

– put a small amount of the product in your hand, apply it sparingly to exposed areas only or to clothing, only at the nape of the neck and ankles, as far as possible;

– make sure the children do not touch the areas to which the insect repellent has been applied. If they do touch those areas, they should wash their hands with soapy water; and

– wash your hands after applying the insect repellent to all the children in the group, even if you wore gloves to apply it.

Wash the treated skin with soap and water when the children come inside or when protection is no longer needed. This is particularly important if insect repellent is applied several times in the same day or on several consecutive days.

AUTHORIZATION FORM FOR THE APPLICATION OF INSECT REPELLENT

A parent is not required to consent to the application of this Protocol. However, if a parent does not sign the authorization form, insect repellent may not be applied to a child unless the parent and a member of the Collège des médecins du Québec give written authorization. A parent may limit the period of validity of the authorization by indicating the duration of the authorization in the space provided.

I hereby authorize _____
(name of the childcare centre, person recognized as home childcare provider or person who assists the provider, as the case may be, or person designated under the second paragraph of section 67 of the Regulation respecting childcare centres, where applicable) to use on my child, in accordance with this Protocol, insect repellent sold under the following brand name:

Brand name, form (lotion, cream, gel, non-aerosol or aerosol spray) and concentration of the active ingredient DEET

Child's surname and given name

Authorization period

Parent's signature

_____/_____/_____
Date

This Protocol was prepared by the Ministère de l'Emploi, de la Solidarité sociale et de la Famille and approved by a working group composed of representatives from the health and social services network and childcare services. The information it contains reflects the state of knowledge on the subject in 2003.”

42. This Regulation comes into force on 1 June 2004.

6300

Gouvernement du Québec

O.C. 435-2004, 6 May 2004

An Act respecting childcare centres
and childcare services
(R.S.Q., c. C-8.2)

Day care centres — Amendments

Regulation to amend the Regulation respecting day care centres

WHEREAS paragraphs 1, 1.1, 1.2, 2, 5, 6, 10.2, 17, 18, 19.1 and 24 of section 73 of the Act respecting childcare centres and childcare services (R.S.Q., c. C-8.2) provide that the Government may make regulations, for the whole or part of the Québec territory, on the matters referred to therein;

WHEREAS the Government made the Regulation respecting day care centres by Order in Council 1971-83 dated 28 September 1983;

WHEREAS it is expedient to amend the Regulation to provide for the screening of day care centre permit applicants and permit holders as well as day care centre directors and employees, and to establish new qualification requirements for the staff;

WHEREAS it is expedient to amend the Regulation with respect to the safety of the outdoor play area and play equipment and the administration of medications;

WHEREAS, in accordance with sections 10 and 11 of the Regulations Act (R.S.Q., c. R-18.1), a draft of the Regulation to amend the Regulation respecting day care centres was published in Part 2 of the *Gazette officielle du Québec* of 5 March 2003 with a notice that it could be made on the expiry of 45 days following that publication;

WHEREAS the 45-day period has expired;

WHEREAS it is expedient to make the Regulation with amendments;

IT IS ORDERED, therefore, on the recommendation of the Minister of Employment, Social Solidarity and Family Welfare and the Minister for Family Welfare:

THAT the Regulation to amend the Regulation respecting day care centres, attached to this Order in Council, be made.

ANDRÉ DICAIRE,
Clerk of the Conseil exécutif

Regulation to amend the Regulation respecting day care centres*

An Act respecting childcare centres and childcare services (R.S.Q., c. C-8.2, s. 73, pars. 1, 1.1, 1.2, 2, 5, 6, 10.2, 17, 18, 19.1 and 24; 2002, c. 17, s. 18)

1. Section 1 of the Regulation respecting day care centres is amended by striking out “, date of birth” in paragraph 4.

2. Section 2 is amended

(1) by replacing paragraph 4 by the following:

“(4) for himself or, if the applicant is a legal person, for each director, a current attestation establishing that no impediment exists or a current attestation of information that may establish an impediment under section 5.1 or 5.2, as the case may be;”;

(2) by replacing paragraph 7 by the following:

“(7) a true plan, to scale, of the outdoor play space referred to in the first paragraph of section 47.2, together with

(a) a site plan for the play space showing its location in relation to the facility, as well as the location and layout of the outdoor play area, if there is one;

(b) in the case of the outdoor space referred to in subparagraph 2 of the first paragraph of that section, a copy of the duly registered title of ownership, lease or authorization referred to in that subparagraph; and

(c) the certificate referred to in section 47.4, where applicable, current to the application;”;

(3) by adding the following paragraph at the end:

“In this Regulation,

“attestation establishing that no impediment exists” means the document issued by a police force in Québec confirming that the data banks accessible to the force do not contain any information needed to ascertain the existence of an impediment under subparagraph 2 or 3 of the first paragraph of section 18.1 of the Act or an impediment within the meaning of those provisions under section 8; and

“attestation of information that may establish an impediment” means the document issued by a police force in Québec setting out the information needed to ascertain the existence of an impediment under subparagraph 2 or 3 of the first paragraph of section 18.1 of the Act or an impediment within the meaning of those provisions under section 8, and contained in the data banks accessible to the force.”.

3. The following is inserted after section 5:

“§1.1. *Requirements for permit holders*

5.1. Where an application for a day care permit is submitted by a natural person, the applicant must have an investigation of the information needed to ascertain the existence of an impediment under subparagraph 2 or 3 of the first paragraph of section 18.1 of the Act carried out in respect of himself or herself and provide the Minister with an attestation establishing that no impediment exists or, as the case may be, an attestation of information that may establish an impediment for the Minister’s assessment.

A permit holder must provide a new attestation if the Minister, on being made aware that the information referred to in the first paragraph has changed, requires a new attestation be provided.

5.2. Where an application is submitted by a legal person, every director must, at the permit applicant’s request, consent in writing to an investigation of the information needed to ascertain the existence of an impediment under subparagraph 2 or 3 of the first paragraph of section 18.1 of the Act. The director must also

* The Regulation respecting day care centres, made by Order in Council 1971-83 dated 28 September 1983 (1983, *G.O.* 2, 3527), was last amended by the Act to amend the Act respecting childcare centres and childcare services as regards places giving entitlement to grants (2003, c. 27, s. 13). For previous amendments, refer to the *Tableau des modifications et Index sommaire*, Québec Official Publisher, 2004, updated to 1 March 2004.

consent to the communication of the attestation establishing that no impediment exists to the permit applicant and to the Minister or, as the case may be, provide the permit applicant with the attestation of information that may establish an impediment and consent to its communication to the Minister for the Minister's assessment.

A director is also subject to the requirements prescribed above, with the necessary modifications, where a permit holder must provide such an attestation in respect of the director pursuant to sections 5.3 and 6.

5.3. Where there is a change of director, a permit holder must, within 60 days of the change, provide the information and documents required by paragraph 4 of sections 1 and 2 in respect of the new director.

The permit holder must also provide a new attestation for a director if the Minister, on being made aware that the information referred to in the first paragraph of section 5.2 has changed, requires a new attestation be provided.”

4. The first paragraph of section 6 is replaced by the following:

“**6.** An application for the renewal of a day care centre permit must be submitted at least 90 days before the expiry date of the permit, together with the information and documents required by paragraph 4 of section 1 and subparagraph 4 of the second paragraph of section 2. The application must also be accompanied by the other information and documents listed in section 2 if the information and documents previously submitted are no longer accurate or are incomplete.”

5. Section 8 is replaced by the following:

“**8.** No person working in a day care centre during its operating hours, including a trainee or a volunteer who is present on a regular basis at the day care centre, may have an impediment within the meaning of subparagraph 2 or 3 of the first paragraph of section 18.1 of the Act that is connected, in the latter case, with the aptitudes and conduct required to hold a position in a day care centre, unless the impediment relates to an indictable or criminal offence other than an offence listed in the schedule to the Criminal Records Act (R.S.C. 1985, c. C-47) for which a pardon has been granted.”

6. The following is added after section 8.1:

“**8.2.** Before being hired, the person must, at the request of the permit applicant or permit holder, consent in writing to an investigation of the information needed to ascertain the existence of an impediment within the

meaning of subparagraph 2 or 3 of the first paragraph of section 18.1 of the Act. The person must also consent to the communication of the attestation establishing that no impediment exists to the permit applicant or permit holder or, as the case may be, submit the attestation of information that may establish an impediment to the permit applicant or permit holder for assessment.

Once hired, the person is also subject to the requirements prescribed above where the attestation dates back three or more years or where the permit holder must have a new investigation carried out pursuant to section 8.4.

8.3. Every person who regularly transports children on behalf of a permit holder is subject to the requirements prescribed by sections 8 and 8.2, with the necessary modifications.

8.4. A permit holder must provide a new attestation for a person referred to in section 8 or 8.3 if the Minister, on being made aware that the information referred to in section 8.2 has changed, requires a new attestation be provided.”

7. Section 9 is replaced by the following:

“**9.** In a day care centre, the permit holder must ensure that at least one day care staff member out of three holds

(1) a diploma of college studies in early childhood education or in childcare education;

(2) a diploma of college studies in special education, together with an attestation of college studies in early childhood education or in childcare education or a university certificate in early childhood studies or in childcare education;

(3) an attestation of college studies in early childhood education or in childcare education in a program requiring a minimum of 1,200 hours of training, a university certificate in early childhood studies or childcare education or in child studies, together with three years of experience, on a full-time basis or the equivalent, in duties involving the implementation of a program of educational activities for groups of preschool-age children in a home childcare service operated by a person recognized by the holder of a home childcare agency permit before 1 September 1999 or, after that date, by the holder of a childcare centre permit, both issued under the Act, in a day care or childcare centre operated by the holder of a permit issued under the Act, or in a preschool, a kindergarten or a school childcare service, all operated by an establishment recognized by the Ministère de l'Éducation;

(4) a bachelor's degree with a minimum of one minor in one of the following fields of study: early childhood studies, pre-school education, psycho-education, child development (psychology), remedial or special education, including or together with three university-level or college-level courses of a minimum of 45 hours each in child health, child safety and the educational approach; or

(5) an attestation of college studies for early childhood educators working with Native children.

9.0.1. A day care staff member who meets the following requirements is deemed to have the qualifications referred to in section 9:

(1) the staff member worked 60% or more of the time on a full-time basis for one or more day care centre permit holders between 19 October 1983 and 19 October 1988 and was assigned to implementing the program of activities for the children;

(2) the staff member has successfully completed one college-level or university-level course of a minimum of 45 hours in each of the following fields:

(a) child development;

(b) hygiene and health of young children;

(c) development of programs of activities for preschool-age children; and

(d) childcare services in Québec.

9.0.2. Any person who, on 31 May 2004, has one of the qualifications listed in section 9, as it read on that date, is deemed to have the qualifications required by section 9.

This also applies to any person who, on 31 May 2004, holds an attestation in childcare studies or in family studies and has three years of experience, on a full-time basis or the equivalent, in duties involving the implementation of a program of activities for groups of preschool-age children in a childcare service or in a health, social services or educational establishment.

9.0.3. Any person who, on 31 May 2004, is enrolled in a program of studies leading to one of the qualifications listed in section 9, as it read on that date, is deemed to have the qualification on the date the person completes the program.

9.0.4. Any person who, on 31 May 2004, is enrolled in one of the courses leading to the qualification referred to in subparagraph 4 of the first paragraph of section 9, as it read on that date, is deemed to have the qualification on the date the person completes the courses.

9.0.5. Any person who, on 31 May 2004, is in the process of acquiring the experience leading to the qualification referred to in subparagraph 5 of the first paragraph of section 9, as it read on that date, as well as any person who, on that date, holds an attestation in childcare studies or in family studies is deemed to have the qualification on the date the person acquires the required three years of experience.

9.0.6. The holder of a day care permit must ensure that the one day care staff member out of three who has one of the qualifications required by section 9 is present each day with the children for at least half of the centre's operating hours.

Where the number of day care staff members is fewer than three, at least one of those staff members must have one of the qualifications required by section 9.”.

8. Section 9.1 is amended

(1) by replacing “in sections 9” in subparagraph 1 of the first paragraph by “of sections 9 to 9.0.5”;

(2) by replacing subparagraph 2 of the first paragraph by the following:

“(2) for each person referred to in sections 8 and 8.3, the attestation required by section 8.2 dating back less than three years and, in the case of the attestation of information that may establish an impediment, accompanied by a declaration by the permit holder or by a certified true copy of the board of directors' resolution attesting that there is no impediment under section 8 in respect of the person.”.

9. Section 17 is amended by replacing the third paragraph by the following:

“Despite the first paragraph, acetaminophen may be administered and insect repellent applied without medical authorization to a child received, provided it is done in accordance with the protocol set out in Schedule I. Saline nasal drops and oral hydration solutions may be administered and zinc oxide-based cream for the seat area, calamine lotion and sun cream without PABA applied without medical authorization to a child received, provided the child's parent has given written authorization.”.

10. Section 19 is amended by inserting “, insect repellent, calamine lotion, zinc oxide-based cream for the seat area” after “hydration solutions” in the first paragraph.

11. Section 26 is replaced by the following :

“**26.** A day care centre permit holder must ensure that any climbing apparatus, swing, slide or similar device installed indoors and designed for indoor use has smooth surfaces with no sharp edges. It must be safe and placed on a surface that can absorb the impact of a fall.”.

12. Section 28 is amended by replacing “wading pool is” by “portable wading pool is”.

13. Section 41 of the French text is amended by replacing “jeux” in the first paragraph by “jeu”.

14. Section 43 is revoked.

15. The following is inserted after section 47:

“DIVISION V.1

LAYOUT, EQUIPMENT, MAINTENANCE AND SAFETY OF OUTDOOR PLAY SPACES AND OUTDOOR PLAY AREAS

47.1. In this Division, “outdoor play area” means the part of the outdoor play space that has play equipment intended for the children who attend the day care centre.

47.2. A day care centre permit holder must provide the children with

(1) an outdoor play space enclosed by a safe fence at least 1.20 m in height, contiguous to the building housing the rooms where the permit holder provides day care ;

(2) an outdoor play space enclosed by a safe fence at least 1.20 m in height located less than 500 m from the facility, to which the permit holder has access during the operating hours of the day care centre by a duly registered title of ownership, by a lease with a term of at least 5 years or by a written authorization guaranteeing free access for the same period ; or

(3) an outdoor children’s play space in a public park ; the play space must be within 500 m of the facility, be enclosed by a fence and be accessible during the operating hours of the day care centre.

The play space must have a suitable and safe layout and, if it has an outdoor play area, that area must be adapted to the age of the children received.

The minimum surface area of the play space referred to in subparagraphs 1 and 2 of the first paragraph must be 4 m² per child, while allowing at least one third of the maximum number of children indicated on the permit to be accommodated there at a time.

The distance of 500 m referred to in subparagraphs 2 and 3 of the first paragraph is measured by the shortest route normally taken to walk the distance between the outdoor play space and the building housing the day care centre.

47.3. The day care centre permit holder must ensure that the outdoor play area and the play equipment in that area meet Canadian Standards Association Standard CAN/CSA-Z614-03, Children’s Playspaces and Equipment (Etobicoke, 2003).

The permit holder must also comply with the standard as it pertains to inspections and maintenance, and must prepare the annual report and maintain all the records referred to in the standard.

47.4. A day care permit holder who equips the outdoor play space of a day care centre with an outdoor play area or play equipment must, within 30 days of laying out the area, provide the Minister with a current layout certificate certifying that the outdoor play area and the play equipment in that area comply with the requirements of the second paragraph of section 47.2 and the first paragraph of section 47.3. The certificate must be issued by an architect, engineer or technologist who is a member of his or her respective professional order or by a landscape architect who is a member of the Association des architectes paysagistes du Québec under which the landscape architect is authorized for that purpose.

47.5. The day care centre permit holder must, no later than 30 June of the third year following the year in which the certificate was issued, provide the Minister with a new certificate in conformity with the requirements of section 47.4 that dates back less than four months.

47.6. The day care centre permit holder must notify the Minister in writing within 10 days of any change affecting the outdoor play area or play equipment. The permit holder must, on request, provide the Minister with a new certificate in conformity with the requirements of section 47.4.

47.7. Sections 47.3 to 47.6 do not apply to an outdoor play area located in a public park.

47.8. A day care centre permit holder must ensure that the day care staff members supervise the children and watch them at all times when they are using play equipment.”.

16. Section 49 is amended by deleting subparagraph 3 of the first paragraph.

17. Section 51 is replaced by the following :

“**51.** A day care centre permit holder who contravenes any of the provisions of sections 9, 9.0.6, 9.1 to 13, 15, 19, 19.2 to 36, 39 to 42, 44 to 47, subparagraphs 1 and 2 of the first paragraph of section 47.2, sections 47.3 to 47.6, 47.8, 48 or 49 is liable to the fine prescribed in section 74.9 of the Act.”.

18. Section 56 is amended

(1) by replacing “section 43” in the first paragraph by “section 47.2”; and

(2) by replacing “jeux” wherever it appears in the French text by “jeu”.

19. The following is inserted after section 56:

“**56.1.** A day care centre permit holder must provide the Minister with the attestation required by section 5.1 or 5.2, in respect of himself or herself or, if the holder is a legal person, in respect of each director, no later than 1 December 2004. The requirements of section 5.1 or 5.2, as the case may be, apply to the person referred to above.

56.2. Unless a day care centre permit holder has an attestation establishing that no impediment exists or an attestation of information that may establish an impediment that dates back less than three years, the permit holder must have an investigation of the information needed to ascertain the existence of any impediment under section 8 carried out no later than 1 December 2004 in respect of each person who works at the day care centre during its operating hours or who regularly transports children on behalf of the permit holder. The requirements of section 8.2 apply to a person referred to above, with the necessary modifications.

56.3. A day care centre permit holder who, on 1 June 2004, had already equipped the outdoor play space of the day care centre with an outdoor play area and play equipment must provide the Minister, no later than 1 October 2004, with a certificate in conformity with the requirements of section 47.4 that dates back less than four months.

A day care centre permit holder is not required to comply with sections 7.1 to 7.5, 7.7, 9.1.1, 9.2 to 9.6.3 and 9.8 of the standard referred to in section 47.3 before 1 June 2007. However, the permit holder must comply with the provisions of those sections upon repairing, replacing or adding to the equipment.”.

20. The protocol entitled “1. PROCEDURE FOR ADMINISTERING ACETAMINOPHEN” in Schedule I is replaced by the following :

“1. PROTOCOL FOR ADMINISTERING ACETAMINOPHEN

Acetaminophen is the generic name of the medication that is commercially available under the following brand names: Atasol, Temptra, Tylenol and other house brand names.

Under the Regulation respecting day care centres, acetaminophen may be administered without medical authorization to a child received in a day care centre, provided it is administered in accordance with this Protocol and that a parent has given written consent.

A parent is not required to consent to the application of this Protocol. However, if a parent does not sign the authorization form, the medication may not be administered to the child unless the parent and a member of the Collège des médecins du Québec give written authorization.

BASIC RULES

Within the framework of this Protocol, acetaminophen may be administered solely to reduce fever. It may not be administered

— to children under two months of age;

— to relieve pain;

— during more than 48 consecutive hours (two days);
or

— to children who have received medication containing acetaminophen in the preceding four hours.

In those four cases, the Protocol does not apply and written authorizations from a physician and the parent are required to administer the medication.

A day care centre may have its own acetaminophen container, in which case the brand name, the dosage form (drops, tablets, syrup) and the concentration must be indicated on the authorization form.

To avoid confusion, acetaminophen should be kept on hand in only one of its two liquid forms: drops or syrup. If children under 24 months of age are received, it is recommended that drops be used instead of syrup. If the centre elects to use syrup for the other children, it is recommended to use only one concentration.

The dosage must not under any circumstances exceed the dosage guidelines below or the dosage prescribed on the medication container.

An adult tablet must never be cut up and administered to a child as it could alter the dosage: an inadequate dose would not provide the expected result, while an overdose could pose serious risks to the child.

It is important to always check the concentration of acetaminophen and to follow the dosage instructions on the container since new products of greater or lesser strength may appear on the market. It is also recommended to use only one concentration if the brand name selected is available in more than one concentration.

Any administration of acetaminophen must be recorded in the register of medications prescribed by the Regulation and the parent must be informed.

WHAT YOU SHOULD KNOW

What is a normal temperature ?

The normal temperature range will vary depending on the measurement method used, as illustrated in the table below.

Measurement Method	Normal Variation in Temperature
Rectal	37.2°C to 37.5°C
Oral	35.5°C to 37.5°C
Axillary (underarm)	34.7°C to 37.0°C
Tympanic (ear)	35.8°C to 37.5°C

What is fever ?

Fever is defined as a body temperature that is higher than normal. Normal temperature may vary somewhat depending on the child, the time of day, the outdoor temperature and the level of activity. The cause of the fever is more important than the temperature itself.

It is generally considered that there is fever if the rectal, oral or tympanic temperature is above 38.0°C or if the axillary temperature is above 37.5°C.

The only sure way to measure fever is to take the child's temperature. A child's temperature must be checked whenever the child's general condition (frantic crying, loss of energy, change in general condition, loss of appetite, etc.) or physical symptoms (flushed cheeks, excessively warm skin, sweating) could be signs of fever. The following measures are recommended:

- take the rectal temperature of children under two years of age;

- take the rectal, tympanic or axillary temperature of children between two and five years of age;

- take the oral temperature of children over five years of age;

- use the appropriate thermometer;

- always use disposable plastic tips as they are more hygienic; otherwise, disinfect the thermometer properly before and after each use;

- if the child has just been physically active, wait approximately 15 minutes as the child's body temperature may be higher than normal if it is taken immediately after an activity;

- always comply with the time requirements for the thermometer being used since the time required may vary with the thermometer. A digital thermometer, which requires less time to take the temperature, is recommended.

WHAT YOU SHOULD DO

If you notice the start of an increase in body temperature (a rectal, oral or tympanic temperature between 37.5°C and 38.0°C or an axillary temperature between 37°C and 37.5°C), and if the child's general condition is good and there are no specific medical precautions that need to be taken,

- dress the child comfortably;

- have the child drink (water, fruit juice or milk) at more frequent intervals;

- keep an eye on the child and take the child's temperature again after 60 minutes, or sooner if the child's condition seems to be worsening; and

- inform the parent of the child's condition.

If a child under two months of age has a fever (a rectal temperature above 38.0°C or an axillary temperature above 37.5°C),

— apply the measures listed above for an increase in body temperature (dress comfortably, have the child drink and keep an eye on the child);

— notify the parent immediately; ask the parent to come and pick up the child and, in the meantime, apply the measures listed above; and

— if the parent cannot come to pick up the child, call the persons designated by the parent as emergency contacts and, if they cannot be reached, take the child to a medical service, to the local community service centre or to a hospital emergency department; do not administer acetaminophen without a written medical authorization for the child.

If a child two months of age or older has a fever (a rectal, oral or tympanic temperature above 38.0°C or an axillary temperature above 37.5°C),

— apply the measures listed above for an increase in body temperature (dress comfortably, have the child drink and keep an eye on the child);

— inform the parent of the child's condition;

— administer acetaminophen according to the dosage guidelines below or the dosage instructions on the medication container, in accordance with the rules in this Protocol; and

— one hour after administering acetaminophen, take the child's temperature again; if the temperature is still high, ask the parent to come and pick up the child. If the parent cannot be reached, call the persons designated by the parent as emergency contacts and if they cannot be reached, take the child to a medical service, to the local community service centre or to a hospital emergency department.

When you administer acetaminophen,

— always use simple words, appropriate to the child's age, to explain to the child the relationship between his or her condition, the medication being taken and the expected results;

— wash your hands before handling the medication;

— check the concentration, dosage instructions and expiry date on the medication container;

— pour the medication (drops or syrup) into a medicine spoon calibrated in ml, then administer it to the child; never put a medicine dropper directly into a child's mouth, unless it is a disposable dropper. The spoon must be washed in very hot water after use;

OR

— if administering a tablet, put it in a goblet then have the child take it. If the child wants to, he or she may drink a little water after taking the tablet; and

— wash your hands after administering the medication.

ACETAMINOPHEN: DOSAGE

CONCENTRATION

Weight	Drops	Syrup		Tablets	
	80 mg/ml	80 mg/5 ml	160 mg/5 ml	80 mg/tablet	160 mg/tablet
2.4-5.4 kg	0.5 ml (40 mg)	2.5 ml (40 mg)	1.25 ml (40 mg)	-	-
5.5-7.9 kg	1.0 ml (80 mg)	5.0 ml (80 mg)	2.5 ml (80 mg)	-	-
8.0-10.9 kg	1.5 ml (120 mg)	7.5 ml (120 mg)	3.75 ml (120 mg)	-	-
11.0-15.9 kg	2.0 ml (160 mg)	10.0 ml (160 mg)	5 ml (160 mg)	2 tablets (160 mg)	1 tablet (160 mg)

CONCENTRATION

Weight	Drops	Syrup		Tablets	
	80 mg/ml	80 mg/5 ml	160 mg/5 ml	80 mg/tablet	160 mg/tablet
16.0-21.9 kg	3.0 ml (240 mg)	15.0 ml (240 mg)	7.5 ml (240 mg)	3 tablets (240 mg)	1.5 tablets (240 mg)
22.0-26.9 kg	4.0 ml (320 mg)	20 ml (320 mg)	10 ml (320 mg)	4 tablets (320 mg)	2 tablets (320 mg)
27.0-31.9 kg	5 ml (400 mg)	25.0 ml (400 mg)	12.5 ml (400 mg)	5 tablets (400 mg)	2.5 tablets (400 mg)
32.0-43.9 kg	6 ml (480 mg)	30.0 ml (480 mg)	15.0 ml (480 mg)	6 tablets (480 mg)	3 tablets (480 mg)

– The dosage unit may be repeated every four hours.

– Do not exceed six doses in a 24-hour period.

– The dosages shown in the chart above are based on a maximum dose of 10 to 15 mg/kg.

WARNING**ACETAMINOPHEN IN RELATION TO IBUPROFEN AND OTHER MEDICATIONS****IBUPROFEN :**

— A warning is needed since a clear distinction must be made between acetaminophen and ibuprofen.

— Although both medications have antipyretic (fever-reducing) properties, they must not be confused because they belong to different classes of medications and work differently. Ibuprofen must not, under any circumstances, be substituted for acetaminophen for the following reasons:

– acetaminophen and ibuprofen belong to different classes of medications;

– ibuprofen is a non-steroidal anti-inflammatory drug (NSAID);

– the dosage and frequency of administration are different for the two medications;

– it has been established that all NSAIDs may affect respiratory functions; that is why ibuprofen is contraindicated in persons who have or have had asthma; and

– a cross-sensitivity has been observed between salicylates and ibuprofen (allergic reaction).

— When applying this Protocol, care must be taken to never confuse ibuprofen and acetaminophen or substitute one for the other.

— This Protocol may be applied as indicated even if a child has received ibuprofen at home before arriving at the day care centre, regardless of the time elapsed. There is no contra-indication to or danger in giving acetaminophen to a child who received ibuprofen earlier since the two medications do not work in the same way.

OTHER MEDICATIONS :

— The availability of an increasing number of combination medications containing acetaminophen and another pharmaceutical product on the market calls for greater care in applying this Protocol. A number of cough syrups, for example, contain acetaminophen.

— Good communication between the parents and the person authorized to administer the medication is important. The person authorized to administer the medication must know what medication the child received in the four hours before arriving at the day care centre so the Protocol may be applied safely, for the health and well-being of the child.

— If the person authorized to administer the medication notices fever in a child within four hours of the child's arrival and the person has been made aware that the child took syrup or other medication earlier, the person may contact a pharmacist to obtain the necessary information concerning the medication and apply the Protocol accordingly.

AUTHORIZATION FORM FOR THE ADMINISTRATION OF ACETAMINOPHEN

A parent is not required to consent to the application of this Protocol. However, if a parent does not sign the authorization form, acetaminophen may not be administered to the child unless the parent and a member of the Collège des médecins du Québec give written authorization. A parent may limit the period of validity of the authorization by indicating the duration of the authorization in the space provided.

I hereby authorize _____

(name of day care centre)

to administer to my child, in accordance with this Protocol, acetaminophen sold under the following brand name:

Brand name, form (drops, syrup or tablets) and concentration

Child's surname and given name

Authorization period

_____/_____/_____
Parent's signature Date

This Protocol was prepared by the Ministère de l'Emploi, de la Solidarité sociale et de la Famille and approved by a working group composed of representatives from the health and social services network and childcare services. The information it contains reflects the state of knowledge on the subject in 2002."

21. The protocol entitled "2. PROCEDURE FOR ADMINISTERING ORAL HYDRATION SOLUTIONS" in Schedule I is replaced by the following:

"2. PROTOCOL FOR APPLYING INSECT REPELLENT

Under the Regulation respecting day care centres, insect repellent may be applied without medical authorization to a child received in a day care centre, provided it is applied in accordance with this Protocol and that a parent has given written consent.

A parent is not required to consent to the application of this Protocol. However, if a parent does not sign the authorization form, the insect repellent may not be applied to a child unless the parent and a member of the Collège des médecins du Québec give written authorization.

BASIC RULES

The insect repellent used must contain a concentration of less than 10% DEET (N,N-diethyl-m-toluamide); read the product label carefully because the concentration of DEET varies significantly from product to product.

A day care centre may have its own insect repellent container, in which case the brand name, the form (lotion, cream, gel, non-aerosol or aerosol spray) and the concentration of the active ingredient DEET must be indicated on the authorization form. To avoid confusion, only one form of insect repellent should be kept on hand.

Repeated or excessive applications of insect repellent are unnecessary for effectiveness; it is recommended to apply the repellent sparingly to the skin. The product should not be used for extended periods of time.

Under no circumstances should insect repellent be applied

- to the eyes or mucous membranes;
- to open wounds or broken skin;
- to irritated or sunburned skin;
- under clothing;
- to the hands; or
- in excessive amounts.

Insect repellent may not be used on children under two years of age without written authorization from a parent and a physician. Hence, this Protocol does not apply to children under two years of age.

It is recommended to apply insect repellent only once a day to children between six months and two years of age, and a maximum of three times a day to children over two years of age.

Insecticides and pesticides are made for use on land or in houses, and should never be used on the body.

DEET-based products should first be tested by applying a small amount to a small area of the child's skin, preferably on the inside of the forearm, then waiting eight to twelve hours. It is suggested that testing be done in the morning to see how well the children tolerate the product through the day; it is important to let parents know that the test will be done on that day. The test should be done in early spring, well before the Protocol

is applied. If a reaction occurs, wash the treated skin immediately and consult a physician; make sure to give the physician a list of the product's ingredients.

Never combine insect repellent and sunscreen. Avoid all "2-in-1" products that act as both an insect repellent and a sunscreen. To adequately protect the children from the harmful effects of the sun, apply sunscreen generously to exposed skin and under clothing; apply insect repellent, in contrast, in small amounts and never under clothing. If suntan lotion is applied after insect repellent, both products become less effective. Sunscreens also lose approximately 20% of their effectiveness when DEET is applied. When a sunscreen and an insect repellent are used, it is recommended to use a cream with a sun protection factor (SPF) of 30 and to apply the insect repellent 30 to 45 minutes after the sunscreen.

Insect repellent must be used in well-ventilated areas and away from food.

Any application of insect repellent must be recorded in the register of medications prescribed by the Regulation and the parent informed of the number of daily applications.

PRECAUTIONARY MEASURES

Insect repellent should be used only during periods when mosquitoes are abundant or if the area around the day care centre provides a breeding ground for mosquitoes, and only after the precautionary measures below have been taken.

To avoid insect bites when they are outside, the children should

- wear a long-sleeved sweater and long pants that ideally fit tightly at the wrists and ankles;

- wear loose-fitting, light-coloured clothes made of a tightly woven fabric;

- wear shoes and socks;

- avoid using perfumed products; and

- avoid going outside at times of the day when mosquitoes are most abundant, such as early morning and late afternoon.

To prevent mosquitoes from multiplying in the area around the centre,

- eliminate any source of standing water, which is conducive to mosquito breeding;

- turn over any objects that are not stored indoors, such as boats, wading pools, gardening containers and children's toys;

- cover outdoor garbage cans and any other container that may collect water;

- replace pool or wading pool water or make sure it is treated daily;

- use insect screens in the areas where younger children play; and

- repair damaged insect screens at the day care centre as quickly as possible.

Protect children under six months of age from coming into contact with mosquitoes by using netting on strollers and by using screened-in verandas.

WHAT YOU SHOULD KNOW

DEET-based products remain the preferred and most effective insect repellents against a wide variety of insects; insect repellents with a DEET concentration of less than 10% provide two to three hours of protection.

Although the safety of these products has been proven, they may pose certain risks, especially to children, if they are misused. DEET is partially absorbed through the skin and may make its way into the bloodstream. It may also accumulate in the body fat, brain and heart. A few cases of poisoning have been cited in literature. However, there is little risk to human health if insect repellents are used with discretion and only occasionally.

Applying insect repellent to clothing (except synthetics or plastic material) may be a way of decreasing the risk of poisoning in children over two years of age, but it is important to watch that children do not put the saturated clothing in their mouths, or touch it and accidentally get repellent in their eyes. DEET-based products can cause severe eye irritation.

In choosing a product, the following benefits and inconveniences should be considered:

- products in the form of a lotion, gel or cream are generally easy to apply but heavy application should be avoided;

- insect repellents in non-aerosol or aerosol spray form require additional caution; they should not be applied in closed or poorly-ventilated areas to avoid breathing in the harmful fumes, and care must be taken to avoid getting repellent on children's faces or hands.

WHAT YOU SHOULD DO

Insect repellent must always be applied by a person authorized to do so. Under no circumstances should children be allowed to apply insect repellent themselves, regardless of their age.

When you go outdoors with the children, you must

- apply the precautionary measures; and
- follow the steps below to apply the insect repellent :
 - use simple words to explain to the child the relationship between the situation, the insect repellent being applied and the expected results ;
 - wash your hands before handling the product ;
 - read the product label carefully before applying, and make sure that the DEET concentration is less than 10% and that the product does not contain sunscreen ;
 - it is preferable to wear gloves to apply the product ;
 - use single-use gloves and change gloves if a child has broken skin, such as insect bites (which often lead to a secondary infection), to eliminate the risk of transmitting a skin infection to another child ;
 - put a small amount of the product in your hand, apply it sparingly to exposed areas only or to clothing, only at the nape of the neck and ankles, as far as possible ;
 - make sure the children do not touch the areas to which the insect repellent has been applied. If they do touch these areas, they should wash their hands with soapy water ; and
 - wash your hands after applying the insect repellent to all the children in the group, even if you wore gloves to apply it.

Wash the treated skin with soap and water when the children come inside or when protection is no longer needed. This is particularly important if insect repellent is applied several times in the same day or on several consecutive days.

AUTHORIZATION FORM FOR THE APPLICATION OF INSECT REPELLENT

A parent is not required to consent to the application of this Protocol. However, if a parent does not sign the authorization form, insect repellent may not be applied to a child unless the parent and a member of the Collège des médecins du Québec give written authorization. A

parent may limit the period of validity of the authorization by indicating the duration of the authorization in the space provided.

I hereby authorize _____
(name of day care centre)
to use on my child, in accordance with this Protocol, insect repellent sold under the following brand name :

Brand name, form (lotion, cream, gel, non-aerosol or aerosol spray) and concentration of the active ingredient DEET

Child's surname and given name

Authorization period

_____/_____/_____
Parent's signature Date

This Protocol was prepared by the Ministère de l'Emploi, de la Solidarité sociale et de la Famille and approved by a working group composed of representatives from the health and social services network and childcare services. The information it contains reflects the state of knowledge on the subject in 2003.”.

22. This Regulation comes into force on 1 June 2004.
6301

M.O., 2004-002

Order of the Minister of the Environnement dated 20 April 2004

Ecological Reserves Act
(R.S.Q., c. R-26.1)

Respecting the revocation of the plans of five proposed ecological reserves

WHEREAS, under section 4 of the Ecological Reserves Act (R.S.Q., c. R-26.1), the following five areas were set aside with a view to establishing an ecological reserve :

- the proposed Chicobi ecological reserve ;
- the proposed Coleraine ecological reserve ;
- the proposed Manche-d'Épée ecological reserve ;
- the proposed Léon-Provancher ecological reserve ;
- the proposed Lac-Malakisis ecological reserve (western and north-eastern portions) ;