



PAMPA DAY HOME

ROOTED IN CARE, GROWING WITH LOVE

 540, Catalina Drive, Yellowknife, North West Territory, Canada X1A 2L3

FOR MORE INFO:  +1-867-444-2272  PAMPABOOTE@GMAIL.COM

Pampa Day home

Parent Handbook.

Philosophy of Pampa Day Home

At our day home, we believe that **play is the foundation of all learning** in early childhood. Children learn best when they are actively engaged, curious, and free to explore their environment in meaningful ways. Through play, children develop their imagination, creativity, confidence, problem-solving skills, and social relationships.

We recognize that each child is unique, with their own interests, strengths, and pace of development. Our role as caregivers is to create a **safe, nurturing, and inclusive environment** where every child feels valued and supported. We view play not as a break from learning, but as the very process through which learning happens.

Our day home emphasizes:

- **Exploration and Discovery:** Providing opportunities for hands-on experiences such as sensory play, art, building, outdoor exploration, and dramatic play.
- **Social and Emotional Growth:** Encouraging cooperation, empathy, respect, and communication through group play and shared activities.
- **Cognitive Development:** Supporting early literacy, numeracy, and critical thinking through play-based learning materials and routines.
- **Physical Development:** Promoting movement and health through indoor and outdoor activities that build strength, balance, and coordination.
- **Independence and Self-Expression:** Allowing children to make choices, take risks safely, and express themselves creatively.

We believe that families are children's first teachers, and we value open communication and partnership with parents. Together, we help children build the confidence, curiosity, and love of learning that will guide them throughout their lives.

Pampa Day Home

Please initial the following policies to show that you have read and agree to the following policies:

Hours of Operation

_____ My home is open for childcare from 8AM to 5PM Monday through Friday. Drop off is from 8AM-8:15AM. Pick up is from 5PM-5:15. If your work schedule does not permit this please talk to me and we may be able to make alternate arrangements.

Trial Period and Termination Services

_____ The first two weeks of enrolment are considered probationary for everyone and care may be terminated any time during that period.

_____ After the probationary period, I require two weeks' notice.

_____ If the parent does not provide a two-week notice, fees for two weeks are still required.

_____ I will give you two week's notice if I must terminate care.

_____ I retain the right to terminate this contract WITHOUT NOTICE in the event of destructive, uncontrollable, or violent behavior, or in the case of delinquent fees.

Start Date: _____ Termination

Date: _____

Holidays

_____ I will be closed on all statutory and civic holidays. No refunds are given for statutory or civic holidays. Here are the civic holidays that I will be closed on:

- | | |
|--|------------------------|
| <input type="checkbox"/> New Years Day | Thanksgiving |
| <input type="checkbox"/> Good Friday | Remembrance Day |
| <input type="checkbox"/> Easter Monday | Christmas Eve |
| <input type="checkbox"/> Victoria Day | Christmas Day |
| <input type="checkbox"/> Aboriginal Day | New Years Eve |
| <input type="checkbox"/> Canada Day | |
| <input type="checkbox"/> First Monday in August | |
| <input type="checkbox"/> Labor Day | |

Vacation

_____ I will give you four weeks' notice when I will be closed, during vacation it will be chargeable. It will be your responsibility to make other child care arrangement during these times. No refunds are given for late arrivals, early departures, your family vacation days or days your child is absent due to illness.

Parent Involvement

_____ Parents are welcome to stop by anytime they wish. Please take into consideration that rest time may not be the best time to stop by as this is a very important transition time. Please allow time at drop off/pick up to talk about your child's day, while respecting privacy. Discussions that require longer periods of time will be scheduled when confidentiality can be maintained.

Immunization

_____ Please ensure that a copy of your child's immunization record is brought to me for their file. In addition, their health care number must be on file before the child(ren) can start the day home.

_____ Immunization records must be kept up to date. As soon as possible after a change please give me a copy or let me know verbally so I can update your child's immunization record.

I _____ the Parent/Guardian for
_____ has handed in the immunization record.

Parent/Guardian Signature

Date

Day home Provider

Date

Illness

_____ I will not accept children that are possibly contagious. Signs of contagious illness may include vomiting, fever, diarrhea, bad colds and flu.

_____ Parents will be notified and required to remove their child(ren) if the child exhibits symptoms such as a rash, fever of 100°F or higher, excessive cold and/or cough, vomiting, lice, or nits, discharge from the eyes or ears, unusual drowsiness, persistent or excessive crying and/or symptoms, of common childhood diseases such as chicken pox, roseola, conjunctivitis, mumps. Measles, influenza.

_____ A child showing signs or a possible contagion in the Day Home will be separated from the other children, cared for, parent's contacted to pick up, and supervised until the parent/guardian has arrived.

_____ **A child with a communicable disease (C.O.V.D, tuberculosis, chicken pox, etc.) can not attend the child care program. All recommendations made by Public Health will be followed.**

** Once they are able to participate in all of the daily activities they are welcome back



By following these guidelines, you will be protecting your child (ren) as well as the other children in the day home

Medication consent form

Name of Child: _____

Date: _____

To be completed by the child's parent/Guardian

I, _____ [parent or guardian's name]
give permission for _____ [child's name] to be
given the following medication by child care staff according to instruction below.

Parent/guardian
signature: _____

Name of Prescribed
medication: _____

Special
Instructions: _____

Start date _____ End Date _____

My child received _____ [number] doses at home

Are there any possible side effects from medication? Please specify:

Over the counter medicine

_____The day home provider have my permission to administer over-the-counter type medication[Tylenol, Dimetapp, diaper rash ointment, sunblock, etc] to my child/ children:

Name of child:_____

Date	Time(s)	Amount	Given by	Refrigerated

Parent/Guardian Signature_____ Date_____

Parent/Guardian Signature_____

Date_____

Doctor and Health Care Information

Doctor's Name: _____

Clinic: _____

Phone Number: _____

Health Care Number: _____

Immunization Record copy: Y or N

Transportation Policy

_____ Please ensure the transportation of children to Pampa Day home by Car. The day home operator will not take any responsibility for transportation of children from anywhere and drop off to their home. Day home operator will not drive cars for transportation.

Parent/Guardian Signature

Date

Day home Provider

Date

Evacuation Policy

_____ In case of Fire or emergency evacuation the operator will take the kids by walk and wagon (will be used for infants) to the muster point. The muster point is near the mailbox at Norseman drive, behind Reddie Mart.

Parent/Guardian Signature

Date

Day home Provider

Date

Emergency Form

_____ I give permission to the day home operator _____ to seek and obtain emergency medical/dental or surgical treatment as prescribed by a treating physician for my child. I give my permission for my child to be transported by car or ambulance to an emergency center for treatment. If an ambulance is called, the cost of the ambulance is my [parent/guardian] responsibility.

Full name of child: _____

Birthdate: _____

Allergies to meds: _____

Special Health Problems: _____

Regular Medication: _____

Date of last physical exam: _____

Name of Regular Doctor: _____

Health care Number: _____

The day home operator shall not be responsible for providing or paying for the child's health care. I agree that neither I or my child will bring any claims against the day home provider, as a result of any injuries, expenses or damages that I or my child may suffer in any way related to the use of their facilities, toys, day trips, outings, other children, whether such claims are known or unknown or arise in the future

Supervision Policy

_____The children in my care will always be under my supervision. Should an unusual circumstance or emergency arise then I shall contact the parents, all families will be notified.

Confidentially Policy

Any information disclosed will be kept confidential. As an early childhood professional I am committed to respecting the rights and privacy of the children and their families. I will maintain confidentiality of verbal information and written records. Any information given to me verbally or in writing by parents/ guardians will be respected and remain private. I will refrain from discussing a child's negative or concerning behavior in front of other children or parents. I will also refrain from discussing sensitive family issues in front of a child, other children or other parents. Instead, I will find a private space to discuss sensitive issues or schedule a call or conference with the parent.

All children's records are kept confidential, separate from other children and stored in a professional manner that will not allow any other than myself and the Regional Early Childhood Consultant of the Government of Northwest Territories to view the files upon annual inspections. Your child's files will be kept for 6 years in the day home business.

** The day home operator will be responsible for approving and providing any request information such as suspected child neglect, physical, emotional and sexual abuse to Child and Family Services**

Child Guidance Policy

Here at Pampa Day Home we want every member that attends the facility to feel valued and respected and for each child and parent to be treated fairly. Our day home is a caring common ground, whose values are built on mutual trust and respect for everyone.

This redirection guidance policy is designed to support, nurture and care the way in which every can play and problem solve in a supportive way. Having children being allowed to make their own decision and at the same time given them appropriate boundaries. If children encounter difficulties problem solving with another child, the day home operator will step in and help facilitate to make sure each child is treated fairly and the resolution is appropriate.

In this day home we incorporate the following;

****Respect to self **Respect to environment** Respect others****

Understand and have compassion: help children to understand other children's views,

Responsibility: to enable children in making their own decisions and take responsibility for their actions,

Kindness: to promote kindness and be gentle towards each other,

No child shall be the subject to any form of physical punishment or verbal, or emotional abuse. No child shall be denied and physical necessity.

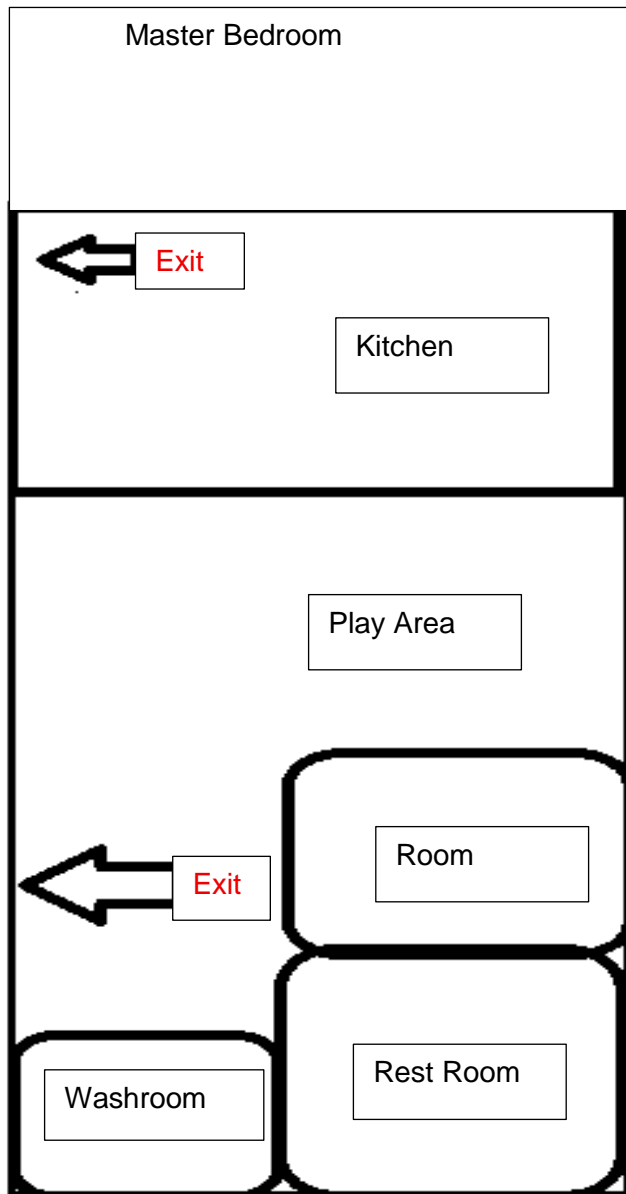
Child Guidance Policy cont'd

Setting good examples and highlighting positive behaviours is the way we value each child. We absolutely do not focus on “NO or Don’t do that”, we focus on enriching children’s learning environment, guidance and teachable moments. We also find a way to make the child feel better when they are sad or hurt, such as giving them a hug, singing them a song or simply taking the time to discuss what is really happening. If the child who is exhibiting the negative behavior we use redirecting. Asking them to change activities or bringing a new learning game, telling them they can lead a game, being the day home operator’s helper.

1. Redirecting the child to another experience.
2. Problem solving and finding a positive solution with the help of the adult.
3. Having some quiet activities to calm down and reflect

Emergency Evacuation

In the case of an emergency: flood, power outages for more than 1 hour, fire, Pampa Day Home will evacuate the premises, call emergency services and go to Muster point near the post box at Norseman drive. There we will contact the parents to come and pick up their child. Here is a look at all the emergency exits that are currently in my home. This emergency layout will be posted by each emergency exit.



Pampa Day home

Here is a look into the day home routine. Some activities may change due to weather or depending on children's interest. The day home plans activities based on the interest of the children and will be giving out monthly newsletters to parents.

- ❖ 8.00-8:15 Arrival of the children, (free play offered)
- ❖ 8:30 Handwashing
- ❖ 9:00-9:15 Breakfast (if children are hungry, we feed them breakfast)
- ❖ 9:15-10:00 Free play (manipulatives, house center, puzzles, blocks)
- ❖ 10:00 Toileting/Diapering/Hand washing
- ❖ 10:30-11:00 Dressing
- ❖ 11:00-11:45 Outdoor Exploration** (front yard play area)
- ❖ 11:45-12:00 Handwashing
- ❖ 12:00-12:30 Nutritional Lunch
- ❖ 12:30-12:45 Diapering/Toileting/Handwashing
- ❖ 1:00 – 2:30 Rest time (children that do not nap will have quiet activities)
- ❖ 3:00-3:15 Toileting/Diapering/handwashing
- ❖ 3:15-3:45 Nutritional Snack
- ❖ 3:45-4:00 Getting ready to go outside
- ❖ 4:00-4:45 Outdoor Exploration**
- ❖ 4:45-5:00 Home time (children playing with table activities)