Town of Drayton Valley Early Childhood Development Centre

5024- 48th Street
Drayton Valley, AB
514-2200 (phone) 542-5753 (Fax)
www.town.draytonvalley.ab.ca

Early Childhood Centre Registration Form

Child's Starting Date: _____/____/____
Year Month Day

Date of Birth: ___/___/___
Yr. Mos. Day

Sex: M ◯ F ◯

13-18MOS ___ 19 – 36 MOS ___ 36 – 4 yr___ 4 yr and up ___

Full time care: ____ or Part Time Care: _____
Days required

Name child responds to: _____
(Surname) (Given name) (Also known as)

Legal Land Description: _____

Mailing Address: _____

Postal Code: _____ Home Phone: _____

Email Address: _____

Person(s) with whom child lives (adults & siblings):_____

Child's First Language: _____

Parent (s) / Guardian (s):

Name: _____ Home Phone: _____

Work Phone: _____ Cell: _____ Day/Hours of work _____

Address _____

Name:_____ Home Phone: _____

Work Phone: _____ Cell: _____ Day/Hours of work _____

Address _____

Emergency Contacts: (persons authorized to pick up child and/or be contacted in case of emergency include (siblings/ extended family members/ friends of family)

Name: _____ Relationship to Child: _____

Address_____

Home Phone: _____ Work ph. _____ Cell ph. _____

****If there is a custody agreement, please give details and attach copy:**

_____

_____

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Health Information

Family Doctor: _____ Phone: _____

Other health professionals involved with your child:

Name: _____ Phone: _____

Alberta Health Care # (or out of province number) must have this to attend.

_____

Immunizations are up to date?

☐ **Yes** ☐ **No**

If appropriate, please comment here on any other health issues:

Special Medications: _____ Vision or Hearing: _____

Allergies: _____ Speech/ Language: _____ Other:_____

_____

_____

Written Consent is given for: (please check all items for which you give your consent)

☐ immediate first aid if needed from certified staff

☐ transportation to the hospital should medical attention be needed.

☐ daily transportation by the facility (facility has the option to offer)

If your child is transported by the facility are there any instructions for special care for the child (eg. Motion sickness, seizures etc) during transportation.

☐ Yes If yes, specify: _____

☐ No

_____ Date: _____

Signature of person filling out application Year / Month / Day

Reviewed:11/22/2022

Child's Name: _____ **D.O.B:**_____

Child Care Services Agreement

All fees are due and payable in advance by the 1st day of each month. You will be given two weeks' notice if fees are not paid on the 15th of the month. All fees to be paid in full by the last day of the month or service will be terminated. There will be a 2.5% interest charge on all overdue fees after the 15th of the month. All outstanding balances after the last day of the month will be sent to collections.

- Drop-off and pick-up times are between 7:30 a.m. and 5:00 p.m.
- Parents are charged either a part time rate or full time rate for the start month / end month depending on start / end of care.
- Preference of spaces will be given to full-time registrants. Definitions and types of registrations are as follows:

Fees:

Full Time Registrations
Any child registered for childcare services for three days each week on a monthly basis is considered full-time.
Full Time days scheduled for your child will be: _____.
Full Time drop off and pick-up will be: _____.

Part-Time Registrations
Part-Time care is defined as 1 – 2 *regularly* scheduled days each week.
All fees due are payable on the 1st of each month.
Part time days for your child will be _____.
Times for drop off and pick up will be _____.

- Part-time enrolment will consist of regularly scheduled days i.e. same days and hours each week. Part-time days are agreed upon mutually by the parents and the Child Care Program Manager.

1. *No reduction in fees or exchange of days for care is allowable for temporary absences due to illness, Christmas closure, professional development days, vacation, or statutory holidays*. If days need to exceed the agreed-upon schedules, then;
    a) Parents must call the Centre to see if space is available.
    b) Additional drop-in day rates will apply
2. Priority is given to full-time registrations.

3. One month's written notice is required when parents wish to change the status of their child's registrations, i.e. part-time to full-time.

4. Notice of one month is required (in writing) when withdrawing your child from the Child Care Centre. Parents are responsible for the full month's fee.

5. **Hours of Operation**- the Child Care Centre is open from **7:30 a.m. until 5:00p.m**., Monday to Friday excluding all statutory holidays as listed in the Parent Handbook. See attached calendar for closures for this year.

6. **Sign-in and Sign-out Process** -Children must be brought directly into the Centre and not left unattended outside the premises. The Child Care Centre will not be responsible for any child that is not escorted into the Centre and signed in. It is very important that you take your child directly to the program room they are enrolled in and speak with the caregiver, so they are aware of the arrival of your child.

   *** Note**: children must be picked up by 5:00 p.m. If you are going to be late, please call the centre so that we can reassure your child and arrange to have a staff member stay late. A late fee of $10.00 for the first 0-5 minutes late, and $10.00 per minute thereafter.

   Under no circumstances will a child be released without prior consent from the parent/ guardian. Under no circumstance will a child be allowed to leave the Child Care Centre alone or unaccompanied by a person under the age of 18 yrs. If someone other than the parents are assigned to occasionally call for a child, the parents must inform the Centre in writing for each day arranged.

7. Please call the Centre by 9:00 am if your child will not be in attendance that day.

8. The Child Care Centre agrees to use care when supervising all children and their belongings; however, the Centre will not be liable for any loss or damage to clothing or other effects of children, nor for any accident, injury, sickness, or disease that may occur to any child while in the care of the Centre (gross negligence excepted).

9. **Clothing and Belongings:** Please dress your child appropriately in play clothes and label all items of value i.e. snowsuits, boots, shoes, and mittens which may become lost. If your child must borrow Child Care clothing, please ensure that it is promptly returned to the Centre. Please provide a second set of clothing. Indoor shoes are required.

10. **Discipline**- Under no circumstances will any staff member use corporal punishment as a means of discipline. The staff will use redirection, reasoning and problem solving as their main tools to guide children's behaviour.

11. **Emergency/ Fire / Disaster Relocation** – If a fire or disaster occurs, you will be notified to pick up your child immediately from an evacuation location that may be either the Scout's Hall or Omniplex dependent on the reason for evacuation.

Nutrition Fee

Our program offers a Nutrition Program. This consists of two healthy snacks and a hot lunch. All food service at our program is based on the Canada Food Guide and Nutritional Guidelines for children and youth. The cost of the Nutrition Program is $125.00 / month or $6.00 per day for children enrolled part time. Our program chooses to have a nutritional program for the following reasons:

- ✓ We can ensure safety for children with serious food allergies
- ✓ We can ensure every child in care has access to nutrition that meets most of their daily requirements
- ✓ We know this alleviates the work of parents having to prepare and stay within the guidelines for healthy snacks and lunch
- ✓ We can ensure every child has enough food throughout the day.
- ✓ We can introduce new foods to children in a setting where they see their peers trying new foods.
- ✓ It supports our objective of quality care, as we teach nutrition habits to children.

Please check the box below to take part in the Nutrition Program for the duration that your child is in care.

☐ Yes, My child will be participating in the nutrition program provided by ECDC.

I have read, understand, and agree to adhere to the regulations of the Town of Drayton Valley Early Childhood Development Centre. I have gone over the Parent Handbook and agree to support all policies and procedures for the Early Childhood Development Centre.

_____ _____

Signature of Parent/ Guardian Date

_____ _____

Signature of Child Care Program Manager Date

Drayton Valley Early Childhood Development Centre

Authorization for Pick Up

Child/ren Name:_____ Date:_____

Parent/Guardian Name:_____ the following people have permission from the parent/guardian to pick up the child/ren named above from the child care centre.

Name	Relationship to Child	Contact number
1._____	_____	_____
2._____	_____	_____
3._____	_____	_____
4._____	_____	_____
5._____	_____	_____

The parent/guardian will give the provider notice if anyone other than themselves will be picking up their child. Anyone other than the parent/guardian who picks up a child from the day home must have Photo Identification and have their name on the above list, before the provider will release the child to them.

_____ _____

Parent/Guardian Signature Date

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Reviewed Wednesday, January 15, 2025

Early Childhood Development Centre
5024 8th Street, Drayton Valley, Alberta T7A1E1
Email: ecdc@draytonvalley.ca
Ph: 780.514.2248

Parent Handbook Review and Sign

Please complete the form below and return this with the completed registration package.

I, _____ have read the Parent Handbook in its entirety and I am aware of and understand all the policies and procedures of the Early Childhood Development Centre.

One important thing I learned in reading this:

_____
_____
_____
_____

Something I would additionally like to learn more about:

_____
_____
_____
_____

_____ _____

Signature Date

Early Childhood Development Centre
5024 48th Street, Drayton Valley, T7A1E1
514-2248 (Phone) 621-0413 (Fax)
www.town.draytonvalley.ab.ca

Drayton Valley Early Childhood Development Centre

Re: Emergency Response and Event Sharing

Dear Parents,

In order to improve our emergency information sharing for parents we have enrolled with

"Remind Me"

This app will allow us to message via text or email to all providers simultaneously should an emergency response be required.

For example: In the past we closed the ECDC due to fumes in the building, we felt our response was delayed to parents / staff / board members as we phoned each person individually. This process will alleviate anyone not being notified.

This is a simple process for you, simply:

For text messages:

Text this number: **(587) 316-6168**In the message window type**: @dvecdc**
(type the @ sign as well)

You will receive a text asking you to send your full name, this enables me to place you in group for notification. You can also receive messages via email by following the instructions below.

For mobile app notifications:

Download the mobile app for iOS and Android devices and create a new account (or log in if you already have one.) To join a class, tap the **+** by Classes Joined and either join with your class code (**@dvecdc**) or search for your class. You'll automatically get app notifications.

Should you have any questions regarding this please do not hesitate to contact Administration

I _____ understand that any information or attachments sent via Remind are being transmitted in confidence for the use of the individual(s) to which it is addressed and may contain information that is confidential and privileged. Any use not in accordance with its purpose, such as sharing on social media or sharing to other persons than the intended recipient(s) is prohibited.

_____ _____

Signature of Parent / Guardian Date

Drayton Valley Early Childhood Development Centre

Parental Consent Form
Diapering Creams / Ointments / Lotions /Spray

Name of Child: _____

If families are bringing in home remedies: They will need to have a doctor's note or a medical professional (Doctor, nurse practitioner or pharmacist) this note to guarantee the ingredients are safe and with possible expiry information. Other remedies will need to come in their original containers with ingredients. If a medical professional recommends the mixture of the ingredients, then parents must clearly label the container with a printed sticker and medical note on file with the exact ingredients and procedures.

I have no objection to the staff of the Child Care Centre applying diaper cream, ointment, lotions, Vaseline which I will provide for my child.

_____ _____
Signature of Parent / Guardian Date

1. Name of Diaper Cream/Ointment/Lotion/Vaseline / Spray Provided:

_____

Expiry Date: _____

Directions on when to use:

_____

_____

2. Name of Diaper Cream/Ointment/Lotion/Vaseline/ spray Provided:

_____

Expiry Date: _____

Directions on when to use:

_____

_____

3. Name of Diaper Cream/Ointment/Lotion/Vaseline / spray Provided:

_____

Expiry Date: _____

Directions on when to use:

_____

_____

Revised 1/15/25

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EARLY CHILDHOOD DEVELOPMENT CENTRE
NURTURING TOMORROW'S LEADERS

CONSENT FOR ILL CHILD TO BE TAKEN TO EMERGENCY WHEN PARENT CANNOT BE CONTACTED

It is our policy that we notify a parent when a child is ill or needs medical attention. Occasionally we cannot contact parents, and we need to get immediate help for the child. Our procedure is to take the child to the nearest emergency service.

Please sign the consent below so that we can take appropriate action on behalf of your child. Return the signed consent to the centre immediately. We will take the consent with us to the emergency centre.

I hereby give consent for my child (ren)

_____ when ill to be taken to the nearest emergency care facility by the Early Childhood Development Centre staff when I cannot be contacted.

I hereby give consent for my child(ren)_____ to receive immediate first aid treatment from Child Care staff and medical treatment at hospital.

_____ _____
Date Name of Parent/ Guardian

Name of Child (ren)_____

Address: _____ **Phone:** _____ _____
Home **Work**

Allergies

_____ _____
_____
Alberta Health No. (or other health #)

Family Doctor: _____ _____
Name **Phone**

Parent/Guardian Consent Form
Early Childhood Development Centre (ECDC)

Collection, Use & Disclosure of Personal Information
under the *Freedom of Information and Privacy Act* (FOIP Act)

AUTHORITY FOR COLLECTION

The FOIP Act sets controls and standards on how public bodies collect, use and disclose personal information within custody or under the control of the Town of Drayton Valley. The FOIP Act requires that when public bodies collect personal information directly from individuals the information is about, that these individuals be provided with the legal authority for the collection, be explained the purpose of the collection, how the information will be used and be provided a contact person should they have any questions relating to this activity. The information collected as part of the Early Childhood Development Centre program is personal information according to the FOIP Act and is necessary to our obligation to provide students with an education program that meets their needs and to provide a safe and secure environment. This information will be made available to the Early Childhood Development Centre and its employees, the Government of Alberta, and the Child Care Board (within the scope of their roles and responsibilities), and to individuals working with the children in ECDC on a need-to-know basis.

REQUIRED USE OF INFORMATION

The Town of Drayton Valley believes the uses listed below are vital to fulfill its obligation to provide a healthy, well-functioning program, and the information collected will be used only for authorized programs and activities. Please read the following information about the types of activities or purposes for which personal information is collected:

- in emergency situations, the circulation of personal information on a "need-to-know" basis for children who have severe, life-threatening medical conditions
- the use of the child's name, birth date, number of hours in care, attendance hours, and parent's name to determine eligibility for particular programs and affordability funding provided by the Government of Alberta
- the use of the child's name, address, birth date, photo, school and grade for identification purposes
- the use of the child's name, address, parental and emergency contact information, for the provision of transportation services
- the use of the child's name on an artwork or other creative material displayed at ECDC, Town of Drayton Valley office or website, or sponsored displays in the community, provided that a Copyright Consent Form has been signed respecting the works created by each child
- the use of a child's name or photo, or comments about the child in promotional materials, promotional webpages, and social media
- the taking of individual, class, team, or club photos for ECDC educational purposes
- the taking of photos and/or videos during classroom activities or during Town of Drayton Valley or ECDC sponsored activities, and their use by the media or other organizations where children are not interviewed or identified by name or face
- the taking of photos and/or videos by ECDC staff and Town of Drayton Valley personnel or agents during classroom activities or other activities for non-profit and educational purposes, where the material will only be used within ECDC or the community. Separate and specific consents will be required where individual children are identified or interviewed, and the material is to be used outside ECDC. You will be contacted prior to such events taking place.

Please note that photos and/or videos of activities that are open to the general public may be taken and used for purposes within and outside the school. ECDC may not be able to restrict such activity at public events.

Parent/Guardian Consent Form

Early Childhood Development Centre (ECDC)

Collection, Use & Disclosure of Personal Information
under the *Freedom of Information and Privacy Act* (FOIP Act)

PERMISSION/CONSENT

The Early Childhood Development Centre is required to get written permission from parents/guardians before the information collected can be used for authorized programs and activities. We request that all parents/guardians read all of the initial sections carefully and sign this form.

I have read subsections "Authority for Collection" and "Required Use of Information", and I hereby grant permission, on behalf of my child, to Town of Drayton Valley and Early Childhood Development Centre to the collection, use, and disclosure of the personal information listed. This consent form remains in effect for as long as my child remains at Early Childhood Development Centre or until I/we rescind the permission.

Child's Legal Name: _____

Parent/Guardian's Legal Name: _____

_____ _____

Parent/Guardian's Signature Date

Collected personal information is protected from unauthorized access, collection, use, and disclosure in accordance with the FOIP Act. Should you have any questions about collection, use and disclosure of personal information, please contact the Early Child Development Centre Program Manager at (780) 514-2200.

Parent/Guardian Consent Form
Early Childhood Development Centre (ECDC)

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- the use of the child's name, address, birth date, photo, school and grade for identification purposes
- the use of the child's name, address, parental and emergency contact information, for the provision of transportation services
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Parent/Guardian Consent Form

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Child's Legal Name: _____

Parent/Guardian's Legal Name: _____

_____ _____

Parent/Guardian's Signature Date

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Early Childhood Development Centre

Parental Consent Agreement
Local Excursions, Parks and School Grounds

Throughout the year the staff will be taking the children on walks and small excursions within our community. Staff are ALWAYS equipped with a cell phone and a first aid kit. The boundaries for these walks are within a one-kilometer distance of the centre. Any trips of a greater distance will be considered a "field trip" and will have a consent form with details of date, time, place etc to be sent home and signed. This local excursion, parks and schoolgrounds agreement will be in effect for the duration your child is in care.

I give my child _____ permission to go on regular walks within a one-kilometer radius of the Early Childhood Centre. I understand that all precautions will be taken about weather and safety measures are in place to provide the best care possible while on these excursions.

_____ _____

Signature of Parent / Guardian Date

Throughout the year the children like to explore some of the parks and school grounds. We will be going to the various parks in Drayton Valley. Please see the attached map of the parks we will visit throughout the year. Please sign below giving permission for your child to go visit them.

I give my child_____ permission to go to various parks and school grounds with the Early Childhood Development Centre I understand that all precautions will be taken about weather and safety measures are in place to provide the best care possible while at parks or school grounds

_____ _____

Signature of Parent / Guardian Date

I/We, hereby acknowledge that sufficient information has been provided by the Centre with respect to the planned activity, duration, location, method of transportation, participants and supervision.

I/We, hereby acknowledge that certain RISKS OF INJURY are inherent to participate in learning activities outside Early Childhood Development Centre. These types of injuries may be minor or serious and may result from one's actions, or the actions or inaction of others, or a combination of both.

I/We understand that the Rules and Regulations established for the field trips are designed for the safety and protection of the participants and hereby undertake to inform my child to abide by these rules and regulations.

I/We understand that: 1. a minimum level of fitness and health (physical, mental and emotional), is required; 2. each person has a different capacity for participation; and 3. Any exceptions to full participation are identified on the Child Health Form.

I/We declare having read and understood the above Parental Consent Agreement in its entirety and hereby consent to allow my/our child to participate, acknowledging all of the foregoing.

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Splash Park Permission

We will be taking the children out to the splash park behind the centre sporadically through the summer months. We will spend roughly a ½ hour to 1 hr. depending upon UV index (should some children find this too hot we will shorten our time outside) We will be meeting all ratio guidelines for child to staff required to ensure the safety of all children.

I/We hereby acknowledge that sufficient information has been provided by the centre with respect to the planned activity, duration, location, method of transportation, participants and supervision.

I/We hereby acknowledge that certain RISKS OF INJURY are inherent to participating in learning activities outside the childcare centre. These types of injuries may be minor or serious and may result from one's actions, or the actions or inaction of others, or a combination of both.

I/We understand that the Rules and Regulations established for the field trips are designed for the safety and protection of the participants and hereby undertake to inform my child to abide by these rules and regulations.

I/We understand that: 1. a minimum level of fitness and health (physical, mental and emotional), is required; 2. each person has a different capacity for participation; and, 3. Any exceptions to full participation are identified on the Child Health Form.

I/We declare having read and understood the above Parental Consent Agreement in its entirety and hereby consent to allow my/our child to participate, acknowledging all of the foregoing.

Things to remember*

- Dates: **Starting June 1 – August 31**
- Please send with your child a bathing suit and towel**
- Bathing suits will be kept on site for the week and sent home to be cleaned on the weekends
- We will be putting sunscreen on all children one hour before heading out to Splash Park.

My child _____ has permission go to the Splash Park behind the Early Childhood Development Centre

_____ _____

Parent's Signature Date


HWY 22
JUBILEE AVE
INDUSTRIAL RD
MACKENZIE AVE
MEIER AVE
Northview Pond
Mackenzie Park
Peace Park
Downtown Park
Outreach School
Rotary Park
ECDC
J & M Pocket Park
Foundations Pre-K
Eldorado Elementary School
Drayton Christian School
Drayton Valley Playschool
Deby Park
Watino Park
Little Lions Park
4S Skate Park
Discovery Park
St. Anthony School
Frank Maddock High School
Evergreen Elementary School
(Temporarily Closed)
Sunrise Park
Holy Trinity Academy
Park Place
Ivan To Park
Sekura Park
WEST VALLEY PARK RD
RV PARK ACCESS
E SERVICE RD

Drayton Valley Early Childhood Development Centre

Parental Consent Form
Use of Sunscreen / Bug Repellant

Name of Child: _____

___I will provide sunscreen for my child, labeled before the long weekend in May.
I have tested this sunscreen on my child and my child has shown no adverse reaction. I understand that staff will check for expiry dates and notify me to replace any expired products.

__ I do not want sunscreen used on my child, I will bring protective clothing and a wide brim hat for sun protection. I understand the risks associated with denying the application / reapplication.

_____ _____
Signature of Parent / Guardian Date

I have no objection to the staff of the Child Care Centre assisting my child in using insect repellent before going out to play. I have tested this repellent on my child and my child has shown no adverse reaction. This product will not be applied to the child's skin but will be sprayed onto clothing. There will only be one application per day. Staff will only used spray purchased and certified by

_____ _____
Signature of Parent / Guardian Date

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Early Childhood Development Centre

Home Record Form

Child's Surname:	**Given Names:**

Short sketch of the child's background:

Date of Birth:	**Age:**	**Sex:**
Place in Family:		
Others living in the home:		
Siblings Names:		
Pets:		

This section of form is to be filled out by child's mother/female guardian/female close to the child:

Playmates (Are there any playmates of your child attending the centre/day home already):

Separation Anxiety (explain how your child reacts to being separated from yourself, the other parent/guardian.etc):

Activity Level (Is your child generally active, inactive, quiet, easily excited, tends to tire quickly…etc):

Sleep Times (Describe how your child goes down for naps, if they nap, duration of naps, what to expect upon waking…etc):

Eating (Are there any food allergies? Any special instructions for the caregiver? I.e.: food textures, avoidances. etc):

Please describe a favorite activity of yours that you do with the child:

Special Interests (crafts, books, toys, pets, sports…etc)

Guidance Methods Used at Home (list guidance methods you use at home as well as duration)

This section of the form is to be filled out by the father/male guardian/male close to the child.

Playmates (Are there any playmates of your child attending the centre/day home already):

Separation Anxiety (explain how your child reacts to being separated from yourself, the other parent/guardian..etc):

Activity Level (Is your child generally active, inactive, quiet, easily excited, tends to tire quickly…etc):

Sleep Times (Describe how your child goes down for naps, if they nap, duration of naps, what to expect upon waking…etc):

Eating (Are there any food allergies? Any special instructions for the caregiver? I.e.: food textures, avoidances..etc):

Special Interests (crafts, books, toys, pets, sports…etc)

Please describe a favorite activity of yours that you do with the child:

Guidance Methods Used at Home (list guidance methods you use at home as well as duration)

Please add any additional information that you feel may be beneficial to your child's transition into the centre/day home.

Do you have any cultural concerns about planned activities to coincide with special holidays or occasions (Halloween, Christmas, Easter etc.)?

Are there any cultural holidays, events, or foods that you can help incorporate into your child's program?

WELCOME TO OUR FAMILY

Show us those great pics!

PLEASE SEND US SOME PHOTOS OF YOUR CHILD AND YOUR FAMILY TO BE PART OF OUR FAMILY WALL IN THE ROOM. THIS GIVES YOUR CHILD A SENSE OF HOME WHEN THEY ARE HERE!

Parent Orientation

Reviewed with Parents

- ◯ Child's locker area
- ◯ Sign in/ Sign out procedure
- ◯ Medication Procedure
- ◯ Information Re: sleep/ lunch toileting
- ◯ Communication Books / Newsletter
- ◯ Daily Routine
- ◯ Planning Sheets/ Learning Stories
- ◯ Weekly Menus
- ◯ Parent Information area
- ◯ Parent Handbook

Received For File

- ◯ Photos of child
- ◯ Home Record Form
- ◯ Diaper Cream form
- ◯ Local Field Trips
- ◯ Sunscreen / Bug spray sign off
- ◯ Parent Handbook
- ◯ Photo of child for locker

Child's Name:_____ **Parent signature:**_____

Early Childhood Development Centre

Early Childhood Development Centre Health Policy Sign Off

I, _____ have read the attached Communicable Disease and Health Policy and understand that the following guidelines must
be followed for my child _____ attending the Early Childhood Development Centre.

(Please initial all boxes below and sign at bottom and return to the centre.)

☐ Each day before attending ECDC I will do a health evaluation of my child.

☐ I will not treat my child for fever and then send them to childcare. Treatment for fever means your child is ill and should not be attending care.

☐ if my child has any of the following symptoms, I understand that they must stay out of care for 48 hrs after the last symptom.

☐ if my child has been tested for a communicable illness or COVID they will not return to care until results are received and there is no risk to other children.

- Green mucous or congested cough / cold, RSV, pneumonia, bronchitis
- A fever over 38 degrees Celsius and low energy. Even if Tylenol is controlling a fever, it is an indication that your child is fighting infection and should be seeing a doctor as soon as possible.
- Stomachache, Unexplained pain.
- Vomiting (one or more times in a 24-hour period). Excessive vomiting can lead to dehydration.
- Diarrhea (two or more water stools in a 24hour period).
- Cold with fever, runny nose, and eyes, coughing and sore throat or new unexplained cough,
- Sore throat, difficulty swallowing.
- Rash or red eyes (thick mucus or pus draining from eye).
- Headache or stiff neck.
- Itchy body or scalp.
- Known or suspected contagious illness, e.g., chicken pox, mumps, and measles. requiring greater care and attention than can be provided without compromising the care of the other children in the program, or having or displaying any other illness or symptom the staff member knows or believes may indicate that the child poses a health risk to persons on the program premises

☐ Early Childhood Development staff, as per the Child Care Regulations, will also request that a child does not return to the program premises until they program administration is satisfied the child no longer poses a health risk to persons on the program premises. This will not apply if the parents provide written notice from a physician indicating the child no longer poses risk to other people within the program.

☐ If a family knowingly has their child attend care with a communicable illness that can pose a risk to others the childcare space will be terminated.

_____ _____

Parent Name / Signature Date

TOWN OF DRAYTON VALLEY

Subject:	Communicable Disease and Health	Policy:	
Department:	Community Services – Early Childhood Development Centre		
Approval Date:	June 12, 2008	Review Date:	February 24, 2021

Communicable Disease and Health Procedure

We know that health is a complex issue in a childcare environment. In establishing our health policy, we considered the following factors:

- The inability of a child who is too ill to cope with the day's program.
- The need to protect our children from communicable disease.
- Parents' need for a guideline to assist them in deciding whether to bring a child that is "not quite well" to childcare.
- The responsibility and commitment of parents who work full time.

Parents will complete a “Parent Health Policy Sign-Off” when they register their child.

Supervision of a Sick Child

If a child appears to be ill (vomiting, diarrhea, unexplained rash, uncontrollable cough) the child may be:

- separated from the other children, and staff will notify the supervisor and parents immediately.
- The child’s temperature will be taken with an ear thermometer, documented, and shared with the parent.
- The child will be kept as far away as is practicable from the other children and directly supervised by a primary staff member. The child may be removed to the Program Manager’s office during this process to be monitored until he/she is picked up by a parent, guardian, or emergency contact
- If the parent is not available emergency contact numbers will be phoned for your child to be picked up.
- The childcare centre may request that a child does not return to the program premises until they program administration is satisfied the child no longer poses a health risk to persons on the program premises. This will not apply if the parents provide written notice from a physician indicating the child no longer poses risk to other persons within the program.

When Your Child is Sick

When your child exhibits any of the following symptoms, they will be requested to remain out of care until they have seen a physician or **48 hrs**. until symptoms resolve.
Obvious symptoms that indicate a child is ill are:

- A fever over 38 degrees Celsius and low energy. Even if Tylenol is controlling a fever it is an indication that your child is fighting infection and should be seeing a doctor as soon as possible.
  ** if a child's fever reaches a temperature greater than 40 degrees Celsius an ambulance will be called to transport the child and staff member to the Drayton Valley Hospital & Care Centre. The parent will be contacted as soon as possible and updated on location and condition of their child. Parents will assume care of their child at the hospital and any costs incurred for ambulance or care provided by the hospital.*
- Unexplained pain.
- Vomiting one or more times in a 24-hour period. Excessive vomiting can lead to dehydration.
- Diarrhea (two or more water stools in a 24hour period).
- Cold with fever, runny nose and eyes, coughing and sore throat or new unexplained cough
- Sore throat, difficulty swallowing.
- Rash or red eyes (thick mucus or pus draining from eye).
- Headache or stiff neck.
- Severely itchy body or scalp.
- Known or suspected contagious illness, e.g., chicken pox, mumps, and measles.
- requiring greater care and attention than can be provided without compromising the care of the other children in the program, or
- having or displaying any other illness or symptom the staff member knows or believes may indicate that the child poses a health risk to persons on the program premises

Parents/guardians are strongly encouraged to keep ill children at home to prevent the spread of illness at the centre. Children must have been **free from symptoms for 48 hours** before returning to the centre. Please ensure you have back-up plans to accommodate any such spontaneous childcare needs.
Where two or more children in the same program room show signs of (fever, vomiting, diarrhea), staff will notify Environmental and Public Health for the appropriate action to be taken. Only under their recommendation would the centre close programming and contact the child's parent/guardian to remove their child from the program premises immediately if necessary. (Please see the following page for a list of Communicable Diseases.)

There are other times when a child is not showing signs of a definite illness but not able to handle the stress of the day. In these instances, it will be the decision of the supervisor and the staff as to whether the child should be sent home.

Communication

Communicable Health Policy is part of the Parent Handbook and is shared through the Parent Orientation when a child starts at the ECDC.

All parents will be provided with a "consent for ill child" form which gives the centre permission for their child to be taken to the nearest emergency care facility by the Early Childhood Development Centre staff when they cannot be contacted.

Give consent for their child(ren) to receive immediate first aid treatment from Child Care staff and medical treatment at hospital.

Documentation

Staff will document the following should a child become ill at the centre:

- Date and time child was found to be feeling ill (record of temperature taken at this time)
- Name of staff who noticed child was ill
- Time parent was contacted and who contacted them
- Time parent came to pick up the child
- Day that child returned to care.

Standard of Practice

- **Early Learning and Child Care Regulation AR 143/2008**
- **Part 1 Program Requirements -Section 8 Potential Health Risk**
  Sections 1-3

References:

1. Healthy Child Care, Healthy Child
2. Notifiable Disease List Alberta Health
3. Notifiable Disease PDF

NOTIFIABLE DISEASE LIST

Provincial Program Development & Disease Control
Alberta Health and Wellness

Notifiable diseases are monitored and controlled by the Communicable Disease regulations under *The Public Health Act*.

AIDS
Acute Flaccid Paralysis (AFP)
Amoebiasis
*Anthrax
*Botulism
Brucellosis
+Calicivirus Infection:
- including Norovirus, Norovirus like viruses & other small round structured viruses (SRSVs)
Campylobacteriosis
Chancroid
Chickenpox (Varicella)
Chlamydial Infections
Cholera (O1 & O139)
Congenital Cytomegalovirus (CMV)
Congenital Rubella Infection
Congenital Rubella Syndrome (CRS)
Congenital Toxoplasmosis
Creutzfeldt-Jakob Disease - Classic (CJD)
Creutzfeldt-Jakob Disease - Variant (vCJD)
Crimean Congo Haemorrhagic Fever
Cryptosporidiosis
Cyclosporiasis
Dengue Fever
Diphtheria
Eastern Equine Encephalitis (EEE)
*Ebola Haemorrhagic Fever
E. coli O157:H7
+Enterovirus Infections:
- Including Coxsackie A, B & Echovirus
Giardiasis
Gonococcal Infections
Group A Streptococcal Disease, Invasive (iGAS)
+Haemophilus Influenzae, Invasive – non-type b
Haemophilus Influenzae, Invasive - type b (Hib)
Haemolytic Uremic Syndrome (HUS)
Hantavirus Pulmonary Syndrome (HPS)
Hepatitis A (HAV)
Hepatitis B (HBV)
Hepatitis C (HCV)
Hepatitis (other, viral)
HIV Infection
■ Human Metapneumovirus (hMPV)
■ +Influenzae A/B
*Lassa Fever
Legionellosis
Leprosy
Leptospirosis
Listeriosis
Lyme Disease
Lymphogranuloma Venereum (LGV)
Malaria
*Marburg Haemorrhagic Fever
Measles/Rubeola
Meningococcal Disease, Invasive (IMD)
+Meningitis (viral)
Meningitis (bacterial, see Hib,IMD,IPD,iGAS)
°Methicillin-Resistant Staphylococcus Aureus (MRSA)
Mucopurulent cervicitis (MPC)
Mumps
Neonatal Herpes Simplex Infection
Non-gonococcal urethritis (NGU)
Paratyphoid Fever
+Parvovirus
Pertussis
*Plague
Pneumococcal Disease, Invasive (IPD)
Poliomyelitis
Powassan Encephalitis
Psittacosis
Q fever
Rabies
■ Respiratory Syncytial Virus (RSV)
Rocky Mountain Spotted Fever
■ +Rotavirus
Rubella
St. Louis Encephalitis
Salmonellosis
Severe Acute Respiratory Syndrome (SARS)
Shigellosis
*Smallpox
+Staphylococcal Intoxication
Subacute Sclerosing Panencephalitis (SSPE)
Syphilis
Tetanus
Toxic Shock Syndrome (if iGAS refer to Group A Streptococcal Disease, Invasive)
Trichinosis
Tuberculosis (TB)
*Tularemia
Typhoid Fever
Typhus – Louseborne
Typhus – Murine
Typhus – Scrub
Varicella Zoster, Shingles
Vibrio Parahaemolyticus
Vibrio cholerae (non O1, non O139)
Western Equine Encephalitis (WEE)
West Nile Virus Asymptomatic Infection (WNAI)
West Nile Virus Non-neurological Syndrome (WN-Non NS)
West Nile Virus Neurological Syndrome (WNNS)
Yellow Fever
Yersiniosis

Diseases in red are reportable to the Provincial Health Office by ***fastest means possible (FMP)*** through direct voice communication at (780) 419-9339. For Influenzae A/B and Rotavirus individual laboratory reports go to the MOH.

Symbols:
(Red) FMP
(*) bioterrorism agents
(+) no NDR required
(■) aggregate reporting
(◦) line list.

June 2008

Subject:	Enrolment	Policy No.:	
Department:	Community Services – Early Childhood Development Centre		
Approval Date:	July 10, 2011	Review Date:	February 24, 2021

Enrolment Policy

Purpose

Enrolment in our program is open to children within the age limits (12 months to 5 years) provided the program can meet the needs of the child. Enrolment is granted without discrimination against gender, race, creed, religion, or political belief.

Our centre offers full and part time care. Part time care is one (1) to two (2) full days per week; full time care is three (3) to five (5) days per week.

1. First month's fees are due when parents confirm acceptance of a space in the centre. First and last month's fees are due to confirm a space in the centre for parents who intend to apply for subsidy. Partial month's fees for the first month of care will be prorated to include only those days in which the child has been enrolled. Parents who are applying for subsidy will not receive this money back until they have finished their last month of care to balance out any fees not covered.

2. Administration fee – All new accounts will be charged a one - time admin/orientation fee. This is a non-refundable fee, which will apply to all accounts (full time, part time). In the event a family terminates care and returns within the same twelve-month period, the fee will NOT be charged again.

3. No reduction in fees or exchange of days for care is allowable for temporary absences due to illness, Christmas closure, professional development days, vacation, or statutory holidays

4. All new registrants are responsible to read the Parent Handbook and sign off that they have done so. This is important for families to become familiar with policies and procedures of the centre.

5. Parents will need to meet with the Program Manager at the centre to discuss policies and procedures (such as drop-off times, pick-up, payment, etc.).

6. Parents must return a completed registration form and emergency contact information card to the Program Manager. These documents must be filled in including Alberta

Health Care number and *all* contact names that will have authorization to pick up the child from the premises.

7. Advertising of available childcare spaces is done through, the local radio, newspaper, Town of Drayton Valley website, Community Registration night and social media.

8. When the centre has reached full capacity, we will have a waiting list for each age category.

9. Parents on the list will be given notice that there is a space. They will have 48 hours to respond and pay their fees before it will be offered to the next name on the list.

10. (Note: children will not be accepted into the program and will not be able to attend until these documents are completed in their entirety.)

Only after receiving all these items will your child's space be reserved and held for you until your start date.

Termination or Withdrawal from Service

Families are required to provide one month's written notice when they withdraw their child. More notice is preferable if the family is able. This is crucial as many families are waiting for a childcare space on the waitlist and require one month's notice for their current provider before they can accept a space. Please request form below for withdrawal.

EARLY CHILDHOOD DEVELOPMENT CENTRE

WRITTEN NOTICE FORM

TODAY'S DATE:_____

I,_____ am giving written notice that
(Parent's Name)
_____ will be my child(ren) _____
(date of termination)

last day of care.

I UNDERSTAND THAT A MONTHS NOTICE IS REQUIRED AND WILL BE BILLED ACCORDINGLY

Parent/s signature:_____

Program Manager's Signature_____

TOWN OF DRAYTON VALLEY

Subject:	Absenteeism / Late Drop Off	Policy:	
Department:	Community Services – Early Childhood Development Centre		
Approval Date:	July 15, 2010	Review Date:	February 24, 2021

Absenteeism and Late Drop-Off Policy

Parents are required to notify the Centre by 9:30 am if their child will not be attending on a regularly scheduled full day. This does NOT apply if the child is sick and has a doctor's note for two consecutive days.

The day care is open to accept children between 8:00 am - 9:00 am. If you plan to drop your child off after 9:00 am, you are **required** to call or message the centre through REMIND. Daily programming begins each day at 9:00 am and classes are involved in outings and field trips, as well as educational based programming which may result in your child's class being unavailable to accept your child. If you arrive at the Centre after 9.30am and your child is on an outing, parents are required to either meet the group on their outing or **wait with the child** until their child's class returns to the Centre. Drop off is **not** permitted between 11:30 am and 2:00 pm as this is regular naptime. As well, kitchen staff begins preparing for lunch and snacks earlier in the day and will be unable to accommodate fluctuating numbers of children for lunch.

TOWN OF DRAYTON VALLEY

Subject:	Late Pick-Up Policy	Policy:	
Department:	Community Services – Early Childhood Development Centre		
Approval Date:	June 15, 2022	Review Date:	June 15, 2022

Late Pick–Up Policy

Late Pick Up

If parents are late more than three times (in a six-month period without making prior arrangements) your childcare space will be terminated. If a personal emergency occurs, parents should notify the centre before closing time so that we will be aware of the difficulty. If a parent or authorized person fails to pick up a child by closing time, the following action will be taken unless suitable arrangements have previously been made:

- Fifteen minutes after closing, staff will attempt to contact the person (s) named by the parent as alternate care-giver.
- Thirty minutes after closing the Program Manager and / or Designate will be contacted and appropriate arrangements with Child and Family Services will be made.

Late Pick Up Charges

The Centre closes daily at 5:00 p.m., any pick-ups after closing time are subject to a late fee charge. **Late charges of $10.00 for the first 5 minutes late, and $10.00 per minute after this, will be applied to your account based on the late pick-up form you will sign.** Childcare staff are to be paid overtime for any time after 5:00 pm. All parents who are late pick-up fee, this fee compensates the Centre for staff over time costs.

Drop – In Care Procedures

Drop –In care is care provided by the centre that is not regularly scheduled weekly or monthly. To have your child come to the centre for drop- in care you must fulfill the following procedure:

- Come in for an orientation, read the parent handbook, and fill out a full registration form for your child. The fee for registration is $75.00.
- You are required to give 48 hours' notice for the day in which you require care.
- There is a daily rate for care and nutrition. This fee is due upon arrival at the centre for care and must be paid by cash or cheque. This rate applies regardless of the number of hours you require for the day.
- If your child has not returned in the previous six months you will be required to go through the orientation process again, as well as update prior registration forms. You will not be required to pay the registration fee a second time.

Summer Care:

- Any families not currently registered with the Drayton Valley ECDC and wanting summer care must notify the Program Manager by June 1st. A $75.00 registration fee will apply to hold spaces for those people who are not already registered with the centre.
- If there are any open spaces during the summer months, the regular "drop – in procedure" will apply.
- If you need a space for up to three weeks a daily fee per day will apply. If scheduled for more than three days per week and for more than three consecutive weeks a monthly rate will be charged.

Alberta

Infant Care Incentive Program
Parent Statement of Acknowledgement

I, _____ , acknowledge and understand that:
name of parent/guardian

_____
name of child care program

is eligible to receive funds from Alberta Children's Services under the Infant Care Incentive program. This program encourages childcare agencies to provide infant care spaces for children between the ages of 0 and 18 months. A program receives $150 each month while the child is 0-18 months and receiving child care for eight or more hours per month.

In order to receive the funds, _____
name of child care program

must provide Alberta Children'sServices with each child's legal name, date of birth and number of hours of childcare received each month. This information is used to ensure the child care program is eligible to receive the Infant Care Incentive funding.

This form will be maintained by the childcare program for a minimum period of two years in accordance with the protection of privacy provisions as specified by the *Personal Information Protection Act*.

For further information, contact the Alberta Supports Contact Centre at 1-877-644-9992 (toll free) or 780-644-9992 (Edmonton area) between the hours of 7:30 a.m. - 8:00 p.m. Monday to Friday (except general holidays).

_____
name of child(ren) 0 - 18 months

Date yyyy-mm-dd	Signature of Parent/Guardian

TOWN OF DRAYTON VALLEY

Subject:	Absenteeism / Late Drop Off	Policy:	
Department:	Community Services – Early Childhood Development Centre		
Approval Date:	July 15, 2010	Review Date:	February 24, 2021

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TOWN OF DRAYTON VALLEY

Subject:	Communicable Disease and Health	Policy:	
Department:	Community Services – Early Childhood Development Centre		
Approval Date:	June 12, 2008	Review Date:	February 24, 2021

Communicable Disease and Health Procedure

We know that health is a complex issue in a childcare environment. In establishing our health policy, we considered the following factors:

- The inability of a child who is too ill to cope with the day's program.
- The need to protect our children from communicable disease.
- Parents' need for a guideline to assist them in deciding whether to bring a child that is "not quite well" to childcare.
- The responsibility and commitment of parents who work full time.

Parents will complete a “Parent Health Policy Sign-Off” when they register their child.

Supervision of a Sick Child

If a child appears to be ill (vomiting, diarrhea, unexplained rash, uncontrollable cough) the child may be:

- separated from the other children, and staff will notify the supervisor and parents immediately.
- The child’s temperature will be taken with an ear thermometer, documented, and shared with the parent.
- The child will be kept as far away as is practicable from the other children and directly supervised by a primary staff member. The child may be removed to the Program Manager’s office during this process to be monitored until he/she is picked up by a parent, guardian, or emergency contact
- If the parent is not available emergency contact numbers will be phoned for your child to be picked up.
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Communication

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- Time parent was contacted and who contacted them
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- Day that child returned to care.

Standard of Practice

- **Early Learning and Child Care Regulation AR 143/2008**
- **Part 1 Program Requirements -Section 8 Potential Health Risk**
  Sections 1-3

References:

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2. Notifiable Disease List Alberta Health
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NOTIFIABLE DISEASE LIST

Provincial Program Development & Disease Control
Alberta Health and Wellness

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Brucellosis
+Calicivirus Infection:
- including Norovirus, Norovirus like viruses & other small round structured viruses (SRSVs)
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Chlamydial Infections
Cholera (O1 & O139)
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Congenital Rubella Infection
Congenital Rubella Syndrome (CRS)
Congenital Toxoplasmosis
Creutzfeldt-Jakob Disease - Classic (CJD)
Creutzfeldt-Jakob Disease - Variant (vCJD)
Crimean Congo Haemorrhagic Fever
Cryptosporidiosis
Cyclosporiasis
Dengue Fever
Diphtheria
Eastern Equine Encephalitis (EEE)
*Ebola Haemorrhagic Fever
E. coli O157:H7
+Enterovirus Infections:
- Including Coxsackie A, B & Echovirus
Giardiasis
Gonococcal Infections
Group A Streptococcal Disease, Invasive (iGAS)
+Haemophilus Influenzae, Invasive – non-type b
Haemophilus Influenzae, Invasive - type b (Hib)
Haemolytic Uremic Syndrome (HUS)
Hantavirus Pulmonary Syndrome (HPS)
Hepatitis A (HAV)
Hepatitis B (HBV)
Hepatitis C (HCV)
Hepatitis (other, viral)
HIV Infection
■ Human Metapneumovirus (hMPV)
■ +Influenzae A/B
*Lassa Fever
Legionellosis
Leprosy
Leptospirosis
Listeriosis
Lyme Disease
Lymphogranuloma Venereum (LGV)
Malaria
*Marburg Haemorrhagic Fever
Measles/Rubeola
Meningococcal Disease, Invasive (IMD)
+Meningitis (viral)
Meningitis (bacterial, see Hib,IMD,IPD,iGAS)
°Methicillin-Resistant Staphylococcus Aureus (MRSA)
Mucopurulent cervicitis (MPC)
Mumps
Neonatal Herpes Simplex Infection
Non-gonococcal urethritis (NGU)
Paratyphoid Fever
+Parvovirus
Pertussis
*Plague
Pneumococcal Disease, Invasive (IPD)
Poliomyelitis
Powassan Encephalitis
Psittacosis
Q fever
Rabies
■ Respiratory Syncytial Virus (RSV)
Rocky Mountain Spotted Fever
■ +Rotavirus
Rubella
St. Louis Encephalitis
Salmonellosis
Severe Acute Respiratory Syndrome (SARS)
Shigellosis
*Smallpox
+Staphylococcal Intoxication
Subacute Sclerosing Panencephalitis (SSPE)
Syphilis
Tetanus
Toxic Shock Syndrome (if iGAS refer to Group A Streptococcal Disease, Invasive)
Trichinosis
Tuberculosis (TB)
*Tularemia
Typhoid Fever
Typhus – Louseborne
Typhus – Murine
Typhus – Scrub
Varicella Zoster, Shingles
Vibrio Parahaemolyticus
Vibrio cholerae (non O1, non O139)
Western Equine Encephalitis (WEE)
West Nile Virus Asymptomatic Infection (WNAI)
West Nile Virus Non-neurological Syndrome (WN-Non NS)
West Nile Virus Neurological Syndrome (WNNS)
Yellow Fever
Yersiniosis

Diseases in red are reportable to the Provincial Health Office by ***fastest means possible (FMP)*** through direct voice communication at (780) 419-9339. For Influenzae A/B and Rotavirus individual laboratory reports go to the MOH.

Symbols:
(Red) FMP
(*) bioterrorism agents
(+) no NDR required
(■) aggregate reporting
(◦) line list.

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