CHAPTER ONE: LICENSEE RESPONSIBLE

LICENSEE RESPONSIBLE	Monitoring Compliance and
	Contraventions
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	APPENDIX: Monitoring Checklist,
	Monitoring Students Compliance and
	Contraventions, Ministry of Education
	Compliance Action Plan

Purpose

To establish a consistent, constructive policy for compliance and contraventions of North Hastings Children's Services policies, procedures and individualized plans that will be monitored and on an ongoing basis, recorded and addressed using a progressive disciplinary correction process that addresses the inappropriate behaviour of employees.

Policy

North Hastings Children's Services supports the theory of progressive correction. This is the gradual process of modifying an employee's behaviour with respect to unacceptable conduct or work habits. It is not intended to downgrade, embarrass, or negatively affect the dignity of the employee. Monitoring of compliance and contraventions will be administered as fairly, objectively, and consistently as possible. Correction action will demonstrate management concerns and not be vindictive.

Compliance with all policies, procedures and Individualized plans must always be adhered to. All Individualized Plans and the following Policies and Procedures will be monitored for compliance annually and for each staff member a minimum of four times a year without notice as well as if an incident or observation occurs in regard to the following policies;

Playground Safety Policy Anaphylactic Policy Anaphylactic Individual Plans Sanitary Practices Policy Sleep Supervision Policy Serious Occurrence Policy Medication Policy
Supervision of Volunteers and Students Policy
Program Statement Implementation Policy
Staff Training and Development Policy
Criminal Reference Check/Vulnerable Sector Check Policy
Fire Safety/Evacuation Procedure
Individualized Support Plans
Waitlist Policy
Parent Issues and Concerns Policies and Procedures
Emergency Management Policies and Procedures
COVID-19 Infection Control Policies
Other Policies or Procedures

Procedures for Contraventions

1.0 Responsibility

The administrative team (Coordinator(s) and Executive Director) is responsible for monitoring compliance and contravention for staff. The administrative staff will observe interactions between staff, children and families by observing staff as they perform their duties throughout the day, by asking questions, by reviewing documentation (daily log, attendance, daily playground inspections). Each staff will have their own checklist in their individual file that documents compliance and contravention. Action will be taken in the form of verbal warnings, written warnings, suspension, or discharge.

Staff are responsible for monitoring the compliance/contravention of students and volunteers. All contraventions for volunteers will be directed to the Executive Director/designate, who will then document and meet with the volunteer to ensure a compliance plan is put into place and met.

Documentation will be maintained on the volunteers file. Staff will be responsible for monitoring and documenting student compliance/contravention, and contraventions will be documented and addressed immediately. Staff will complete a compliance note which will be maintained on the students file upon the completion of placement.

2.0 Guidelines

The requirements of corrective action are as follows:

2.1 The employee/student/volunteer must be made aware of the standards of performance.

- 2.2 The employee/student/volunteer must expect corrective action if the standard is not achieved.
- 2.3 All standards of performance must be consistently enforced.
- 2.4 The employee/student/volunteer must be made aware that his/her behaviour is unacceptable.
- 2.5 Before corrective action is administered, the employee must be allowed to make a statement on their actions.
- 2.6 Corrective action should be taken immediately after the alleged contravention and a compliance plan put in place.
- 2.7 All compliance and contravention observations must be documented on the attached Compliance Checklist and such documentation placed in the employee's personnel file, with a copy given to the employee. Written evidence must include dates, times, and specifics concerning the standard that was or was not achieved. Records of compliance or contraventions are to be stored in a secure location for at least three years from the date of creation. At the Executive Director's discretion, a Compliance Action Plan may be required to be completed by the Child Care Coordinator and staff member(s) involved.
- 2.8 All corrective actions must respect the privacy of the individual.
- 2.9 It must be determined if deficiencies on the part of management, such as lack of training, contributed to the concern.
- 2.10 In situations that are deemed serious, the employee can be asked to leave the premises (with pay) until a full investigation is completed.

3.0 Process

Corrective action is normally a four-step process, except in the case of certain kinds of conduct (e.g., abuse of client, theft of organization property, insubordination) which, because of their seriousness, justifies omitting one or more steps.

3.1 One or more verbal warnings.

The interview should take place in a private place. In the interview the supervisor should discuss the behaviour that has been observed, indicate proper procedures and policies, and ask for and **listen** to the employee's reason for the behaviour. The supervisor should then discuss the solution

and advise the employee that failure to correct the situation will result in further action.

3.2 One or more written reprimands.

The written reprimand should be sent to the employee as confirmation of the interview. The memo should cover all the items discussed during the interview. A copy should be placed in the employee's personnel file.

3.3 One or more suspension.

The length of the suspension will be dependent on the seriousness of the offense and whether there has been a prior action for the same offense. The suspension should also be followed up by a written letter to the employee, with a copy put in the personnel file and sent to the Executive Director. The letter should include a statement on the incident that occurred, the time the behaviour was unacceptable and future action that might have been taken if the behaviour is not corrected. The date for a follow-up meeting should also be specified.

4.0 Steps to Follow before Discharging an Employee

- 4.1 Suspend the employee and initiate a thorough investigation to obtain all the facts (unless there are absolutely no facts in dispute and the conduct calls for summary dismissal).
- 4.2 Obtain all the facts, including any remarks the employee in question might care to make.
- 4.3 Determine whether there is a rule or policy that calls for dismissal based upon the facts involved.
- 4.4 Determine whether the employee was aware of the rule or policy in question.
- 4.5 Determine whether there have been any exceptions to the rule or policy.
- 4.6 If there have been exceptions, determine if the factual situation at hand fits any of the exceptions.
- 4.7 If this is the first discharge case under a particular rule, double check the original purpose and intent of the rule and confirm that it is still a timely and proper one.
- 4.8 If the discharge has been brought about because of the corrective action procedure, recheck to make sure that all past steps and procedures have been properly followed.

- 4.9 Make sure the employee's file contains the proper documentation and witnesses' statements to support the discharge case.
- 4.10 Provide written notice of discharge to the employee.
- 4.11 A member of the board of directors and/or legal counsel (if required) will escort the employee from the premises.

The Coordinator shall ensure that this policy and procedures are reviewed as follows at the child care centre:

- 1. With employees, before they begin their employment.
- 2. With volunteers or students who will be interacting with children at the child care centre, before they begin to volunteer or before they begin their educational placement.
- 3. With each person described in paragraph 1 or 2, at least annually after the first review and at any other time when changes are made to the policy or a procedure.