we know that often no perfect decision exists. If you do not feel that it is safe for your child to attend, use your best judgment whether or not he or she should attend. We prefer to exercise flexibility in these situations as opposed to an inflexible policy.



Appendix A

Guidelines for Common Childhood Communicable D

REPORTABLE DISEASES			
DISEASE	SIGNS AND SYMPTOMS	HOW TRANSMITTED?	
<p>MEASLES</p> <p>Also known as Rubeola, Red Measles</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Measles virus 	<p>Fever, cough, runny nose, watery, red eyes for 2 to 4 days before rash starts. Small red spots with white or bluish white centers in the mouth. Dusky red, blotchy rash that begins on the face and spreads all over the body. Rash lasts 4 to 7 days.</p>	<p>Airborne:</p> <ul style="list-style-type: none"> • Spread easily from person-to-person through the air (highly contagious) <p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with respiratory secretions of an infected person 	4 0
<p>MUMPS</p> <p>Also known as Infectious parotiditis</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Mumps virus 	<p>Swollen and painful salivary glands (found in front of and below the ear or under the jaw) on one or both sides of the face. May include fever, malaise, headache, inflamed testicles and respiratory symptoms (especially for children aged five and under).</p>	<p>Droplet:</p> <ul style="list-style-type: none"> • From coughs and sneezes of an infected person to a distance of < 2 metres <p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with the saliva or respiratory secretions of an infected person 	7 S
<p>RUBELLA</p> <p>Also known as German Measles</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Rubella virus 	<p>Low-grade fever, malaise, tiredness and swelling of the glands in the neck and behind the ears. Raised, red, pinpoint rash that starts on the face and spreads downwards. Rash lasts 3-5 days.</p>	<p>Droplet:</p> <ul style="list-style-type: none"> • From coughs and sneezes of an infected person to a distance of < 2 metres <p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with respiratory secretions of an infected person 	7 0
<p>HEPATITIS A</p>	<p>Fever, fatigue, loss of appetite, nausea, vomiting</p>	<p>Contact:</p>	



Guidelines for Common Childhood Communicable Diseases

REPORTABLE DISEASES			
DISEASE	SIGNS AND SYMPTOMS	HOW TRANSMITTED?	
<p>CHICKENPOX</p> <p>Also known as Varicella</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Varicella-Zoster virus 	<p>Slight fever may be present before an itchy rash develops. Crops of small red spots turn into fluid-filled blisters. After the blisters break, open sores will crust over to form dry, brown scabs as they resolve. Usually lasts about 10 days.</p>	<p>Airborne:</p> <ul style="list-style-type: none"> • Spreads easily from person-to-person through the air (coughing/sneezing) <p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with the fluid from the blisters or respiratory secretions 	1 b a
<p>DIARRHEAL DISEASES</p> <p>Also known as Gastroenteritis</p> <p>Caused by :</p> <ul style="list-style-type: none"> • Campylobacter, Salmonella, Shigella, E. coli 0157:H7, Giardia lamblia, Norovirus, Rotavirus • Other bacterial, parasitic and viral organisms 	<p>Abnormally loose or frequent stools and sometimes nausea, vomiting, abdominal pain or cramps, mucous, blood or pus in stool. Other systemic symptoms such as fever.</p>	<p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with stool of infected person or animal (contaminated hand to mouth) • Indirect contact with contaminated food, water or other objects or surfaces contaminated with stool <p>Airborne:</p> <ul style="list-style-type: none"> • Ingestion of airborne viruses produced when an ill person vomits. This mode of transmission for diarrheal diseases is specific for Norovirus 	T 0
<p>PERTUSSIS</p> <p>Also known as Whooping Cough</p>	<p>Usually begins with low grade fever, runny nose and mild cough. After 1-2 weeks, the cough worsens. Child will cough violently and rapidly, over and over, until no air is left in the lungs. Child will sit up in bed with head propped up.</p>	<p>Droplet:</p> <ul style="list-style-type: none"> • From coughs and sneezes of an infected person to a distance of < 2 meters 	E w tr



Guidelines for Common Childhood Communicable Diseases

NON-REPORTABLE DISEASES			
DISEASE	SIGNS AND SYMPTOMS	HOW TRANSMITTED?	
<p>COMMON COLD</p> <p>Caused by:</p> <ul style="list-style-type: none"> Rhinoviruses 	<p>Sneezing, runny nose, sore throat, cough, fever, headache, decrease of appetite and lack of energy. Most colds last for 7 to 10 days.</p>	<p>Droplet:</p> <ul style="list-style-type: none"> From coughs and sneezes of an infected person to a distance of < 2 metres <p>Contact:</p> <ul style="list-style-type: none"> Direct contact with respiratory secretions. Indirect contact with toys, other objects or surfaces contaminated with respiratory secretions 	
<p>HAND, FOOT & MOUTH DISEASE</p> <p>Caused by:</p> <ul style="list-style-type: none"> Non-polio enteroviruses 	<p>Fever, small painful blisters in the mouth, which make it difficult for the child to eat or drink. Blisters on the palms of child's hands, on their fingers, and on the soles of their feet and occasionally on their buttocks. Blisters may persist for 7 to 10 days and are not itchy. Headache, vomiting, diarrhea, sore throat, loss of appetite and lack of energy can also occur.</p>	<p>Contact:</p> <ul style="list-style-type: none"> Direct contact with stool, saliva, nose and throat secretions or fluid from the blisters of an infected person Indirect contact with contaminated toys, objects or surfaces <p>Droplet:</p> <ul style="list-style-type: none"> From coughs and sneezes of an infected person to a distance of < 2 metres 	
<p>HEAD LICE</p> <p>Also known as Pediculosis capitis</p> <p>Caused by:</p>	<p>Itchy scalp (may be worse at night), nits (whitish-grey egg shells) attached to hair shafts, scratching marks or small red lesions like a rash, live lice.</p>	<p>Contact:</p> <ul style="list-style-type: none"> Direct head-to-head contact (live lice). Indirect contact by sharing hats, hair brushes, headphones, helmets, etc. 	

NON-REPORTABLE DISEASES			
DISEASE	SIGNS AND SYMPTOMS	HOW TRANSMITTED?	
<p>PINWORMS</p> <p>Also known as Enterobiasis</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Enterobius vermicularis 	<p>Pinworms live in the large intestine. The female worms crawl out of the anus at night and lay eggs on nearby skin. Intense itchiness around the anus and vagina, especially at night, sleeplessness and irritability.</p>	<p>Contact:</p> <ul style="list-style-type: none"> • Direct contact from fingers contaminated from scratching • Indirect contact from contaminated bed linens, clothing, toys, etc. • Re-infection from contaminated hands 	Un
<p>SCABIES</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Sarcoptes scabiei (mite) 	<p>Red, very itchy rash which usually appears between fingers, on palms, armpits, wrists, elbows, groin area, buttocks, and shoulder area. Tiny burrows that look like grayish- white or skin-colored lines on the skin may be seen. Itchiness is usually worse at night. Itchiness may persist for several weeks despite successful treatment as the skin lesions in scabies are the result of an allergic reaction to the mite.</p>	<p>Contact:</p> <ul style="list-style-type: none"> • Direct contact from person-to-person, prolonged, close and intimate skin-to- skin contact 	Un tre
<p>PINK EYE</p> <p>Also known as <i>Conjunctivitis</i></p> <p>Caused by:</p> <ul style="list-style-type: none"> • Bacteria (Streptococcus pneumonia) • Viruses (Adenoviruses) • Non-infectious causes (allergies) 	<p>Red or pink eyeballs, itching, tearing, sensitivity to sunlight and discharge from the eye.</p> <p>Bacterial: thick, yellow-green discharge, sticky eyelids, pain.</p> <p>Viral and non-infectious: watery discharge, mild or no pain.</p>	<p>Droplet:</p> <ul style="list-style-type: none"> • From coughs and sneezes of an infected person to a distance of < 2 metres <p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with eye secretions 	Ba ta Vi
<p>IMPETIGO</p> <p>Caused by:</p> <ul style="list-style-type: none"> • Streptococcus pyogenes 	<p>Clusters of red bumps or blisters filled with clear fluid surrounded by area of redness. There may be fluid oozing out of the blisters and they may develop a honey colored or grey crust. Rash usually appears around the mouth and nose, and on exposed face or</p>	<p>Contact:</p> <ul style="list-style-type: none"> • Direct contact with rash of an untreated person • Indirect contact with contaminated bed linens, towels or clothing 	Fr tre dr