

**APPLICATION FOR A LICENSE TO OPERATE A  
SCHOOL AGE CHILD CARE PROGRAM**

Personal information on this form is collected under Regulation 2 of Prince Edward Island's Child Care Facilities Act and Regulations and will be used for the purpose of licensing programs; and maintaining and advertising a registry of licensed programs including a mailing list. If you have any questions about this collection of personal information, you may contact the Child Care Facilities Board, Department Social Services & Seniors, 902-368-6513.

If you have any concerns about freedom of information and protection of privacy in general contact the Department of Social Services & Seniors FOIPP Coordinator, 902-894-0304.

In order to apply for a license to operate a child care program, the following must be submitted to the Child Care Facilities Board:

1. Application for a License to Operate a Child Care Program - see pages 3 and 4
2. Comprehensive Business Plan - outline attached
3. Comprehensive Service Plan - outline attached
4. A letter from the Municipality stating the property is correctly zoned for a licensed child care facility.
5. Approved declaration for registration of a business name (Office of the Attorney General)

Upon receipt of the application for a license, the Secretary to the Child Care Facilities Board will arrange for inspection by the Fire Marshall's Office and Division of Environmental Health. The time frame for completion of inspections depends on the length of the waiting list for inspections at the time of the application. Also, final approval may be delayed if major renovations are required for the proposed facility (for example, requirement for exit stairs or additional washroom facilities). **Final approval cannot be given until a satisfactory inspection report from Provincial Fire Marshall's Office (Regulation 2 [c]) and a satisfactory inspection report from Division of Environmental Health (Regulation 2 [c]) are submitted to the Child Care Facilities Board, as well as, satisfactory completion of #1 - #4, as stated above.** Inspections may be initiated upon receipt of an Application for a License to Operate a Child Care Facility and a letter from the Municipality regarding the zoning of the property. (#1 and #4, as stated above)

All documents received by the Child Care Facilities Board in relation to the application for a license to operate a child care facility (i.e., business plan, service plan) are considered to be confidential. All documents must be received one week prior to the Child Care Facilities Board meeting to allow time for review.

## **POLICY FOR ISSUANCE OF A PROVISIONAL LICENSE**

Upon satisfactory completion of all licensing requirements, the Child Care Facilities Board will issue a Provisional License to a new facility. A Provisional License shall expire not later than six months from the date of issue, in order to enable a facility to operate on a conditional basis. During this time, final inspection will be made by the Child Care Facilities Board Prior to licensing.

As the Board will require time to review applications and service plans, and carry out preliminary inspections for fire and health as outlined above, **owners/supervisors will be required to submit applications at least one week prior to the Child Care Facilities Board meeting** to allow for this to be carried out. As all Provisional Licenses are to be issued in the name of the supervisor, the identity and qualifications of the supervisor must be known before a Provisional License is issued.

The above policy applies to both short and long-term facilities, and any exception will be in extenuating circumstances and at the discretion of the Board.

**DEPARTMENT OF SOCIAL SERVICES & SENIORS  
APPLICATION FOR A LICENSE TO OPERATE A CHILD CARE PROGRAM: PART I  
NEW APPLICATION**

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NAME OF CHILD CARE FACILITY

FACILITY TELEPHONE NO.

LOCATION OF CHILD CARE FACILITY

MAILING ADDRESS OF CHILD CARE FACILITY

**TYPE OF LICENSE APPLIED FOR:**  EARLY CHILDHOOD CENTRE  DAYCARE HOME  SCHOOL AGE CHILD CARE CENTRE

**FACILITY WILL BE OPERATED BY: (INDICATE ONE)**

<input type="checkbox"/> PRIVATE OWNER	NAME: _____ ADDRESS: _____ LEGAL STATUS: _____
<input type="checkbox"/> COMMUNITY ORGANIZATION  PRESIDENT  SECRETARY	ORGANIZATION NAME: _____ NAME: _____ ADDRESS: _____ NAME: _____ ADDRESS: _____ LEGAL STATUS: _____
<input type="checkbox"/> OTHER GROUP OR ORGANIZATION  OFFICER (1)  OFFICER (2)	ORGANIZATION NAME: _____ NAME: _____ ADDRESS: _____ NAME: _____ ADDRESS: _____ LEGAL STATUS: _____

**TYPE OF PROGRAM:**

<b>SESSIONS: (CHECK APPROPRIATE ONE)</b>	
<input type="checkbox"/> FULL DAY	HOURS OF OPERATION: _____ TO _____
<input type="checkbox"/> 1/2 DAY A.M. ONLY	DAYS OF OPERATION (SPECIFY): _____
<input type="checkbox"/> 1/2 DAY P.M. ONLY	MONTHS OF OPERATION (SPECIFY): _____
<input type="checkbox"/> FULL DAY WITH 1/2 DAY OPTION PROPOSED OPENING DATE OF FACILITY: _____	
<b>ENROLLMENT:</b>	
TOTAL NUMBER OF CHILDREN SUPERVISOR WILL ALLOW PER SESSION: _____	
WILL YOU REGISTER CHILDREN (CHECK ALL THAT APPLY):	
<input type="checkbox"/> UNDER 1 YR <input type="checkbox"/> 1 YR OLD <input type="checkbox"/> 2 YR OLD <input type="checkbox"/> 3 YR OLD <input type="checkbox"/> 4 YR OLD <input type="checkbox"/> 5 YR OLD <input type="checkbox"/> 6 YR OLD <input type="checkbox"/> 7-10 YR OLD	

**STAFF (PLEASE USE BACK OF FORM IF NECESSARY)**

SUPERVISOR:	NAME:	HOME ADDRESS:	HOME PHONE:
PROGRAM STAFF	NAME:	HOME ADDRESS:	HOME PHONE: [ ] FULL TIME [ ] PART TIME
	NAME:	HOME ADDRESS:	HOME PHONE: [ ] FULL TIME [ ] PART TIME
	NAME:	HOME ADDRESS:	HOME PHONE: [ ] FULL TIME [ ] PART TIME
	NAME:	HOME ADDRESS:	HOME PHONE: [ ] FULL TIME [ ] PART TIME
SUPPORT STAFF	NAME:	[ ] FULL TIME [ ] PART TIME	

**APPLICATION FOR A LICENSE TO OPERATE A CHILD CARE PROGRAM**

In accordance with Regulation 33. (1) and (2) of the Regulations to the Child Care Facilities Act, which states:

"As a condition of renewing the license of a facility, the supervisor and any other program staff person who has been employed in any facility for three years or more shall have successfully completed at least one unit of continuing education during the three year period preceding application for renewal."

"The supervisor shall be responsible for providing evidence of compliance with subsection (1) with the application for license renewal."

Support Staff are not required to complete the Continuing Education requirements.

**CERTIFIED STAFF:** Prior to opening, centres are required to have 2 staff who meet certification requirements.

NAME	TYPE OF CERTIFICATE	EXPIRY DATE

<b>SIGNATURE OF APPLICANT:</b> _____ <b>ADDRESS OF APPLICANT:</b> _____ <b>PHONE NO. OF APPLICANT:</b> _____ <b>DATE OF APPLICATION:</b> _____	A \$25.00 per year, non-refundable licensing fee must accompany all applications. A cheque or money order payable to Dept. of Social Services & Seniors is satisfactory. Please do not send cash in the mail. A receipt will be issued for such payment. Please return form to: Child Care Facilities Board, c/o Dept. of Social Services & Seniors, 161 St. Peter's Road, PO Box 2000, Charlottetown, PE, C1A 7N8.
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**Note: please return pages 3 and 4 with your licensing application.**

## **COMPREHENSIVE BUSINESS PLAN**

Applicants must submit the following information, typed and double spaced.

### **1. Cover Page**

- legal name of business; (name must be legally registered with the Office of the Attorney General, 902-368-4550 and verification attached);
- date of preparation of business plan;
- name, address, and phone number of the business (centre) or contact person;

### **2. The Business**

- Description:
  - form: sole proprietorship, partnership, corporation (profit or non-profit);
  - size: number of spaces, number of employees, size of facility;
- Management:
  - owner and/or director: names, what strengths do they bring to the business (experience, expertise, etc.).

### **3. The Opportunity**

- The Service:

Describe what you will offer. Outline hours per day and days per week of your operation. Describe unique or innovative features. Do you have plans to modify or expand in the future?

- The Market:

Who are your potential customers?

How does your service satisfy their needs:

Are there other types of early childhood centres available in your area? Do they provide care for school age children?

Is enrollment in other centres increasing or decreasing? Why?

Strengths and weaknesses: compare your centre with theirs (size, reputation, location, cost, hours, ages of children, nature of program, etc.);

Pricing: Can you offer competitive rates?

- Promotion:

How do you plan to advertise/promote your centre?

#### **4. Production**

- Location:

What makes your location suitable?

- Facilities:

Are facilities owned or leased? State the terms.

Describe your facilities. (Be brief - detailed description will be included in service plan.)

Will renovations be required? At what cost?

What will be your capacity (number of spaces) for this centre?

- Materials and Supplies:

Detailed list to be provided in Service Plan.

- Personnel:

How many staff do you plan to hire?

Will owner be included in child-staff ratio?

What additional skills or training will be required for your staff?

What will be the cost of training?

List the compensation and benefits that will be provided for each position. Include salaries, benefits, overtime, and cost for substitutes.

- Set Up:

How long will it take to acquire facilities, equipment, personnel, etc., and to be ready to begin operation?

#### **5 Financial Data**

- Provide detailed statement of projected income and expenses for your first year of operation, including cash flow trends.

## **COMPREHENSIVE SERVICE PLAN**

A comprehensive service plan is a written service plan that demonstrates to the satisfaction of the Child Care Facilities Board the applicant's ability to provide a safe and effective child care program and includes a description of:

- (1) the proposed child care program, including the child care philosophy on which the program will be based;
- (2) the delivery of the child care program;
- (3) the nature and scope of parental involvement in the child care program,
- (4) staff positions, responsibilities and qualification requirements;
- (5) administrative policies and procedures;
- (6) utilization of the indoor space and the outdoor play space of the day care facility, including furnishings and equipment.

Service plans shall be organized with a Table of Contents according to the format outlined on the following pages.

Service plans are evaluated subject to Regulation 27 and in accordance with policy, procedures and guidelines found in the Child Care Facilities Act, Regulations and Guidelines. The service plan must be approved before a provisional license is issued.

In order to determine the applicant's ability to provide a safe and effective child care program, the following information and format is required in the service plan.

### **Program:**

The description of the child care program shall include:

- child care philosophy of program;
- approaches for developing and stimulating the social, physical, intellectual, creative, and emotional needs of children (example, through the use of activity centres, equipment, etc.)
- role of staff in facilitating children's development;
- specific philosophies of an integrated program for special needs children (if such care is provided);
- written discipline policy (see Regulation 26) specifying:
- how staff communicate expectations, guide children's behaviour, set limits and apply consequences;

- a rationale for this policy;
- procedures for informing parents of policy;
- implementation of policy including orientation and monitoring of staff.
- organization of daily routines for each group of children for eating, individual and group activities, indoor and outdoor activities, and provision for snacks and meals.
- description of one week's activities (e.g., crafts, field trips, themes)
- methods of ensuring children's hygiene practices, for example, hand washing before and after eating;
- methods for accommodating the special needs of children with disabilities (if included in the program);
- food service approach (food provided by license holder or parents, where is it prepared?);
- sample menus for meals and snacks (minimum 2 weeks);
- meal time routines - timing of meals for groups, child wash-up procedures;
- provision for food allergies and special diets;
- emergency evacuation procedures (see Guidelines to Regulations, Monthly Fire Drills: How to Plan a Procedure).

**Parental Involvement:**

The nature and scope of parental involvement shall be described with regard to:

- methods of:
  - ensuring parent awareness of daily program;
  - dealing with concerns, expectations of parents;
  - communicating child's progress to parent;
- provision of parent handbook, including above information, program description, policies, and procedures.

**Staffing:**

The following staffing information shall be included:

- job descriptions -- duties, responsibilities and qualifications of: director/supervisor, program staff and any staff performing support functions;



- organizational chart showing reporting relationships of license holder, director/supervisor, program staff and support staff.
- designated alternate director/supervisor;
- personnel policies and procedures for:
  - staff supervision, evaluation and discipline;
  - staff orientation and training including:
    - certification
    - first aid training;
  - system for scheduling of staff, including assignment to groups, cover-off relief staff, staff breaks;
- staff handbook containing all of the above staffing information.

### **Administrative Policies and Procedures:**

Administrative policies and procedures shall include:

- health and safety policies (approved by PEI Health and/or Fire Inspectors where applicable);
- operating policies and procedures regarding such matters as:
  - hours of operation, holiday closures, fees, late pick up, admission, fees during vacations and transportation of children;
- evidence of liability insurance coverage; \$1 million minimum coverage is required, which must extend to indoor and outdoor activities, as well as any transportation provided by the centre for field trips or outings;
- names and phone number of back-up staff;
- sample forms, such as registration form, child attendance, medication administration, accident/incident report forms and required parental approvals for emergency medical treatment and field trips (attached copies of emergency medical treatment and field trip forms are to be used by all centres).

**Facility:**

- A description of the facility, including:
  - indoor floor plan:
    - room dimensions
    - windows, exits
    - floor surfaces
    - storage for children's belongings
    - storage of first aid supplies
    - storage for hazardous materials and equipment
    - furnace area
    - food preparation, eating and storage areas
    - washrooms
    - water sources
    - sleeping areas
    - room layout and usage plan showing (can be included in the floor plan):
  - basic furniture:
    - shelving - fixed and moveable
    - dividers
    - tables and chairs;
  - utilization of the outdoor play space, including a plan showing:
    - fixed equipment
    - fencing
    - gates
    - access from building
    - list of portable equipment
    - shaded and sheltered areas
    - play and protective surfaces, for example grass, asphalt, sand, cushioning;
  - inventory of indoor and outdoor equipment, toys and materials.

**NOTE:**

Readers are cautioned that the policies and administration guidelines are subject to change without notice, at the discretion of the Child Care Facilities Board.

**SAMPLE FORM -- EMERGENCY MEDICAL FORM**

In the event of a serious injury to my child, \_\_\_\_\_, and the supervisor/staff of the \_\_\_\_\_ centre are not able to reach me (or my/our designate), I hereby give permission for the supervisor or designated staff person to act on my behalf in obtaining and/or authorizing emergency medical treatment for my child. I understand that any treatment would be on the advice of a qualified medical doctor.

SIGNED: \_\_\_\_\_ (MOTHER) \_\_\_\_\_ (DATE)  
\_\_\_\_\_ (FATHER) \_\_\_\_\_ (DATE)

**SAMPLE FORMS - FIELD TRIPS**

**1. GENERAL PERMISSION FOR REGULAR TRIPS:**

I, \_\_\_\_\_, give permission for my child, \_\_\_\_\_, (the rink) \_\_\_\_\_ (Wednesday mornings) to go to \_\_\_\_\_, on \_\_\_\_\_, from \_\_\_\_\_ (November 15) to \_\_\_\_\_ (April 1) \_\_\_\_\_ (name of centre) with the staff and children of the \_\_\_\_\_.

(time)  
I understand that the staff and children will be leaving the centre at \_\_\_\_\_ and returning at \_\_\_\_\_ (time). I also understand that they will be travelling by \_\_\_\_\_ (car, walking) \_\_\_\_\_.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**2. SPECIFIC PERMISSION FOR ONE TIME ONLY TRIPS:**

I, \_\_\_\_\_, give permission for my child, \_\_\_\_\_, to go  
(Rainbow Valley) (date)  
to \_\_\_\_\_ on \_\_\_\_\_, with the staff and children of the  
\_\_\_\_\_ centre. I understand that the children and staff will  
(time) (time)  
be leaving at \_\_\_\_\_ and returning at \_\_\_\_\_. I also  
(in a rented van, in parents' cars,  
etc.)  
understand that the children and staff will be travelling \_\_\_\_\_.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**INCIDENT REPORT**

Name of Child: \_\_\_\_\_ Date: \_\_\_\_\_

Time: \_\_\_\_\_ Where/Place: \_\_\_\_\_

Note to Parents:

Your child was not injured and this is not an injury report: this report is used when something happens which does not require significant first-aid treatment, but which may be important to your child. If you have any questions, please contact the supervisor or designate of the child care centre.

NOTIFICATION OF PARENT OR GUARDIAN:

Who was notified: \_\_\_\_\_ How: \_\_\_\_\_ Time: \_\_\_\_\_

Comment: \_\_\_\_\_  
\_\_\_\_\_

DESCRIPTION:

What happened? \_\_\_\_\_  
\_\_\_\_\_

ADDITIONAL COMMENTS OR INFORMATION:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Supervisor or Designate: \_\_\_\_\_

Date: \_\_\_\_\_

Permission to reprint this report granted by Daybreak Parent Child Centre, St. John's, NF

**INJURY REPORT**

Name of Child: \_\_\_\_\_ Date: \_\_\_\_\_

Time: \_\_\_\_\_ Where/Place: \_\_\_\_\_

**NOTIFICATION OF PARENT OR GUARDIAN:**

Who was notified: \_\_\_\_\_ How: \_\_\_\_\_ Time: \_\_\_\_\_

Comment: \_\_\_\_\_

**DESCRIPTION:**

What happened? \_\_\_\_\_

What part of the body was involved? \_\_\_\_\_

Was the skin broken? Yes No Bruised? Yes No Bleeding? Yes No

If so, describe: \_\_\_\_\_

Was breathing impaired? Yes No If so, where and how? \_\_\_\_\_

Was child unconscious, dizzy, etc? If so, describe: \_\_\_\_\_

Was first-aid measures were taken and by whom? \_\_\_\_\_

Did the person applying first-aid hold a valid first-aid certificate? Yes No

Signature of Supervisor or Designate: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

Permission to reprint this report granted by Daybreak Parent Child Centre, St. John's, NF

#### Note to Staff:

This report form is used to report injuries or when the staff feels that an injury may have occurred based on the circumstances. For example, if a child falls from a high place, or is struck on the head, but no bruising or abrasion shows up before the child leaves the child care centre, the teacher will still use an injury report. If injury occurs, parents are contacted before the child goes home, if possible, and the injury report is sent home with the child. Injury reports are reviewed by the supervisor or designate, with a copy to the child's file.

Sometimes children ask to have band-aids or ice applied for minor scrapes and bruises. The teacher can apply there as she sees fit, but this does not mean that the child has been injured. If the child is involved in an incident which does not result in injury, even if first aid is applied, the parent will receive an incident report, not an injury report. Incident reports are reviewed by the supervisor with a copy to the child's file.

## **EARLY CHILDHOOD DEVELOPMENT ASSOCIATION**

### **MISSION STATEMENT**

The Early Childhood Development Association of Prince Edward Island is a provincial non-profit organization committed to promoting and supporting the quality of early learning and childcare programs and services for our Island's children and families.

The Early Childhood Development Association was organized in 1974, and incorporated as a non-profit organization in 1975. The E.C.D.A. de-centralized into 4 Regional Chapters, one in West Prince Region, East Prince Region, Queens County and Kings County.

The E.C.D.A. is governed by a Provincial Executive. Individual membership, generally numbers around 200, and is open to all those interested in the field of early childhood.

### **GOALS:**

The Early Childhood Development Association strives to:

- Build an educated workforce who is dedicated to life-long learning;
- Contribute to partnerships and networks that support the healthy development of our young children;
- Provide information to families;
- Encourage research and projects that support early childhood education and care; and
- Promote a strong membership



## **EARLY CHILDHOOD DEVELOPMENT ASSOCIATION (ECDA) LIABILITY INSURANCE POLICY**

As required in Regulation 2 of the Regulations to the Child Care Facilities Act, "An applicant for a license shall on initial application, 2(c) on request, provide evidence, in the form of copies of certificates ..... of adequate coverage for liability insurance extending to both indoor and outdoor activities conducted by the facility ..."

According to Guideline 4 for this regulation, "the Child Care Facilities Board considers \$2 Million to be adequate coverage for liability insurance for child care facilities. This coverage must extend to indoor and outdoor activities, as well as any transportation provided by the centre for field trips or outings.

The Early Childhood Development Association's Liability Insurance Policy has \$2 Million coverage, and is available to all licensed centres who are members of the Association. Centre memberships and insurance premiums are quoted yearly.

For more information, go to the Early Childhood Development Association's website and click on Insurance. [www.ecda.pe.ca](http://www.ecda.pe.ca)

This policy is presently administered by:

Early Childhood Development Association of PEI  
P.O. Box 23055, 40 Enman Crescent,  
Charlottetown, PE, C1E 1Z6  
**Phone: 368-1866**

