

# LICENSING CONNECT

Community Care Facilities Licensing | Child Care

July 2023



SUMMER



## Message from the Regional Supervisor

A Licensee recently asked “What does mentoring, support, and education look like from the Licensing program’s point of view?” I had to pause to think about this for a minute.

The Community Care Facilities Licensing (CCFL) program speaks about education, support, mentoring, cooperation, and collaboration with facilities at every opportunity - it is woven into program goals and training plans. Collaboration is the core tenant of the CCFL program. What does collaboration actually look like?

Every point of contact with a Licensee is an opportunity to collaborate, assisting Licensee's and their staff in understanding and meeting the legislation outlining minimum requirements. Every routine inspection, follow-up inspection, incident, renovation, safety plan, seminar, phone call, email, and even a complaint is an opportunity to give and receive feedback and ask questions of the Licensing program. By maintaining lines of open communication and developing coalitions, the Licensing program hopes to collaborate and partner with Licensees to reach a common goal: to ensure the health and safety of our vulnerable populations.

**Joel Verbruggen, MPH, BSc. | Regional Supervisor**

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Time to hydrate

# Heat Preparedness

## Is Your Child Care Facility Prepared for the Summer Heat?

In the summer of 2021 and 2022, Environment Canada issued multiple heat warnings throughout the province of British Columbia causing serious health and safety risks within our communities.

The months of May and June in 2023 have already brought unseasonably warm temperatures across the Island Health region with temperatures reaching close to 30 degrees Celsius. More warm weather is expected to continue.

Community Care Facilities Licensing is committed to ensure Licensees are proactive and prepared for the upcoming summer heat.



KEEPING  
KIDS  
COOL

### Signs & Symptoms HEAT EXHAUSTION & HEAT STROKE

**Heat Exhaustion**

- 37 C to 40 C (98.6 F to 104 F)
- Headache, Fatigue, Dizziness
- Muscle Cramps
- Nausea
- Pale, Moist Skin
- Weak Pulse

**Heat Stroke**

- 40 C (104 F) and above
- Confusion, Unconsciousness
- Seizures
- vomiting
- Warm, Dry Skin
- Fast & Strong Pulse
- Rapid Heart Rate

Coma & Death Possible

**First Aid Guide**

- Move to a cool place and rest
- Remove excess clothing
- Fan skin
- Place cool cloths on skin
- Drink cool water if fully conscious

**First Aid Guide**

- Call local emergency number
- Move to a cool place and rest
- Remove excess clothing
- Drench skin with cool water
- Place ice bags on the armpits

## RESOURCES

Click on title to view links!

- BC Heat Impacts Prediction System (BCHIPS): BCCDC
- Extreme Heat Preparedness Guide: Government of BC
- Heat-Related Illness HealthLinkBC
- Heat Safety Island Health
- Health Facilities Preparation for Extreme Heat: Recommendations for Retirement and Care Facility Managers: Government of Canada
- Wildfire Smoke BCCDC

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What is your plan?

# Preparing for Summer Heat Considerations

It is important to have a plan in place at your facility to ensure your site is prepared to respond to heat emergencies. Please see below for some important points to consider as you develop your preparedness plan.



**Create a Heat Preparedness Policy for your facility**

**Drink plenty of water and ensure access to water**

**Create shade and cooling stations outdoors**

**Increase frequency of rest and water breaks**



**Ensure staff are trained and knowledgeable on facility policies and able to identify and respond to heat emergencies for children in care**

**Have cool refreshments available such as popsicles, fruit and veggies with higher water content**

**Ensure fans, air-conditioners and HVAC systems are regularly maintained**

**Plan physical activities for cooler parts of the day**



**Wear sunscreen, hats, and light, loose fitted clothing**

**Create cooling stations inside**

**Close blinds and shutters to block direct sun**

**Never stay in a parked car on a hot day**

# A Look Inside Licensing

## Program of Activities & Schedule G of the Child Care Licensing Regulation (CCLR)

By Kate Skye | Child Care Licensing Officer

Child Care Licensing Regulation section 44(1) - Program of Activities is a section of legislation which is outcome based which means it allows each Licensee to choose how they want to meet this requirement and states:

A licensee must provide to children a comprehensive and coordinated program of indoor and outdoor activities that:

- (a) Is designed for the development and care of children,
- (b) Is appropriated for the age and development of children in each group in the community care facility, and
- (c) Complies with program standards set out in Schedule G.

Schedule G located at the back of Child Care Licensing Regulation, as it relates to Section 44(1), speaks to how a Licensee can design a program of activities to meet the unique developmental needs (physical, intellectual, language, emotional and social) of all the children in care. As with other Schedules in the Child Care Licensing Regulation, the Schedules help define certain sections of the Child Care Licensing Regulation.

Nature Based, Waldorf Inspired, Montessori, Culturally Sensitive, Early Learning Framework, Reggio Emilia or Academies for Kindergarten Readiness are just some of the many different philosophies that a Licensee may use to determine the type of programming and environments provided to children.

When Licensing Officers arrive to conduct inspections they can learn a lot about how the facility is meeting Schedule G by observing the indoor and outdoor environments, watching how the children interact with each other, and the toys and equipment available to them. Licensing Officers listen to how staff speak to and how they engage with children in care. This is one reason why Licensing Officers conduct inspections when the facility is operating and children are in care.

The focus at routine inspections is to review the many health and safety protocols in place. This includes, for example, assessing hazards, reviewing staff and children's records, reviewing the minor incident log book and attendance records, reviewing policies, fire drills, maintenance records etc. This often leaves little time to look at the unique ways each licensed centre is meeting the requirements of Schedule G.





Just before the COVID-19 pandemic changed the way child care facilities provided many of their programming activities, a Pilot Project in the Cowichan Valley began a broader conversation about how Licensing and Licensees could work together to explore compliance with Schedule G.

The Cowichan Valley Pilot Project was supported by then Chief Medical Health Officer Dr. Richard Stanwick, prior to his retirement from Island Health, and Cowichan Valley Medical Health Officer Dr. Shannon Waters. Licensing Officers were given the opportunity to work from a satellite office in the Cowichan Valley.

They were tasked with exploring the best way for Licensing Officers to assess compliance with Schedule G, while supporting Licensees of child care facilities to meet the requirements of Schedule G. In addition, the discussion included how to conduct a thorough review of the requirements in Schedule G without overwhelming facility staff at the time of the routine inspections.

A team of motivated community advisors were invited to join the project and continued to meet in person and via technology between 2018 and 2020. The focus of the Pilot Project was to review different types of assessment tools currently available and determine whether any of them would be helpful for this purpose. The community advisors included representatives from the Cowichan Tribes, School District 79, Cowichan Valley Regional District, Northern Lights College, Early Childhood Educators of BC, Child Care Resource and Referral, Vancouver Island University, and Island Health Authority.

After completing a review of a variety of Early Childhood Assessment tools, the members of the Pilot Project determined there was no current assessment tool that was the right fit.

The Pilot Project wrapped up its work in the Fall of 2020 with a shared vision for one day continuing this work as the following gems were left glittering but unpolished:

- Licensing’s mandate must include building relationships and empowering all caregivers, including those marginalized groups who struggle with the rules and regulations.
- There is no one way cookie cutter approach to programming.
  - What works with one group of children does not always work with a different group of children.
- First Nations traditions and cultures are unique in the richness they bring to the child’s environment. Culturally sensitive equipment, stories, toys, art and music can all vary but still meet the richness outlined in Schedule G.
- Assessing Schedule G through a score card rating approach shuts down meaningful dialogue.
  - Allowing centres to say why they choose to do certain things in a certain way, as well as discussing the “feel of the room”, “how things transition” and “how children interact with the environment and the caregiver”, allows aspects of the “whole environment” to come into play when assessing programming.
- While a conversation with the Manager of a child care facility may be the most time efficient way to gather information, it may not shed light on whether Schedule G is being met in all the different spaces of a facility.
  - Meaningful discussion with all the staff working in a facility, as well as observations and documentation allow for a wider perspective to be explored.





- How can the views of parents and children be included when examining programming in a child care facility?
- Fixed caseloads for Licensing Officers can help to build stronger relationships with Licensees and child care staff.
- When Licensing Officers can be a *Guide by the Side* and work within a Coach Approach or inquiry model, staff in child care facilities may be more willing to explore programming with their Licensing Officers more as wondrous learning for children rather than just whether the facility ticked a specific box.
- Programming and managing children’s behaviour are often intertwined.
  - If educators become overwhelmed by children’s behaviours, programming can be affected in negative ways.
  - Could the length of time a child spends in a facility also have a direct correlation with successful programming?
- School Districts are incorporating the Early Learning Framework (ELF) into their new school age care on school grounds and recreational programs.
  - How can other licensed child care centres use the Early Learning Framework to build on and strengthen children’s interests?
- There are always shining stars in each community’s Early Childhood Sector and their experiences, when shared through tours or social media outlets, can provide valuable inspiration to other educators at other centres. Sharing the wealth of programming ideas is essential.
- Is there a place for enhancing Professional Development when it comes to assessing programming?
  - Could educators be given certificates and professional development hours if they participate in the evaluation of programming at their centres?
- Licensing Officers cannot abdicate their role if they see non compliance with Schedule G, but building trust and finding access points (social justice and equity) may help caregivers arrive at a place of partnership in helping build a competency based model.

While Licensing has the responsibility to ensure that all licensed child care facilities are in compliance with the minimum standards of all the Child Care Licensing Regulation, including Schedule G, the overall goal is to blend an understanding that Licensees and staff are the best people to understand the children and families they serve. Being able to link quantifiable programming to the overall wellbeing of children and families needs to be the shared goal in moving forward.

While this project did not conclude the best competency based model to use to assess programming in licensed child care facilities, the participants who shared their time and energy in this project reached the same conclusion, this conversation must continue as a way to support and enrich the work that is already being done in our vibrant early years communities.

## RESOURCES

**BC Early Learning Framework**

**Early Childhood Environment  
Rating Scales (ECERS)**

**The LOVIT Program Evaluation  
Process (PEP)**

**The City of Toronto’s  
Assessment for Quality  
Improvement (AQI)**

**Early Childhood Educators of BC**



# CELEBRATING

# YVONNE BETTS

# 30 YEARS

October 19, 1992 was a day I will never forget, my first day as a Child Care Licensing Officer. It was exciting and scary, but almost 30 years later I am so glad I took the leap and applied for the job.

My first experience with Licensing was many years ago while working in a daycare in Victoria. The Licensing Officer came to complete an inspection, walked around, talked to staff, and left. At the time of the inspection, the Licensing Officer had asked my boss what the facility needed more of. She replied, "toys in the housekeeping area". The assumption by all of my colleagues including my boss was that the inspection had gone well.

A week later, we received the inspection report in the mail which cited contravention to the daycare not having enough toys in the housekeeping area.

I have always remembered the impact that this had on myself and my colleagues. This experience helped me form my practice as a Licensing Officer and highlighted the importance of fair and transparent communication with Licensees.

During my years in Licensing, I have worked with some amazing Licensing Officers who have also helped me develop my practice to what is it today.

I started working with the Childcare team in 1992. Back then, we didn't have computers, and inspection reports were hand written and phone messages were written on pink slips of paper stacked on my desk.

I will never forget the trips to remote areas to inspect childcare centers: the boat trips, road trips, and cultural learning that I experienced.

After a couple of years, I started to help out with the Residential Care team and moved permanently to Residential Care in 2004 where I have been ever since.

Also in 2004, I expanded my family through adoption and have been blessed with my son Joey and daughter Tina and now have four beautiful grandchildren.



Over the years, Licensing has evolved with changes to the regulations and subsequently, changes in my practice as a Licensing Officer. The one thing that has remained constant is the endless dedication the caregivers have towards persons in care.

To the caregivers who work their butts off to ensure great care, you have my respect and admiration. Caregivers, in both child and residential care, have a very difficult job and make the difference in the life of a vulnerable child or adult.

To my numerous colleagues over the past 30 years, you have been a part of my journey, encouraging, challenging, supporting, and caring, and I could not have done it without you.

My goal as a Licensing Officer has always been to work as a team to ensure safe care is provided.

Yvonne Betts  
Residential Care Licensing Officer

***CCFL wants to acknowledge and share appreciation for Yvonne's many years of wonderful service. Best wishes to Yvonne on her new adventure into retirement.***



# LICENSING LINGO

## Outcome Based vs Prescriptive Based

By Stephen Morgan | Child Care Licensing Officer



### What does it mean when Licensing Officers use the wording outcome based or prescriptive based?

Licensing Officers conduct inspections of child care facilities as delegated to them by the Medical Health Officers on Vancouver Island.

Licensing Officers conduct inspections of child care facilities and assess compliance to the requirements identified in the legislation below:

- *The Community Care and Assisted Living Act,*
  - The Child Care Licensing Regulation, and
- The Director of Licensing – Standards of Practice are the guidelines for conducting inspections.

The requirements of the Child Care Regulation and the Director of Licensing – Standards of Practice are largely outcome based versus prescriptive.

An example of a **prescriptive** section of legislation would be Child Care Licensing Regulation section 47 – Heated Water. This prescriptive section of the Child Care Licensing Regulation states that hot water accessible to children is heated to no more than 49 degrees Celsius.

- At the time of inspection, if a Licensing Officer determines that the hot water accessible to children exceeds 49 degrees Celsius, this would be cited as non compliant.
- The expectation is that the hot water temperature must not exceed 49 degrees Celsius as the legislation specifically states the requirement for temperature.
- There is no ability on the part of the Licensing Officer to allow water temperature to exceed 49 degrees Celsius.

An example of an **outcome based** section of legislation would be Child Care Licensing Regulation section 17 – Hazardous Objects and Substances. This outcome based section of the Child Care Licensing Regulation states that children do not have access to any object or substance that may be hazardous to the health and safety of a child. It is in the outcome based items that Licensing Officers could have different opinions. What is accessible to one might not be to the other depending on background, knowledge of the facility, or past practice.

- The Child Care Licensing Regulation does not identify for a Licensee or a Licensing Officer how to achieve compliance with this section, so each situation can look different in how compliance is obtained.
- What Licensing Officers assess is the outcome of the decision that the Licensee makes in regards to hazards

- Does it appear more likely than less likely that a child can access a hazardous object or substance?

Let's start with a review of the labelling of a product.

Does the label state, keep out of reach of children? If so, that defines that it **must** be out of a child's reach.

The Licensee needs to consider where the product can be safely stored while considering factors such as the ages of the children, children's behaviours and ongoing monitoring.

Another example of a section of legislation that is outcome based would be a child that sleeps in a playpen in a bedroom ensuite.

- Considering a child's age and development, for some time a young child would not be able to get out of the playpen, but as the child grows and develops there could come a time when that same child could climb out of the playpen.
  - Therefore any hazardous products in the bedroom or ensuite, such as medication, must remain inaccessible at all times.
- Licensing Officers observe not only what is occurring at the moment of the inspection but what may occur over time.
- Licensing Officers are required to not only assess the risk to children at the time of inspection but what could occur over time.

If a Licensing Officer observes an immediate risk or a risk that could occur over time, the area of concern should be discussed with the Licensee or Manager, providing their observation and inquiring of how the risk can be mitigated.





Documentation on an Inspection Report must occur to ensure that the information and observations are captured and recorded for both the Licensee and Licensing. The record of the areas of contravention also supports monitoring and assessment of the corrective action the Licensee has taken or what may still remain as outstanding.

- For example, if a cleaning product that was observed as accessible during a Routine Inspection is still accessible during the Routine Inspection Follow Up, the Licensing Officer (would) discuss the observation with the Licensee and document on the inspection report what the Licensee's status of the outstanding area is and how they intend to reduce the risk to children. The risk remains in place.

A Licensing Officers' role is to assess risk, engage in a discussion with a Licensee of why it is a risk and inquire of the Licensee's process. The Licensing Officer would highlight specifically why it would be determined to be a contravention to the legislation.

What you can expect from Licensing Officers:

- Will not apply how one Licensee achieves compliance to another, each situation is reviewed on a case by case basis and with its own merits to determine compliance;

- Will engage the Licensee/Manager in a discussion and approach the situation with inquiry;
- Will not direct the Licensee on how to achieve compliance;
- Will be objective and clear in their observations; and
- Will be available for further clarification and questions after the inspection to support the Licensee.

When there are changes in the caseloads of Licensing Officers, Licensees may feel that the newly assigned Licensing Officer to their child care facility is documenting something that the former Licensing Officer never did.

For example, a Licensee stated that the former Licensing Officer had never documented non compliance about the baseboard heater being too hot or hazardous. When the file was reviewed, the former Licensing Officer had conducted inspections in the late spring to early autumn and therefore the baseboard heater was never on during the inspection.

Licensing Officers should work with Licensees to ensure that the health, safety, and programming needs of children in care are met and that Licensees have the tools to ensure that they can achieve compliance.

# LO CORNER

Daniela Karolys  
Child Care Licensing Officer



## What is your favourite part about being a Licensing Officer?

**My favourite part** about being a Licensing Officer is visiting Licensed Child Care facilities. Seeing each environment with its uniqueness and individuality is inspiring and reminds me daily of the importance of child care in creating strong communities.

Sometimes my job takes me to remote locations to see children in care all around Vancouver Island. When visiting centres, I often get inquisitive looks from children and many questions about who I am. These interactions and ensuring the health, safety and well-being of children gives me sense of fulfillment in my role as a Licensing Officer.



*A typo was discovered in the Licensing Lingo FAQs section in the Child Care Licensing Connect Newsletter April 2023.*

form if the family does not have access to a family doctor?

...ence with accessing a family doctor, it is acceptable the name and telephone number of a walk in medical and use or indicate 911.

- If a family was able to secure a family doctor, the licensee would have the parent update the information on the child's record.
- Please note that online Telus Health would ~~not~~ be accepted as meeting the requirements of Section 57(2)(d) of the Child Care Licensing Regulation.

**It should say...**

Please note that online Telus Health **would be accepted** as meeting the requirements of Section 57(2)(d) of the Child Care Licensing Regulation.

# CONTACT US

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