Monitoring Student Compliance and Contravention

Of Policies and Procedures

Staff/Volunteer/Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Policy & Procedure** | **Compliance****Y/N** | **Contravention** | **Action Plan** | **Follow Up Plan/dates** |
| Program Statement& Implementation Policy |  |  |  |  |
| Professional Development and Training Policy |  |  |  |  |
| Sleep Supervision |  |  |  |  |
| Supervision of Students and Volunteers |  |  |  |  |
| Vulnerable Sector Check Policy |  |  |  |  |
| Playground Safety |  |  |  |  |
| Anaphylactic Policy |  |  |  |  |
| Anaphylactic Individual Plans |  |  |  |  |
| Staff Training & Development |  |  |  |  |
| Individual Service Plans |  |  |  |  |
| Fire Safety & Emergency Evacuation |  |  |  |  |
| Sanitary Practises Policy |  |  |  |  |
| Medication Policy |  |  |  |  |
| Serious OccurrencePolicy |  |  |  |  |
| Waitlist Policy |  |  |  |  |
| Parent Issues and Concerns Policies and Procedures |  |  |  |  |
| Emergency Management Policies and Procedures |  |  |  |  |
| COVID-19 Infection Control Policies (Chapter 12) |  |  |  |  |
| Policy: |  |  |  |  |
| Policy: |  |  |  |  |

Monitoring Student Compliance and Contravention of Policies & Procedures

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have supervised\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Staff Name Student Name

For the period of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(dates) and have found them to be in compliance with all required policies, procedures and plans with the exception of the contravention(s) noted on their file.

Staff Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_