



February 19, 2014

Mr. Jim Grieve, Assistant Deputy Minister
Ministry of Education, Early Years Division
Mowat Block, 24th Floor
Queen's Park, 900 Bay Street
Toronto, ON M7A 1L2

Dear Mr. Grieve:

Please find attached Niagara Child Care Sector Executive Committee's feedback on the proposed regulatory changes to the Day Nurseries Act.

Through collaboration, the Niagara Child Care Sector Executive Committee seeks to support a community in which all children have access to developmentally appropriate care and education. While our Mission is to serve as a voice supporting higher standards in child care for all children in Niagara, we also support those who work with children to continually improve the quality, value and range of services offered to Niagara families. As well we seek to inform Niagara's child care sector's policymakers and the public on issues related to early learning and care.

The membership of Niagara Child Care Sector Executive Committee is comprised of the following programs and agencies:

- Niagara licensed child care programs including: A Child's World Family Child Care Services of Niagara; YMCA of Niagara; Rosalind Blauer Centre for Child Care; Niagara Nursery School; and La Boîte à Soleil Child Care Services.
- Agencies include Niagara College Early Childhood Education Program, Brock University Bachelor of Early Childhood Education Program, the Early Childhood Community Development Centre, Regional Municipality of Niagara, Children's Services, Quality Child Care Niagara, and the Francophone Advisory Committee of Niagara.

On Wednesday February 5, 2014 the Niagara Child Care Sector Executive Committee held a Community Forum where approximately 70 early learning and child care professionals met to discuss and provide input to the attached paper. We sincerely appreciated having the opportunity to provide feedback and we would be happy to offer any additional information as desired. Please feel free to contact me at kim.cole@acw.on.ca or 905.735.1162.

Best Wishes,

Kim Cole

Kim Cole, RECE, ECE.C
Chair, Niagara Child Care Sector Executive Committee

Niagara's Response to Proposed Regulatory Changes to the Day Nurseries Act (DNA) and Early Childhood Educators Act (ECEA, 2007)

Niagara has a history of supporting and aligning with the vision to transition and modernize child care in Ontario and particularly it's following key features:

- an increasingly accessible and integrated system that is responsive and adaptable;
- high-quality programs that contribute to healthy child development which are centred around a view of children as competent, capable and curious and delivered by knowledgeable Early Childhood Educators (ECE's);
- choice and convenience for families by supporting a range of quality service options;
- a sustainable partnership between the Province and municipal service system manager, supporting collaboration with school boards, community agencies and other partners;
- a licensing framework for child care that is simplified, and flexible; and
- a suite of measures to support accountability and transparency.

Some examples of Niagara efforts to-date include:

- Elimination of the wait list for families seeking fee subsidies to help with child care costs;
- Working continuously with local school boards and child care providers during implementation of FDK to successfully mitigate the impacts to families and children using licensed child care;
- Working diligently to increase the quality of child care programs in Niagara through innovative programs such as provided by the local professional resource centre (ECCDC), Quality Child Care Niagara (QCCN) and the Coordinated Approach to Child Health (CATCH) pilot project, and;
- Enhancing access for families and strengthening existing partnerships through Integration Leader and Innovation Fund projects, and other initiatives such as Parent Direct Niagara www.parentdirectniagara.ca, informal networks / communities of practice, and the multi-sector Professional Learning Coalition.

It is within this context that nearly 70 early learning and child care professionals attended a meeting hosted by the Niagara Child Care Sector¹ in order to discuss, and provide input on, the proposed changes to Regulation 262 under the DNA and a proposed new Regulation under the ECEA, 2007.

Attendees were presented with a brief overview of Bill 143 (Child Care Modernization Act, 2013), the vision behind the transition and modernization of the child care system and detailed information on the proposed regulatory changes. Feedback was gathered through an electronic voting process on key questions and group discussions.

¹ The Niagara Child Care Sector, through collaboration, seeks to create a community in which all children have access to developmentally-appropriate care and education.

While many of the proposed changes were clearly seen as ways to improve the responsiveness, adaptability, and flexibility of the child care system as well as choice and accessibility for Ontario families, they often appeared to do so at the expense of quality, safety and the RECE profession as a whole. One attendee expressed Niagara's perspective very concisely stating that 'every child deserves the best possible care delivered by qualified staff'.

Further details on Niagara's response to the proposed changes in the three priority areas of Regulation 262 and the ECEA (2007) are found below.

Response to Proposed Changes to Regulation 262 under the DNA

1. Enhancing Quality

The majority of electronic voting respondents (79%) liked the idea of a policy statement to guide program content and educator practice that is grounded in ELECT and will connect to a child care licensing framework. This change was perceived as an important step in setting common standards that will help to increase the consistency and quality of program delivery across the province.

Quality Child Care Niagara (QCCN) has been promoting positive and responsive interactions and active exploration, play and inquiry, as well as supporting holistic development and the provision of engaging materials and environments for the past 10 years in the region. Given this, it is not surprising that 91% of voting attendees were not concerned with this proposed change.

However, there was a mixed response to the idea of replacing the requirement for a 'posted daily program plan' with one to 'communicate with parents on a regular and ongoing basis' about their children's experiences. While regular communication with parents is an established practice in Niagara, two thirds of respondents did not like, or only somewhat liked, this proposed change.

Concerns were expressed around the lack of details regarding what constitutes a 'regular and ongoing basis', as well as possible implications for professional practice (i.e. How to communicate effectively when the focus during drop-off and pick-up is, and should be, on the children? What if parents are unavailable and/or uninterested in communicating? How to ensure that there is adequate time to share each individual child's play based development?). The potential for negatively impacting RECE professional credibility was also noted in that, without a posted program plan, parents may be less likely to appreciate the developmental aspects that play based programs are built on. For example, one attendee noted that at least one parent commented that the program plan was like their pre-school school 'curriculum'.

There was also a mixed response to the idea of simplifying outdoor play requirements. While 44% of voters liked the notion, in principle, the majority of attendees either did not like, or only somewhat liked, the proposed change. A lack of information concerning which requirements

would be simplified (i.e. equipment, resources, time spent) and what minimum requirements would be maintained made it challenging to comment on this item. It was also noted that whether the requirements are simplified or not, the quality of play experiences being provided will continue to be critical.

There was a more positive response to the idea of having more flexibility around rest time. The majority (64%) liked this proposed change, noting that using their professional discretion will be a welcome change which will not only allow for more developmentally sensitive and responsive programs, but also increase alignment with family sleep schedules and parent expectations. However, concerns were also expressed around the implications that this change might have on ratios, scheduling staff break times, and space requirements.

The requirement that Private Home Day Care (PHDC) Home Visitors have an ECE diploma and be registered with the CECE was supported by the majority of attendees (86%), particularly as a means to increasing professionalism within the licensed child care sector and given the grandparenting consideration.

2. Increasing Access and Flexibility

The proposed alternate model for Centre-Based Child Care (CBCC) Same Age Groupings for Children under School Age, Group Sizes and Employee to Child Ratios was, by and large, not considered favourably, with only 28% of votes indicating that this change would reduce costs to families and make child care more financially viable.

While choice in age grouping schemes was seen as a good idea for operator adaptability (56%), concerns among the 72% who did not agree, or only somewhat agreed, with the proposed alternate model focused on possible impacts to quality and staffing.

Furthermore, the proposed minimum of one of three staff being a registered ECE for the 0-1 age grouping was not well received, with 70% of responses indicating that all three staff, and 20% suggesting that at least two staff, should be RECE's.

Overwhelmingly, the response from Niagara indicated that the most important aspect to address in the alternate model was the qualification of care providers (76%). While it was noted that ratios, group size and qualifications were all important there appeared to be less of an impact on group size and ratios in the proposed alternate scheme than on qualifications. There was concern that the new minimum requirements for qualified staffing may de-value registration in the College of Early Childhood Educators and de-motivate those who have taken the necessary steps to comply.

The alternate age groupings, ratios, group sizes, and staff qualifications for CBCC for school age children 6-8 years was not viewed as supporting program quality and child safety among most Niagara respondents (77%). Potential challenges regarding finding the required physical space

and ensuring qualified staffing levels were noted. Furthermore, the large group sizes involved, the non-ECE qualification standard and the lack of clarity around what would constitute 'regular access by non-ECE staff to ECE staff' caused concern around whether staff would have the appropriate behaviour management and special needs training and/or supports. Finally, there was some suggestion that the alternate model could negatively impact available employment opportunities for RECE's in the province.

A similar sentiment was expressed with regard to the alternate age groupings, ratios, group sizes, and staff qualifications for CBCC for school age children 9-12 years of age, with 79% of votes indicating that it did not support program quality and child safety. Ratios were perceived as the biggest area of concern (e.g. managing such a large group), along with providing adequate special needs supports.

Niagara suggests that the most important area to consider when proposing an alternate model for CBCC for school aged children is staff qualifications (58%), with ratios next (36%) and group size (6%) viewed as the least important aspect.

The proposed alternative CBCC multi-age grouping model was perceived as potentially supporting access for the unique and diverse child care needs of various cultural and linguistic communities but possibly doing so at the expense of quality and staff retention. Unanswered questions regarding which unique geographic/demographic challenges would qualify and who would be accountable for these decisions were also a concern.

The majority of those providing input did not agree, or only somewhat agreed, with the proposed ratios for 0-2 year olds (80%) and 2-4 year olds (62%). It was suggested that while the ratios might be helpful in addressing staffing pressures, the requirement to also provide developmentally-responsive interactions, experiences and environments may lead to higher levels of staff burn out and lower retention rates.

88% of respondents did not agree with the proposed 0-4 year old multi-age groups' maximum total group size of 20, with no more than eight children below 2 years of age. It was noted that centres could potentially accept 8 infants and 12 two year olds in the same room with just four staff and only two of whom are qualified. The majority of attendees indicated that they did not believe that in unique circumstances quality and safety could be sustained in either of the proposed multi-age grouping models (80% disagreement with Model 1 and 76% with Model 2). The lack of consideration for the developmental and special needs supports that could be required when adopting these alternate models was a significant concern expressed.

From the perspective of providing "high-quality programs that contribute to healthy child development" this arrangement seems untenable and could possibly encourage abuses as a means to improve financial viability or performance. At the very least, the proposed change could negatively impact the quality of the child care programs offered in Ontario and increase variances in quality between communities and programs.

47% of Niagara respondents thought that ratios were the most important item to address within the proposed multi-age grouping models, with 37% indicating staff qualifications and 15% suggesting group size as the priority item. It was also suggested that reducing the age spans within the models might make for a more acceptable alternative.

Generally, the proposed alternate multi-age grouping model was considered to be a complicated means of increasing access; with the potential to build in a structural pressure to provide 'any program' instead of a 'quality program'. While it may increase access to child care, this approach could further marginalize children and their families in communities with unique geographic/demographic needs and leave children with special needs vulnerable and/or inadequately supported. The Niagara community response also acknowledged that it is not possible to regulate for all possible configurations and recommends regulatory flexibility supported by appropriate policies.

The proposed amendments to children's age limitations within Private Home Day Care (PHDC) were generally not viewed positively, with 81% not supporting up to 5 children under the age of 10 in addition to PHDC provider's own children, 65% not supporting up to 5 children under the age of 6 in addition to their own, and 93% not supporting the proposed change that removes the '3 children under 3 years of age' limit. While it was acknowledged that this might benefit families in terms of more available services, it could be very taxing on providers and reduce the capacity to provide quality programming, and thereby also negatively affect the perception and credibility of the ECE profession. Additional reasons for concern included the very broad configuration of ages and developmental stages that could result and lack of accommodation for these possibilities, as well as for children with special needs within PHDC settings.

3. Enhancing Health and Safety

Niagara was unanimous in its support for the proposed changes concerning Criminal Reference Checks and Vulnerable Sector Screening requirements for individuals in both home and centre based child care.

The proposed regulatory changes with regard to First Aid training are already being met or surpassed in the region, in order to ensure that staff absences can be adequately covered while also maintaining health and safety. Given this, the community recommended that 100% of staff in child care centres should maintain current certification, especially if it needs to be updated once every five years (as opposed to every 2 years).

Almost $\frac{3}{4}$ of those in attendance (73%) supported the proposed change requiring licensed operators to have their menus reviewed by a registered dietician, stating that this was a natural continuation of progress already made regarding the provision of nutritional meals and snacks. Of the 26% who did not, or only somewhat, agreed, the reasons noted were that the change didn't go far enough (if only 'reviewed' then not ensuring nutrition) or was unnecessary due to the guidelines and supports already provided by Public Health.

Response to new Regulation under the Early Childhood Educators Act, 2007

The proposed regulation to specify which sectors of society must be represented among the Public Appointees to the CECE Council is generally supported but does not go far enough in Niagara's opinion. In order to better ensure improvements to access and choice and adequate consideration of ratios and the provision of quality child care, they recommend appointing a representative from each of the following on the CECE Council:

- First Nation
- Inuit
- Metis
- Aboriginal
- Expertise with children with special needs

In conclusion, 76% of attendees did not believe that the key features supporting the vision for modernization and transition were reflected in the proposed changes to regulations. Of primary concern were the possible negative implications on program quality, safety, the focus on child development and the ECE profession overall.

In addition to concerns regarding ratios, group size and employee qualifications, the absence of consideration for special needs children and the service delivery realities that are occurring due to increased prevalence over time was the greatest dissatisfaction expressed by the attendees at the community consultation. As a recognized leader in this area, Niagara understands how important it will be to adequately address this issue if we are to realize a vision that includes an increasingly accessible and integrated system that is responsive and adaptable and offers high-quality programs that contribute to healthy child development for all children in Ontario.

Some final suggestions for better alignment with the intended vision include: province-wide early developmental screening, such as implemented by Quality Child Care Niagara; the need to ensure that care is taken in subsequent policy development, and; sufficient flexibility in guidelines so as not to hinder local programming needs.