

Quality Early Learning Network

Provincial Five-Year CCEYA Legislative Review

Reducing Administrative Burden in Child Care

The five-year legislative review of the *Child Care and Early Years Act* is occurring at an unprecedented time in Ontario. Virtually overnight, **COVID -19** shut down the province including both the licensed child care sector and the education sector for more than four months, leaving children, families, educators and employers scrambling.

Updating and revamping the CCEYA at this time underlines the larger crisis facing the sector and the children and families that it serves. COVID – 19 has demonstrated that a strong and viable licensed child care sector is an essential service, not only for the healthy development of children but also for the functioning of a strong economy, especially as it enables women to participate more effectively and fully in the workforce.

As operators on the front lines we have a number of policy and technical recommendations that will improve the quality of child care while reducing the regulatory burden on providers. Child care is complex. The funding formula is opaque and inadequate. The layers of regulation by government are cumbersome.

However, our collective challenge is that the 5 -year review of the legislative and regulatory framework is only one element of a system that, even prior to the pandemic, was in crisis. This review cannot be done in a vacuum. It is but one component of a much bigger issue: the continued viability of the child care and early learning sector.

The COVID -19 pandemic has exacerbated fundamental challenges facing the sector:

- Staffing shortages across the province;
- Inadequate funding; and
- The lack of an integrated approach that ensures effective collaboration between licensed operators, public health, CMSMs/DSSABs and Boards of Education.

The five-year review needs to lead to:

- Secure, consistent funding streams that allow for innovative and flexible responses to changing circumstances; and
- Effective, mandated collaboration between licensed operators, public health, CMSMs/DSSABs and Boards of Education with the goal of maximizing the use of available resources to meet the needs of children and their families in a seamless, integrated manner.

The review of the *Child Care and Early Years* is not only timely, but essential, to enable the sector to better meet the needs of both children and their families. **COVID – 19** demonstrates the importance of responsive and nimble legislation and regulation that supports quality during both “normal” circumstances and in times of crisis.

The QELN believes that the following four broad policy objectives need to inform the foundation of the review:

- 1) Affordability, accountability and sustainability matter** - The *CCEYA* must support high quality while minimizing the red-tape and unnecessary bureaucracy that limits the ability of licensed operators to respond quickly and effectively to the needs of children, families and the communities.

- 2) **Cooperation and collaboration between the child care sector and the education sector matters-** Align the **Education Act and the CCEYA** to streamline the delivery of a collaborative, integrated system of child care and early learning.
- 3) **Children and families matter - The quality of their daily lived experiences must be at the forefront of legislative and regulatory review for the licensed child care and education sectors.** The strength of our economic recovery depends critically on the success of the review.
- 4) **Balanced, risk based regulatory framework** - The **QELN** is making several recommendations to reduce red tape and duplicative administrative requirements. We are NOT recommending an unlicensed, unregulated patchwork of care.

Both centre- based and home-based child care must continue to be licensed and accountable to families and to funders. A licensed system is also more likely to be compliant when there are public health and other measures required to protect our youngest citizens. Furthermore, a licensed, accountable system is able to quickly respond in a crisis while maintaining quality and the legislation needs to allow for this. The recommendations of the **QELN** are presented in this context – building legislation and regulations that support and enhance quality experiences, while minimizing the administrative burden.

Pedagogy is about the quality of the child’s experience and *How Does Learning Happen? Ontario’s Pedagogy for the Early Years*, makes clear that quality is directly impacted by the level of engagement of not only the children but their families and the educators as well.

The QELN vision: licensed, regulated, accountable child care that provides high quality, safe experiences for children and their families and where unnecessary red tape and administrative requirements do not consume time, effort and energy which takes away from that which is most important: creating early learning and care environments in which children, families and educators belong, can express themselves, are able to actively engage and whose well-being is supported.

The **QELN** believes that this is the time to address and resolve longstanding challenges in the sector. The Five-Year review is an opportunity for government and the sector to be bold and innovative. The pandemic has taught us that for the sector to grow and prosper we will need to do things differently. The review is not merely an opportunity to make minor amendments to the regulatory framework to reduce the administrative burden and reinforce the importance of quality child care and early learning in licensed centres and home-based care. It is an opportunity to ensure that the updated regulatory, policy and funding framework ensures the sustainability of a flexible licensed child- care sector that meets the needs of the new normal. The new system that emerges must be one that is integrated, properly funded and of high quality. Children and families deserve nothing less and now our economy depends on it.

Licensing and regulation matter; the **Quality Early Learning Network** is recommending a reduction in red tape and duplicative administrative requirements. The **QELN** is NOT recommending an unlicensed, unregulated patchwork of care. Both centre based and home based child care must continue to be licensed and accountable to families and to funders. A licensed system is also more likely to be compliant when there are public health and other measures required to protect our youngest citizens. Furthermore, a licensed, accountable system is able to quickly respond in a crisis while maintaining quality and the legislation needs to allow for this. The recommendations of the **QELN** are presented in this context – building legislation and regulations that support and enhance quality experiences as opposed to creating an administrative burden.

QELN Bold Ideas for Change

The **QELN** believes that this is the time for bold and innovative initiatives that will address and resolve longstanding challenges in the sector. The Five-Year review is not merely an opportunity to amend legislation to reduce the administrative burden and reinforce the importance of quality early learning and care in licensed centre and home-based early learning and care.

What?	Why/Rationale
<p>Clarify the role of the CMSMs/DSSABs as service system managers. Reduce duplication of oversight between the Province and Municipalities (CMSMs and DSSABs)</p>	<p>Agencies in some Municipalities are being inspected annually by the Ministry and by the Municipality (Toronto – Assessment for Quality Improvement (AQI) – lots of overlap and duplication in the inspection process that is not necessary). Not only does this create considerable additional red tape, there are also conflicting expectations which can be confusing for agencies/educators/home child care providers. In times of emergency/crisis such as COVID -19 clarity as to who is responsible for what is absolutely critical. Jurisdictional confusion results in delays,</p>
<p>Enshrine the requirement for collaboration between school boards and the early learning and care sector in the legislation. Create a separate set of regulations for Before and After School programs that align more closely with the developmental needs of kindergarten and school age children, and reflect the requirements that exist through their school day. COVID 19 has demonstrated the essential need for active collaboration between Boards of Education and the early learning and care sector. For example, plans for partial week attendance to support smaller cohorts of children are now being developed by Boards with little or no consultation or collaboration with the child care sector. How will parents cope with the expectation to reopen the economy whilst their ability to work remains compromised?</p>	<p>Many of the regulations imposed on our programs do not exist throughout the school day, and are not consistent with our purported view of the child (and educator) as competent and capable. The volume of policies and rules are daunting for our staff to know and implement; they result in an administrative burden that often impedes our educators’ ability to fully engage with their children and develop enriching programs.</p>
<p>Update CCLS and the authorization categories in place to support more efficient operations. Streamline the process and reduce unnecessary red-tape.</p>	<p>Currently, only one person (the licensor) is permitted to upload documents and view everything (e.g. upload health inspection reports or download a licence.) Multi-site operators would benefit from the introduction of different levels of authority. This would enable Site directors to upload information. Different levels of authority could be balanced with restrictions as to access and capacity.</p>

Fully implement Tiered Licensing for centre based child care.	Licensing visits were supposed to be on a tiered system, with fewer visits to centres that are doing well – but this happens only for a few sites.
Introduce Tiered Licensing for Home Child Care Agencies.	This provides an incentive for agencies. Also, may look slightly different than centre-based tiered licensing process.
Actively allow for and support outdoor education and increase opportunities for children to be outside more often by eliminating the requirement that outdoor time must be at 100% ratio. Allow for 2/3 ratios outdoors when there is no climber or climbing equipment in the yard/area and it is fenced/ Additionally. All for the licensing of outdoor environments (i.e. forest school concept)	There is increasing evidence the supports the value of nature based outdoor education for children. Supports this concept to be available to all families regardless of geography and financial ability.
<p>Ensure consistency amongst Program Advisors</p> <ul style="list-style-type: none"> • The Ministry needs to ensure that its Program Advisors are interpreting and enforcing the requirements of the Act in a consistent manner from program to program and region to region. • The importance of consistency has been reinforced by the experience of developing a coordinated, rapid response to the COVID – 19 pandemic. 	<p>Multi site organizations often have multiple program advisors supporting their programs. Inconsistencies in how the Act and its requirements are interpreted can cause confusion amongst staff and management. Examples include what language they want to see in required policies, the definition of “written documentation”, and expectations for medication forms/labels.</p> <p>This results in receiving non-compliances for something that had been previously approved by another Advisor, which greatly impacts tiered licensing, inspection records and the workload/stress of staff and Supervisors.</p>
Create and implement a province wide campaign to educate parents and families/communities on licensed home child care and its importance in the early learning sector.	<p>Many families/communities are unaware that licensed home child care exists and its benefits and flexibility for families. Lack of knowledge on the service limits accessibility to the licensed early learning and care sector.</p> <p>The licensed home child care sector has demonstrated its capacity to respond quickly and flexibly during the COVID-19 pandemic.</p>
Modernize language in CCEYA – “child with special needs”	

QELN “Big Picture” Recommendations for Legislative Amendments to the *Child Care and Early Years Act, 2014*

The **QELN** has a number of solutions focussed recommendations (see Appendix One below). The recommendations range from significant to small but nonetheless meaningful. There are two areas in particular where changes to the legislation would reduce the administrative burden and increase the capacity to focus on quality programs with relationships between children, families and educators at the centre.

1) STAFFING

- Staff Qualifications: With respect to all **Before and After School Programs**, the following are also qualified employees: These recommendations would reinforce the necessary collaboration between education and child care.
 1. An employee with a diploma or degree in child and youth care.
 2. An employee with a diploma or degree in recreation and leisure services.
 3. A member in good standing with the Ontario College of Teachers. O. Reg. 126, s.36(1)
- Amend the Director Approval process by moving the responsibility for Director Approval/a person to take the place of an RECE process, especially in licensed before and after school programs from MEDU to Operators. Operators should be responsible for developing, implementing and maintaining processes based on requirements set by MEDU to ensure that staff are to implement programs that meet or exceed the goals and expectations of the licensed child care sector.
- In multi-site operations, qualified staff should be able to work at any of the sites operated by the agency.
- Allow Operators to hire staff who have not yet completed their CPR/First Aid as long as there are staff who hold these certifications on site. Staff would have to obtain their CPR/First Aid with the first three months of employment.

2) STREAMLINE the LICENSING PROCESS

- Amalgamate/merge/synchronize the legislative and regulatory requirements between the Education Act and the Child Care and Early Years Act so that there no differences between the expectations for children when they are in school and when they are in child care. (Particularly with respect to the environment). Don't duplicate existing requirements in the CCEYA. The critical importance of this recommendation has been reinforced by the advent of the COVID – 19 Pandemic. When schools and child care do not collaborate, parents and children are left hanging. For example, if, in September 2020, schools reopen only partially, parents who do not have access to licensed child care will find themselves with limited work opportunities. However, close collaboration between schools and centres could result in a seamless delivery of services that incorporate both school and child care.
- Wherever there are applicable Municipal by-laws and requirements (Public Health, Fire etc.) in play, don't duplicate these requirements in the CCEYA. Again, the COVID -19 Pandemic demonstrates the critical need for close, working relationships between Public Health and the child care sector. As the sector, reopens, it is in compliance with newly created public health requirements, that in some instances, supersede CCEYA requirements. Public health is part of

the municipal infrastructure which further reinforces the need for clarity around service system management and the role of CMSMs/DSSABs.

- Ensure multiple non-compliances aren't identified for a single issue/problem and allow opportunities to rectify low or moderate risk non-compliances immediately.
- Initiate the practice of uploading documents (insurance certificates, first aid certificates, playground inspections) through CCLS for review prior to inspections. Any opportunities to reduce the need for administratively focused visits is a) an opportunity to use visits as a time to review and support quality programming and engagement between educators and children and b) an opportunity to reduce the number of contacts, something that COVID -19 has taught us far too much about.
- Remove the requirement to post allegations of child abuse or neglect in a conspicuous place.
- Create a separate non-compliance scale for Serious Occurrences that doesn't automatically affect the tiered licensing rating.

Please see **Appendix One** below for a complete list of recommendations made by **QELN** member agencies along with rationales for the suggestions offered. Appendix One outlines more than sixty (60) specific potential amendments all focussed on reducing the administrative burden whilst focusing on creating high quality, safe and responsive early learning and care environments.

Who is the Quality Early Learning Network?

The **Quality Early Learning Network (QELN)**, whose members are all multi-site children's services providers and who offer a range of early learning programs including but not limited to licensed group centres, licensed home child care and parent/child centres including Ontario Early Years Centres, is committed to strengthening the quality of programs for young children and their families. The QELN members provide a range of early learning programs and services to more than 60,00 children from infancy through age twelve. Together we employ more than **11,600** educators, assistants and support staff.

OUR VISION – An integrated system of quality services for children and families delivered by not-for-profit community agencies and the public sector who work collaboratively in the best interests of children, families, educators and communities.

MISSION – The **Quality Early Learning Network** will work collaboratively with public policy decision-makers to develop, deliver and sustain a community based, not-for-profit system of early learning and care services for all children and families which is accessible, affordable, inclusive and effective.

Appendix One – Recommended Revisions to CCEYA Legislation

Recommended Change	Legislative Reference	Why?
Remove requirement to have Sanitary Practices policies.	Section 33	Public Health already requires policies; leads to double inspection. Public Health has established the health and safety requirements which reinforces the Public Health role. In the reopening process following the COVID – 19 pandemic closure, the Ministry of Education has referred operators to the Public Health department for virtually every question. (may be needed for home child care but not group)
Food storage requirements duplicated what is already required by Public Health	Section 42(1)	Duplication of requirements (May be required in home child care) See above.
Remove requirement to label food and drinks supplied by parent – not a problem for food that has to be stored but not necessary for the bottle or sippy cup that comes in the morning with the child who is finishing breakfast	42(1)	Bottles or sippy cups that come in with a child in the morning are washed and sanitized as soon as the child finishes; this should be adequate to prevent the spread of disease
Remove requirement to post allegation of child abuse or neglect in a conspicuous place	38.1	Compromises confidentiality Allegation may not be founded; leads to speculation and finger pointing
Remove requirement to document direct visual checks of Sleeping children over the age of 12 months	33.1	Joint statement on Safe Sleep indicates that the risk is to children under 12 months; room is already at ratio and must have enough light to conduct direct visual checks
If medicine box is inaccessible to children shouldn't have to be locked	40 (1)	Unnecessary requirement
Don't ask parents to write down the amounts of medication to be given; this is on the prescription label and/or in the note from the doctor.	40 (1)	Duplication of information already available
Remove requirement to have Director Approval to bring bagged lunches on non-instructional days	Section 42(2)	Implied by serving this age group
Posting of Allergies and Food restrictions in places where food is not prepared or served.	43(3)	Epi-pen is always with the staff; posting is unnecessarily onerous

Recommended Change	Legislative Reference	Why?
Program Statement and Enforcement	46(1)	<p>Being held accountable as the operator for the behaviour as others (individuals)</p> <p>If a 12-year-old goes to Starbucks and we report the missing child (Serious Occurrence) but could not prevent the initial action. If a staff does something wrong, the agency has policies and procedures in place to address the lapse. The last revision of the Act provided for individuals to be penalized; use this route rather than penalizing the operator. When the operator gets the compliance order it is an automatic Tier 3 for three years which is publicly posted.</p>
Enforcement of Non-Compliance	36 (1)	<p>in the child care licensing manual p. 165 – it states that “where non-compliances identified in an inspection are not rectified by the licensee within the required timeframe, the matter may be referred to enforcement for further action” it also says “where appropriate, the Ministry will take an escalating approach to enforcement, starting first by providing clarity to providers, staff and licensees on the rules...if further actions are required, depending on the nature of the contravention and specific circumstances, a compliance order may be issued. Here is the problem – we are receiving compliance orders right, left and centre that make no sense – are we not in compliance? Yes, we are not, however, it’s not like we didn’t respond and rectify in the given time period – yet we still get a compliance order – I get it if we keep repeating the same mistake, or we put a child at risk, but that is not what is happening.</p>
Health Assessments and immunization of Staff	57.1	<p>Like Sanitary Practices and Food Storage and Handling above – this is the domain of Public Health – the intent between Ministry of Education and Public Health is that Public Health will monitor all immunization records. The practice of immunization review is not consistent throughout the province. However, it is within their authority to review, not Ministry of Ed.</p>
Emergency Management	68.1 (1)	<p>remove requirement to identify a safe and appropriate off-site meeting place, in case of evacuation in the Emergency Management Plan – we have already identified a designated place of shelter in the event the child care centre must be evacuated due to an emergency in 68(1) Fire Safety/Evacuation Procedures and Drills - we are required to give evidence of a designated place of shelter in the event the child care centre must be evacuated due to an emergency – can’t we just include in this fire plan approved local fire chief? It gets posted by doorways – who is going to open up a procedure manual to figure out where to go?</p>

Recommended Change	Legislative Reference	Why?
Contains Safe Drinking Water, Lead Testing, Smoke-Free Ontario, Care Seat Safety, Acts – basically says child care programs must obey the legislation identified, but the Ministry of Education doesn't enforce the requirement.	Section 11 (Other Legislation)	Anything related to Public Health should fall in this section (sanitation, food safety, immunization). Public Health has the lead for these requirements and the requirement for both schools and child cares with respect to compliance should be the same.
Remove the requirement that supply staff be RECEs if there are a sufficient number of RECEs on site.		If supply staff must either be RECEs or have Director's approval, it is appropriate that they be able to supply at any location where a multi-site operator provides services.
Reintroduce Schedule 2, and allow the operator to follow both schedules depending on community need		It should be a fluid system that reflects the current needs of the community. Allows for a reduction in potential bottle necking as children age out of one group and into another. The challenge of determining groups with the requirement to COHORT children and educators in groups of no more than 10 increases the need for flexibility,
Daily written record		Need to reduce what is required in the log. Only significant events, or changes should be required for communication to staff on a shift change.
Accept electronic registrations;		Reflects the increasingly paperless society. This is also less onerous and more convenient for parents. Electronic registrations also reinforce the potentially ongoing need to reduce physical contact where possible.
For centres in schools eliminate the requirement to show copies of water testing, fire equipment and zoning approval.		These requirements are already being met by the school board; this is a duplication of red tape and administrative work.
Names on lunch bags and requirement of ice packs, inconsistent with school policy	section 44 of O.Reg. 137/15	Consistent expectations for children throughout the day
The school day does not monitor school-age children's hand washing	ss. 6.1(1)[SAN]	Consistent expectations for children throughout the day makes sense from supporting the children's autonomy and capability. It is also important to note that as a result of changes coming out of the COVID -19 pandemic schools may be required to monitor and enforce hand washing. If this is the case, the requirements for child care and for the school day should be the same.
Director Approval Process involves the submission of a large amount of information and back and forth communication. When licensed organizations have done their due diligence, can that be acceptable?	Ontario Regulation 137/15 sec 54	Trust the staffing decisions of agencies (who are ultimately responsible for their staff). Only one application for director's approval for multisite agencies should be required instead of having to do again if staff changes locations. Administrative red tape that does not contribute to quality also hampers the capacity of operators to make quick decisions in times of crisis. (Such as responding to COVID – 19)

Recommended Change	Legislative Reference	Why?
Repair log and Injury log – <i>redundant</i>	Subsection 3.18	Injuries are already documented
Completion of Accident Report and Given to Parent, Copy kept in child’s record, then also recorded in Daily Written Record-redundancy and unnecessary administrative responsibility for educators	Reg 137/15 ss 36 and Reg 137/15 37	Duplication of information
Staff Health Assessment & Immunization Follow the recommendation of the local Medical Officer of Health -Wouldn’t it be more efficient to have a provincial directive? Many organizations follow the recommendation of the local Medical Officer of Health which can be a challenge when an agency operates in more than one municipality.	Reg 137/15 57.1	Provincial directive to ensure consistency. Medical officers of health do not see this as a priority for them. This is a reduction in red tape and increases consistency across the province. In times of emergency, it is even more important. For example, if and when a vaccine against COVID-19 is developed and is being used, broad compliance will be essential.
Allow Operators to hire staff without their CPR/First Aid as long as there are staff who hold those certifications on site. Staff would be able to start and obtain their CPR/First Aid training within the first 3 months of employment.	58 (2)	Staffing vacancies could be filled faster. A CPR/First Aid trained employee would always be available for each group of children. This is a particular challenge given the current staffing shortages across the province.
Relax the restrictions on mixed age grouping for outdoor play for infants, toddlers and preschoolers.		It is developmentally appropriate for young children of similar ages to play together when the required supervision is present. When child care outdoor play space is shared with a school, it can be difficult to meet the time requirements for outdoor play when all three groups need to be separated when outside. The requirement to COHORT in groups of no more than 10 increases the likelihood of family grouping and this should be reflected in playground usage.
Family Grouping for infants & toddlers at the beginning and end of the day for at least 30 minutes	#8 (4) (4)	It is not unusual to have one staff with one infant. The requirement to COHORT in groups of no more than 10 increases the likelihood of family grouping and this should be reflected in playground usage.
Staff who are director approved in the ECE role for one organization should be	#54 (1) (2)	Upon occasion, where numbers warrant, programs will combine for PA days, school holidays (Christmas, March break) summer camp etc.

able to work at all sites in the same capacity		
Recommended Change	Legislative Reference	Why?
To Change the subsection 60. (1) B to remove any external partners as they are not left alone with children Example: Bus drivers.	60. (1) Every licensee of a child care centre shall obtain a vulnerable sector check from, (a) every employee, before the person begins their employment; and (b) every volunteer or student who is on an educational placement with the licensee, before the person begins interacting with children at the child care.	Even though bus drivers have criminal checks through their bus company, they still need to have it with them to show at all times - if they don't have the checks to show, licensees are in non-compliance. Operators are being held accountable for something over which they have absolutely no control.
Director Approval for RECEs to be supervisor on off-site programs	6. (1) Subject to subsections (2) and (3), every licensee shall be responsible for the operation and management of each child care centre or home child care agency it operates, including the program, financial and personnel administration of each such child care centre or home child care agency	The Ministry requirements related to Director approval are unduly burdensome. It might take more than a few weeks to get approval from the Ministry. As well, not every RECE candidate has two years' experience.

QUALITY EARLY LEARNING NETWORK

Recommended Change	Legislative Reference	Why?
<p>Staff Qualifications: <i>With respect to a licensed kindergarten age group or a junior school age group or a licensed primary/junior school age group that includes only children who are junior school age, the following are also qualified employees:</i></p> <ol style="list-style-type: none"> 1. An employee who has a diploma or degree in child and youth care. 2. An employee who has a diploma or degree in recreation and leisure services. 3. A member in good standing with the Ontario College of Teachers. O. Reg. 126/16, s. 36 (1). <p>Change to include all school age and kindergarten groups</p>	<p>137/15 54(2)</p>	<p>These qualifications, specifically 3., allow individuals to work in differing capacities with the same age groups of children. Requirements to know and follow legislative policies and procedures, as well as program statements, ensure individuals are familiar with the rules and principals governing and guiding our practices. This change would make it easier for providers to recruit educators, and would remove the administratively burdensome process of applying for Director’s Approval.</p> <p>This change reinforces the need for additional collaboration and integration between child care and school.</p>

QUALITY EARLY LEARNING NETWORK

Recommended Change	Legislative Reference	Why?
<p><i>Definitions</i> <i>"serious occurrence"</i> <i>means,</i> <i>(b) abuse, neglect or an allegation of abuse or neglect of a child while receiving child care at a home child care premises or child care centre,</i> Would suggest a change to "verified incidents of abuse or neglect.</p>	<p>SS 4.9 (1)</p>	<p>The administrative process of submission and follow-up of serious occurrences can be onerous, and should be reserved for incidents that are truly of a serious nature. As an organization, we have been in the practice of consulting with the CAS any time there is a concern regarding staff and child interactions brought forth by either parents or staff, and a subsequent SO is filed. Over 90% of these concerns are not investigated and when they are, allegations are very rarely verified. Although we feel it is important to communicate with our Program Advisors, the resulting consequences of doing so can be overwhelming and often disproportionate to the incidents themselves (i.e. Enforcement proceedings, reports to the CECE's etc.) Over and above the administrative burden, this causes undue stress and has a significant impact on our work force, beyond the individuals directly involved.</p>
<p><i>A director may approve a smaller amount of space than required under clause (1) (b) for a child care centre located in a school, provided that the room or area to be used by a licensed age group is used by the school for children who are the same age as the age category of the licensed age group. Special Instructions indicate: This approval is subject to compliance with the following:</i> <i>Shared space confirmation must be kept on file and made available to Ministry staff when requested. The shared space confirmation must include</i></p>	<p>Subsection 3.5 Play Activity Space</p>	<p>In several cases, we have had to have a room actually measured and licensed because it is not being used by the school for the age group it was designed for, or not being used at all during the day. (i.e. KG room with KG equipment and furniture used by a grade one class during the day needs to be measured and approved for our KG group, taking time and ministry resources)</p> <p>This reinforces the importance of collaboration between child care and education. Furthermore, it would provide clarity of children who find themselves with different expectations at different times of the day.</p>

QUALITY EARLY LEARNING NETWORK

<p><i>information on all rooms available for use by the child care program, regardless of whether they are currently using the rooms or not. <u>It must also include the primary use of each room during the school day and be signed by the child care centre’s supervisor and a representative of the school board (e.g., principal).</u></i></p> <p>Would suggest change to indicate that the room should be designed, equipped and/or primarily used for the same age group</p>		
<p>Recommended Change</p>	<p>Legislative Reference</p>	<p>Why?</p>
<p>Serious Occurrence non-compliances have a separate rating scale that doesn’t automatically affect the tiered licensed rating</p>	<p>Section 4.9</p>	<p>Issues that don’t reflect our regular practice and should not be reflected on our tier for our license.</p> <p>It is also important to note that in 2020, this will require adjustments as it is required to report as a serious occurrence whenever a parent, staff or child have COVID symptoms.</p>
<p>Clarity over when the enforcement system is activated. Enforcement section of the CCEYA needs to be clearer.</p>	<p>Section 13</p>	<p>Its not clear in the manual</p>
<p>Posting of a Decal not being a non-compliance when the license is posted.</p>	<p>Subsection 10.9</p>	<p>Trivial – license is posted already</p>
<p>Non smoking decal not posted should not be a non-compliance with CCEYA.</p>	<p>Section 11 11.3</p>	

QUALITY EARLY LEARNING NETWORK

Recommended Change	Legislative Reference	Why?
Eliminate repetition in CCEYA for example – outdoor play and rest and supervision in multiple places within the act.		1 non compliance can have many pieces comes about as non-compliances as a result.
Initiate the practice of uploading annual third-party playground checks and action plans through the Child Care Licensing System (CCLS) for review prior to inspections.	O. Reg 137/15 Part II section 24 (5) (b) and Section 82 And Child Care Licensing Manual September 2019 (CCLM), Section 3 Building, Equipment and Playground, subsection 3.18 Playground Safety Policy	The licensing process would be more efficient for the Ministry of Education (MEDU) and the operator.
In programs licensed for children from birth to 12 years, remove the requirement to post allergy lists for all children in all program spaces. Acknowledge the operators’ responsibility to develop and implement a plan to manage a safe environment for children with allergies i.e. post allergy lists in the spaces that the child with allergies utilizes.	O. Reg 137/15 Part II Section 43 (3) And CCLM section 5 Nutrition, subsection 5.5 Allergies and Food Restrictions	<ul style="list-style-type: none"> • Children in various age groups do not interact with each other or utilize all spaces i.e. infants never go into before and after school spaces. This is particularly true as the sector reopens following COVID and COHORTS are not permitted to mingle and/or be in each other’s space. • It is also an important privacy issue. Not posting everywhere eliminates parents becoming aware of information about children who their child does not interact with - there is no need for additional parents to be aware. For example, one agency has had parents comment that a child must be of a specific religion owing the dietary restrictions posted. • The current requirement creates a potentially unsafe environment as there may be too many postings for staff/others to effectively monitor. • It is an administrative burden to re-print and re-post multiple lists in multiple locations. • Unnecessary use of public funds by the MEDU to monitor this requirement.

Reducing Administrative Burden in Child Care
Five Year Legislative Review
CCEYA
3rd Party Agreement
CECE Act

QUALITY EARLY LEARNING NETWORK

Recommended Change	Legislative Reference	Why?
Replace the requirement for WSIB approved standard first aid including infant and child CPR with emergency or child care specific first aid which includes infant and child CPR.	O. Reg 137/15 Part II Section 58 (2) And CCLM section 7 Staff Qualifications, subsection 7.6 Standard First Aid	<ul style="list-style-type: none"> • The additional medical scenarios and responses in the standard first aid including infant and child CPR training are not relevant to licensed child care. • The additional cost and time to complete the course imposes an unnecessary financial and human resources burden to operators, and in some cases may be a deterrent to potential staff, especially those considering part time positions i.e. supply and before and after school.
Remove or clarify the requirement for licensed home child care Providers to collect information for school age children who are visiting the home child care premise and not enrolled in the Provider's program.	O. Reg 137/15 section 72 (1) and Home Child Care Licensing Manual (HCCLM) 10.2	It is an unnecessary administrative burden for the family, Provider, agency and MEDU to collect information (such as application for enrolment, date of admission and discharge, emergency information) for school age children such as the Provider's school age grandchild visiting for the day, or the Provider's own school age child inviting a classmate for a play date after school.
Remove the requirement for all food and drink supplied by the family of a child in care to be labelled and allow the agency to develop their own policy specifically outlining the circumstances they would require food and drink supplied by the family of a child to be labelled i.e. there is more than 1 child in care whose food and drink are supplied by their family, or food and drink is supplied due to a medical reason.	O. Reg 137/15, 42(1) and HCCLM 5.2	It is unnecessary and imposes an unnecessary administrative burden for the family and Provider.
It is not clear exactly who is required to review and sign-off on all policies and procedures in home childcare homes.	O. Reg 137/15, And HCCLM Subsection 1.3	It is unnecessary and imposes an unnecessary administrative burden for the Provider, agency and MEDU, to have individuals (i.e. cleaning person, own child's tutor) who are regularly at the

Reducing Administrative Burden in Child Care

Five Year Legislative Review

CCEYA

3rd Party Agreement

CECE Act

QUALITY EARLY LEARNING NETWORK

Re-consider who (i.e. persons who are ordinarily residents of the premises or regularly at the premises) is required to review the required policies, procedures and individualized plans.		premises, but are not responsible for the care of the children, to review policies and procedures. Sign off on policies should only be by those who are responsible for the children - signing off on safe sleep (for example) is irrelevant for other adults in the home who should never be responsible for monitoring sleep in the first place.
Recommended Change	Legislative Reference	Why?
Remove requirement for documentation of direct visual checks	33.1(4)	Children are supervised during the rest period and RECE's are competent, capable and well versed in observing children and recognizing any changes that are a cause for concern. Any changes to the health, safety and wellbeing of a child are already documented in the daily log and on the symptoms of ill health forms and communicated to the parents. Requiring staff to document that the sleep check was conducted for every child at least once per rest period (if not more) is burdensome and unnecessary paperwork that does not improve health and safety or the quality of care.
Remove the requirement for program advisors to view CRC/VSS for employees, students and volunteers	60(1)	This requirement contradicts the privacy rights of staff and implies that the initial check conducted by management staff was not enough. Verification from the employer should be sufficient, and would allow Program Advisors to spend more time focusing on the overall quality of the program – staff engagement, interactions, environment, etc. It is an unnecessary level of red tape that does not contribute to quality.
Remove the requirement for each offence declaration to be obtained no later than 15 days after the anniversary of the previous declaration or CRC/VSS	62(1)(2)	Tracking anniversary dates is an administrative burden, especially for organizations with many employees. Ideally, we would be permitted to obtain annual offence declarations from all employees on one specified day each year. This would align with how other administrative tasks are completed (e.g. annual policy reviews and sign offs)

QUALITY EARLY LEARNING NETWORK

Recommended Change	Legislative Reference	Why?
Licensing inconsistencies for newly constructed/opening centres.	CCEYA	Inconsistency in documents /TPH required signatures etc. requested by different program advisors; asking for same documents to be uploaded more than once to CCLS.
<p>O. Reg 137/15 Part II Operation of Child Care Centres and Home Child Care, Health and Medical Supervision, 38 Serious Occurrences</p> <p>and</p> <p>CCLM section 4 Health and Medical Supervision, subsection 4.9 Serious Occurrences</p> <p>Ensure consistency across regions with regards to the expectation for operators to develop and implement policies ensuring compliance with <i>Child, Youth and Family Services Act, 2017</i>. This would apply to how operators address Serious Occurrences such as a missing or temporarily unsupervised child and allegations.</p>	<p>Despite having developed our own protocol, as per the recommendations in the CCLM, our regional MEDU office has instructed our organization to report staff to CAS. CAS continues to inform us they do not want to receive these reports unless we feel neglect was involved.</p>	