

ENHANCED SAFETY PLAN

TACHE COMMUNITY DAY CARE - SCHOOL AGE

FACILITY NUMBER 101107

1298 Dawson Road, Lorette MB

Director: Melissa Marion

Preschool Site: 204-878-2286

tachedaycare@mts.net

On-Site Facility Cell Phone: 330-0768

Box 520 Lorette, Manitoba R0A 0Y0

FACILITY OVERVIEW

Tache Community Day Care – School Age
1298 Dawson Road, Lorette

Date Developed: August 18, 2011 Last Revised: November 1st 2012 Last Reviewed:

Reviewed and Approved by:

Fire authority Child care coordinator Board of directors

Copies provided to:

- all supervisory staff and designated alternates
- child care coordinator
- posted in each separate area for easy reference by all staff and the fire authority

Purpose

This safety plan is designed to provide guidance and direction to staff and the board of directors. This will help ensure the safety of the children, families, staff and visitors to our child care centre. It establishes clear and concise policy and procedures:

- to prepare staff on what to do in the event of different types of emergencies
- to evacuate safely to our designated place of shelter
- to shelter-in-place when it is safer to remain in the centre
- to close the centre due to severe weather, health-related or other emergencies
- to ensure the safety of children with anaphylaxis (life-threatening allergies)
- to ensure safe indoor and outdoor environments
- to control visitor access

Delegation of Authority

The Lead staff or designated alternate maintains the authority to declare an emergency situation and implement evacuation, shelter-in-place or closure procedures. The director (or designated alternate) assumes responsibility when on site. This responsibility includes communications with parents and the media.

Children, Staff and Building Personnel

Children

Licensed for maximum of 45 spaces aged 6 years to 12 years

Staffing

3-4 staff on site including: 1 ECE II and 3 CCA's

Centre director is responsible for 2 sites and is primarily located at the preschool site.

The centre is operated by a Board of Directors and the Board President is contacted as needed.

Building personnel

Board of Directors, Director or Designate

Building Description

1784 square foot, metal frame structure, single-occupant, single level

Day Care Centre

Spaces Used by Centre

Centre is located on main floor – main area space; kitchen; 2 washrooms; entrance area

Exits

Main Exit - Front Entrance

Alternate Exit - Rear Entrance

Fire Safety Equipment and Locations

Fire Alarm System: Local signal only. Child care staff MUST call 911 for fire department.

Fire Alarm System Control panel: Located at the front door entrance on 1298 Dawson Road

Fire Alarm Pull Stations located: main entrance, rear exit

Fire Department Connection: Fire hydrant

Smoke Alarms:

4 hard wired to fire alarm panel: in the kitchen, in the entrance and 2 in the main play room

Heating, Ventilation and Air Conditioning

Central gas heating (2 furnaces located on roof of building)

Air conditioners attached to the furnace

Portable fire extinguishers

3 ABC extinguishers located:

- main entrance area
- kitchen
- rear exit

Utility Shut-off Locations

Shut-off instructions are posted by each utility. The child care staff have access to all utility shut off valves in case of an emergency situation.

Water main and water heater: in mechanical room

Main natural gas valve: outside – east side of church

The following are identified on the electrical panel located in the mechanical room:

- furnace (roof top unit)
- fire alarm system
- water heater
- indoor and outdoor lights
- exhaust fans
- stove
- reciprocals (electrical plug ins)
- entry slab heater
- lobby f.f. heater (slab heater)
- kitchen fridge
- baseboard heater

EMERGENCY FLOOR PLAN

See attached

EMERGENCY EVACUATION PROCEDURES

Emergency evacuation procedures will be used in case of:

- fire
- a chemical or hazardous materials accident inside or outside of the centre
- a suspected natural gas leak

Emergency evacuation procedures may be also used in situations such as:

- bomb threat
- threatening behaviour inside the building
- a chemical accident in the area outside of the centre
- a health-related emergency such as utility failure or sewage back up

In Case of Fire

Staff should:

1. Ensure everyone evacuates fire area immediately.
2. Close doors to fire area.
3. Pull fire alarm bell.
4. Notify Lead Staff (or designated alternate).
5. Follow direction from senior staff to evacuate all children, staff and visitors from building.

Suspicion of Gas Leak - IMPORTANT - DO NOT pull fire alarm bell

Staff should:

1. Verbally notify the Lead Staff (or designated alternate) immediately.
2. Follow direction from Lead Staff to evacuate all children, staff and visitors from building.

Lead Staff (or designated alternate) should:

1. Verbally notify staff to evacuate the building.
2. Direct senior staff to lead *Evacuation Procedures*.
3. Call 911 for fire department and state nature of emergency and address.
4. Call centre director (or designated alternate) at preschool site as soon as possible.

Upon Hearing Fire Alarm (or Suspicion of Gas Leak)

All children, staff and visitors should:

1. Stop all activities immediately
2. Follow directions of senior staff to evacuate building.
3. Meet in the assembly area outside of the centre
 - Exiting from front entrance – in front of RM office
 - Exiting from rear entrance – centre’s outdoor play area away from building

Senior staff should:

1. Direct staff to gather with children and visitors by the inside of exit door. Tell children to take jackets for protection in cold weather, if safe to do so.
2. Assign specific staff to:
 - Conduct a sweep of the centre looking for any remaining children or adults.
 - Lead evacuation out of the building.
 - Bring the attendance record (with floor plan attached) and take attendance in the assembly area.
 - Take the emergency backpack (including first aid kit, child information records, staff emergency information, blankets for protection in cold weather)
 - Help children who require additional assistance.
 - Take required medications and specialized equipment for children with additional support needs if essential to their immediate safety and it is safe to do so.
3. Close all doors and windows, time permitting.
4. Report evacuation status to director (or designated alternate).

Lead Staff (or designated alternate) should:

1. Call 911 for fire department. State the nature of the emergency and the address.
2. Review attendance record received from staff. Confirm that all children, staff and visitors are accounted for.
3. Call centre director (or designated alternate) at preschool site for assistance.
4. Advise fire department of evacuation status - complete to ensure no possibility that any child care staff, children or visitors are unaccounted for).
5. Take direction from fire department.

6. Direct staff to return inside or proceed to designated place of shelter upon direction from fire department.
7. If staff and children proceed to designated place of shelter before fire department arrives:
 - If possible, assign a staff member to remain at main entrance to advise fire department.
 - Call 911 to inform of evacuation status.
8. Post the name, location and contact number of the designated place of shelter on the outside door.

Director (or designated alternate) should:

1. Prepare a written statement to relay to parents by telephone to let them know the children are safe, where to pick them up and whether they need to come early.
2. Assign specific staff to contact parents with prepared statement using centre's cell phone and office phone in designated place of shelter.
3. Record an outgoing message on the centre's voice mail system.
4. Contact staff on outings to return to designated place of shelter, not the centre.
5. Contact schools and advise that the children cannot come to the centre until further notice. Make necessary arrangements for children's care, staff would meet children at school.
6. Be available to discuss event with parents when they pick up children.

After the event, the director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event.
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support.

DESIGNATED PLACE OF SHELTER AWAY FROM THE CENTRE	
<p><u>Primary Place of Shelter</u> Notre Dame De Lorette Parish 1282 B Dawson Road Phone: 878-2221 Alternate Phone: 878-2819 (Patricia – Chair)</p>	<p><u>Secondary Place of Shelter</u> TCDC Preschool Site 480 Senez Street Phone: 878-2286</p>

EVACUATION AND SHELTER-IN-PLACE PRACTICE DRILLS

The following procedures are used to ensure the safety of children and adults in our centre.

Evacuation and shelter-in-place practice drills are documented on the Evacuation and Shelter-in-Place Drill Record form and maintained on file for at least one year. Staff and children will not be told in advance of the drills. Parents and visitors will be required to participate in the drill when in the centre and follow the direction of staff.

Emergency Evacuation Drills

- minimum of one evacuation drill per month using battery-operated smoke alarm (including minimum of one drill using fire alarm annually)
- using alternate exit routes
- at different times of the day with varying numbers of staff
- complete evacuation to our designated place of shelter at least once a year

Use of Fire Alarm Manual Pull Stations

Director (or designated alternate) should:

- reset alarm immediately after drill when pull stations used

Shelter-in-Place Drills

- minimum of one shelter-in-place drill every year

After Evacuation or Shelter-in-Place Practice Drills

- Lead Staff (or designated alternate) will post this information for families
- staff will try to discuss the drill with each family at departure time, particularly if their child found it interesting or upsetting

CENTRE CLOSURE PROCEDURES

The following procedures and communication policies will be used in the event of partial or full day closure of the centre due to:

- weather-related emergencies such as a severe winter storm
- health-related emergencies such as a utility failure or the outbreak of illness
- floods
- forest fires

Closure of centre for portion of day

Director (or designated alternate) should:

1. Contact parents by telephone. Advise them to pick up their children early at centre or at designated place of shelter. Provide staff with a scripted statement to use if helping notify parents.
2. Contact emergency contacts designated by parents, if parents cannot be reached.
3. Post a note on the outside door with the name, location and phone number for the designated place of shelter. Include the centre's cell number.
4. Advise all staff not there at the time.
5. Inform schools used by school-age children.

Closure of centre for the full day

Director (or designated alternate) should:

1. Attempt to contact all families and staff the previous evening or early in the morning by telephone. Provide staff with a scripted statement to use if helping notify parents.
2. Arrange to have the closure announced on CJOB 680 (786-2471).
3. Record an outgoing message on the centre's voice mail system.
4. Post a note on the outside door, if possible.
5. Inform schools used by school-age children.

Additional steps to prepare for closure due to flooding or fire

Director (or designated alternate) should:

1. Make sure signs showing the locations of utility shut-offs and instructions are posted. Periodically review with designated alternate.
2. Turn off the furnace, main power switch and the outside gas valve, time permitting. Call Building Manager to notify and for assistance if needed.
3. Take important documents such as child and staff information and financial records, time permitting.

Additional steps if our building is flooded

Director (or designated alternate) should:

- Contact Manitoba Hydro to disconnect power at the pole and make sure it is safe to re-enter the centre.
- Schedule the cleaning, service and replacing of main circuit panels, light switches, electrical sockets, appliances, furnaces, etc by certified technicians.
- Make arrangements to have all wiring inspected by a qualified electrician before turning power on.
- Make arrangements for the natural gas to be turned on by a qualified professional.
- Schedule appropriate cleaning for all flooded areas.

Contact parents with an expected reopening date.

After partial or full day closure

Director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event, Terry Smith 204-268-6762.
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support, public health nurse 878-9752 ext 3.
4. Contact fire and public health inspectors and the child care coordinator. Depending on the reason for closure, there may be requirements or recommendations to reopen centre.

CONTROLLING FIRE HAZARDS and INSPECTION AND MAINTENANCE OF FIRE SAFETY EQUIPMENT

The following procedures will be used to ensure requirements under the Manitoba Fire Code are met to reduce and prevent the risk of fire by:

- controlling fire hazards
- inspecting and maintaining fire safety equipment

Documentation File

The following documentation will be maintained by the Director and Lead Staff for review by the fire inspector. The designated alternate will know the location of this file, which will contain:

- copies of safety checklists used to document daily, monthly and annual checks to control fire hazards and inspect and maintain fire safety equipment
- fire protection system annual inspection report by a qualified technician
- heating system annual inspection report by a qualified heating contractor
- fire extinguishers annual inspection report by a certified agency
- evacuation and shelter-in-place practice drill record

These following items have been integrated into our Safety Checklists to document the checks required on a daily, monthly and annual basis.

Daily Inspections and Maintenance

1. Fire alarm power indicator and trouble indicator lights are functioning correctly.
2. Evacuation procedures and floor plans are prominently posted in each room.
3. Exit signs are easy to see and lit.
4. Corridors and exits are unobstructed and properly lit.
5. Exits are free of snow and ice. There is a minimum of three meters (about 10 feet) cleared of snow outside of exit. There is a cleared path so that everyone can move further away from the building.
6. Fire doors are NOT wedged or blocked open.
7. Electrical appliances are unplugged when not in use (toaster, coffee maker, etc.)
8. All electrical outlets have covers in place.

Monthly Inspections and Maintenance

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1. Exit doors are readily opened from the inside without the use of keys or other locking devices.
2. Fire department access is unobstructed. Exterior fire department connections are easy to see and unobstructed (if applicable). For example, no vehicles may be parked in a fire route/lane. There is no excessive vegetation, snow or other obstructions to access routes and fire hydrant.
3. All fire extinguishers are checked by Lead Staff to make sure:
 - proper type
 - hung in required locations
 - labelled
 - ready for use
 - tagged
 - properly charged (arrow in green zone)
 - monthly check documented on tag and on practise drill record
4. Storage areas are checked by Building Manager and centre director (or designated alternate) to make sure:
 - combustible materials have not built up in storage rooms or service rooms
 - combustible materials are not stored next to water heaters and heating equipment
 - propane cylinders are not stored inside building
5. Inspection documentation maintained by Building Manager and centre director for review by fire inspector for:
 - emergency lights inspection to make sure they work if the power fails
 - fire alarm manual pull stations

Annual Inspections and Maintenance

Inspection documentation maintained by the Building Manager and centre director for review by fire inspector for the following:

1. Fire extinguishers are inspected by certified agency (also documented on tag).
2. Heating system is inspected by qualified heating contractor.
3. Fire protection systems are inspected by a certified technician:
 - emergency lighting
 - fire alarm system

WEATHER-RELATED EMERGENCIES

The following procedures will be used in the event of the following in our area:

- winter storms
- flooding
- forest fires
- tornadoes
- severe thunderstorms

Preparation

To prepare to care for children outside of regular centre hours or during a utility failure, the director (or designated alternate) will ensure that:

- non-perishable food and water is stored and replenished at least annually
- flashlights and battery operated lights with fresh batteries are available in all areas of the centre
- fresh batteries are available for the weather radio or portable radio
- signs indicating locations of utility shut-offs and instructions are posted and reviewed periodically with designated alternate

Winter Storm, Flood and Forest Fire Procedures

Director (or designated alternate) should:

1. Monitor appropriate source listed below when there is potential for severe weather, flooding or forest fires:
 - Environment Canada for weather watches and warnings on weather radio or local media
 - Manitoba Water Stewardship's Hydrologic Forecast Centre website (manitoba.ca/waterstewardship/floodinfo) and local media during the spring run off period and during other high water advisories for the area
 - Manitoba Conservation Fire Program website (manitoba.ca/conservation/fire/) as well as local media during forest fire season from April to October
2. Notify and provide direction to Lead Staff at school age site.

Lead Staff (or designated alternate) should:

1. Notify staff in playground to bring children inside in the event of a severe weather warning.

2. Notify any groups on outings to return or take indoor shelter immediately.
3. Reschedule outdoor play and all outings away from the centre.
4. Post information indicating that there may be a need for closure and reminding parents how the closure will be communicated.

Additional steps for severe winter weather watch/warning or a blizzard warning

1. Director and the Board President will consult on the need for emergency closure.
2. Follow *Emergency Closure Procedures* if required.

Additional steps when there is potential for flooding or forest fire

1. Director and the Board President will consult on the need for an emergency closure based on the information available from emergency response officials.
2. Director (or designated alternate) will:
 - advise Lead staff at school age site
 - advise parents if a decision is made to close the centre
 - follow all instructions from emergency response officials
 - remind parents to listen to local media and emergency response officials for evacuation orders and assume that the centre will be closed until further notice
3. Follow *Emergency Closure Procedures* if required.

Tornado or Severe Thunderstorm Procedures

Staff should:

1. Immediately contact the Lead Staff (or designated alternate) if aware of a severe thunderstorm or tornado warning/sighting in the area.

Director (or designated alternate) should:

1. Monitor the situation using information from Environment Canada on the weather radio.
2. Make decision to enact *Shelter-in-Place Procedures: Tornado*.
3. Notify and provide direction to the Lead Staff at school age site.

Lead Staff should:

1. Remind staff not to use electrical equipment and avoid using the telephone.
2. Direct staff to move children away from doors and windows.
3. Make sure flashlights and battery operated lights with fresh batteries are available in all areas of the centre.
4. Unplug all electrical appliances such as TVs, radios and toasters.

Staff should:

1. Follow directions from senior staff.
2. Guide children to stay away from windows, doors, radiators, stoves, metal pipes, sinks or other electrical charge conductors.

SHELTER-IN-PLACE PROCEDURES: TORNADO

Protective Space - bathroom areas

Lead Staff (or designated alternate) should:

1. Direct senior staff to lead *shelter-in-place procedures*.
2. Notify staff in playground to return indoors immediately.
3. Notify staff on outings away from centre to immediately seek the closest indoor shelter. Remind them to call back with their location.

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4. Notify schools that the children should not be transported to the centre and that staff cannot leave to pick them up. Make arrangements for the children's care.
5. Bring the emergency backpack into the protective spaces (including the first aid kit, child information records, staff emergency information, contact information for schools)
6. Bring the weather radio operating on battery backup and cell phone to protective space to monitor when it is safe to leave the protective spaces.
7. Call centre director (or designated alternate) at preschool site about status of *Shelter-in-Place Procedures: Tornado*.

Senior staff should:

1. Direct staff and children to gather in the protective spaces.
2. Take attendance to make sure all children and staff are accounted for.
3. Assign specific staff to:
 - help children who require additional assistance
 - take required medications and specialized equipment for children with additional support needs if it is possible to do so safely and if essential for the immediate safety of a child
4. Advise Lead Staff (or designated alternate) of the status of *Shelter-in-Place Procedures: Tornado*.

After the event, director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event. Terry Smith 1-204-268-6762
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support.

HEALTH-RELATED EMERGENCIES

The following procedures and communication policies will be used in the event of an emergency due to:

- a child's medical condition
- communicable or food-borne illness in the centre or larger community
- serious injury of a child
- utility failure or sewage backup

A Child's Medical Condition

When a child enrolls with a medical condition or is diagnosed while attending the centre the director (or designated alternate) should:

1. Make sure Unified Referral Intake System (URIS) applications are submitted annually.
2. Arrange staff training by a registered nurse related to the URIS *Individual Health Care Plan/Emergency Response Plan*.
3. Update the centre's safety plan with any special considerations required for the child.
4. Store *Individual Health Care Plan/Emergency Response Plans* in the appropriate staff communication area while considering the importance of confidentiality.
5. Make sure there are processes to monitor when a child's URIS plan will expire.
6. Arrange for plan to be updated and staff retraining to be conducted every year.
7. See the Anaphylaxis section for additional policies and procedures related specifically to life-threatening allergies.

Communicable or Food-Borne Illness

Prevention

The following procedures are used to prevent outbreaks of communicable or food-borne illness:

- routine health practices
- cleaning and sanitizing schedules
- safe food handling practices
- disposable gloves are worn any time staff's hands may come in direct contact with blood (or body fluids containing blood) or staff have open cuts or sores on their hands

- staff monitor children's health and ask parents about unusual symptoms observed in children (diarrhea, vomiting, abdominal pain, etc.)
- staff encourage parents to inform the centre of diagnosed illness after a visit to the doctor
- staff document symptoms, diagnosed illnesses or absences due to illness in the daily incident record
- a toileting log book is maintained to help identify children with diarrhea as a simple warning system of an illness outbreak.

Outbreak of communicable or food-borne illness in centre

Director (or designated alternate) should:

1. Contact the public health nurse for requirements for specific illnesses. Be sure to ask about any special precautions for non-immunized children or pregnant staff/family members.
2. Contact the public health inspector if directed to do so by the public health nurse.
3. Inform the child care coordinator of the situation and public health authority's requirements and recommendations.
4. Provide regular updates to the child care coordinator and public health authorities.
5. Review the following procedures with all staff and make sure procedures are diligently followed:
 - proper sneezing and coughing etiquette
 - adult hand washing procedures
 - children's hand washing procedures
 - diapering and toileting procedures
 - cleaning and sanitizing procedures
 - procedures for the proper storage, handling and serving of food
6. Notify parents of illnesses present in the centre and the symptoms to look for in their child.
7. Share resources and information with parents.
8. Advise staff of requirements from public health or other authorities and make sure requirements are followed.

Staff should:

1. Review proper hand washing procedures with the children.
2. Go over sneezing and coughing techniques with the children.
3. Monitor bathroom visits to make sure procedures are followed.
4. Clean and sanitize toys, equipment and surfaces on a routinely basis.

5. Encourage parents to discuss any health concerns, symptoms or diagnosed illnesses.
6. Document health concerns, symptoms or diagnosed illnesses in the daily incident record.

Parents should:

1. Discuss any health concerns or symptoms with staff.
2. Tell staff about any diagnosed illnesses.

Contact with Public Health

The public health authority will be contacted for advice and direction if any of the following illnesses are present in the centre:

- any illness prevented by routine immunizations: diphtheria, measles, mumps, pertussis (whooping cough), polio and rubella
- gastrointestinal infections such as a diagnosed case of campylobacter, E. coli, giardia, rotavirus, typhoid fever, salmonella gastroenteritis, shigella gastroenteritis and yersinia gastroenteritis
- diarrhea, if there are 2 to 3 or more children within 48 hours, because it could be a serious gastrointestinal infection
- group A streptococcus (invasive diseases such as toxic shock syndrome and flesh-eating disease)
- haemophilus influenzae type b (Hib)
- hepatitis A virus (HAV)
- impetigo, if there is more than one diagnosed case in the same room within a month
- meningitis
- meningococcal disease
- strep throat and scarlet fever, if there are more than two diagnosed cases within a month
- tuberculosis

Public health will also be contacted about any bite that breaks the skin as blood tests may be required.

Notification to Parents and Staff

1. Parents and staff will be advised of any of the illnesses requiring contact with public health (above).
2. The notice will specifically advise parents to talk to their doctor and check their own child's immunization records about the following illnesses prevented by routine immunizations:
 - diphtheria
 - measles

- mumps
 - pertussis (whooping cough)
 - polio
 - rubella
3. The notice will specifically advise staff or family members who are or may become pregnant that they should talk to their doctor and check their immunization status for the following illnesses:
- chicken pox
 - parvovirus B19 (fifth disease or “slapped cheek” syndrome)
 - rubella
 - measles
 - mumps
 - CMV (cytomegalo virus)

Additional steps: Outbreak of communicable or food borne illness in larger community

Director (or designated alternate) should:

1. Monitor and respond to warnings from Manitoba Health and Healthy Living, Health Canada or the Canadian Food Inspection Agency. Be sure to visit their websites for additional information.
2. Advise all staff of recommendations from Manitoba Health, Health Canada, the Food Inspection Agency, the public health inspector or the child care coordinator. Make sure staff follow recommendations.

Serious Injury of a Child

Lead Staff (or designated alternate) should:

1. Help make the decision to provide first aid at the centre or call an ambulance.
2. Contact the parents or emergency contacts if parents cannot be reached.

Injury requiring first aid

Staff should:

1. Provide first aid according to the principles learned in their first aid training.
2. Document the incident as quickly as possible and provide an incident report to the parents and Lead Staff (or designated alternate).
3. Complete an assessment of the factors related to the incident. If necessary, make changes to prevent injuries.

Injury requiring medical attention

Lead Staff (or designated alternate) should:

1. Call 911 for an ambulance.
2. Call centre director (or designated alternate) at preschool site for assistance.
3. Provide a copy of the parent's permission for emergency medical treatment.
4. Accompany the child to the hospital with a copy of the parent's permission for emergency medical treatment, if parents are not at the centre.
5. Provide an incident report to the director (or designated alternate).

Staff should:

1. Attend to the child according to the principles learned in their first aid training until paramedics arrive.
2. Document the incident as quickly as possible.
3. Provide an incident report to the parents and Lead Staff (or designated alternate).

After the event, director (or designated alternate) should:

1. Complete an assessment of the factors related to the incident. If necessary, make changes to prevent future injuries. Work with Building Manager as needed.
2. Notify the child care coordinator within 24 hours by submitting a Serious Injury Notification on-line or by telephone, the centre's insurance provider and the board president.

Utility Failure or Sewage Back up

The following procedures will be used in the event of sewage back-up or the loss of one of the following utilities:

- heat
- water
- hot water
- electricity
- natural gas

Lead Staff (or designated alternate) should:

1. In the case of a loss of electrical power, figure out if it is specific to the centre or if the area is without power. If it is specific to the centre, see if it is a breaker that has blown and restore power.
2. Contact centre director (or designated alternate) at preschool site for assistance.

Director (or designated alternate) should:

1. Contact the appropriate utility or repair service immediately to report the problem and get an estimated length of time without service.
2. Contact the public health inspector to complete a risk assessment. The loss of any utility or sewage back-up may present a health risk to the children, staff and families.
3. Contact the local fire authority to determine if the loss of the utility or sewage back-up presents a fire safety risk (for example, fire protection systems/life safety equipment or access to exits is compromised) and if there are alternative requirements during a loss of fire protection.
4. Advise staff on procedural changes required by public health (for example, the use of hand sanitizers and single-use food handling and service items) or the fire authority (such as the requirement for a fire watch).
5. Enact *Evacuation Procedures or Emergency Closure Procedures* if required by the public health authority or fire authority.
6. Follow *Evacuation Procedures or Emergency Closure Procedures*, if required.
7. Inform the child care coordinator of situation and the requirements and recommendations from public health or fire authority. Terry Smith 204-268-6762

ANAPHYLAXIS (LIFE-THREATENING ALLERGIES)

The following roles and responsibilities outline the procedures that will be followed if:

- a child currently in the centre has been diagnosed with a life-threatening allergy
- a child about to enrol in the centre has been diagnosed with a life-threatening allergy

IMPORTANT

Call an ambulance immediately to take the child to the hospital when an adrenaline auto-injector is used.

The entire community has a role to play in ensuring the safety of children with a known risk of anaphylaxis in a community setting. To minimize risk of exposure and to ensure rapid response to an emergency, parents, children and centre staff must all understand and fulfill their responsibilities.

Director (or designated alternate) should:

1. Work as closely as possible with the parents of the child with a known risk of anaphylaxis. Regularly update emergency contacts and telephone numbers.
2. Immediately start appropriate planning for an *Individual Health Care Plan/Emergency Response Plan* that considers the age and maturity level of the child, the specific allergen and the centre's circumstances.
3. Submit a URIS application with parents, including *An Authorization for the Release of Information* form. Remind parents that it will need to be completed every year.
4. Have parents complete an *Authorization for Administration of Adrenaline Auto-Injector* form.
5. Contact the public health nurse (or contracted nursing agency if the public health nurse is not available) to develop the *Individual Health Care Plan/Emergency Response Plan* and schedule staff training.
6. Identify a contact person for the nurse.
7. Inform other parents that a child with a life-threatening allergy is in direct contact with their child (with written parental approval). Ask parents for their support and cooperation.
8. If it is not developmentally appropriate for the child to carry an auto-injector, make sure the adult responsible for that child wears it in a fanny pack. An alternative is to keep it in a safe, UNLOCKED location accessible only to the adults responsible.
9. Staff Training
 - Notify staff of the child with a known risk of anaphylaxis, the allergens and the treatment.
 - Have all staff (and possibly volunteers) receive instruction on using an auto-injector.
 - Inform all substitute staff about the presence of a child with a known risk of anaphylaxis. Be sure to advise them of the appropriate support and response, should an emergency occur.
 - Store the *Individual Health Care Plan/Emergency Response Plan* in the staff communication areas for easy access while keeping in mind the importance of confidentiality.

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- Arrange an annual in-service through the nursing service to train staff and monitor personnel involved with the child with life-threatening allergies.
10. Help with carrying out policies and procedures for reducing risk in the centre.
- Post allergy alert forms with photographs, in the staff room, kitchen, eating area and other appropriate locations (with written parental approval).
 - Develop safety procedures for field trips and extra-curricular activities.
11. Make sure there are processes to:
- Monitor when a child's *Individual Health Care Plan/Emergency Response Plans* will expire.
 - Annually review and submit a URIS Application form to make sure there is an *Individual Health Care Plan/Emergency Response Plan* for each child with a life-threatening allergy.
 - Monitor the expiry dates for children's adrenaline auto-injectors. Remind parents about expiry as needed.
 - From time to time, remind other parents in the centre how important it is to make sure packed lunches and snacks are allergen-free.

Responsibilities of all staff:

1. Receive annual URIS training in caring for a child with anaphylaxis.
2. Display a photo-poster in the child care centre (with written parental approval).
3. Discuss anaphylaxis with the other children, in age-appropriate terms.
4. Encourage children not to share lunches or trade snacks.
5. Choose products that are safe for all children in the centre (parental input is recommended).
6. Instruct children with life threatening allergies to eat only what they bring from home, if applicable.
7. Reinforce hand washing to all children before and after eating.
8. Facilitate communication with other parents.
9. Follow policies for reducing risk in eating and common areas.
10. Enforce rules about bullying and threats.
11. Leave information in an organized, prominent and accessible format for substitute staff.
12. Plan appropriately for field trips. Make sure auto-injectors are taken on field trips and emergency response plans are considered when planning the trip.

Responsibilities of the parents of a child with anaphylaxis:

1. Tell the centre director about the child's allergies and needs.

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2. Provide their child with an up-to-date auto-injector. If it is not developmentally appropriate for the child to carry it, parents should confirm the auto-injector is in a specified location (safe, UNLOCKED location accessible only to the adults responsible), or on the person of the adult responsible for the care of the child.
3. Make sure their child has and wears a medical identification bracelet.
4. Submit all necessary documentation as required.
5. Provide the child care centre with adrenaline auto-injectors before the expiry date.
6. Make sure that auto-injectors are taken on field trips.
7. Participate in the development of a written *Individual Health Care/Emergency Response Plan* for their child, which is updated every year.
8. Be willing to provide safe foods for their child, including special occasions.
9. Provide support to the facility and staff as required.
10. Teach their child (as developmentally appropriate):
 - to recognize the first signs of an anaphylactic reaction
 - to know where their medication is kept and who can get it
 - to communicate clearly when he or she feels a reaction starting
 - to carry his or her own auto-injector on their person (for example, in a fanny pack)
 - not to share snacks, lunch or drinks
 - to understand the importance of hand washing
 - to report bullying and threats to an adult in authority
 - to take as much responsibility as possible for his or her own safety

Responsibilities of all parents:

1. Cooperate with the child care centre to eliminate allergens from packed lunches and snacks.
2. Participate in parent information sessions.
3. Encourage children to respect the child with a known risk of anaphylaxis and centre policies.
4. Inform the staff before food products are distributed to any children in the centre.

Responsibilities of the child with anaphylaxis:

1. Take as much responsibility as possible for avoiding allergens, including checking labels and monitoring intake (as developmentally appropriate).
2. Eat only foods brought from home, if applicable.

3. Wash hands before and after eating.
4. Learn to recognize symptoms of an anaphylactic reaction (as developmentally appropriate).
5. Promptly inform an adult as soon as accidental exposure occurs or symptoms appear (as developmentally appropriate).
6. Wear a medical identification bracelet.
7. Keep an auto-injector on their person at all times, such as in a fanny pack (as developmentally appropriate).
8. Know how to use the auto-injector (as developmentally appropriate).

Responsibilities of all children (as developmentally appropriate):

1. Learn to recognize symptoms of anaphylactic reaction.
2. Avoid sharing food, especially with children with a known risk of anaphylaxis.
3. Follow rules about keeping allergens out of the centre and washing hands (as developmentally appropriate).
4. Refrain from bullying or teasing a child with a known risk of anaphylaxis.

CHEMICAL ACCIDENT PROCEDURES

The following procedures will be used in the event of a chemical accident:

- inside of the centre (for example, the inappropriate mix of household cleaners)
- in the area outside of the centre

Chemical Accident Inside of Child Care Building

Leader Staff (or designated alternate) should:

1. Enact evacuation procedures immediately.
2. Direct staff to follow *Evacuation Procedures*.
3. Call 911 for the fire department.

Chemical Accident Outside of Child Care Building

Lead Staff (or designated alternate) should:

1. Enact *Shelter-in-Place Procedures* **or** *Evacuation Procedures* based on instructions from the emergency response personnel
2. Follow: *Evacuation Procedures* **or** *Shelter-in-Place Procedures: Chemical Accident Outside of Building*

Shelter-in-Place Procedures: Chemical Accident Outside of Building

Lead Staff (or designated alternate) should:

1. Verbally direct senior staff to lead *Shelter-in-Place Procedures* and close windows and as many internal doors as possible.
2. Notify staff in playground to return indoors immediately.
3. Make sure all exterior doors are closed and locked.
4. Turn off breakers that control air flow (furnace/air conditioner).
5. Notify staff on outings away from centre to immediately seek the closest indoor shelter and call back with their location.
6. Call centre director (or designated alternate) to make sure preschool site is aware of situation and advise of the status of *Shelter-in-Place Procedures*.

7. Notify schools that the children cannot come to the centre until further notice. Make arrangements for the children's care.
8. Inform parents by phone as quickly as possible. Use a scripted message, if possible.
9. Direct parents to stay away from the area and listen to the local media for further updates on the situation.
10. If there is time and it is needed, assign specific staff to take additional measures to protect indoor air:
 - Cover and seal bathroom exhaust grilles, stove range hood and other openings to the outdoors as much as possible.
11. Inform staff and children when emergency response personnel say it is safe to leave the building.

Senior staff should:

1. Lead *Shelter-in-Place Procedures*.
2. Direct specific staff to close and lock exterior windows and to close as many internal doors as possible.
3. Take attendance to account for all children, staff and visitors.
4. Advise the Lead Staff (or designated alternate) of the status of *Shelter-in-Place Procedures*.
5. Assign specific staff to prepare for evacuation by:
 - Having the emergency backpack (including the first aid kit, child information records, staff emergency information, contact information schools) ready to go, should evacuation be ordered
 - Having required medications and specialized equipment for individual children with additional support needs ready.

After the event, director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event. Terry Smith 204-268-6762
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support.

BOMB THREAT PROCEDURES

The following procedures describe how we will respond to:

- a bomb threat received by telephone or in writing
- a bomb threat received and suspicious item found

IMPORTANT

If a bomb threat is received and/or a suspicious package is found:

- DO NOT use any form of wireless communication (cordless phones, pagers, cell phones, Blackberries, two-way radios, etc.).
- Contact the Lead Staff (or designated alternate) immediately to assess the situation
- Stationary (corded) telephone located in the kitchen

Bomb Threat Received by Telephone or in Writing

Staff member receiving a bomb threat by telephone should:

1. Use the *Threatening Telephone Call* form to record as much information as possible.
2. Notify Lead Staff (or designated alternate) IMMEDIATELY after the call and discuss information on the *Threatening Telephone Call* form.

Staff member finding a bomb threat in writing should:

1. Leave the note where it is and do NOT touch or move it (even if it has already been moved).
2. Notify Lead Staff (or designated alternate) IMMEDIATELY.

Lead Staff (or designated alternate) should:

1. Direct staff NOT to use any form of wireless communication.
2. Consult with centre director (or designated alternate) at preschool site. Determine if there is an immediate threat to safety based on the information available.
3. Call **911** using a stationary (corded) phone (Director may take this responsibility). Consult with police/fire for further steps.
4. In consultation with police/fire department, determine if there is an immediate threat to safety based on the information available and decide whether or not to evacuate.

5. Notify police of the caller's phone number if call display or call trace was successful.
6. Make sure the person who answered the threatening phone call or found the written message is available to be interviewed by police or emergency personnel.
7. If there is an imminent threat to safety:
 - Enact *Evacuation Procedures*. Do NOT use fire alarm.
 - Direct senior staff to lead *Evacuation Procedures*.
8. Assign specific staff to:
 - Go to the playground and tell staff to remain there or proceed to designated place of shelter.
 - Call staff and children on outings away from centre (using a stationary corded phone). Advise staff not to return to centre until further notice or to proceed to designated place of shelter.

Senior staff should:

1. Lead *Evacuation Procedures* if enacted.

After the event, the director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event. Terry Smith 204-268-6762
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support, public health nurse 878-9752 ext 3.

Bomb Threat and Suspicious Item

If a bomb threat is received and suspicious package, letter or object is found, there is an immediate threat to safety.

Lead Staff (or designated alternate) should:

1. Evacuate the immediate area where the suspicious item was found. Close the door to the area.
2. Direct staff not to use any form of wireless communication.
3. Enact the *Evacuation Procedures*. Do NOT use fire alarm.
4. Direct senior staff to lead *Evacuation Procedures* using only exits routes and areas that are free of suspicious items.
5. Call **911** using a stationary (corded) phone and state the nature of the emergency.
6. Notify police of the caller's phone number if call display or call trace was successful.
7. Make sure the person who answered the threatening phone call (or found the written message) and found the suspicious package is available to be interviewed by police.
8. Once outside, contact the centre director (or designated alternate) at preschool site.

Senior staff should:

1. Lead the *Evacuation Procedures*.
2. Assign specific staff to:
 - Go to playground and advise staff to remain there or proceed to designated place of shelter.
 - Call staff and children on outings away from centre using a stationary (corded) phone and advise staff not to return to centre and to proceed to designated place of shelter.

If suspicious item is found but no bomb threat has been received, the Lead Staff (or designated alternate) should:

1. Advise staff NOT to touch or move it (even if it has already been moved).
2. Evacuate the immediate area and close door.
3. Try to determine if it is suspicious and dangerous or if it is an ordinary item.
4. Call 911 using a stationary (corded) phone and consult with police for further steps.
5. In consultation with police, determine if there is an immediate threat to safety based on the information available and decide whether or not to evacuate.
6. Contact centre director (or designated alternate) at preschool site.

In the case of a suspicious powdery substance, all persons believed to have had contact with it must:

1. Gather together in a separate area away from those who did not have contact.
2. Stay to get the appropriate medical assessment and treatment.

After the event, the director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event.
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support.

THREATENING BEHAVIOUR PROCEDURES

The following procedures describe the response to threatening behaviour:

- inside the centre or on the property
- in the neighbourhood

Staff should:

1. Notify the Lead Staff (or designated alternate) immediately when aware of:
 - threatening behaviour inside the centre or on the property
 - threatening behaviour in the neighbourhood (either by seeing it or being told by the police)
 - a threat made in writing or received by telephone (do not move, touch or delete the evidence)
2. Call **911** for the police immediately if there is an immediate threat to safety.

Lead Staff (or designated alternate) should:

1. Tell staff in the daily staff communication log book to contact the Lead Staff (or designated alternate) immediately if a person who may become threatening arrives at the centre. For example, if a person has made a threat or is extremely upset such as:
 - a recently fired staff person
 - a parent concerned about a situation at the centre
 - a parent who has become angry, violent or made threats to take a child with respect to a custody dispute
2. If the threat is received in writing, by telephone or voice mail:
 - Call the police immediately. The police can help assess the level of risk to your safety and help you decide on next steps.
 - Do not touch, move or delete the threat or evidence so the police can investigate properly.
3. Advise and consult with centre director (or designated alternate) at preschool site about any threatening behaviour.

SHELTER-IN-PLACE PROCEDURES

Threatening Behaviour Inside Centre or On Property

Protective Spaces: Use bathroom area if possible (or evacuate out the closest, safest exit if necessary)

Lead Staff (or designated alternate) should:

1. Make the decision to enact *Shelter-in-Place Procedures*.
2. Direct senior staff to lead the *Shelter-in-Place Procedures*. Tell senior staff where the threatening person is and whether they seem to have a weapon or not.
3. If the person does not have a weapon:
 - Direct a senior staff member to call 911 for the police and centre director (or designated alternate) at preschool site.
 - Talk to the person. Try to calm them down.
4. If the person has a weapon:
 - Call **911** for the police immediately. Do not approach the person.
 - Take cover in the closest protective space.
5. Follow directions from the police about what to do next.
6. Give the police floor plans and information about the number of children and staff and where they are.
7. As soon as possible, notify staff on outings to stay where they are or to look for indoor shelter.
8. As soon as possible, notify schools that the children should not come to the centre until further notice. Make plans accordingly for the children's care.
9. As soon as possible, call centre director (or designated alternate) at preschool site if not contacted previously and advise of status of *Shelter-in-Place Procedures*.

Senior staff should:

1. Quietly direct staff to gather with children into the protective spaces as far away from the threatening person as possible.
 - If the threat is on the property, direct staff and children to quickly move inside, take cover or drop to the ground, depending on the situation.
 - If the threat is inside the centre, direct staff and children in the playground to go to the designated shelter-in-place immediately.
2. Assign specific staff to:
 - take attendance to account for all children and staff

- help children who need additional assistance
 - take required medications and specialized equipment for children with additional support needs if essential to their immediate safety and it is safe to do so
3. If safe to do so, advise Lead Staff (or designated alternate) about the status of *Shelter-in-Place Procedures*.

Staff should:

1. Gather children in the nearest protective space away from the threatening person.
2. Turn off lights.
3. If threat is on property, close and lock exterior windows.
4. If the threat is inside the centre, DO NOT close exterior blinds or curtains. Police need to see inside the centre.
5. Stay in protective spaces that are out of sight from doors and windows.
6. DO NOT leave protective spaces until told by the Lead Staff (or designated alternate).

After the event, the director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event.
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support.

SHELTER-IN-PLACE PROCEDURES **Threatening Behaviour in Neighbourhood**

IMPORTANT DO NOT leave the centre until the police tell you it's okay.

Lead Staff (or designated alternate) should:

1. Direct senior staff to lead *Shelter-in-Place Procedures*. Tell them the threat is in the neighbourhood.
2. Notify staff and children in the playground to come inside immediately.
3. Make sure exterior doors are closed and locked.
4. Notify staff with children on outings to stay where they are (if safe to do so) or find the closest indoor shelter. Have staff call back to say where they are.
5. Look at attendance records provided by staff to ensure all children and staff are accounted for.
6. Call centre director (or designated alternate) to make sure preschool is aware of situation and to advise about status of *Shelter-in-Place Procedures*.
7. Notify schools that the children cannot come to the centre until further notice. Make plans for the children's care.
8. Call **911** to make sure police know about the situation.
9. Follow directions from the police about what to do next.
10. Tell staff when it is safe to leave the protective spaces as directed by the police.

Senior staff should:

1. Direct staff to gather with children away from exterior windows and doors.
2. Assign specific staff to help children who need additional assistance.
3. Take attendance to account for all children.
4. Advise Lead Staff (or designated alternate) of status of *Shelter-in-Place Procedures*.

Staff should:

1. Gather children in areas away from exterior doors and windows.
2. Close and lock exterior windows.
3. If possible, close blinds or curtains.
4. DO NOT leave centre until advised by the Lead Staff (or designated alternate).

After the event, the director (or designated alternate) should:

1. Write and distribute a short letter telling parents about the event and any follow-up steps that will be taken.
2. Tell the Child Care Coordinator about the event. Terry Smith 204-268-6762
3. If necessary, call the Regional Health Authority to access the community crisis/trauma response team within 24 hours of the event for advice, resources or in-person support- 878-9752 ext 3

CONTROLLING VISITOR ACCESS

The following procedures describe how we control and monitor visitor access to ensure:

- staff are aware when parents and children arrive or depart
- staff are aware of expected or unexpected visitors
- people who do not belong in the centre are prevented from entering unnoticed

Preparation

- There are policies that ask parents to tell staff when an alternate person will pick up their child. If staff do not know the person, they will ask for ID.
- Staff need to be informed regarding custody arrangements and what to do if the non-custodial parent arrives at a time outside of the arrangements.
- Parents are informed in the parent policy manual that staff need to be advised of changes to who is allowed to pick up their child. Staff will then update the designated pick up list for the child.
- Parents and staff are informed in the parent and staff manual to be cautious and not allow other people to enter the centre as they are entering or exiting the centre. Staff need to be able to see and recognize the individual.
- When visitors are expected, staff will note it in the staff log book so all staff are aware. For example, this may include a different pick-up person, a utility repair person or practicum supervisor for an early childhood education student.
- If the visitor is unknown to the staff, staff must ask to see identification.
- Expected visitors are welcomed and escorted to the appropriate area in the centre.
- When we learn during the enrolment process, in an Inclusion Support Program meeting or through observation, that a child has a tendency to leave areas unescorted or is not fearful of strangers, all staff are informed. Staff are also required to pay particular attention to make sure the child remains safe.

Controlling and Monitoring Visitor Access

1. All doors are locked throughout the day except the main entrance door leading into the lobby of the building.
2. The interior lobby door is locked and equipped with a video intercom system.
3. The interior monitoring station is located on wall between washroom and kitchen.
4. When arriving at the centre, parents and visitors press the buzzer. Staff identifies person on the monitor and presses the door release. If person is unknown to them, staff must ask who they are, the purpose of visit and identification before allowing entry.
5. The closest staff to the monitor is responsible for responding to the intercom. New staff and substitutes are not to respond intercom until they are familiar with the families.
6. Staff are required to welcome parents and children into the centre, share pertinent information and help the child to get involved in the centre's activities.

7. Staff are required to sign children in and out on the attendance record.
8. Parents are required to directly tell a staff member when they are leaving the building, with or without their children and to not allow other people into the centre when entering or leaving the centre.
9. The doors are equipped with chimes. Staff are required to visually check when they hear the chime to make sure a child is not leaving without an appropriate adult.
10. When children and staff are in the playground, staff take a key to re-enter the centre.

SAFE INDOOR AND OUTDOOR SPACE PROCEDURES

The following procedures describe how we ensure:

- safe indoor spaces
- safe outdoor spaces

Staff should:

- Watch for any safety concerns throughout the day.
- Correct the situation to the best of their abilities and document what was done.
- Bring concerns to the attention of the Lead Staff (or designated alternate). Make sure action is taken, if needed.
- Note any safety concerns and related reminders about appropriate procedures in daily staff communication log book.
- Watch for suspicious activity in the neighbourhood and report it to the Lead Staff and the police, if necessary.
- Stay alert to their surroundings when in the playground or on outings.
- Trust their instincts and, if they feel uncomfortable in a place or situation, to gather the children and leave immediately.

Staff on opening shift should:

1. Complete the *Daily Safety Checklist – Indoor* and *Daily Safety Checklist – Outdoor*.
2. Correct any safety concerns to the best of their abilities and document what was done.
3. Give the checklists to the Lead Staff (or designated alternate).
4. Make sure the Lead Staff is aware of any concerns and things that need to be done.
5. Note any safety concerns and related reminders about appropriate procedures in the daily staff communication log book.

Staff on the closing shift should:

1. Do a walk-through and make sure all appliances are unplugged, the stove, TV is turned off, etc.
2. Note any safety concerns and related reminders about appropriate procedures in the daily staff communication log book.

Director (or designated alternate) should:

1. Make sure monthly and annual inspections are completed and documented on the appropriate checklists.
2. Complete and document any required repairs or actions. Work with building manager if the action required is the landlord's responsibility.
3. Review enrolment forms, Inclusion Support Program intake and review meeting minutes and URIS *Individual Health Care/Emergency Response Plan* as applicable for any specific requirements for a child with additional support needs.
4. Make any necessary changes to indoor or outdoor spaces to make sure children with additional support needs are safe. Work with building manager if the action required is the landlord's responsibility.
5. Communicate safety concerns or changes to procedures to all staff:
 - Note concerns in the daily communication log book.
 - Review at a staff meeting and, depending on how serious the situation is, share with the board of directors.
6. Make sure safety concerns that relate directly to parents or require a change in their behaviour are posted in a prominent area. If the concern is serious, write a letter to each parent.

STAFF TRAINING

The enhanced safety plan will be reviewed and specific responsibilities will be discussed with the director (or designated alternate) when a staff member is given responsibilities for fire safety or emergency response procedures.

Training for New Staff

New staff are required to:

1. Read the enhanced safety plan and discuss it with the director (or designated alternate).
2. Review the *Daily and Monthly Indoor Safety Checklists* with the director (or designated alternate) to learn how to control fire hazards and their responsibility to address any fire safety issues that they see. Staff are instructed to bring fire safety issues to the attention of the director. Issues not resolved by the director can be taken to the board.
3. Review *Individual Health Care Plan/Emergency Response Plans* for all children enrolled with anaphylaxis (life-threatening allergies). Be trained in the use of a child's auto-injector and child-specific avoidance strategies detailed in each individual plan.
4. Review several practice drills with the director (or designated alternate) to learn how to improve their participation and to have their questions answered.

The director (or designated alternate) will show new staff the locations of:

- staff communication log book (containing important information to read daily)
- emergency phone number list including:
 - > the centre's location address
 - > designated place of shelter
 - > contact information for schools serviced by the centre
- fire alarm pull stations
- fire extinguishers
- emergency backpacks that contain child information records and staff emergency information
- first aid kits
- a copy of the enhanced safety plan
- *Individual Health Care Plan/Emergency Response Plans* for all children enrolled with anaphylaxis (life-threatening allergies) or other applicable health conditions
- adrenaline auto-injectors for children with anaphylaxis

The director (or designated alternate) will discuss and demonstrate to new staff:

- when to use a fire extinguisher
- what type of fire extinguisher to use
- how to use the PASS method in the use of a fire extinguisher

Training for All Staff

All staff will:

1. Review their actions, as well as the actions of the children, after each practice evacuation or shelter-in-place drill and discuss ways for improvement.
2. Review how to use a fire extinguisher at least once a year.
3. Be retrained in the use of a child's auto-injector and child-specific avoidance strategies detailed in each *Individual Health Care/Emergency Response Plan* for children with anaphylaxis (life-threatening allergies) at least annually.
4. Be retrained in specific plans detailed in each *Individual Health Care/Emergency Response Plan* for children with other applicable health conditions at least annually.

BOARD OF DIRECTORS ROLES AND RESPONSIBILITIES

The roles and responsibilities of board members are outlined in our board orientation package indicating:

1. New board members are required to read the enhanced safety plan and to discuss it with the director (or designated alternate).
2. The board will review and discuss the enhanced safety plan at board meetings at least annually.
3. Board members will review annual fire, public health and child care centre inspection checklists to ensure that the director (or designated alternate):
 - addresses any fire safety issues
 - monitors that all procedures to control fire hazards are completed
 - makes sure all required inspections and maintenance of fire safety equipment are completed and documented as required
 - addresses any public health concerns
 - addresses any child care licensing non-compliance issues or other concerns
4. The board will encourage staff to bring fire safety or other safety issues to their attention as stated in personnel policies, during employment orientations and during annual reviews of enhanced safety plan with all staff.

STAFF AND BOARD ANNUAL REVIEW

The enhanced safety plan will be reviewed annually at the board meeting in April by:

- all supervisory staff and designated alternates
- the board of directors

Any necessary changes or revisions will be made including:

- increases or decreases in staffing levels
- increases or decreases of licensed number of children
- changes to rooms or floor spaces occupied by the child care centre
- changes to emergency procedures

If revisions are made, new copies will be printed with the revision date and submitted to the child care coordinator for review and approval. If the revisions are related to fire safety or fire evacuation procedures, a copy will also be submitted to the fire inspector for review and approval.

The revised enhanced safety plan will be:

- distributed to all supervisory staff and designated alternates
- posted in the child care centre for reference by the fire authority
- kept in the staff communication area for easy access and review by child care staff
- reviewed by child care coordinator
- reviewed by the fire authority

The enhanced safety plan will be reviewed annually with all staff at the staff meeting in June or after revisions have been approved.

Individual Health Care Plan/Emergency Response Plans (URIS)

Plans will be reviewed every year for each child enrolled with anaphylaxis (life-threatening allergies) or other applicable health conditions.

The director (or designated alternate) will monitor expiry dates for individual plans.