early childhood development centres

CODE OF PRACTICE

FIFTH EDITION (2026)

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1 INTRODUCTION

The Code of Practice for Early Childhood Development Centres ("Centres"), hereinafter referred to as (the "Code"), is issued by the Early Childhood Development Agency ("ECDA"). The Code is approved by the Chief Licensing Officer (the "CLO") under Section 36(1)(b) of the Early Childhood Development Centres Act 2017 (the "Act").

The Code spells out the minimum regulatory requirements that must be met to ensure the safety and well-being of children and infants in the Centres. The Code also highlights various provisions in the Act and the Early Childhood Development Centres Regulations 2018 (the "Regulations").

A failure to follow the Code could warrant regulatory actions by the CLO, or be used as evidence in any related court proceedings.

2 LICENCE OF A CENTRE

2.1 Classes of Licence

Licence Conditions

In granting or renewing a licence to any person to operate an early childhood development centre, the Chief Licensing Officer may impose such conditions as the Chief Licensing Officer considers requisite or expedient having regard to the purpose of this Act.

The Chief Licensing Officer may impose –

(a) conditions generally applicable to all licences;
(b) conditions specifically applicable to a class of licences; or
(c) conditions specifically applicable to a particular licence.

[Sections 10(1) and (2) of the Act]

2.1.1 Licensees must comply with the description(s) of the respective class(es) of licence stated in the following table.

Table 1: Classes of Licence

Description of Types of Licences	Class A (formerly known as Infant Care Services)	Class B (formerly known as Child Care Services)	Class C (formerly known as Kindergarten Services)
Periods of Operation	• Monday to Friday (7am to 7pm). • Operates 5 days a week throughout the year, except on weekends and public holidays.		• Monday to Friday. • Operates during school terms, according to the Ministry of Education's (MOE) academic calendar, with the exception of Centres which follow an international curriculum and academic year.
Age Range of Children and Infants	2 to 18 months old	18 months to below 7 years old	18 months to below 7 years old
Programme Type(s)	• Full day and/or • Half day • May provide flexible options (at least 12 to 24 hours a week, and 3 hours per session)		• Half day (Single, dual, triple sessions)

Description of Types of Licences	Class A (formerly known as Infant Care Services)	Class B (formerly known as Child Care Services)	Class C (formerly known as Kindergarten Services)
Space for Gross Motor Development Activities (GMA)	Not Applicable	1/6 of Centre's capacity at 4m² per child or 40m², whichever is more.	1/10 of Centre's capacity at 4m² per child or 40m², whichever is more.
Programme Hours	Operational hours	Typically 9am to 5pm. • Centres can determine their programme hours (subject to ECDA's approval). • Centres need to display the daily programme schedule.	Programme hours are typically 6 hours or less, unless otherwise stated (subject to the CLO's approval).
Non-programme Hours	Not Applicable	Arrival, departure and rest	Not Applicable

2.1.2 Licensees must only operate one of the following:

- Class A only
- Class B only
- Class C only
- Class A and B
- Class A and C

2.1.3 Should a licensee intend to operate a second class of licence in addition to its current class of licence (e.g. operate Class A in addition to current Class B or C), the licensee must:

- Make an application to the CLO and pay the prescribed application fee.
- Comply with the pre-licensing requirements stated in the *'Guide to Setting Up an Early Childhood Development Centre'* for the second class of licence. This document is available on ECDA's website under the *'Operators'* section.

2.1.4 Children or infants must not be in the Centre for more than 24 hours continuously. Licensees that contravene this may be criminally liable under Regulation 22(3) of the Regulations.

2.1.5 Centres must not be used for any purpose which is detrimental to the interests of Singapore and/or or the public. This may include but is not limited to the use of a centre's premises to conduct activities or disseminate content that is contrary to Singapore's laws, or to prevailing family values and social norms.

2.2 Accommodation Capacity

2.2.1 All centres will be given a licensed accommodation capacity, which will state the number of children and infants who can be enrolled at the Centre.

2.2.2 The accommodation capacity is computed based on the areas dedicated for teaching and learning use, and it excludes service areas (e.g. toilets, pantry, kitchen, office, store, staircase landing, corridors).

2.2.3 For Class A Licences, the accommodation capacity is computed based on $5m^2$ floor space area for each infant.

2.2.4 For Class B Licences, the accommodation capacity is computed based on $3m^2$ floor space area for each child.

2.2.5 For Class C Licences, the accommodation capacity is computed based on $1.88m^2$ floor space area for each child.

2.2.6 For Class B Licences, centres must have safe access to an appropriate outdoor play space for GMA. The space must minimally be $1/6$ of the Centre's capacity at $4m^2$ per child or $40m^2$, whichever is more. If an appropriate outdoor play space suitable for GMA is available and the outdoor play space meets the requirements above, the indoor space area will be considered in the computation of accommodation capacity. Otherwise, it will be excluded from the computation of accommodation capacity.

2.2.7 For Class C Licence, centres must have safe access to an appropriate outdoor play space for GMA. The space must minimally be $1/10$ of the Centre's capacity at $4m^2$ per child or $40m^2$, whichever is more. If an appropriate outdoor play space suitable for GMA is available and the outdoor play space meets the requirements above, the indoor space area will be considered in the computation of accommodation capacity. Otherwise, it will be excluded from the computation of accommodation capacity.

2.2.8 The number of children or infants enrolled at the Centre, including children or infants enrolled on a trial basis, must not exceed the accommodation capacity, unless otherwise approved by the CLO.

2.2.9 If the licensee intends to enrol children or infants beyond the licensed accommodation capacity, the licensee must submit an application to the CLO and obtain the CLO's approval to do so. Such applications are considered on a case-by-case basis.

2.2.10 Centres with children diagnosed with developmental needs must only enrol these children up to 15% of the Centre's accommodation capacity (excluding the accommodation capacity for infants), unless otherwise specified by the CLO. If there is a need to exceed 15%, Centres must seek the CLO's approval. This is to ensure the Centre provides sufficient resources to support all children.

2.3 New Licence Application

No operation of early childhood development centre without licence, etc.

A person must not operate (whether solely or jointly with any other person) an early childhood development centre unless the person –

(a) Is authorised to do so by a licence under this Act;
(b) Is exempt from this subsection by or under this Act in relation to that centre; or
(c) Is directed by the Chief Licensing Officer under section 18 to do so despite the expiry or revocation of the licence for that centre

[Section 6(1) of the Act]

2.3.1 A new licence application must be made by the intended licensee of the Centre to the CLO and submitted electronically via the GoBusiness Licensing Portal at *https://licensing.gobusiness.gov.sg*.

2.3.2 The intended licensee must be (i) registered either with the Accounting and Corporate Regulatory Authority (ACRA) or the Registry of Societies (ROS), (ii) a Charity or (iii) a Co-operative Society.

2.3.3 The intended licensee and key appointment holders of the licensee must both submit to the CLO the *'Self-Declaration and Consent Form on Offences, Warnings and Financial Capacity for Key Appointment Holders (KAH)'*.

2.3.4 The intended licensee must make an e-payment for an application for a licence to set up and operate a Centre via the GoBusiness Licensing Portal.

2.3.5 Any incomplete submission or false declarations will not be accepted.

2.3.6 The intended licensee must comply with all requirements stated in the *'Guide to Setting Up an Early Childhood Development Centre'*. This document is available on ECDA's website under the *'Operators'* section.

2.3.7 The intended licensee must submit the licence application and the complete set of required documents before the licensing officer's scheduled visit to the Centre.

2.3.8 The new premises must be ready for operations before a site visit is made by the Licensing Officer.

2.3.9 Unless otherwise approved by the CLO, the intended licensee must not begin operations of the Centre or accept monetary payment related to enrolment of children or infants until the application to operate a Centre pursuant to a class of licence has been approved by the CLO[1].

2.3.10 The licence and the *'Declaration of Tenancy Agreement'* must be displayed at a prominent location of the Centre premises visible to parents/guardians.

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1 The new licence application will be processed within 14 working days upon receiving a complete set of documents which meets ECDA's requirements, and the licensee having met all regulatory requirements, whichever is the latest.

2.4 Licence Renewal

Application for or to renew licence

An application must be made to the Chief Licensing Officer in accordance with this section. An application must —

(a) be in the form and manner required by the Chief Licensing Officer;
(b) be accompanied by a non-refundable application fee (if prescribed) paid in the manner required by the Chief Licensing Officer; and
(c) be accompanied by any information that the Chief Licensing Officer requires to decide on the application.

[Section 7(1)(2) of the Act]

2.4.1 Licensees must submit an online application to renew the Centre's licence no later than 1 month before the licence expires. There will be a penalty for late application of the licence renewal.

2.4.2 Licensees must make an e-payment for the application to renew a licence and for the issuance of the renewed licence via ECDA's Centre Management System (CMS) before the licence is issued.

2.4.3 Licensees must comply with the requirements stated in Annex A on *'Workflow on Licence Renewal for Centres'*.

2.4.4 For the purpose of licence renewal, licensees must update if there are any changes to documents relating to the operational matters of the Centre (e.g. Centre's Standard Operating Procedures (SOPs) for safety, health and hygiene matters, Centre's Handbook for Parents, and statutory approvals) before they submit the application for licence renewal.

2.4.5 Centres will be required to undergo and pass an audit to assess their compliance with the provisions of the ECDC Act, the Regulations, the conditions of the licence, this Code of Practice as well as the Regulatory Standards before the CLO decides if the Centre's licence may be renewed.

2.4.6 Notwithstanding the licensing criteria in the Regulatory Standards, the CLO may take into account matters and evidence as may be relevant, as provided for under Section 8(5) of the ECDC Act. This includes but is not limited to the Centre's compliance with the Regulatory Standards, and any lapses which constitute a breach of the ECDC Act and Regulations that may have occurred during the duration of the licence.

2.4.7 Centres will be issued with a 6, 12, 24 or 36-month licence tenure, which will be determined at the CLO's discretion.

2.4.8 The 36-month licence tenure is only applicable to a Centre's existing class of licence and the Centre must have at least:

- Attained 2 consecutive 24-month licence tenures and met the licensing criteria for a third consecutive 24-month licence tenure during the licence renewal; or
- An existing 36-month licence tenure and met the licensing criteria for a 24-month licence tenure during the licence renewal.

2.4.9 Centres with 2 consecutive 6-month licence tenures must minimally attain a 12-month licence tenure at the subsequent renewal of licence. Failure to do so may lead to non-renewal of the Centre's licence, i.e. the Centre has to cease operations.

2.4.10 Licensees must acknowledge the licence visit report provided by the Licensing Officer.

2.4.11 Licensees must rectify and address any regulatory non-compliance by the deadline given by the Licensing Officer.

2.5 Cessation of Operations

Voluntary cessation of operation or surrender of licence

A licensee must not, without giving the Chief Licensing Officer prior notice —

(a) Wholly and permanently cease operating the early childhood development centre specified in the licensee's licence; or
(b) For any reason surrender the licence.

[Section 14(1) of the Act]

2.5.1 Licensees must provide at least 6 months' written notice to parents/guardians, and the CLO before they cease operating the Centre specified in the licensees' licence or surrender their licence (for whatever reason), unless otherwise approved by the CLO. Licensees should first notify the CLO of their intention to cease operations and seek further guidance before proceeding to notify parents/guardians. The following information must be included in the notification:

- Discussions with the landlord pertaining to the tenancy agreement (if cessation of operations is due to tenancy issues), and
- Intended closure / other plans (if any)

2.5.2 Notwithstanding paragraph 2.5.1, parents/guardians, and the CLO must be informed once the licensee is notified of the possibility of non-renewal of tenancy agreement and/or clearances from regulatory authorities or government agencies, e.g. Change of Use by the Urban Redevelopment Authority (URA).

2.5.3 Licensees must again update the CLO and parents/guardians 2 months before closure of the Centre. The update must include the confirmation of the Centre's closure and progress of the licensee's plans in preparation for cessation of the Centre's operations. The update to the CLO must include information such as parents'/guardians' sentiments on the upcoming closure, whether enrolled children have found alternative entres etc.

2.5.4 For any cessation of operations, licensees must complete all arrangements with parents/guardians in terms of settlement of any outstanding fees and deposits before the last day of operations.

2.5.5 Licensees must assist parents/guardians with alternative care arrangements, if required by the parents/guardians.

3 CHANGES TO LICENCE

3.1 Permanent Relocation to New Premises

3.1.1 Licensees, who intend to relocate the Centre to a new premises permanently, must submit an application to the CLO and obtain the CLO's approval to do so.

3.1.2 Licensees must inform the parents/guardians, and the CLO at least 6 months before the targeted commencement date of operations at the new premises.

3.1.3 The new premises must be ready for operations, and the following information must be submitted to the Licensing Officer before the site visit:

- A copy of the letter to parents/guardians regarding the relocation plans
- Targeted effective date of operations at new premises
- Current enrolment
- Estimated capacity of new premises
- Self-assessment checklist of the new premises, as provided in the guide '*Guide to Setting Up an Early Childhood Development Centre*'.
- Approved Use of Premises from the URA or the Housing Development Board (HDB) for the use of the new premises as a Centre
- Fire Safety Certificate / Temporary Fire Permit from the Singapore Civil Defence Force (SCDF)
- Certificate of Statutory Completion / Temporary Occupation Permit from the Building and Construction Authority
- Validation of Legal Entity / Registration (e.g. ACRA, ROS Registration, Charities Registration, IPC Registration, Co-Operatives Societies Registration)
- Tenancy agreement for the new premises
- Floor plan with breakdown of floor areas, as endorsed by a Qualified Person (QP) as defined under the Building Control Act.
- Letter from the QP to certify that the floor plan submitted to the CLO is the same as the one submitted to SCDF

3.1.4 The licence for the new premises must be approved by the CLO[2] before the licensee can relocate the children and infants to the new premises.

3.1.5 The licence must be displayed at a prominent location of the new premises accessible to the public.

3.1.6 Licensees must make e-payment for the above application via CMS before the licence is issued.

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2 The licence for the new premises will be processed within 14 working days upon receiving a complete set of documents which meets ECDA's requirements, and the licensee having met all regulatory requirements, whichever is the latest. Additional processing time may be required for applications that warrant further assessment by ECDA.

3.2 Cessation of Current Class of Licence and Application for a New Class of Licence in the Same Premises

3.2.1 Licensees, who intend to cease the current class of licence and apply for a new class of licence (e.g. cease Class C and apply for a new Class B licence), must submit an application to the CLO in writing at least 6 months before the targeted effective date of the new class of licence. Licensees must not effect a new class of licence without the CLO's approval.

3.2.2 Licensees may submit an application only if the Centre has an existing licence tenure of at least 12 months.

3.2.3 Licensees must inform parents/guardians of the impending cessation of the current class of licence and application for a new class of licence, in writing at least 6 months before the targeted effective date of the new class of licence, and state that the change(s) is/are subject to the CLO's approval. Proof that the licensee has informed the parents/guardians must be submitted to the CLO together with the licensee's application for a new class of licence.

3.2.4 Licensees must ensure that the Centre's provision of care and education to children and infants is not compromised during the transition period between the time of the licensee's application and the effective date of the new class of licence.

3.2.5 Centres will be required to undergo and pass an audit to assess their compliance with the provisions of the ECDC Act, the Regulations, the conditions of the current licence, and this Code of Practice, before the CLO decides if a new class of licence may be granted. The requirements are also stated in the Regulatory Standards and the '*Guide to Setting Up an Early Childhood Development Centre*', which ECDA will use during the site visit to validate the Centre's compliance.

3.2.6 Centres that cease operations for an existing class of licence and apply for a new class of licence at the same premises may be issued a 12 or 24-month licence tenure at the CLO's discretion.

3.3 Transfer of Licence

Transfer of licence

A licence, and any right, benefit or privilege under the licence, is not transferable to any other person unless the Chief Licensing Officer approves in writing the transfer.

[Section 13(1) of the Act]

3.3.1 All applications for a transfer of licence must be made by the current licensee of the Centre to the CLO for approval at least 3 months before the targeted effective date of transfer. This includes any transfer of any right, benefit or privilege under the licence to another person, whether or not it involves a change in the Unique Entity Number (UEN) or name/type of legal entity.

3.3.2 If the Centre is located in HDB premises, the current licensee must approach HDB to seek their approval for any changes to the tenancy agreement. The current licensee shall obtain a valid tenancy agreement that reflects the intended licensee's name from HDB before ECDA can approve the transfer of licence.

3.3.3 If the Centre is located in a site which requires the URA's Grant of Written Permission (GWP), the intended licensee must obtain such permission for the use of the premises as a childcare centre or kindergarten. The intended licensee may take over the site with its existing GWP (whether temporary or permanent permission) as long as it is still valid. However, for sites issued with a temporary permission (TP), the intended licensee must submit a renewal application to URA, 3 months prior to the expiry of the TP.

3.3.4 Licensees must be in possession of at least a 12-month licence tenure with at least 7 months remaining on the licence tenure at the point when the application for a transfer of the licence is submitted to the CLO.

3.3.5 The current licensee and intended licensee must not put into effect any transfer of licence without the CLO's approval.

3.3.6 Licensees must ensure that the Centre's provision of care and education to children and infants is not compromised during the transition period between the time of the application for a transfer and the effective date of the transfer.

3.3.7 The intended licensee will take over the remaining licence tenure and the Centre's operations (e.g. fee structure, programmes), and become the new licensee of the Centre upon the CLO's approval.

3.3.8 Any change(s) which the new licensee intends to make can only take place after the transfer is effected, subject to the Centre meeting the minimum notification period for the respective change(s) as specified in Annex B. This includes but is not limited to change in Centre name, change in programme plan and curriculum and fee increase.

3.3.9 The current licensee must inform the parents/guardians of the impending transfer of licence in writing at least 3 months before the targeted effective date of transfer and state that this change is subject to the CLO's approval. Proof that the licensee has informed the parents/guardians must be submitted to the CLO together with the licensee's application for a transfer of licence.

3.3.10 The current licensee must state the following in the written notification to parents/guardians:

- The application for a transfer of licence is subject to the CLO's approval.
- The licensee continues to be responsible for the Centre's management and operations until the transfer is effected.

3.4 Extension of Bays

3.4.1 All applications for the extension of bays of the Centre must be made by the licensee of the Centre.

3.4.2 For an application to extend a Centre's bays, such that the distance between the 2 furthest bays is **between 100 and 300 metres**, centres must meet the following requirements:

- Each bay must be self-contained with provision of sanitary facilities within the bay.

- An L2 certified senior educator must be appointed for each bay. For bays which provide only infant services, at least an EY1 certified senior infant educator must be appointed. This is to ensure that a senior personnel is present to assist the Principal in the Centre's operations. The senior educator or senior infant educator can be counted towards the Centre's qualified staff-to-child ratio.
- Centres must comply with the requirements and procedures for road crossing[3], if children need to cross roads, where applicable.

3.4.3 For an application to extend a Centre's bays, such that the distance between the two furthest bays is **between 301 and 400 metres**, centres must meet the following requirements:

- Each bay must be self-contained with provision of sanitary facilities within the bay.
- An L2 certified Key Personnel must be appointed. The Key Personnel is defined as any staff in the centre other than the Principal, who holds a leadership role in the Centre and is able to make important decisions in the absence of the Principal. The Key Personnel cannot be counted towards the qualified staff-to-child ratio, and has to be approved by the CLO.
- An L2 certified senior educator must be appointed for each bay. For bays which provide only infant services, at least an EY1 certified senior infant educator must be appointed. This is to ensure that a senior personnel is present to assist the Principal in the Centre's operations. The senior educator or senior infant educator can be counted towards the Centre's qualified staff-to-child ratio.
- Centres must comply with the requirements and procedures for road crossing, if children need to cross roads, where applicable.
- There must also be additional measures to enable the Principal to supervise the operations across extended distance (e.g. installation of closed circuit television, intercom systems).

3.4.4 The new bays are only allowed to begin operations upon the CLO's approval.

3.5 Change of Key Appointment Holders

Change of licensee's particulars

Where a licensee is a person other than an individual and there is a change in any of the members of the board of directors or committee or board of trustees or other governing board of the licensee, or any of the partners of the licensee (as the case may be) the licensee must, at least 1 month before the change

(a) notify the Chief Licensing Officer in writing of the change; and
(b) notify the parents and guardians of the children attending at the licensee's centre in writing of the change.

[Regulation 20(2) of the Regulations]

3.5.1 All notifications on the change of key appointment holders must be made by the licensee of the Centre.

3 *Refer to Section 5.*

3.5.2 Licensees must notify the CLO and parents/guardians of any change of key appointment holders at least 1 month before the change.

3.5.3 Key appointment holders are defined as the following:

- a member of the board of directors or committee or board of trustees or other governing board of the applicant or licensee (as the case may be)
- a partner of the applicant or licensee (as the case may be)
- any other person, by whatever name called, who has general management or supervision of the business of the Centre, i.e. anyone who will make decisions on matters such as expansion or cessation of business, change in fees, relocation, etc.

3.5.4 The inclusion or removal of key appointment holders may or may not effect a change in the licensee, and/or the status / type of the legal entity and/or the UEN. Please note that should there be a change in the licensee, an application for a transfer of licence must be submitted to the CLO.

3.5.5 For changes in key appointment holders, the following requirements must be met:

a) Provide written notice to parents/guardians and the CLO at least 1 month before any change of key appointment holders.

b) Submit to the CLO
   - A copy of the letter to parents/guardians informing them of the change
   - Supporting documents (e.g. copy of the updated ACRA, letter from the committee)
   - A completed copy of the *'Self-Declaration and Consent Form on Offences, Warnings and Financial Capacity for Key Appointment Holders (KAH)'* by new key appointment holders
   - Documentation of the Centre's communication plans with parents/guardians and efforts to maintain quality of care

c) Previous and current key appointment holders must respond to concerns raised by the CLO.

3.6 Change in Centre's Name

Change of licensee's particulars

A licensee must seek the Chief Licensing Officer's consent to change the name of the licensee's centre.

[Regulation 20(5) of the Regulations]

3.6.1 All applications for a change in the Centre's name must be made by the licensee of the Centre to the CLO.

3.6.2 Licensees must obtain the CLO's approval on the change in the Centre's name.

3.6.3 Licensees that intend to change the Centre's name must meet the following requirements:

a) Provide written notice to parents/guardians, the CLO and staff of the Centre at least 1 month before the change in the Centre's name

b) Submit to the CLO:
   - A copy of the letter to parents/guardians informing them of the change
   - Supporting documents (e.g. copy of the updated ACRA, letter from the committee)
   - Documentation of the Centre's communication plans with parents/guardians and efforts to maintain quality of care

3.6.4 In instances where the Centre's name differs from the licensee's name, the Centre must make known to parents/guardians the registered name of the licensee (i.e. the business entity registered either with the ACRA or the ROS, or the Charity or Co-operative Society).

3.7 Change in Licensee's Name

3.7.1 Licensees must notify the CLO and parents/guardians on the change in the licensee's name (in cases whereby the licensee is a registered company) at least 1 month before the change.

3.7.2 The notification to the CLO must include the following documents:

- A copy of the letter to parents/guardians informing them of the change
- Supporting documents (e.g. copy of the updated ACRA)
- Documentation of the Centre's communication plans with parents/guardians and efforts to maintain quality of care

3.7.3 The change in the licensee's name may or may not effect a change in the licensee, and/or the status / type of the legal entity and/or the UEN. Please note that should there be a change in the licensee, an application for a transfer of licence must be submitted to the CLO and the corresponding requirements, including notice period, must be complied with (refer to paragraph 3.3 on Transfer of Licence).

3.8 Change in Centre's Particulars

3.8.1 All applications for a change in particulars of the Centre must be made by the licensee of the Centre.

3.8.2 Licensees must obtain the CLO's approval on any change in the Centre's particulars. This includes the following:

- Change in operating hours
- Change in accommodation capacity
- Change in class of licence
- Addition / Deletion of age group / programme

3.8.3 Licensees must notify the CLO on any change in the Centre's particulars. This includes the following:

- Change in licensee's address (applicable only where the licensee is a registered company or society)
- Change in the Centre's details (e.g. contact number, email address, GST Registration)

3.8.4 For any change in the Centre's contact number and/or email address, the licensee must notify parents/guardians, and the CLO immediately. This information is to enable the CLO to contact the Centre quickly in the event of any emergencies.

3.8.5 Licensees must provide the required written notice to parents/guardians, and the CLO for the respective type of change, and can only effect the changes upon the CLO's approval. Please refer to Annex B for more information.

4 STAFF

4.1 Staff Deployment and Qualifications

Approval for performance of, and deployment of individuals to perform, prescribed duties

A licensee of an early childhood development centre must not perform, and must not deploy an individual to perform, at that centre any prescribed duty or prescribed class of duties relating to —

(a) the provision of care or education to children at that centre; or

(b) the operation of that centre, unless the performance by that licensee of, or deployment of that individual to perform (as the case may be), the prescribed duty or prescribed class of duties at that centre is with the approval of the Chief Licensing Officer the provision of care or education to children at that centre; or

[Section 23 of the Act]

Particulars of staff and education service providers

(1) A licensee must submit the particulars in paragraph (2) of —

(a) every member of the licensee's staff who is deployed to perform a duty at the licensee's centre; and

(b) every education service provider who is engaged by the licensee to provide any educational service at the licensee's within 28 days after the date of such deployment or engagement (as the case may be), to the Chief Licensing Officer in such form as the Chief Licensing Officer may require.

(2) For the purposes of paragraph (1), the particulars are as follows:

(a) name;

(b) residential address;

(c) email address;

(d) contact number;

(e) any other particulars which may be required by the Chief Licensing Officer.

(3) If there is any change in the particulars mentioned in paragraph (2) of any member of the licensee's staff or any education service provider engaged by the licensee, the licensee must notify the Chief Licensing Officer of such change within 28 days after the date of the change in such form as the Chief Licensing Officer may specify.

[Regulation 41 of the Regulations]

4.1.1 All programme staff of the Centre must meet the following requirements:

- Hold the required qualifications (Refer to Table 2 in paragraph 4.1.8 below)
- Make a declaration through the '*Self Declaration and Consent Form on Offences and Warnings*' which can be downloaded via *ECDA's website* and CMS.
- Be certified medically fit to work with young children and infants by a medical practitioner during pre-employment medical check. Refer to Annex E for medical examination requirements. Any new staff whose last pre-employment medical clearance, via ECDA's Pre-employment Medical Report Form, was obtained within the last 12 months is not required to undergo a new medical check.
- Has obtained the CLO's approval.

4.1.2 All non-programme staff of the Centre must meet the following requirements:

- Make a declaration through the '*Self Declaration and Consent Form on Offences and Warnings'* which can be downloaded via *ECDA's website* and CMS.
- Be certified medically fit to work with young children and infants by a medical practitioner during pre-employment medical check. Refer to Annex E for medical examination requirements. Any new staff whose last pre-employment medical clearance, via ECDA's Pre-employment Medical Report Form, was obtained within the last 12 months is not required to undergo a new medical check.
- Has obtained the CLO's approval

4.1.3 Licensees must ensure that all staff (with the exception of Singapore Citizens (SCs) and Permanent Residents (PRs) born before 1 January 1975 being exempted[4]) provide documentary proof[5] that –

- Staff has received 2 doses of measles vaccination; or
- Staff has previously been diagnosed by a registered medical practitioner as being infected by measles, and the staff has since recovered from the disease; or
- Staff has taken a serological test and the serological test shows that he or she has immunity against measles; or
- Staff has taken a serological test and has received 2 doses of measles vaccination[6] for which the serological test shows he or she has no immunity against.

4.1.4 Licensees must exercise all due diligence and ensure that staff records are verified to the best of their knowledge before submission for the CLO's approval.

4.1.5 All staff's records must be maintained for verification and inspection as and when required by the CLO.

4.1.6 Licensees must ensure that all staff (including relief staff and non-programme staff such as cleaner, cook and administrative workers) are briefed on the SOPs relating to safety, health and hygiene in the operations of a Centre. Please refer to Annex C for more information on the required SOPs.

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4 MOH has indicated that close to 100% of this exempted group (i.e. SCs and PRs born in Singapore before 1 January 1975) have high immunity against measles as measles was prevalent in Singapore before the introduction of measles vaccination in 1976.

5 Documentary proof refers to Health Booklet records, immunisation records downloaded from the Health Hub App or certificate of vaccination issued by a General Practitioner (GP) in Singapore, a serological test result stating that the individual has immunity against measles or a laboratory test result stating that the individual is infected by measles. Vaccination records from foreign countries which have been translated into English by the foreign Embassy or a Notary Public will be accepted.

6 Measles vaccination refers to the Measles, Mumps and Rubella (MMR) vaccination which is available in Singapore.

4.1.7 Licensees must put in place measures to ensure the safety of children when its Centre staff are deployed in the care and supervision of children and infants. This includes:

- Briefing staff on appropriate practices in their interactions and management of children and infants, and on their assigned roles and duties.
- Familiarising staff on safety protocols so that immediate attention can be rendered to children or infants who are unwell or injured.
- Ensuring children and infants are supervised by approved programme staff (non-teaching staff such as cooks and cleaners who are deployed to assist in the care and supervision of children must also be approved by ECDA as programme staff) at all times, and are not left alone with individuals who have not been approved by ECDA as programme staff (e.g. staff not approved as programme helper in ONE@ECDA, repairmen, visitors, volunteers including parents/guardians of other children in the Centre).
- Exercising due diligence, including background reference checks, before allowing any external party (e.g. bus attendant) to be in direct contact with the Centre's children, and adopting precautionary measures to ensure children's safety (e.g. escorting and supervising external parties when they visit the Centre, such as for repair work). Refer to Annex G for guidelines on child safe policies.

4.1.8 The requirements for programme staff training levels must be met, as stated in Table 2.

Table 2: Programme Staff Training Levels

Employment Title	Letter of Notification (LON) / Minimum qualifications required	Roles / Class they can be deployed to
Principal	• Advanced Diploma in Early Childhood Centre Leadership (ADECL), or • Approved alternatives with at least 4 years of teaching experience as an L2 certified educator (unless otherwise approved by the CLO)	Principal
Preschool Educator	• L2 certified* or equivalent, and as approved by the CLO	Playgroup to Kindergarten 2
Early Years Educator (Nursery)	• L1 certified* or equivalent, and as approved by the CLO	Playgroup to Nursery
Assistant Preschool Educator	Advanced Certificate in Early Childhood Care & Education or Higher Nitec in Early Childhood Care & Education or equivalent	Assist in Playgroup to Kindergarten 2

Employment Title	Letter of Notification (LON) / Minimum qualifications required	Roles / Class they can be deployed to
Early Years Educator (Playgroup and Pre-Nursery	• EY2 certified* or • Advanced Certificate in Early Years or equivalent, and as approved by the CLO	Playgroup to Pre-Nursery
Assistant Early Years Educator	• Fundamentals or Basic Certificate in Early Childhood Care & Education or Educator Aide Training or equivalent	Assist in Playgroup to Nursery
Infant Educator	• EY2 certified* or • Advanced Certificate in Early Years or equivalent, and as approved by the CLO or • EY1 certified* or • Higher Certificate in Infant Care/Certificate in Infant & Toddler Care or • State Registered Nurse and attended Early Years Development Framework	Infants aged 2 to 18 months
Programme Helper	No professional qualifications in early childhood	Additional manpower in classes

**Definitions of EY1, EY2, L1, L2 and classes for the different age groups can be found in Annex D.*

4.2 Qualifications and Responsibilities of Principal

4.2.1 Licensees must ensure that there is a Principal deployed to oversee a designated Centre, as approved by the CLO.

4.2.2 The Principal must be employed on **a full-time basis** to oversee a designated Centre. The Principal's responsibilities would include, but are not limited to:

- **Overseeing centre operations** (e.g. implementing safety, health and hygiene practices, overseeing administration, and provision of meals)
- **Fostering a child-safe environment** (e.g. providing guidance and supervision to staff on their practices, ensuring appropriate child management practices, putting in place processes for staff to report inappropriate practices, promptly addressing any issues observed or surfaced, and reporting to ECDA, where required)
- **Managing manpower resources** (e.g. staff deployment to meet required staff-to-child ratios, staff orientation and induction)
- **Driving quality programmes and services** (e.g. having regular walkabouts to observe centre's operations, staff - child interactions, and staff-parent interactions, ensuring conducive classroom environments, delivery of quality programmes and activities that are developmentally appropriate)

- **Overseeing programme and curriculum** (e.g. providing guidance to staff in design and implementation of developmentally appropriate learning experiences for children)
- **Building of stakeholder relationships and partnerships** (e.g. parent/guardian engagement, handling parents/guardians and public queries)
- **Uplifting staff's professional practice** (e.g. conducting regular meetings to brief staff on policies and processes, facilitating regular conversations relating to the *Code of Ethics* by referencing *the case studies*, and sharing of good practices, in-house and external training for staff' professional and personal development)

4.2.3 The Principal of the Centre must meet the following requirements:

- Hold the required qualifications (refer to Table 2).
- Make a declaration through the '*Self Declaration and Consent Form on Offences and Warnings'* which can be downloaded via *ECDA's website* and CMS.
- Be certified medically fit to work with young children and infants by a medical practitioner during pre-employment medical check. Refer to Annex E for medical examination requirements.
- Has obtained the CLO's approval.

4.2.4 Principals are not computed towards programme staff-to-child ratio and qualified programme staff-to-child ratio during programme hours.

4.2.5 Principals must not hold a regular teaching load.

4.2.6 In the absence of the principal (e.g. on maternity leave), the licensee is to appoint a member of the licensee's staff to be the covering principal (i.e. to carry out supervisory duties in the principal's absence), and ensure that the covering principal is aware of and carries out the duties listed at paragraph 4.2.2.

4.3 Staff-to-Child Ratio

4.3.1 Programme staff-to-child ratio refers to the Centre having a sufficient number of programme staff deployed to take care of the children or infants, in accordance with the ratios as stipulated in the ECDC Regulations.

4.3.2 Qualified programme staff-to-child ratio refers to the Centre having a sufficient number of programme staff, who have the Letter of Notification (LON), or Letter of Attendance (only applicable for programme staff who have completed their Higher Certificate in Infant Care (HCIC) or Advanced Certificate in Early Years (ACEY) course and deployed to infant care. Refer to paragraph 4.5.7 for details.) to confirm that they are qualified to teach children or infants, in accordance with the qualifications and ratios as stipulated in the ECDC Regulations.

4.3.3 For Class A Licences, the staff-to-infant ratio must be met in addition to the following conditions:

- At least 50% of the required programme staff are Infant Educators.
- At least 2 programme staff are present at all times, out of which 1 must be an Infant Educator.

Table 3: Class A Licence – Programme Staff-to-Infant Ratio

Level	No. of Programme Staff	No. of Infants
Infant (2 to 18 months)	1 IE or 1 PH	5

4.3.4 For Class B Licences, the programme hours are typically from 9am to 5pm, while non-programme hours are typically from 7am to 9am and 5pm to 7pm. Centres must meet the requirements for programme staff-to-child ratio as stated in the following table (refer to Table 4).

4.3.5 For Class C Licences, programme hours are typically operational hours. Centres must meet the requirements for programme staff-to-child ratio as stated in the following table (refer to Table 4).

Table 4: Class B and C Licence – Programme Staff-to-Child Ratio

For Class B and C Licence					
Programme Hours			Non-Programme Hours		
Level	No. of Qualified Programme Staff	No. of Children	Level	No. of Programme Staff	No. of Children
K2	1	25	**K2**	1	30
K1	1	20	**K1**	1	25
Nursery	1	15	**Nursery**	1	20
Pre-Nursery	1	12	**Pre-Nursery**	1	18
Playgroup	1	8	**Playgroup**	1	12

4.3.6 Qualified programme staff-to-child ratio must be met during programme hours. If the Centre deploys additional staff such as Assistant Preschool Educators or Assistant Early Years Educators during programme hours, the ratio is stated in Table 5.

Table 5: Class B and C Licence – Qualified Programme Staff-to-Child Ratio

Programme Hours (indoors)		
Level	No. of Qualified Programme Staff	No. of Children
K2	1 Preschool Educator	25
	1 Preschool Educator + 1 Assistant Preschool Educator	30

Programme Hours (indoors)		
Level	**No. of Qualified Programme Staff**	**No. of Children**
K1	1 Preschool Educator	20
	1 Preschool Educator + 1 Assistant Preschool Educator	25
Nursery	1 Early Years Educator (L1)	15
	1 Early Years Educator (L1) + 1 Assistant Early Years Educator	20
Pre-Nursery	1 Early Years Educator (EY2)	12
	1 Early Years Educator (EY2) + 1 Assistant Early Years Educator	18
Playgroup	1 Early Years Educator (EY2)	8
	1 Early Years Educator (EY 2) + 1 Assistant Early Years Educator	12

4.3.7 For outdoor learning experiences for children and infants (e.g. play, learning experiences, excursions, etc), the following staff requirements must be met:

- Qualified programme staff-to-child ratio as per during programme hours; and
- Even if the class size only requires 1 qualified programme staff, the Centre must still ensure that there are at least 2 adults present at all times, of whom at least one must be a qualified programme staff.

4.4 Child First Aid Certification

4.4.1 The Key Personnel / Principal must have obtained a Child First Aid Accreditation (CFA) certification.

4.4.2 For centres with Class A Licence only, there must be at least 3 programme staff who have obtained the CFA certification present in the Centre during operating hours, one of whom must be a Key Personnel or Principal. For centres with more than 50 infants at any one time, there must be an additional staff, during operating hours, who has obtained the CFA certification for every 50 infants or part thereof.

4.4.3 For centres with Class A and B, or Class A and C Licences, there must be at least 3 programme staff (of which at least 1 is an Infant Educator or a Programme Helper deployed to infant care) who have obtained the CFA certification during operating hours for the Class A Licence. For centres with more than 50 infants at any one time, there must be an additional staff during operating hours, who has obtained the CFA certification for every 50 infants or part thereof.

4.4.4 For centres with a Class B or C Licence (regardless of whether it holds Class A Licence), there must be at least 3 staff who have obtained the CFA certification present in the Centre during programme hours. For centres with more than 150 children per session at any one time, there must be an additional programme staff who has obtained the CFA certification for every additional 50 children or part thereof.

4.4.5 For centres with Class B or C Licence (regardless of whether it holds Class A Licence), there must be at least one staff who has obtained the CFA certification present in the Centre during non-programme hours[7].

4.5 Trainee Programme Staff

4.5.1 Centres operating under a Class B or C Licence (i.e. child care or kindergarten) may deploy programme staff undergoing early childhood education training to meet the qualified programme staff-to-child ratios. This provision is allowed until 31 December 2030, and does not apply to programme staff undergoing training who are deployed under the Class A Licence.

4.5.2 Programme staff undergoing training must not be more than 25% of the minimum number of staff required (including Assistant Preschool Educators and Assistant Early Years Educators) to meet qualified programme staff-to-child ratio.

4.5.3 All trainee programme staff undergoing training must meet the following requirements:

- Make a declaration through the '*Self Declaration and Consent Form on Offences and Warnings'* which can be downloaded via *ECDA's website* and CMS.
- Be certified medically fit to work with young children and infants by a medical practitioner during pre-employment medical check. Refer to Annex E for medical examination requirements.
- Has obtained the CLO's approval.

4.5.4 Programme staff undergoing training must not be more than the number of qualified staff per level (applicable only for centres with more than one class per level).

4.5.5 Programme staff undergoing training must be assessed by the Centre on suitability to be deployed in the classes.

4.5.6 Programme staff undergoing training must meet one of the criteria stated in the following table:

Table 6: Programme Staff Undergoing Training

Criteria	Prior Early Childhood Teaching Experience (minimally 1 year)	Prior Early Childhood Qualifications Obtained	Period of Course Attended (to be recognised)
A	Yes	No	50%
B	No	Yes	50%
C	Yes	Yes	Any
D	No	No	100%

7 For centres with Class B or C Licence only, paragraphs 4.4.4 and 4.4.5 apply. For centres offering Class B or C Licence together with Class A Licence, paragraph 4.4.3 applies to the infant care area of the Centre, while paragraph 4.4.4 and 4.4.5 apply to the non-infant care area of the Centre.

4.5.7 To meet the staffing requirements for a Class A Licence (i.e. infant care), the licensee can include programme staff who have completed their HCIC or ACEY course but are pending the issuance of the Course Completion Letter and Letter of Notification (LON), if the staff have received a Letter of Attendance from their training institutions within the last 6 months. Staff who do not receive the LON 6 months after receiving their Letter of Attendance will not be counted as part of the staff strength required to meet the infant care staffing requirements. This provision is allowed until 31 December 2030.

4.6 Relief Staff

4.6.1 Centres may engage relief staff to temporarily cover duties of programme staff, who are absent.

4.6.2 Relief staff must meet the following requirements:

- Make a declaration through the '*Self Declaration and Consent Form on Offences and Warnings'* which can be downloaded via *ECDA's website* and CMS.
- Be certified medically fit to work with young children and infants by a medical practitioner during pre-employment medical check. Refer to Annex E for medical examination requirements.

4.6.3 Relief staff's particulars must be submitted to the CLO via ONE@ECDA.

4.6.4 Relief staff will not be computed towards qualified programme staff-to-child ratio, unless they hold the relevant early childhood care and education qualifications.

4.6.5 Relief staff must be supervised by a Principal, Key Personnel or qualified programme staff.

4.6.6 The records for relief staff must be maintained for verification and inspection as and when required by the CLO.

4.7 Provision of Continuing Professional Development (CPD) Days (only applicable for Class A and / or B Licence)

4.7.1 Up to a maximum of 4 days per calendar year can be designated as CPD days but the Centre must remain open on these days to provide care and supervision to children and infants enrolled in the Centre. CPD days can be used consecutively at a maximum of 2 days, or as 1-day sessions. Unused CPD days will not be carried forward to the next calendar year.

4.7.2 For new centres, the number of CPD days will be pro-rated (by calendar year), depending on the commencement date of services.

4.7.3 Programme staff-to-child ratios for all classes must be met on CPD days.

4.7.4 A minimum of 50% of the number of programme staff required (based on enrolment) must remain in the Centre during CPD days, to ensure there is sufficient staff present who are familiar to the children and infants.

4.7.5 Centres may deploy Assistant Preschool Educators / Assistant Early Years Educators and/or qualified relief Preschool Educators / Early Years Educators to conduct developmentally appropriate activities (similar to non-programme hours), with a focus on provision of care and supervision. Qualified relief Preschool Educators / Early Years Educators include ex-preschool educators who hold early childhood education qualifications, or completed the relief staff programme in early childhood.

4.7.6 Either the Principal or senior/ lead educator must remain in the Centre during CPD days.

4.7.7 Parents/guardians and the CLO must be informed at the beginning of the calendar year on the Centre's CPD days and the provision of care arrangements on those days.

4.7.8 Parents/guardians must be reminded at least 1 month in advance before the CPD day.

4.7.9 Parents/guardians must be informed at least 1 month in advance of any changes to the CPD days.

4.7.10 Parents/guardians of newly enrolled children and infants must be informed of designated CPD days and care arrangements on these days, during registration and orientation.

4.8 Inclusion Coordinator (ICO)

4.8.1 The licensee must ensure that there is an ICO appointed in each centre (not applicable to Centres with Class A Licence only). The licensee may appoint a staff or Learning Support Educator (LSed) from the Centre or its Headquarters (HQ) as an ICO. If the appointed ICO is an LSed or from HQ, he/she can take on the responsibilities of an ICO for up to 5 centres, provided that he/she has the capacity to do so[8].

4.8.2 The ICO must meet the following requirements:

- Is L2(EL) certified or equivalent as approved by the CLO;
- Is employed full-time at the Centre (i.e., EC educator) or HQ (i.e., LSed and HQ staff);
- Has at least 2 years relevant teaching experience in an early childhood setting; and
- Has successfully completed the Pre-Appointment Training for Inclusion Coordinators[9];

4.8.3 The responsibilities of the ICO, with the support of the Principal and educators as stated in Annex I, are to:

- Work with educators to identify children who may potentially require early intervention support;
- Guide educators and parents/guardians to appropriate early intervention support or resources; and
- Work with the Principal to establish centre processes that can support the enrolment and monitor the progress of children with developmental needs.

4.8.4 The licensee must appoint another ICO within 3 months, should the existing ICO withdraw from this role or leave the Centre/operator.

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8 Licensees must submit an application for ECDA's approval, prior to appointment of HQ staff or LSed as ICO.

9 Learning Support Educators (LSed) on the Development Support and Learning Programme (DS-LS programme) who are appointed as ICOs are not required to undergo the pre-appointment training.

5 SAFETY

Safety and wellbeing

During the hours of operation of a centre, the licensee of the centre, and every member of the licensee's staff who is deployed to supervise a class, must ensure —

(a) The safety and wellbeing of every child attending the class; and
(b) That every child attending the class is at all times under the supervision by a member of the licensee's staff, whether the child is within or outside the centre.

[Regulation 49 of the Regulations]

5.1 Premises

5.1.1 Centres' premises must be secured to prevent any unauthorised entry into the Centre.

5.1.2 Centres must have procedures to check and record the entry and exit of all persons in the Centre.

5.1.3 Areas, facilities and equipment that may pose as safety risks must be secured and rendered inaccessible to children and infants. This includes installing a physical barrier at the entrance of the kitchen or pantry, and window grilles if there is a fall risk.

5.1.4 Staircase handrails must be installed at children's height so that children can use them while climbing the stairs.

5.1.5 Keys for the window or window grilles must be kept out of children's and infants' reach, but made accessible to all staff.

5.1.6 The height of the railings at the staircase landing and corridors must be at least 1.5 metres.

5.1.7 With the exception of the areas stated in paragraph 5.1.6, fencing/barriers of at least 1.8 metres in height must be installed in areas used by children, including playgrounds, which are located above ground level and pose a risk of falling to a lower level. Licensees must obtain the CLO's approval for any deviation from this requirement for fencing/barriers to be a minimum 1.8 metres in height.

5.1.8 All fixtures, furnishings and outdoor equipment must be in good condition, child-friendly and appropriate to the age and needs of the children and infants.

5.1.9 Furnishings, equipment and resources must not pose any health or safety risks to children and infants. Furniture such as cupboards, shelves and cubby holes must be sturdy and/or secured properly (e.g. anchored or bolted to the wall or ground) to prevent it from tipping over when it is used or knocked into, which may cause injury to children and infants.

5.1.10 The licensee must plan for and provide resources for the regular maintenance, preventive maintenance, replacement and repair of the premises, furnishings, fixtures and equipment. This is to ensure that the Centre is safe, clean and conducive for children and infants' care and learning.

5.1.11 Sufficient indoor space for children and infants must be provided to prevent overcrowding. This includes taking into consideration the different age groups, class sizes and types of learning experiences.

5.2 Outdoor Learning Experiences

5.2.1 Weather conditions (rain or heat) must be taken into consideration when planning outdoor learning experiences. Minimise outdoor activities directly under the sun between 11 am to 4pm.

5.2.2 The staff-to-child and infant ratio must be met as follows:

- Qualified programme staff-to-child ratio as per during programme hours; and.
- If the class size only requires 1 qualified programme staff, the Centre must still ensure that there are at least 2 adults present at all times, out of which one must be a qualified programme staff.

5.3 Crossing of Roads

5.3.1 Centres that require children to cross roads to move between bays or access outdoor spaces must inform parents/guardians (e.g. in the Centre's Handbook for Parents) of this practice and the safety measures in place.

5.3.2 Licensees must conduct a risk assessment and put in place necessary measures to ensure safety which includes the following requirements.

Assessment on suitability of planned route

5.3.3 There must be a designated crossing area (e.g. traffic light, zebra crossing).

5.3.4 Children must not cross roads at T-junctions or cross-junctions.

5.3.5 Centres must assess the traffic conditions to determine if the road is safe for children. The considerations include:

- Whether heavy vehicles utilise the road often;
- The speed limit of the road.

5.3.6 Centres must review and re-assess the route when necessary, as traffic conditions may vary.

Staff-to-child ratio

5.3.7 The staff-to-child ratio for outdoor learning experiences must be met.

5.3.8 For a group of 7 or more children: <u>at least</u> 3 adults must accompany the group when crossing the road. If the children need to cross the road in small groups, there must be sufficient adults for each group.

5.3.9 In addition to the required staff-to-child ratios, the adults can include volunteers such as parents/guardians, caregivers, but they must be supervised by Centre staff who are approved by CLO.

5.3.10 There must be an adult both in front of and behind the group.

Procedures

5.3.11 Staff must follow traffic rules and practise road safety. Good practices on road safety are as follows:

- Stop before crossing, look for vehicles and practise kerb drill: "Look Right, Look Left, Look Right Again."
- Check to see that there are no vehicles or that vehicles have come to a stop.
- All staff and the children to keep one hand raised while crossing the road. The objective is to be seen.
- Always use footpaths and walkways and never walk along the roads where possible.
- Do not cross the road at road bends and in between stationary vehicles.

5.3.12 Staff must be able to contact the Centre quickly during an emergency.

5.3.13 Children must be easily identifiable (e.g. school uniforms, hats or name tags, etc.)

5.3.14 Staff must be alert, careful and exercise discretion to ensure the safety of children. Staff can carry a whistle or use other means to get children's attention quickly.

5.3.15 Centres must develop a set of SOPs for crossing of vehicular roads, which is shared with all staff.

Educating children

5.3.16 Staff must teach children simple road safety messages and remind them about safety rules before leaving the Centre.

5.4 Care of Infants

5.4.1 For centres providing infant care services, sufficient number (ratio of 1:10) of sinks with running water next to the diaper change tables (ratio of 1:10) must be provided.

5.4.2 Diaper change tables must have 4 raised sides of at least 3 inches high each, when measured from the top of the pad (i.e. interior). This is to prevent the infant from rolling and falling off the diaper change table.

5.4.3 The following practices must be carried out to safeguard the wellbeing of infants:

- Space is demarcated between locomotive and non-locomotive infants.
- Infants are held during bottle feeding.
- Infants are fed with semi solids or solids in an upright position (not lying down).
- If bathing of infants is needed, centres must ensure infants' safety (e.g. checking of water temperature or use safety devices to prevent scalding).

- If bathing is needed to clean older infants (those who can stand), Centres must ensure infants' safety by carrying out necessary risk assessments and putting in place additional measures (e.g. ensure infant is seated, or use a standing shower instead of sink where applicable).
- Diaper changing areas must be cleaned after each use.

5.4.4 Periods for naptime must be provided for infants according to their individual needs. During naptime, centres must ensure the following:

- Sleeping area is safe and conducive for infants' sleep. Cots and mattresses should not be placed near curtain cords.
- Infants who fall asleep in the activity area are carried into the sleeping area.
- Infants are brought out of the sleeping area after they wake up.
- An infant's head and face must not be covered during sleep (e.g. with a cloth, pillow etc).
- Cots are free of objects that can increase the risk of entrapment, suffocation or strangulation. This includes pillows, pillow-like toys, blankets and bumper pads.
- Infants who sleep in cots must be moved to mattresses once they are able to climb out of the cot.
- Playpens and rockers must not be used for infants' sleep.

5.4.5 For infants placed on low chairs, centres must ensure that their feet are able to touch the ground. For infants placed on high chairs, centres must ensure that the infants' feet can rest on the footrest.

5.4.6 Centres must not place infants in restrained or buckled seats for extended periods of time.

5.4.7 All milk bottles and containers of expressed milk or milk powder must be clearly labelled with the infant's name.

5.4.8 Feeding of expressed and/or formula milk must be in accordance with the instructions of the parent/guardian of the infant. No infant should be given expressed and/or formula milk which is not meant for the infant.

5.5 Business Continuity Plan (BCP)

5.5.1 Licensees must develop and update their Business Continuity Plans (BCPs) in order for its Centres to sustain the continuity of care for enrolled children and infants in the event of significant operational disruptions including, but are not limited to, incidents caused by fire, flood, or a public health situation such as a pandemic. Centres must regularly review and update the plans to ensure they remain operationally relevant.

5.5.2 Licensees are to ensure that all staff are briefed and familiar with the BCP.

5.6 Emergency Evacuation Procedures

5.6.1 Licensees must ensure that emergency evacuation exercises for all children, infants and staff are conducted regularly with not more than 6 months between 2 exercises. This is to ensure that staff and children are better prepared and able to respond quickly to emergency situations, including but are not limited to fire, blackout, an intruder in the premises, acts of terrorism or bomb threat.

5.6.2 Centres must alternate the 6-monthly evacuation exercise for children and infants with one fire drill and one security-related emergency exercise (e.g. intruder in the Centre, suspected bomb threat in the Centre), and adhere to the SGSecure advisories.

5.6.3 For centres providing infant care services, a separate emergency evacuation procedure for infants must be followed.

5.6.4 For centres located in zoned Business 1 industrial premises, licensees must be represented as a stakeholder in the building's Fire Safety Committee; and work with the building management on emergency responses and evacuation procedures for the safety of the children, infants and staff at the Centre.

5.6.5 Emergency evacuation routes must be displayed at a prominent location of the premises to facilitate evacuation by staff, children and other persons, in the event of an emergency.

5.7 Documentation of Records for Daily Operations

Record-keeping

5.7.1 The following records must be maintained in the Centre:

- Arrival time of the children and infants
- Attendance of the children and infants
- Signing out records of parents/guardians when they pick up their children or infants. Measures are in place to ensure that the children or infants leave the Centre with their authorised persons only
- Visitors' log
- Accidents and incidents in the Centre
- Illnesses and outbreaks of diseases
- Any deviation from the regular programme
- Special activities / field trips conducted for the children or infants

5.8 Closed Circuit Television (CCTV) Cameras

5.8.1 **Centres must comply with the following requirements** in implementing CCTV in their premises:

a) CCTV cameras must be placed in the following areas which are used by children:

- Entrances / Exits to the Centre
- Corridors and walkways used by children
- Teaching and learning areas (e.g. classrooms, activity rooms)
- Common dining areas
- Indoor / outdoor play areas that are within the Centre's premises
- Infants' napping room (additional requirement for Class A Licence)

b) Cameras must not be placed in toilets, changing rooms and staff rest areas to protect the privacy of children and staff.

c) For security purposes, cameras at all entry and exit points (including emergency exits), and within the premises must capture and record real time footage during and after operational hours.

d) Cameras must be able to capture and record full, unobstructed views of the relevant areas, with clear images that allow identification of individuals in the footage.

e) Cameras must be able to record and store at least 30 days of footage.

f) The date and timestamp on every camera must be set correctly, to accurately show the day and time of an incident.

g) The CCTV system and its cameras must be regularly checked to ensure that they are properly maintained and in good working condition.

h) Where requested by ECDA or other public agencies, the actual recorded CCTV footage must be provided to facilitate investigation of incidents. Actions will be taken against the licensee and/or any individual if:

- The footage that was requested for is destroyed,
- The footage that was requested for cannot be retrieved, due to a failure to turn on or maintain the CCTV cameras or otherwise,
- The footage furnished is not the actual recorded footage that was requested for,
- The footage furnished has been tampered with, or
- The request is not complied with for any other reason.

i) Licensees must comply with the requirements under the Personal Data Protection Act (PDPA) 2012 on the collection, use, disclosure and usage of individuals' personal data.

j) Centres must state their policies on CCTV cameras and footages (including management of requests to access/review CCTV footages) in communication platforms with parents/guardians (e.g. Centre's Handbook for Parents), and **explain such policies to parents/guardians prior to enrolment**.

k) Licensees must appoint at least 1 staff or key appointment holder to ensure compliance with the requirements in (d) to (j), as well as the following:

- To ensure that there is no unauthorised access to CCTV system/camera, or unauthorised viewing, modification, duplication, or disposal of CCTV footage; and
- To assess and approve/reject requests to review, extract or duplicate CCTV footage for parents/guardians.

6 HEALTH AND HYGIENE

6.1 Immunisation of Children and Infants for Enrolment

6.1.1 All children and infants enrolled in the Centre must have been immunised for diphtheria and measles, which are compulsory under the Infectious Diseases (Diphtheria and Measles Vaccination) Regulations 2021.

6.1.2 Children must have at least 1 dose of Measles, Mumps and Rubella (MMR), and primary series of diphtheria (comprises of 3 doses) vaccination for enrolment, and must complete the second dose of MMR at a scheduled date specified by the medical practitioner.

6.1.3 Infants who have yet to reach the required age for specific immunisations can be enrolled in the Centre but should complete the vaccinations as scheduled. All infants transiting from infant care to child care services must have been immunised for diphtheria and measles.

6.1.4 A copy of the child's or infant's immunisation records for diphtheria and measles must be obtained from the parent/guardian, including additional vaccine doses for these diseases. Refer to the Health Promotion Board's website for the recommended childhood immunisation schedule.

6.2 Health Checks

6.2.1 Daily temperature and health checks must be conducted for all children, infants, staff and visitors upon arrival.

6.2.2 The temperature and health checks must be recorded and maintained.

6.3 Premises

6.3.1 The premises must be clean and pest-free, in accordance with the requirements of the Environmental Sanitation (ES) Regime for Preschools[10] under the National Environment Agency (NEA)'s Environmental Public Health Act.

6.3.2 The indoor premises must be adequately ventilated. Centres must also put in good indoor air quality practices, in accordance with the requirements under the ES Regime for Preschools.

6.3.3 Centres should take measures to ensure good ventilation and indoor air quality. These include but are not limited to the following:

- For naturally ventilated spaces, open windows regularly in a safe manner (i.e. ensure that there is no risk of a child falling through). For spaces with mechanical ventilation, ensure ventilation systems are in good working order.
- Open windows or use exhaust fans in bathrooms. This is to control moisture in the environment to prevent the growth of mould, mildew and bacteria. Keep windows and

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10 You can refer to the ES Regime's requirements at https://www.nea.gov.sg/our-services/public-cleanliness/ESR.

other openings (e.g. back door) around exhaust fans closed to avoid short-circuiting of air flow.

- Open windows or use exhaust fans in kitchens. This is to increase ventilation and reduce food odours.
- Ensure air conditioners and air purifiers are equipped with high-efficiency filters (at least MERV14 or F8 for air conditioners and HEPA filters for air purifiers).
- Clean or replace filters in air conditioners and air purifiers regularly, according to the manufacturer's instructions.
- Clean and remove dust with a damp cloth regularly.
- Replace any mouldy furniture and materials and address any dampness issues on walls, which may have been caused by condensation or damaged water pipes.

6.3.4 Centres should carry out regular cleaning of its premises, furnishings and items used by children. These include but are not limited to communal toys, furniture, floors, and doorknobs.

6.3.5 There should be routine cleaning and disinfection of high-risk areas, which include but are not limited to:

- Waste disposal/collection areas
- Food preparation areas
- High-touch surfaces e.g. floor, low shelves, doorknobs, tables used by children and infants
- Toilets

6.3.6 For cleaning and disinfection of general surfaces, centres must implement the following measures:

- Use 1 part bleach to 49 parts water (e.g. 20ml bleach to 980ml water) when using aqueous chlorine solution of 5.25% to 6.15% sodium hypochlorite.
- For surfaces that come into contact with food/mouth, use 1 part bleach to 249 parts water (e.g. 4ml bleach to 996ml water) when using aqueous chlorine solution of 5.25% to 6.15% of sodium hypochlorite.

For disinfection of contaminated surfaces[11], centres must implement the following measures:

- Use 1 part bleach to 9 parts water (e.g. 100ml bleach to 900ml water) when using aqueous chlorine solution of 5.25% to 6.15% sodium hypochlorite.
- Leave the solution on the contaminated area for at least 10 minutes before proceeding with cleanup.
- The bleach solution should be prepared daily or when needed, kept out of sunlight and away from heat. Centres may also use any chlorine-based liquid disinfectant (containing sodium hypochlorite) or Chlorine granular disinfectant+ (containing sodium dichloroisocyanurate / NADCC), prepared in accordance with the manufacturer's instructions.
- Have a readily available spill kit with the items listed in Table 7 below.

11 Contaminated surfaces refer to surfaces that may harbour infectious agents, including surfaces touched by individuals with suspected or confirmed infections, surfaces exposed to any bodily fluids including respiratory droplets, saliva, nasal secretions, blood, urine, faeces or vomit, and high-touch surfaces in areas where infected individuals have been present.

Table 7: Spill Kit

S/N	Item	Purpose
1	Disposable powder-free latex or vinyl gloves	Personal Protective Equipment (PPE) for staff in charge of cleaning
2	Masks	
3	Plastic aprons	
4	Plastic bags (leak-proof, sealable)	To contain the waste items
5	Refuse bags	
6	Paper towels or disposable cloths	To clean and disinfect the contaminated area
7	Tongs	
8	Chlorine-based liquid disinfectant* (should contain sodium hypochlorite) e.g. household bleach / Chlorine granular disinfectant+ (should contain sodium dichloroisocyanurate / NADCC)	
9	Detergent	

**Disinfectants should be prepared in accordance with the manufacturer's guide before use.*

6.3.7 Centres must ensure that containers and floor areas used for cleaning soiled items are disinfected appropriately. If disinfectant solutions are disposed of via toilet drainage, centres must ensure that any floor areas that come into contact with the dirty water are also disinfected.

6.3.8 Cleaning equipment (e.g. mops etc) used for cleaning contaminated surfaces must be kept separately from cleaning equipment used for general cleaning, to prevent cross-contamination.

6.3.9 Centres must use a designated pail system exclusively for soiled clothing. Clothing soiled with urine, stool or vomitus must be rinsed at the Centre using this designated pail. After rinsing, pack soiled clothing in plastic bags to minimise staff and children's exposure to disease-carrying agents. Staff must wash their hands thoroughly after handling soiled clothing.

6.3.10 Licensees must comply with any additional health-related advisories for preschools issued by ECDA and other authorities.

6.4 Provision of Basic Amenities

6.4.1 For Class B and C Licences, there must be at least 2 functioning child-sized wash hand basins and at least 2 functioning child-sized flush toilets.

6.4.2 Basic amenities must be provided and easily accessible to children in the toilets. This includes the provision of hand-washing liquid soap and hand-drying facilities. Every toilet cubicle must, at all times, have a sufficient supply of toilet paper, which is easily accessible to children.

6.4.3 Children and infants' personal effects must be maintained individually in a hygienic manner. This includes personal items such as toothbrushes, mugs, mattresses, mattress covers and combs.

6.5 Meals

6.5.1 Centres that provide food to children or infants must refer to the Health Promotion Board's Healthy Meals in Preschools Programme (HMPP) guidelines[12] and ensure that the food is nutritious, balanced, and varied.

6.5.2 There must be at least 2 different sets of weekly menu on rotation, and food served must be in accordance with the menu of the day.

6.5.3 For Class A Licence, the 2 different sets of weekly menu on rotation must be suited to the age range of each group of infants aged 7 – 9 months, 10 – 12 months and 13 – 18 months respectively.

6.5.4 When introducing new food to infants, centres must not introduce more than 1 food item at a time. When in doubt, centres must check with parents/guardians of the infant before introducing new food.

6.5.5 Parents/guardians and the CLO must be given at least 1 month's notice in writing regarding any significant change/s in the written menu or meal arrangements (e.g. switching from meals prepared in-house to catered meals from food establishments[13] licensed by the Singapore Food Agency (SFA)).

6.5.6 Ad-hoc deviations of food served from the written menu must be duly recorded.

6.5.7 Menus must be displayed at a prominent location within the premises.

6.5.8 There must be sufficient variety and quantity of food and drink proportionate to the age of children and infants.

6.5.9 Children must be provided access to drinking water at all times.

6.5.10 Where children assist in the preparation of the food (e.g. during cookery lessons), they must be supervised by staff. Centres must take the necessary safety and hygiene precautions to prevent accidents, injury or illness:

- Always be aware of the dangers of heat, or when handling hot or boiling food/liquids.
- If children have had vomiting or diarrhoea, they should not assist in the preparation of food until they have been symptom-free for 48 hours.
- If the Centre has recently had, or is currently experiencing an outbreak of gastroenteritis, activities that involve children in the preparation of food should not be held.

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12 You can refer to Health Promotion Board's guidelines at https://www.hpb.gov.sg/schools/school-programmes/health-promoting-programmes-for-pre-schools/healthy-meals-in-pre-schools-programme.

13 Information on track records of SFA-licensed food establishments can be found at https://www.sfa.gov.sg/tools-and-resources/track-records.

6.6 Food Hygiene

Food Handlers

6.6.1 Any person who handles and prepares food and beverages in the Centre, including persons who assist with food preparation, must have a valid certificate for the Basic Food Hygiene Course (BFHC) or Food Safety Course Level 1 (FSCL1) with training providers approved by SFA, before commencing work.

6.6.2 Food handlers must complete refresher trainings before the expiry of the relevant food safety certification as stated in the following table:

Table 8: Refresher Course for Food Handlers

Refresher Course	Frequency
1st refresher training	By the 5th year from the date of first passing the BFHC/FSCL1 course
2nd and subsequent refresher training	Every 10th year from the date of passing the last refresher course

6.6.3 Any person who prepares food in the Centre must ensure good personal hygiene. This includes the following:

- Do not continue to work when unwell (e.g. vomiting, diarrhea, fever or any other illnesses).
- Wash hands thoroughly and regularly with soap and water, before preparing food or touching ready-to-eat food and especially after handling raw food, after visiting the toilet and after handling waste/soiled diapers.

Food Storage and Preparation

6.6.4 Food storage and preparation areas (e.g. kitchen, pantry, stores) must be clean and pest-free.

6.6.5 Surfaces for food preparation, appliances and utensils must be cleaned and sanitised between tasks and after use.

6.6.6 Centres must obtain food supplies from approved sources. Upon receiving the ingredients, centres must store them promptly at the appropriate locations and temperatures.

6.6.7 There must be proper procedures for food storage in the chiller and freezer. This includes the following:

- Raw food and cooked / ready-to-eat food must be stored separately
- Raw food must be stored in containers with tight-fitting lids to prevent spillage and placed on the lowest rack of the refrigerator, below any cooked / ready-to-eat food.
- The temperature of the freezer must be maintained at or below -18°C and the temperature of the refrigerator / chiller at or below 4°C.

6.6.8 Food that has turned bad or passed the “use-by” or “expiry” date must be discarded.

6.6.9 There must be written directions for handling and preparing food.

6.6.10 Basic principles of food preparation must be observed to avoid cross-contamination.

- Separate preparation areas for vegetables/fruits and meat
- Use separate chopping boards and knives for raw vegetables, raw meat and cooked / ready-to-eat food. Use separate utensils (e.g. spoons, tongs) for raw and cooked food.
- Store chopping boards and utensils for raw and cooked food separately.
- Clean chopping boards regularly; replace them when they are worn out.
- Clean and dry knives thoroughly before storage. Ensure knives are kept in places that prevent moisture retention and debris accumulation (e.g. magnetic knife strips).
- **Thaw food in the refrigerator** (0°C to 4°C) or by submerging the food in **cold running water** within sealed and leak-proof packaging.

6.6.11 Food preparation must be conducted away from any site / source, which may lead to food contamination (i.e. near toilets or on the floor).

6.6.12 Food served to children and infants must be cooked within the Centre's premises or obtained from an SFA-licensed food establishment, unless otherwise approved by the CLO.

6.6.13 Food served to children and infants must be sufficiently warm when served to prevent food pathogens from multiplying. Hot food should be kept above 60°C and cold food below 5°C until ready to be served, to reduce the risk of food poisoning. Food should not be kept at room temperature for too long, and be consumed within 4 hours after cooking. Shelf-stable items sealed in original packaging (e.g. packaged bread) may be kept at room temperature and should be consumed as soon as possible once opened.

6.6.14 All food served to children and infants must be cooked thoroughly, and consumed as soon as possible after cooking. Chilled/frozen food should only be reheated once, reaching at least 75°C for 2 minutes. Use clean tongs or gloves when serving food.

6.6.15 There must be written directions for provision of food at all special events / celebrations held in the Centre to enable tracing of food served in the event of an outbreak of food poisoning or gastroenteritis.

Preparation of Milk

6.6.16 Expressed breastmilk for infants must be prepared, stored and heated appropriately.

6.6.17 Expressed breastmilk should be kept refrigerated (below 5°C) or frozen. All bottles of expressed milk need to be labelled with the child's name, and the date that the breastmilk was expressed.

6.6.18 When using formula milk, the container containing the formula milk must be labelled with the child's name and the date of expiry.

6.6.19 It is best to prepare fresh formula for each feed and to give it to the child as soon as it has cooled. Throw away any leftover milk. Do not freeze or reheat it.

6.7 Management of Children and Infants with Food Allergies

6.7.1 All centre staff must be made aware of the children and infants in the Centre with known food allergies, and the appropriate management plan.

6.7.2 The names of the individual children and infants, their respective classes and their known food allergies (with a photograph of the child) must be recorded and displayed in the kitchen or pantry and in food serving areas.

6.7.3 The cook and/or any persons preparing and serving the food must comply with food-safe practices, including appropriate hand-washing procedures before and after handling food, ways to prevent cross-contamination when storing, preparing, cooking and serving food. Separate utensils and dishes should be used and washed thoroughly in warm soapy water.

6.7.4 All teaching materials used in the classroom (e.g. during art & craft sessions, science experiments, cookery activities) must be free of allergens to be safe for use by the child and infant with food allergies.

6.7.5 All tables and chairs used for dining must be cleaned thoroughly with hot soapy water or an "all-purpose" cleaning solution before and after meal times. Single use paper towels should be used when cleaning the tables and chairs to prevent cross contamination from cloths.

6.7.6 All parents/guardians, whose children are in the same class as the child or infant with food allergy, must be informed that they are not to bring any food that contains allergens that may be life-threatening to the child or infant. This applies to events like class celebrations, birthday parties and picnics.

For Children or Infants with High-Risk Food Allergies

In severe cases of food allergy, anaphylaxis may occur. Anaphylaxis is a serious and life-threatening allergic reaction, where there is difficulty in breathing and a severe drop in blood pressure, resulting in giddiness and/or loss of consciousness. This reaction can be fatal if left untreated.

6.7.7 When a child or infant is known to have high risk food allergies, the Centre must, in addition to the above requirements, request from the parent/guardian a copy of the Action Plan for Anaphylaxis that is signed by a medical practitioner. This would enable the Centre to work together with the parent/guardian to manage the child's or infant's condition in the Centre and provide a timely response in the event the child or infant has an allergic reaction.

6.7.8 The parent/guardian must be provided a list of all the food ingredients used for meals in the Centre. This is to allow the parent/guardian to make an informed decision about the Centre's preparation of food for their child or infant. Alternatively, the parent/guardian can opt to provide food for the child or infant daily instead of consuming food prepared by the Centre.

6.7.9 The parent/guardian must be informed immediately in the event the child has an allergic reaction.

6.7.10 Prescribed medication for the child or infant must be kept at a readily accessible location (i.e. not in a locked storage space) in the event the child or infant has an allergic reaction. A cool, dark storage place is recommended. Refrigeration is not recommended.

6.8 Management of Infectious Diseases

Infection diseases

A licensee must —

(a) ensure that the premises and operation of the licensee's centre conform with such requirements as may be specified by the Chief Licensing Officer or in any code of practice, relating to the prevention of infectious diseases and state of hygiene and cleanliness in centres; and

(b) report to a Health Officer, the Chief Licensing Officer, and the parents or guardians of all the children attending at the licensee's centre of any suspected or known case of any infectious disease amongst the licensee's staff or children attending at the centre in accordance with such requirements as may be specified by the Chief Licensing Officer or in any code of practice.

[Regulation 31(1) of the Regulations]

6.8.1 When centres are notified of any suspected or known case of infectious disease amongst children and infants and/or staff, both parents/guardians, and the CLO must be informed to enable early detection of disease outbreaks and implementation of measures to curb transmission. The list of infectious diseases includes, but are not limited to, the following:

- Chickenpox
- Dengue
- Gastroenteritis
- Hand, Foot and Mouth Disease (HFMD)
- Measles
- Mumps
- Respiratory illnesses
- Rubella
- Tuberculosis (TB)
- COVID-19
- Mpox

6.8.2 Licensees must inform the Communicable Diseases Agency (CDA) promptly of any case of measles and clusters (i.e. 2 or more linked cases) of:

- Gastroenteritis
- Hand, Foot and Mouth Disease (HFMD)
- Acute respiratory illness
- Other significant disease

according to *CDA's reporting guidelines*. These must be done through the electronic notification system, Communicable Diseases Live & Enhanced Surveillance (CDLENS). Refer to *https://de-rom.moh.gov.sg/cdlens/auth/login* for more information.

6.8.3 During an outbreak of infectious disease, centres must:

- Temporarily remove and disinfect soft furnishings that may harbour pathogens (e.g. hanging fabrics, soft toys, carpets, cushions)
- Temporarily cease using toys that cannot be effectively cleaned, such as those that absorb water or would be damaged by immersion (e.g. puzzles, activity books)
- Only reintroduce these items after the infectious disease is no longer present in the preschool

6.8.4 Children, infants and/or staff must be monitored for symptoms of common infectious diseases. The symptoms include but are not limited to:

- Respiratory – fever, cough, runny nose, sore throat
- Food poisoning / Gastroenteritis – diarrhoea, vomiting
- Skin conditions – chickenpox, rash, blisters, enlarged lymph nodes
- Oral and ocular – Conjunctivitis (i.e. red eyes), mouth ulcers
- Other physical symptoms – poor appetite, lethargy, headache, chills, muscle ache, joint pain, chest pain

6.8.5 Infected children, infants and/or staff must only return to the Centre upon expiry of their medical certificate and show no symptoms of illness. In the event that there are differing views on the child's or infant's health condition, the licensee can request that the parents/guardians see a medical practitioner to ensure that the child is fit to return to the Centre.

6.8.6 The following records must be kept:

- Records of children, infants and/or staff with symptoms
- Date when they first developed symptoms of the illness
- Clinical diagnosis (if any)

6.9 Management of Haze

6.9.1 To prepare for periods when there is haze, all centres must:

- Identify children with chronic lung and heart conditions and respiratory problems and ensure they have their medication, such as inhalers for asthma, easily accessible at all times;
- Prepare an enclosed and well-ventilated room with working air purifier(s) turned on to temporarily accommodate children who may become unwell or develop respiratory problems; and
- Ensure that air purifiers cover at least 50% of the centre's teaching and learning space and are working (e.g. can effectively filter indoor air, filters are not clogged or dirty).

6.9.2 In the event of haze, further guidance by the CLO may be issued to preschools depending on updates by the NEA. These updates will be sent via SMS from gov.sg and ECDA's generic email address: *System_Admin@ecda.gov.sg*. Centre leaders and educators should also check https://www.haze.gov.sg/ or the myENV app for regular air quality updates and forecasts when planning for the next day's programme, before conducting outdoor or indoor physical activities, or when there appears to be a change in the haze situation.

For Planning Next Day's Programme

6.9.3 Preschools are to refer to NEA's 24-hour Pollutant Standards Index (PSI) forecast when implementing haze management measures and planning indoor and outdoor activities for the next day (refer to Table 9). If the next day's forecast cuts across two ranges (e.g. Unhealthy to Very Unhealthy), preschools are to plan their activities based on the higher range (e.g. Very Unhealthy).

Table 9: Haze Management Measures For Planning the Next Day's Programme & Operations

PSI Forecast / Aspect	≤ 100 (Good to Moderate)	101-200 (Unhealthy)	201-300 (Very Unhealthy)	>300 (Hazardous)
Outdoor Activities	• Continue with normal activities.	• Children with chronic lung and heart conditions or who are unwell: no outdoor activities. • Other children: Minimise prolonged[1] and strenuous outdoor physical activities.	• No outdoor activities for all children.	• No outdoor activities for all children.
Indoor Physical Activities	• Continue with normal activities.	• Children with chronic lung and heart conditions or who are unwell: No strenuous indoor physical activities. • Other children: Minimise strenuous indoor physical activities or switch to non-strenuous ones (e.g. gross motor activities involving simple ball passing games, obstacle courses that do not require running).	• Children with chronic lung or heart conditions or who are unwell: No indoor physical activities. • Other children: Non-strenuous indoor activities allowed.	• No indoor physical activities for all children.
Centre's operations	Proceed as per normal with relevant adjustments to activities and indoor environment based on prevailing 1-hour PM2.5 readings per Table 10 below.		Await instructions from ECDA – see box below.	

When the PSI forecast for the next day is in the Hazardous range:

ECDA would encourage parents and guardians to keep their children at home, and would inform operators and advise centres on when to suspend/scale down lessons and activites.

If ECDA were to activate plans for centres to scale down operations/suspend lessons:

- Preschool-based early intervention programmes (i.e. the Development Support-Plus programme and Development Support-Learning Support programme) may be suspended.
- Centres are to remain physical open to support parents/guardians without alternative caregiving arrangements. Lessons may be suspended and activities may be scaled down. Children of different ages may be cared for together, while ensuring safeguards and non-programme staff-to-child ratios are met throughout the centre's operational hours. The ratio shall be based on the age of the youngest child in the class.

For Daily Adjustments to Activities and Indoor Environment Measures

6.9.4 Before commencing outdoor and indoor physical activities, educators and centre leaders must refer to the **latest 1-hour PM2.5 reading for the region in which the centre is located** on the myENV app or *https://www.haze.gov.sg*. If the reading exceeds 55, centres must adjust outdoor and indoor physical activities in accordance with Table 10.

6.9.5 In the event of a change in haze conditions, centres should check the latest 1-hour PM2.5 reading and adjust the indoor environment in accordance with Table 10. All children's health should be monitored closely, and there should be a well-ventilated enclosed room with an air purifier turned on to accommodate children who may become unwell. Measures may be adjusted to those of the lower PM2.5 band when the latest reading improves.

Table 10: Measures for Daily Activities and Indoor Environment

1-hr PM2.5 reading (μg/m^3)	0 – 55 Band 1 (Normal)	56 – 150 Band 2 (Elevated)	151 – 250 Band 3 (High)	≥ 251 Band 4 (Very High)
Outdoor Activities	• Continue with normal activities.	• No strenuous outdoor activities for the next hour. • Children with chronic lung or heart conditions, or who are unwell: no outdoor activities.	• No outdoor activities for the next hour.	• No outdoor activities for the next hour.
Indoor Physical Activities	• Continue with normal activities.	• Children with chronic lung or heart conditions, or who are unwell: No strenuous indoor physical activities. • Other children: Minimise strenuous indoor physical activities.	• Children with chronic lung or heart conditions, or who are unwell: No indoor physical activities. • Other children: Non-strenuous indoor physical activities allowed.	• No indoor physical activities for all children until PM2.5 levels drop.
Indoor environment	• Switch on fans or air conditioners for air circulation	• House all children in enclosed, well-ventilated indoor spaces, with doors and windows closed. Doors and windows may be opened when the outdoor air quality improves. • Switch on all air purifiers and ensure coverage of at least 50% of the centre's teaching and learning space. • Switch on fans or air conditioners for air circulation.		

6.10 Management of Heat Stress[14]

6.10.1 Licensees must comply with the requirements stated in the following table to minimise the risk of heat stress and heat-related illnesses when conducting outdoor activities. In the event of a heat wave, the CLO will take reference from the Ministry of Sustainability and the Environment (MSE) and the NEA, and provide guidance on the stepped-up measures for the licensee's compliance.

14 Heat stress occurs when our body is not able to cool itself sufficiently, and excess heat builds up, which may cause damage to the body. Warmer or more humid weather could lead to an increased risk of heat stress and related illnesses, such as heat cramps, heat exhaustion and heat stroke. As young children are more vulnerable to heat stress, it is important to take additional measures to safeguard children's health and wellbeing. Heat stress information is available at www.weather.gov.sg.

Table 11: Guidelines for Heat Stress Management

Low Heat Stress WBGT[15](˚C) < 31	**Moderate Heat Stress** 31 ≤ WBGT(˚C) < 33	**High Heat Stress** WBGT(˚C) ≥ 33
Outdoor: • Minimise outdoor activities directly under the sun between 11am to 4pm. • If outdoor activities are scheduled between 11am to 4pm, centres must ensure the following: • Keep the duration for physical activities short. • Schedule a break in shady areas for water and rest for every 15 minutes of activity. • Wear sunscreen to prevent sunburn (as it affects the body's ability to cool down and increases the risk of dehydration). • Monitor heat stress levels and cease all outdoor activities when there is high heat stress.		
Hydration: • Hydrate as per normal	**Hydration:** • Encourage children and staff to drink water frequently; and to drink even before they ask for it (i.e. do not wait until they are thirsty).* • Stay away from sugary drinks (as such drinks may cause greater loss of body fluids). ** These general recommendations apply to children above 1 year old. While infants above 6 months of age and who have been started on solid food may be offered sips of water as required, it is not advisable for infants less than 6 months of age to consume water. Breastmilk/formula milk remains the main source of hydration for infants less than 6 months of age.*	
Attire: • Wear normal attire.	**Attire:** • Wear single layer of loose-fitting clothing.	
Additional measures: • Check Meteorological Service Singapore (MSS) website and myENV app for information on the current weather conditions and heat stress advisory. • Keep classrooms ventilated. • Preschool staff should be aware of the signs and symptoms of heat injuries, ranging from mild ones like heat cramps and rashes to major ones like heat exhaustion and heat stroke. • Watch out for early signs of heat injury (i.e. headache, nausea, dizziness, fainting, high body temperature, rapid pulse, poor concentration, muscle ache, muscle cramps, blurred vision, loss of coordination, disorientation or confusion, seizures or fits, vomiting, decreased and dark-coloured urine), and seek medical attention if symptoms persist or worsen.		

15 The Wet Bulb Globe Temperature (WBGT) provides an indication of heat stress by taking into account the combined effects of air temperature, humidity, wind speed and solar radiation. Please refer to https://www.weather.gov.sg/heat-stress or MyEnv app to check the WBGT.

6.11 Management of Screen Use

6.11.1 All centres must comply with the following requirements on screen use[16] during operational hours:

a) For Class A Licences, centres must not have any form of screen time in the care of and interaction with infants aged 2 to 18 months old.

b) For Class B or Class C Licences, screen time, if used, must be limited to teaching and learning purposes which support programme goals, objectives, and learning outcomes. Centres must not screen videos, movies, or any digital content to occupy children during non-programme hours or periods of transition.

16 Screen use refers to usage of digital devices, including but not limited to smartphones, tablets, laptops, and televisions. For more information on screen use, you can refer to the Guidance on Screen Use for children up to 12 years of age https://www.moh.gov.sg/others/resources-and-statistics/guidance-on-screen-use.

7 PROGRAMME AND CURRICULUM

7.1 Enrolment

7.1.1 Centres must be open to enrol all children, regardless of the child's family background, including but not limited to race, language or religion.

7.1.2 Only children and infants who are enrolled in the Centre are allowed to attend classes conducted at the Centre. All enrolments must be submitted via the CMS.

7.1.3 If the licensee intends to enrol an infant or child beyond the licensed age range (i.e. 2 to 18 months for Class A Licence, and 18 months to below 7 years old for Class B and C Licences), the licensee must submit an application to the CLO and obtain the CLO's approval to do so. Such applications are reviewed on a case-by-case basis and will only be supported if there are exceptional grounds to do so.

7.2 Supporting Children and Infants through Transitions

7.2.1 The licensee must allow parents/guardians, or authorised personnel to accompany their children or infants who are newly enrolled in the Centre, if requested. This is to ease separation anxiety and to help the children or infants adjust to the new environment.

7.2.2 The licensee must allow parents/guardians, or authorised personnel, to accompany enrolled children or infants who have experienced an adverse event (e.g. death of a loved one, traumatic incident). This is to provide comfort and assurance to the child or infant in coping with the grief or loss.

7.3 Staff-Child Interactions and Management of Children and Infants

7.3.1 Staff-child interactions must be respectful, responsive and reciprocal. This is to support children and infants' socio-emotional and psychological well-being, and acquisition of skills for life and learning.

7.3.2 Staff / Education service providers must use positive and developmentally appropriate strategies to manage and communicate with children and infants.

7.3.3 Staff / Education service providers must not commit any of the following acts on any child or infant:

- Sexual exploitation or abuse

- Corporal punishment[17], including –
  - Striking the child / infant, directly or with any physical object
  - Shaking, shoving, spanking or any other form of aggressive contact (e.g. slapping, pinching, punching, kicking, pulling the child's hair, pulling the child's ear)
  - Requiring or forcing the child / infant to repeat physical movements on the pretext of disciplining the child / infant (e.g. requiring the child to do jumps, squats, etc as punishment)
- Giving the child / infant harsh, humiliating, belittling or degrading[18] response of any kind, whether it is a verbal, emotional or physical response. This includes:
  - constant shouting, making inappropriate or insensitive comments, using scare tactics to discipline a child (e.g. educator tells a child that a ghost will catch him if he does not behave)
  - using verbal or physical threats (e.g. threaten to tie a child / infant to a chair or place a child in a cupboard or alone in a room)
  - taking off the child's or infant's clothing in the presence of other children, with the intent to humiliate him / her
  - getting a child to stand and eat his/her meals while the rest of the children are sitting, with the intent to punish or humiliate him/her
  - taping a child's or infant's mouth to keep him/her quiet
- Neglecting the child / infant, and having a deliberate absence of response (such as failing to respond or ignoring physical and emotional needs or cues, e.g. cries of hunger, pleas for emotional comfort, diaper changes or a seizure)
- Depriving the child / infant of any meal or other basic need (e.g. withholding food, water or rest, denying request to go to toilet, taking away rights and privileges for an extended period of time such as play time or activities with other children in the classroom or Centre)
- Isolation of the child / infant unless the child / infant is being supervised by a member of the licensee's staff who is within sight of the child / infant, or physical restriction of any of the child's movements (such as where the acts limit or obstruct a child / infant, or prevent him / her from moving his or her body freely). This includes:
  - strapping or tying a child / infant using a string or any other form of restraint
  - placing a child / infant in a tight space
  - using physical force to prevent, restrict, or subdue the movement of any part of a child's or infant's body
  - pinning a child / infant to the ground
  - placing any object (including one's legs) over an infant when feeding milk to prevent the infant from moving
- Putting the child / infant at risk of being scalded or burnt, which includes:
  - using a lighter or heated object/substance to scare a child
- Causing psychological trauma to the child / infant
- Force feeding the child / infant
- Exposing the child / infant to undesirable content, including but not limited to coarse language, pornography, violence, terrorism, and other content that is inconsistent with paragraph 7.4.1 to 7.4.3 of the Code of Practice.

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17 The United Nations Convention on the Rights of the Child (UNCRC) defines corporal punishment as "any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light".

18 This would include acts which cause shame or embarrassment to the child/infant, or lower his or her self-esteem.

7.3.4 The following SOPs related to behaviour and guidance of staff for the management of children and infants must be maintained:

- Appropriate guidance and behaviour management;
- Child-safe policies (Please refer to Annex G for more information).

7.3.5 All centres must have a set of rules regulating the conduct of their staff. The rules should include, but are not limited to:

- Staff to take all measures to stop or prevent any inappropriate child management practices by other staff or persons in the Centre. This is to protect a child and/or other children from immediate risk and further harm;
- Obligations of staff to report immediately any inappropriate child management practices to the Centre's management;
- Processes for staff to report inappropriate child management practices to the Centre's management and ECDA; and
- Processes for the Centre's management to follow up on staff's feedback on alleged child mismanagement practices.

7.3.6 All staff, including education service providers, must be regularly briefed on the rules of staff conduct, the SOPs on appropriate guidance and behaviour management, and the Centre's child-safe policies (e.g. at least once a year, and when there are updates or changes).

7.3.7 Centres must ensure that there are measures to enforce the rules of staff conduct. Some measures may include (not exhaustive):

- Provision of rules on staff conduct and SOPs which are easy to understand and readily available to all staff.
- Regular reiteration of expected standards of staff conduct during meetings.
- Licensee/Principal/Senior Educators to conduct regular walkabouts to observe, guide and supervise staff on appropriate behaviour management and interactions with children

7.3.8 If there is clear evidence that a staff has mismanaged a child, the licensee must remove the staff from roles that involve the direct provision of care or education of children until the conclusion of ECDA's investigation.

7.3.9 Licensees must ensure that staff / education service providers do not possess, use, sell, or distribute any substance, product or item that is prohibited, restricted or regulated under Singapore law[19], while they are deployed at the centre.

7.4 Programme Plan

7.4.1 The programme and curriculum must be developmentally appropriate, holistic, and aligned to prevailing family values and social norms that reflect Singapore's multi-racial and multi-religious society.

7.4.2 The programme goals, objectives, and learning outcomes must support children's well-being, learning and development.

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19 Including but not limited to the Misuse of Drugs Act 1973, the Tobacco (Control of Advertisements and Sale) Act 1993 and the Intoxicating Substances Act 1987.

7.4.3 The programme and curriculum goals must be guided by the Early Years Development Framework (EYDF) and the Nurturing Early Learners (NEL) Framework.

7.4.4 The licensee must ensure that information on any religious-affiliated elements in the Centre's programme and curriculum (including but not limited to religious practices, rituals, iconography and uniform) is clearly stated in the Centre's Handbook for Parents.

7.4.5 Where paragraph 7.4.4 applies, the licensee must, prior to each child's enrolment, explain to the child's parents/guardians any religious-affiliated elements in the Centre's programme and curriculum, and obtain their acknowledgement in writing that they have received and understood the licensee's explanation.

7.4.6 Licensees must not proselytise and must take all reasonable steps to prevent proselytising by the Centre's staff, any education service provider or other individual or entity engaged by the licensee.

7.4.7 In paragraph 7.4.6, "proselytise":–

- Includes any attempt to convert someone to another religion, for example, attempting to persuade a child of 1 religion that it is better to adopt another religion;
- Does not include sharing of religious stories, singing religious songs and displaying religious icons for educational or instructional purposes only.

7.4.8 Licensees must not require or compel children of any religion to conform to or take part in acts of worship or practices of another religion. For example, licensees must allow the child to not take part in religious practices, if the child or child's parent(s)/guardian(s) does not wish for the child to do so.

7.4.9 Outdoor learning experiences must be carried out within the programme and curriculum daily to support children in all areas of learning and development (e.g. language and literacy, numeracy, physical, social and emotional).

7.4.10 For children enrolled in full day programme, GMA must be carried out for at least 1 hour daily. Out of 1 hour, at least 30 minutes must be outdoors (daily), or 45 minutes must be outdoors (thrice a week), or equivalent.

7.4.11 For children enrolled in half day programme, GMA must be carried out for at least half an hour, 3 times a week. At least 1 of the sessions must be outdoors, or equivalent.

7.4.12 For centres with no access to suitable outdoor spaces, outdoor learning experiences for the children must be conducted at least once a month. This provision is only applicable to centres as specified by the CLO.

7.4.13 For centres which require children to cross roads to access outdoor spaces, licensees must comply with all the stated requirements and procedures accordingly.

7.4.14 Observation, documentation and assessment of the individual child's learning and development must be recorded and shared with parents/guardians every 6 months. For centres providing infant care services, this must be done every 3 months. The information documented should take reference to the areas of development / learning areas as stipulated in the EYDF and NEL Framework.

7.4.15 For Class A Licences, there must be records of individual infant's caregiving and routine needs which are communicated to parents/guardians daily. These include feeds, naps and bowel movements.

7.4.16 Information on the programme plan and curriculum must be submitted to the CLO, when requested. Amendments to the programme plan and curriculum must be made, when required by the CLO.

7.4.17 Parents/guardians, and the CLO must be given at least 1 month's notice in writing regarding any changes in programme plan and curriculum.

7.4.18 Licensees must ensure its staff, and any education service provider or other individual or entity engaged by the licensee, comply with this section in delivering any programme or curriculum to children who are enrolled in the licensee's Centre.

7.4.19 Licensees must not implement programme and curriculum or part of a programme and curriculum, if the CLO deems it unsuitable for children or infants.

7.5 Field Trips/Excursions/Concerts

7.5.1 Parents/guardians must be provided with an option to "opt-out" if they do not want their child to participate in these activities.

7.5.2 There must be provisions for programme staff to remain in the Centre to look after the children, who do not participate in such activities. Staff must engage these children meaningfully in other activities.

7.5.3 There must be procedures for supervision of children outside of the Centre premises, and safety measures for these activities.

7.6 Enrichment Programmes

Approval to engage individuals to provide educational services

A licensee of an early childhood development centre must not engage any individual to provide, for a fee or reward, any educational service for children at that centre, unless the provision of such service by the individual is with the approval of the Chief Licensing Officer.

[Section 29 of the Act]

7.6.1 Enrichment programme(s) are additional programmes that the Centre deems relevant to complement the Centre's curriculum. Some examples include speech and drama, visual arts, gymnastics and swimming classes.

7.6.2 Licensees must ensure that enrichment programme(s) cater only to children enrolled in the Centre. Any additional fee is at the Centre's discretion.

7.6.3 Parents/guardians must be given the option of not enrolling their child in the enrichment programmes.

7.6.4 Children who do not participate in the enrichment programmes must be meaningfully engaged in activities during the duration of the enrichment programmes.

7.6.5 For Class B Licences, enrichment programme(s) must only be conducted between 4pm and 6pm. (The only exception being swimming class, which can be conducted in the morning.)

7.6.6 For Class C Licences, enrichment programme(s) must only be conducted before or after programme hours.

7.6.7 Programme staff-to-child ratio[20] must be met at all times to ensure adequate supervision of children during the enrichment programme(s) hours.

7.6.8 Licensees must ensure that enrichment programme staff and trainers meet the following requirements:

- Make a declaration through the *"Self Declaration and Consent Form on Offences and Warnings'* which can be downloaded via *ECDA's website* and CMS.
- Be certified medically fit to work with young children by a medical practitioner during pre-employment medical check. Refer to Annex E for medical examination requirements.

7.6.9 Enrichment programme staff and trainers' particulars must be submitted to the CLO before the commencement of the enrichment programme.

7.6.10 Parents/guardians must be given at least 1 month's notice in writing for any changes to enrichment programmes (i.e. cessation of enrichment programme vendors, engagement of new enrichment programme vendors).

7.6.11 Records of enrichment programmes must be maintained for the duration of the Centre's licence tenure, for verification and inspection as and when required by CLO.

20 Enrichment programme staff and/or trainers do not count towards programme staff to child ratio during Programme hours.

8 SUBSIDY ADMINISTRATION

8.1 Application

8.1.1 Licensees must inform applicants about the subsidy schemes and additional support that are available for Singapore Citizen children and infants to defray fees charged by the Centre:

- Child Care Basic and Additional Subsidies
- Kindergarten Fee Assistance Scheme (if enrolled in kindergartens run by the Ministry of Education and Anchor Operators)
- Child Care Financial Assistance (CCFA)
- Start-Up Grant (SUG)
- Child Development Account (CDA)

8.1.2 Licensees are required to adopt the digital LifeSG process for all enrolments (including non-subsidy receiving children). Licensees can refer to the Operator's Toolkit for more information about the digital form and how centres can guide parents through the process.

8.1.3 Licensees must comply with the following measures when using the LifeSG form:

- Licensees must trigger the sending of the LifeSG form to the child's or infant's parents or other relevant applicant via CMS within 30 calendar days from the date of the child's or infant's enrolment.
- Licensees must ensure that the LifeSG form is submitted within 14 calendar days from the date the form is triggered. For avoidance of doubt, there will be no back-dating of the approved subsidy effective date if the LifeSG form is submitted after 14 calendar days.

Licensees must obtain the applicant's consent to use their personal information and their child's personal information for the purpose of enabling the applicant to access the digital subsidy / KiFAS application form via LifeSG.

8.1.4 Licensees must support the parent in the subsidy application process, provided the consent of the eligible parents, legal guardian, or non-parent caregiver (e.g. grandparents, foster parents, Children's Homes) of a child or infant who is enrolled in and attending at the licensee's Centre is obtained.

8.1.5 Written consent must be obtained from the main applicant, co-applicant, and relevant family members (if applying for subsidies via Per Capita Income) for ECDA to obtain/verify data with relevant Government databases. If consent is obtained only after the subsidy application, the consent must be current dated (with no backdating), and the licensee must document the reasons for not obtaining consent initially.

8.1.6 Centre administrators appointed by the licensee may administer the subsidy application on behalf of the licensee. The licensee must ensure that the Centre administrators are sufficiently trained and briefed on the prevailing policies, Code of Practice, and procedures. Centre administrators may also be required to attend briefings on subsidy administration.

8.1.7 Licensees must use the latest forms for the application, verify the information in the form with the parents, and verify and upload the relevant supporting documents (if applicable) for a complete submission via CMS.

8.1.8 Licensees are required to go through with the applicant(s) the Subsidy / KiFAS application procedure via the Acknowledgment Note on Subsidy Application (found on CMS), and to obtain the acknowledgment of the applicant(s) of this Acknowledgment Note.

8.2 Fees, Subsidy and Receipts

8.2.1 Licensees must issue either an official receipt or invoice, hardcopy or electronic, for each enrolled child or infant every month or term. In the event that none are issued due to reasons such as centres collecting fee through interbank GIRO, it must be provided upon request by the applicants or ECDA.

8.2.2 The receipt or invoice must clearly state the following:

- Name and Birth Certificate / Citizen Certificate Number of child or infant
- Programme that the child or infant is enrolled in
- Gross fee for programme (includes discounts and subsidies)
- Fee paid by parents
- Approved Government subsidies and Financial Assistance, including Start-up Grant (per paragraph 8.1.1)
- Any fee discount or special assistance provided by the Centre or offset of fee/deposit
- Nett fee paid by the applicant

8.2.3 For trial programme / new enrolment, if fees payable by applicants are pro-rated, the licensee must ensure that any Government subsidies claimed are pro-rated, and based on a percentage i.e. 25%, 50% or 75% of the gross fees (before subsidies).

8.2.4 For Flexi-Care programme, a full month's fee must be paid for the enrolled child to qualify for subsidies. No subsidy claim can be made if a pro-rated fee is paid for the Flexi-Care programme.

8.2.5 Please refer to the applicable subsidy rates based on each programme and any pro-rating in Annex H.

8.2.6 Programme fees indicated on the subsidy application form and in CMS must be inclusive of GST (if applicable).

8.3 Updates to the Subsidy Application / Applicants and Other Changes

8.3.1 Licensees must update the subsidy application via CMS by the 7th of the following month when notified by main / co-applicant on changes in their household circumstances and thereby requesting a reassessment of eligible subsidy by ECDA. Relevant supporting documents must be uploaded via CMS for a complete submission. There will be no back-dating of the approved subsidy effective date if the update was submitted late.

8.3.2 Licensees must update changes in the Nationality of child or infant / subsidy applicant in CMS by the 7th of the following month when notified by main / co-applicant. Relevant supporting

documents must be uploaded in the CMS for a complete submission. There will be no back-dating of the approved subsidy effective date if the update was submitted late.

8.3.3 Licensees must update the following changes via CMS by the 7th of the following month to enable reassessment of subsidy eligible for each child or infant:

- Change in programme enrolled by the child or infant
- Change in programme fee

There will be no back-dating of the approved subsidy effective date if the update is submitted late.

8.3.4 Licensees must ensure that a Form 2 – Subsidy Update and Special Approval Application Form is completed for any relevant updates and changes to a child's subsidy application and profile, excluding:

- Changes in programme fee due to GST and/or
- Changes in programme level arising from the yearly auto-promotion exercise[21]

8.3.5 Contact details of the main and co-applicant must be up-to-date to enable timely communications.

8.4 Attendance

(1) Subject to Paragraph (2), where a licensee has received a Government subsidy for a child for any month, the licensee must not retain any part of the Government subsidy as payment of the child's fees for the month unless —

(a) the child is enrolled in the centre; and
(b) the child attends the centre for at least one day in the month

(5) Where a child in relation to whom the licensee has applied for a Government subsidy fails to attend the centre for at least one day in any month, the licensee must —

(a) notify the Chief Licensing Officer in writing of the failure of the child to attend the centre for at least one day in the month concerned within such time and in such form and manner as may be specified by the Chief Licensing Officer; and
(b) comply with such requirements as may be specified by the Chief Licensing Officer in relation to the child's failure to attend the centre for at least one day in the month concerned.

[Regulations 64(1) and (5) of the Regulations]

8.4.1 Licensees must ensure that Government subsidies are claimed only for children and infants enrolled at the Centre which they attend, with at least 1 day of attendance per month. This attendance requirement must be communicated by the licensee to the applicants / co-applicants.

8.4.2 Attendance of enrolled children and infants must be taken daily and there must not be any backdating of attendance.

21 *Yearly promotion from infant care to playgroup will still require a Form 2.*

8.4.3 Any amendments made on the attendance list, regardless whether the attendance was taken by physical hard copy or digitally, must be made by an authorised person within 1 month of the initial entry (e.g. amendment made to a child's attendance for 15 Jan must be made no later than 14 Feb). If the attendance was taken by physical hard copy, the authorised person must make the amendment by striking off and initialling on the attendance list, without any use of correction fluid or tape.

8.5 Withdrawal

(2) Where a child is enrolled in the centre and attends the centre for at least one day in the month but is subsequently withdrawn from the centre in that month, the licensee may only retain such part of the Government subsidy as may be determined by the Chief Licensing Officer.

(5) Where a child in relation to whom the licensee has applied for a Government subsidy fails to attend the centre for at least one day in any month, the licensee must —

(a) notify the Chief Licensing Officer in writing of the failure of the child to attend the centre for at least one day in the month concerned within such time and in such form and manner as may be specified by the Chief Licensing Officer; and
(b) comply with such requirements as may be specified by the Chief Licensing Officer in relation to the child's failure to attend the centre for at least one day in the month concerned.

[Regulations 64(2) and (5) of the Regulations]

8.5.1 Licensees must fill out the withdrawal form, hardcopy or otherwise, and have it signed by the applicant. Supporting documents, if applicable (e.g. for temporary withdrawal), must be appended.

8.5.2 Where the last payment of infant / child care fees is offset by the initial deposit, a copy of the invoice / receipt issued clearly indicating the amount of infant / child care fees offset by the deposit is required.

8.5.3 Licensees must ensure that the enrolment records of children and infants are updated via CMS to reflect permanent or temporary withdrawal by the 7th of the following month. Supporting documents such as receipt of last payment, and offset of fee by the deposit must be kept in the Centre for audit check conducted by the Chief Licensing Officer.

8.5.4 Licensees must ensure that prorated subsidies are claimed for withdrawn children and infants enrolled in full or half-day programmes if prorated fees are paid in the month of withdrawal, on the condition that the withdrawn children and infants have at least 1-day attendance and minimum of 25% of fee paid. For avoidance of doubt, full subsidies can be received if the full month's fee was paid in the month of withdrawal.

8.6 Electronic submission of Subsidy forms

8.6.1 Licensees may opt to use the electronic version of the latest forms, and obtain parents' (and family members', if applicable) ordinary electronic signatures in the forms. If this option is taken, the licensee must comply with the following measures:

- Licensees / Centre administrators must obtain the parent's written agreement to accept the electronic submission method as an alternative to providing a hardcopy submission.
- Licensees / Centre administrators must confirm the authority and identity of the parents and/or family members who have signed the application form (e.g. call a parent to confirm the email address or to confirm that he/she had sent the signed form and verify the email address in CMS).
- Licensees / Centre administrators must send an acknowledgement email to the parents to confirm receipt of the signed form. Licensees / Centre administrators will sign on the form and this will constitute the complete original signed form. This original signed form will be kept by the Centre and may be circulated by the Centre to the parents or ECDA, and shared with the auditors during audit.
- Licensees must maintain a complete electronic trail and ensure that all records are properly stored and retrievable for the entire period during which the Centre may need to rely on them (see paragraph 8.10).

8.6.2 Licensees / Centre administrators may also sign electronically on the form.

8.7 Payment of Government Subsidies

(3) For the purposes of paragraphs (1) and (2), a licensee must —

(a) ascertain whether the licensee has retained any Government subsidy that the licensee is not entitled to, or more Government subsidy then the licensee is entitled to for each child enrolled in the licensee's centre for each month (called in this regulation the excess amount), within such period as may be specified by the Chief Licensing Officer; and

(b) where the licensee has retained any excess amount, to notify the Chief Licensing Officer in writing as soon as practicable.

[Regulation 64(3) of the Regulations]

8.7.1 Licensees must verify the Government Subsidy (GSII) reports available via CMS and indicate whether or not there are any discrepancies via CMS by the 7th of the following month. The CLO must be notified of any discrepancies immediately.

8.7.2 In the event that there are discrepancies and/or the attendance requirement is not met for any of the children or infants for each month, licensees are required to make adjustment via CMS by the 7th of the following month.

8.7.3 ECDA may withhold Government subsidies in the following situations, which include but are not limited:

- The licensee has made an application under Section 13 of the Act to transfer the licensee's licence.
- The licensee's licence is revoked or the Centre is pending closure indefinitely.

- The licensee fails to confirm if there are discrepancies in the GSII reports by the 7th of the following month for 3 consecutive months (see paragraph 8.7.1).
- The licensee has not submitted the annual audited report (see paragraph 8.9).
- The licensee is under investigation by the Police or Commercial Affairs Department for allegation of fraudulent-related offences or activities.
- There are significant financial and operational indicators that cast doubt on the Centre's ability to continue operating.
- The licensee fails to rectify audit findings within the timeframe stipulated by ECDA.

8.7.4 Where Government subsidies have been withheld under paragraph 8.7.3 of the Code of Practice, licensees must continue to only collect fee net of Government subsidies from parents.

8.8 Recovery of Subsidy Overpayment

(1) Upon receipt of a notice in writing under paragraph (3)(b), the Government may issue a notice in writing requiring the licensee to refund the excess amount to the Chief Licensing Officer within such period as the Chief Licensing Officer may specify in the notice.

(6) Where —

(a) a licensee applies for a Government subsidy on behalf of a parent of a child who is enrolled in the licensee's centre;
(b) due to the submission of incorrect or false information by the licensee to the Chief Licensing Offer, the Government subsidy is paid to the licensee in respect of the child; and
(c) but for the submission of the incorrect or false information mentioned in sub paragraph (b), the parent of the child would not be determined by the Chief Licensing Officer as being eligible to benefit from the Government subsidy,

the Chief Licensing Officer may by notice in writing require the licensee to refund in full the Government subsidy that has been paid to the licensee in respect of the child within such period as the Chief Licensing Officer may specify in the notice.

[Regulations 64(4) and (6) of the Regulations]

8.8.1 Licensees must ensure that recovery of subsidies is promptly and accurately carried out before the deadline as stipulated by the CLO. This includes submission of the necessary supporting documents by the licensee.

8.9 Audit Requirements

8.9.1 A certified auditor must be engaged by the licensee to audit the Centre's subsidy claims annually or upon cessation of the Centre's business (including cases where the licence has been transferred to another business owner).

8.9.2 The audited statement and relevant supporting documents (e.g. to declare discrepancies) must be submitted and declared accurately via CMS within 3 months from the Centre's financial year end or the transfer / closure of the Centre. ECDA may take regulatory action against any licensee for non-compliance (e.g. failing to declare and / or rectify audit findings on a timely basis, incorrect declaration of audit findings, usage of wrong audit guidelines).

8.9.3 For centres pending licence transfer / closure, one month's worth of subsidy payment will be withheld by ECDA, until the audited statement and relevant supporting documents are satisfactorily received.

8.9.4 All subsidies withheld (including those arising from paragraph 8.7.3) shall be deemed as forfeited, if the audited statement and supporting documents are not submitted within 2 years from the date of licence transfer / closure.

Licensees must maintain their bank accounts for at least 2 months after the date of licence transfer / closure in order to receive the payment of subsidies withheld prior to the licence transfer / closure.

8.9.5 Licensees must submit a request to ECDA via CMS to seek an extension of the deadline at least 1 month before the deadline, if he / she is unable to comply due to valid reasons. ECDA may grant an extension on a case-by-case basis.

8.9.6 Licensees must allow entry by ECDA's appointed auditor (for on-site conduct of audits) and provide all necessary assistance in the conduct of audit of the Centre's subsidy claims, including the creation of CMS account and provision of the following documents for inspection, photocopy and/or retention, on a timely basis:

- Children's and infants' personal records (including enrolment / application form, withdrawal form, supporting documents accompanying the subsidy applications, applicants' contact details, applicants' consent for income screening)
- Attendance records of the children and infants
- Sign-out records
- Fee receipts books / bank statements showing payment of fees via GIRO
- Any other relevant documents as specified by ECDA or ECDA's appointed auditor

8.10 Record Keeping

8.10.1 Licensees must keep and retain original MSF- / ECDA-issued forms related to the child or infant (e.g. child or infant's application, withdrawal forms) for at least 3 years from the date on which the child or infant is withdrawn or has graduated from the Centre. Likewise, a copy (hardcopy or otherwise) of supporting documents and other relevant documents has to be kept and retained for at least 3 years from the date on which the child or infant is withdrawn or has graduated from the Centre. Licensee must retain the original audited statement and relevant supporting documents (originals not required) for at least 3 years from the year of audit completion.

8.10.2 Upon the transfer of licence, the licensee must ensure proper hand-over/take-over of all MSF-/ECDA-issued forms related to the child or infant (e.g. child or infant's application, withdrawal forms) as well as all other relevant supporting documents (e.g. attendance records and invoices/receipts), to/by the new operator.

8.10.3 Licensees must produce the records, hardcopy or otherwise, for inspection by the CLO or ECDA's appointed auditor upon request.

8.10.4 Where the licensee's documents are poorly maintained, ECDA may require the licensee to rectify or address the issues, and regulatory actions may be taken for continued non-compliance.

8.11 Confidentiality

8.11.1 Licensees must maintain strict confidentiality of all personal information submitted for purpose of subsidy application. Only authorised personnel shall have access to the information.

9 ADMINISTRATIVE REQUIREMENTS

9.1 Record Keeping

Record-keeping and giving information on quality of service

A licensee must —

(a) Keep and retain, for such period as may be prescribed, such records that are relevant for monitoring or evaluating under this Part the quality of an aspect of early childhood development services as may be prescribed; and
(b) Give to the Chief Licensing Officer, within such period and in such manner as may be prescribed, such information that is relevant for monitoring or evaluating under this Part the quality of an aspect of early childhood development services as may be prescribed.

[Section 35(1) of the Act]

9.1.1 Proper records of the children and infants and their parents'/guardians' particulars must be maintained and updated as and when there are changes. This includes the following:

- Name of the child / infant
- Residential address of the child / infant
- Date of birth
- Dates of registration and enrolment of the child / infant
- Child / Infant's birth certificate number / Singapore citizenship certificate number / Passport no. / FIN no.
- Any known medical conditions and / or allergies of the child / infant
- Long term medication (if any) taken by the child / infant
- Name and contact number of family physician of the child / infant (if any)
- Emergency contact of the child / infant
- Parents'/Guardians' written authorisation for the Centre to take the necessary measures during an emergency, as stipulated in the Centre's standard operating procedures
- Immunisation records of the child / infant
- Name of the parents/guardians
- Parents/Guardians' identity card number / Passport no. / FIN no.
- Employment records of the parents/guardians
- Contact information of the parents/guardians

9.1.2 Centres must put in place procedures to verify the identity of parents/guardians/authorised persons to fetch the child or infant.

9.1.3 Records of the children and infants and their parents'/guardians' particulars must be kept and retained for a period of 3 years from the date when the children / infants are withdrawn or have graduated from the Centre.

9.1.4 Proper records of all staff particulars must be maintained and updated as and when necessary. This includes the following:

- Letter of appointment / employment
- NRIC[22] / Passport / FIN no.
- Copy of a valid work pass (if applicable)
- Residential address
- Email address
- Contact number
- Declaration of Offences and Warnings
- Copy of pre-employment medical check
- Copy of highest academic certificate (if any)
- Copy of professional qualifications in early childhood (if any)
- Copy of a valid child first aid certificate (if any)
- Copy of Basic Food Hygiene Certificate (if any)

9.1.5 Proper records of relief staff's particulars must be maintained and updated, as and when necessary. This includes the following:

- NRIC / Passport / FIN no.
- Copy of a valid work pass (if applicable)
- Residential address
- Email address
- Contact number
- Declaration of Offences and Warnings
- Copy of pre-employment medical check
- Copy of highest academic certificate (if any)
- Copy of professional qualifications in early childhood (if any)

9.1.6 Proper records of enrichment programme staff particulars must be maintained and updated as and when necessary. This includes the following:

- NRIC / Passport / FIN no.
- Copy of a valid work pass (if applicable)
- Residential address
- Email address
- Contact number
- Declaration of Offences and Warnings
- Copy of pre-employment medical check
- Copy of highest academic certificate (if any)
- Copy of relevant professional qualifications (if any)
- Copy of professional qualifications in early childhood (if any)
- Information on the legal entity that the enrichment programme staff is employed with

22 *Digital NRIC is acceptable. This applies to paragraphs 9.1.5 and 9.1.6 as well.*

9.1.7 Records of staff, relief staff and enrichment programme staff must be kept and retained for a period of 1 year from the date when the staff / relief staff/ enrichment programme staff cease to perform any duty at the Centre.

9.2 Programme Fees and Charges

9.2.1 Licensees must inform CLO and parents/guardians of infants/children who are enrolled with the Centre and are affected by the fee revision (including those who have registered their child(ren) or infant(s)) of any increase in registration fee, deposit and/or programme fees in writing, no later than 1 September of the preceding year, before the effective date of the change in fees in the following year.

9.2.2 For any change in incidental charges, parents/guardians and the CLO must be informed of the total estimated incidental charges by 31 January of the year. Parents/guardians who have registered their child(ren) or infant(s) in the Centre must also be informed of the change.

9.2.3 Incidental charges must be optional for parents/guardians.

9.2.4 The list of incidental charges that the licensee may charge is as follows:

- Uniform and any other attire;
- Insurance coverage for a child or infant who is enrolled in the Centre;
- Transporting a child or infant from his or her home to the Centre, or from the Centre to his or her home, or both;
- Attending field trips and excursions outside the Centre, including the cost of meals for the child and the cost of transporting a child to the venue of such field trips and excursions;
- Participating in concerts organised by the licensee, including graduation ceremonies;
- Photographs and videos taken of the Centre's children or infants and events;
- Maintaining online communication tools and systems between the licensee and the parent/guardian of a child or infant;
- Enrichment programmes;
- E-learning materials

9.2.5 For centres operating Class A Licence, the additional list of incidental charges that the licensee may charge is as follows:

- Diapers
- Nappy rash cream
- Milk bottle
- Milk powder
- Cot bedding and any other item which may be consumed or used by an infant.

9.2.6 For centres operating Class B Licence, the additional list of incidental charges that the licensee may charge is as follows:

- Use of a mattress or a stack cot
- Mattress cover

9.2.7 For centres operating Class C Licence, the additional list of incidental charges that the licensee may charge is as follows:

- Readers, academic materials, stationery, school bags and folders, and art and musical materials used in providing those services; and
- Meals that are provided to children

9.2.8 For centres operating Class A and B Licences, licensees must provide parents/guardians with the option of paying school fees on a monthly basis. Any advance programme fees collected must not exceed 3 months of fees.

9.2.9 For centres operating Class C Licence, the programme fees collected must not exceed fees for 1 term.

9.2.10 The fees collected by the Centre must be net of the Government subsidies, if any. In the event that gross fee (fee including subsidy component) is collected, the Centre should refund parents the subsidy when it is received from ECDA. This applies to collection of gross full-month fee or part thereof.

9.2.11 Notwithstanding paragraphs 9.2.8 and 9.2.9, the CLO reserves the right to alter the maximum quantum of fees a centre can collect in advance.

9.3 Annual Centre Closure for Development Days

9.3.1 For Class A and/or B Licences, centres must operate throughout the year except on

- Saturdays and Sundays
- Gazetted public holidays
- Teachers' Day and Children's Day, aligned with the Ministry of Education's practice for primary schools.
- 6 Development Days for professional development and non-teaching tasks (of which at least 2.5 days must be allocated for staff development and curriculum planning)

9.3.2 For any half-day morning closure, centres are to open from 12pm onwards.

9.3.3 For any half-day afternoon closure, centres are to close from 2pm onwards.

9.3.4 For Class C Licences, centres must operate during the school terms according to the Ministry of Education's academic calendar for primary schools, except that closure days in primary schools for marking of examinations will not apply. Centres that use an international curriculum must operate during the school terms according to that academic year. Centres with Class C Licence are given 3 Development Days for professional development and non-teaching tasks.

9.3.5 Parents/guardians and the CLO must be informed by 31 January of each year, about the Centre's closure for Development Days.

9.3.6 Parents/guardians must be reminded at least 1 month in advance before the Centre's closure for Development Day.

9.3.7 Parents/guardians must be informed at least 1 month in advance of any changes to the Development Days.

9.3.8 Parents/guardians of newly enrolled children or infants must be informed of the Centre's intended Development Days during registration and orientation.

9.3.9 For new centres, the number of Development Days is pro-rated (by calendar year), depending on the date of commencement of services.

9.3.10 Unused Development Days will not be carried forward to the next calendar year.

9.4 Renovation Works

9.4.1 Licensees who intend to carry out renovation works (including cyclical maintenance) at their Centre must provide written notice to parents/guardians, and the CLO before the commencement of works. Written notification period as follows:

- At least 1 month's written notice must be provided for renovation works with no or minimal impact to children and infants, and/or no or minimal disruption of services. Examples include minor works and no temporary relocation of the children and infants.
- At least 3 months' written notice must be provided for renovation works with moderate to high impact to the children and infants, and/or disruption of services. Examples include major works and temporary relocation of the children and infants.

9.4.2 A proposal must be submitted to the CLO for approval. The proposal must include the following:

- Schedule and scope of works
- Measures to ensure the children's and infants' safety and well-being
- Use of space to hold the children and infants during the renovation period
- Plans for temporary relocation (if any)
- Food / transport arrangements during the period of relocation

9.4.3 Licensees, who wish to relocate their Centre temporarily, must submit an application to the CLO for the relocation and obtain the CLO's approval to do so.

9.4.4 Temporary relocation includes the following:

- Moving the children and infants to available spaces within another licensed Centre
- Moving the children and infants to available spaces at a holding site that is not a licensed Centre

9.4.5 The space being renovated must be cordoned off and made inaccessible to the children and infants for safety reasons.

9.4.6 There must be sufficient space, staff, resources (e.g. materials, toys) and facilities (e.g. toilets, dining areas, teaching and learning areas) for the children and infants during the period of renovation.

9.4.7 Food and transport arrangements for the children and infants must be made if required.

9.4.8 Licensees, who intend to relocate the Centre to a holding site, must ensure that there is a letter of agreement between the licensee and the holding site to accommodate the children and infants.

9.4.9 Licensees, who intend to relocate the Centre to another licensed Centre temporarily, must ensure that parents/guardians of the children and infants in the holding Centre are informed at least 1 month before the start of renovation works.

9.4.10 Licensees, who intend to relocate the Centre temporarily to a holding site (not a licensed Centre), must ensure that the site complies with the requirements for a Centre. Licensees must provide the following:

- Consent from all parents/guardians on the relocation
- Period of relocation
- All relevant clearances (e.g. Fire Safety Certificate, Certificate of Statutory Completion, Change of Use / Approved Use, Letter of agreement / Tenancy agreement) for the holding site
- Floor plan with breakdown of floor areas, as endorsed by a QP defined under the Building Control Act 1989
- Letter from QP to certify that the floor plan submitted to the CLO is the same as the one submitted to SCDF
- Expected enrolment during the period of relocation

9.4.11 Licensees must make use of the 6 annual Development Days to carry out the works, if necessary.

9.4.12 Licensees must inform the CLO once they are notified of the possibility of a delay to the completion of the renovation works.

9.4.13 Licensees must inform the CLO upon completion of renovation works and/or when they move back to the Centre premises. If the renovation works have resulted in changes to the Centre's layout, licensees must inform the CLO before the end of the renovation period and ensure that all relevant clearances, if required, are obtained and submitted to the CLO.

9.5 Staff Breaks During the Work Day

9.5.1 Operators must provide staff who work for more than 8 consecutive hours with at least 45 minutes of break during the work day. This is to allow the staff to have a meal or rest and recharge. For the avoidance of doubt, operators are to comply with this clause regardless of whether the Employment Act 1968[23] applies to the staff in question.

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23 *Section 38 (1) of the Employment Act 1968 states that "Except as hereinafter provided, an employee must not be required under his or her contract of service to work –*

(a) more than 6 consecutive hours without a period of leisure;
(b) more than 8 hours in one day or more than 44 hours in one week:

Provided that –

(c) *an employee who is engaged in work which must be carried on continuously may be required to work for 8 consecutive hours inclusive of a period or periods of not less than 45 minutes in the aggregate during which he or she must have the opportunity to have a meal."*

10 INCIDENT MANAGEMENT

10.1 Reporting Timeline

Critical and Urgent Incidents: Within 3 hours; with submission of Incident Report within 24 hours

10.1.1 Licensees must notify the CLO of critical and urgent incidents within 3 hours, and provide a full incident report within 24 hours of occurrence. These incidents include:

- A child or an infant is missing from the Centre and his / her whereabouts is unknown.
- Death of a child or infant, regardless of whether it occurred in the Centre.
- Security-related events, such as hostage situation, bomb threat, attempted terrorist activity, racial rioting, employee arrest and physical assault resulting in serious injury/death of a staff or an individual within the Centre premises.

10.1.2 In the event of the death of a child or an infant in the Centre, licensees must immediately notify the police of the death.

Very Serious Incidents: Within 24 hours, including submission of Incident Report

10.1.3 Licensees must notify the CLO of very serious incidents and provide a full incident report within 24 hours of occurrence. These incidents include:

- A child or infant is seriously injured due to actual or alleged child / infant mismanagement by any staff.
- A child or infant receives treatment at a hospital emergency department for life-threatening condition as a result of an injury sustained at the Centre.
- Suspected or actual abuse of any child or infant enrolled in a Centre (whether the suspected or actual abuse took place within or outside of the Centre), or of any child or infant within the Centre (whether the child is enrolled in the Centre), by any adult[24]. See paragraph 10.2 for more details on the protocol to manage such cases.
- Incidents leading to temporary cessation of services e.g. seizure of Centre premises by landlord, damage to premises, fire, flooding, structural damage.

Serious Incidents: Within 24 hours; with submission of Incident Report as soon as possible

10.1.4 Licensees must notify the CLO within 24 hours of a serious incident and follow up with a full incident report as soon as possible. These incidents include:

- Incidents which have or could have impacted the health and safety of the children or infants. These could include but are not limited to:
  - Accidents requiring medical treatment.
  - Children or infants missing from the Centre (even if temporary).
  - Children or infants consume food containing allergens.

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24 This includes the child's or infant's family member or other adults in their life.

- Incidents which placed children or infants at risk of harm (e.g. throwing objects in the direction of a child, regardless of whether the child was injured, releasing child to wrong/unauthorised person).

- Alleged child or infant mismanagement by any staff with or without injury
- Inappropriate touch between children (e.g. any sexual contact, activity or related behaviour)
- Outbreak of contagious or infectious diseases
- Mass food poisoning (involving 3 or more persons)
- Lodging of police report (e.g. incidents involving child safety which are lodged against any staff, licensee or key appointment holder(s))
- Serious crimes committed in the Centre premises, even if there is no harm to educators or children and infants
- Incidents of a serious nature which, by reason of the personalities involved or the surrounding circumstances, are likely to attract public or media interest

10.2 Mandatory Reporting of Child Abuse[25] and Absence of Child with Known Child Protection Concerns

Reporting of child abuse

Where a licensee, a member of a licensee's staff or an education service provider engaged by a licensee —

(a) has reasonable cause to suspect that —

(i) physical or sexual abuse of any child who is enrolled in the licensee's centre has occurred, whether or not such abuse occurred during the centre's operating hours or within the centre; or

(ii) physical or sexual abuse of any child, whether or not the child is enrolled in the licensee's centre, has occurred within the licensee's centre; and

(b) wilfully or unreasonably failed to report such occurrence to the Chief Licensing Officer;

the licensee, member or education service provider (as the case may be) shall be guilty of an offence.

[Regulation 39 of the Regulations]

10.2.1 Licensees must report the following instances of suspected or actual physical or sexual abuse by any staff or persons[26]) to the CLO within the timeframes stipulated in paragraph 10.1:

- of any child who is **enrolled** in the Centre, whether or not such abuse occurred during the Centre's operating hours or within the Centre; **or**
- of any child that **occurred within the Centre**, **whether or not the child is enrolled** in the Centre.

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25 Child abuse is any action or inaction by an individual (e.g. parent or caregiver) that endangers or damages a child's physical or emotional well-being. Child abuse may be in the form of physical abuse, emotional and psychological abuse, sexual abuse and neglect.

26 This includes persons who are not staff members of the licensees, such as the child's or infant's family members, family friends, migrant domestic worker etc.

10.2.2 Centres are to follow these guidelines in managing cases of suspected or actual child abuse by persons who are not the licensees' staff:

- If there was **suspected or actual sexual abuse** of the child who is enrolled in the Centre, report the case via the National Anti-Violence & Sexual Harassment (NAVH)* at 1800-777-0000 **within 2 hours**. **No contact should be made with the parent/caregiver or household member related to the concern.**
- For **other types of suspected or actual abuse, use the "*Sector-Specific Screening Guide: Education (SSSG)*"** developed by the Ministry of Social and Family Development (MSF) to assess the situation. If the outcome is:
  - **Red**, report details to the NAVH **within 2 hours** of knowing about the case**;**
  - **Yellow**, report details to the NAVH **within 24 hours** of knowing about the case;
  - **Green**, document the case and continue with the usual care of the child and interactions with the family, taking note if there are future signs of potential abuse/neglect.

*If the report to NAVH was **made through its *online form***, a copy of the Centre's submission will be automatically shared with ECDA, so the Centre need **not separately inform ECDA**. If a **call** was made to NAVH, centres must **inform its Licensing Officer in writing.**

Please refer to Annex F for a detailed workflow of the reporting process.

10.2.3 Licensees must maintain a set of guidelines on handling children and infants whom they suspect or know to have been abused. The guidelines must include the following:

- Signs and symptoms to look out for to identify various types of child abuse, including physical abuse, emotional and psychological abuse, sexual abuse and neglect.
- Documentation required when a suspected or actual child abuse case is disclosed.
- Reporting protocols for suspected or actual child abuse cases, including the use of SSSG.
- Staff's obligation to report promptly if they suspect or witness any abuse of a child or infant who is enrolled in the Centre, or if they suspect or witness abuse of any child or infant in the Centre whether or not the child is enrolled in the Centre.

10.2.4 Licensees must ensure that all staff are briefed on these guidelines and know that they have an obligation to promptly report any suspected or actual abuse a) of any child who is enrolled in the Centre (whether or not such abuse occurred during the Centre's operating hours or within the Centre), or b) of any child present within the Centre (whether or not the child is enrolled in the Centre). **Licensees and preschool staff are protected against civil or criminal liability if they make a report in good faith.**

10.2.5 With reference to paragraph 10.2.2, when there is a case of suspected or actual child abuse by someone who is not the licensee's staff, centres must conduct an assessment using the SSSG. As such, licensees must ensure that personnel trained in using the SSSG (e.g. Centre Principals, a manager from HQ) are available to assist the Centre with the SSSG assessment whenever required.

10.2.6 Centres should consult NAVH when there is any doubt or concern on the outcome of the SSSG while assessing a case (e.g. SSSG outcome is Green but Centre's staff still have concerns about the child's safety outside of the Centre).

10.2.7 Centres must submit the following information to NAVH when reporting suspected or actual child abuse cases (refer to template at Annex F):

- Centre's details, such as name, address, contact information
- Child's details, such as full name, full birth certificate/FIN number, date of birth, age, and attendance information
- Presenting concerns (e.g. signs and symptoms of abuse observed, if preschool addressed the concern with parent(s) and the responses)
- Whether child is currently presenting with injury
- A body diagram indicating the child's injuries, if any, and a description of the extent of these injuries (including but not limited to number, location and types/extent of injuries). See Annex F Paragraph 1.2 for body diagram template.
- SSSG outcome (Red, Yellow or Green) and Category of SSSG assessment (Child's Physical Condition, Child's Behaviour, Child's Emotional Condition, Parent/ Carer's Condition, or Family Violence)
- Parent/Caregiver's details, such as name, full NRIC/FIN, contact number, relationship to child, and whether the individual is a person causing harm

Other optional information, such as risk factors, what is going well (e.g. safe adult), and what needs to happen (e.g. safety plans).

10.2.8 When reporting suspected or actual child abuse cases to NAVH, **use a body diagram and description to report physical injuries seen, do not take photographs of the child**. This is to avoid subjecting the child to more scrutiny as the authorities could be making additional checks/documentation after taking on the case. However, if photographs of the child's injuries/physical state were already available, centres may submit the photographs in the report[27].

10.2.9 Licensees must also report the absence and withdrawal of children with known child protection concerns. Centres are to follow the guidelines stated below, as well as the workflow and reporting process detailed in Annex F Paragraph 1.3.

- If there are concerns with the child's immediate safety, lodge a police report.
- If the child is withdrawn from the Centre, has no verifiable reason for the absence, or did not return to the Centre after the reported period of absence is over, immediately report to NAVH or Protective Officer (PO) directly.

27 Under the PDPA (Section 3 (Part 1) of the First Schedule), organisations are allowed to collect, use, or disclose an individual's personal data without the consent of the individual, if there are reasonable grounds to believe that the health or safety of the individual or another individual will be seriously affected.

10.3 Submission of Incident Reports

10.3.1 The information provided to the CLO within the incident report must include (but are not limited to) the following:

- Nature of incident
- Date and time of incident
- Location of incident
- How was the incident discovered / reported
- Chronology of events
- Full names and ages of people involved
- Staff response and action taken
- How was the situation brought under control
- Number and extent of injuries / death (identify victims by full name)
- Damage to the property (if any)
- Current status of the situation at the point of reporting (e.g. what is being done, what will be done next)
- Daily situation report (if necessary)
- Investigation done on the Centre's part (e.g. extent and duration)
- Findings of preliminary investigation (if any)
- Police report made (if any)
- Media interest / involvement (if any)
- Contact person and number for additional information and 24-hour contact point

10.4 Whistleblowing Policy

10.4.1 Licensees must establish clear whistleblowing policies and practices for staff to report to the Centre's Management or HQ on matters that could compromise children's and/or staff's safety or well-being. These must be explained clearly to all staff.

10.4.2 Licensees must establish confidential whistleblowing channels that all staff are aware of and have access to. These should be designed such that staff feel safe to report on wrongdoing (i.e. whistleblow).

10.4.3 Licensees must follow up with whistleblower reports promptly, and report to ECDA if it falls under the list of reportable incidents under paragraph 10.1, within the stipulated timeframes.

10.4.4 Licensees must promptly investigate and ascertain the veracity of whistleblowing reports. Pending the completion of investigations, the licensee must take immediate steps to prevent further harm, and to minimise any risks to the safety of children and staff.

Annexes

Annex A: Workflow on Licence Renewal for Centres

6 months before licence expiry

Centres with an existing tenure of 36, 24 or 12 months are advised to do the following:

- Ensure all staff's particulars are updated in ONE@ECDA and ensure all staff documents are available for verification – Declaration of offences and warnings, Pre-employment medical report, X-ray report, Letter of appointment, Valid Child First Aid Certificate, Early Childhood Qualifications.
- Ensure that there is a Principal appointed in the Centre.
- Conduct a self-assessment check using the assessment tool, '*Regulatory Standards*'.

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3 months before licence expiry

Centres with an existing tenure of 36, 24, 12 or 6 months are advised to do the following:

- Submit the licence renewal application in CMS.
- Submit the Declaration form in CMS for availability of first aid items, meeting staff-to-child ratio during non-programme hours and outdoor play, and no changes to the Centre's SOPs/menu/enrolment form/philosophy/curriculum/programme plan/child-safe policies and behaviour management guidelines since the Centre's previous licence renewal. Any changes are to be submitted to the Licensing Officer.
- Ensure that the completed staff-to-child ratio form is ready for the Licensing Officer's verification during the site visit.
- Make e-payment at the end of the application via CMS.
- Ensure ONE@ECDA and CMS are updated.

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1.5 – 2 months before licence expiry

Principal / Licensee to ensure the necessary documents are available for the licensing officer's inspection and / or verification.

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3 weeks – 1 month before licence expiry

Centres will receive their visit report (and deficiencies, if any) via CMS. Centre will need to login and acknowledge receipt of the visit report.

Issuance of Licence

- Centres will be notified of the successful renewal of licence and licence tenure.
- Centres will be issued with an e-licence.
- Centres are to follow up on deficiencies and comply with the terms and conditions (if any) stipulated by the CLO.

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End

Annex B: Summary of Written Notification Period

S/N	Type of Change(s)	Written Notification Period (to Parents or Guardians, and the CLO)
Licence of a Centre		
1	Cessation of services	• At least 6 months before the effective date of cessation **or** once the licensee is notified of the possibility of closure of the Centre. • Parents/Guardians and ECDA must be updated 2 months before closure of the Centre.
Changes to Licence		
2	Permanent relocation	At least 6 months before the targeted commencement date of operations at the new Centre premises
3	Transfer of licence	At least 3 months before the effective date of transfer
4	Change in class of licence	At least 6 months before the change
5	Change in key appointment holders	At least 1 month before the change
6	Change in the Centre's name	At least 1 month before the change
7	Change in the Licensee's name (in cases whereby the licensee is a registered company)	At least 1 month before the change
8	Change in the Centre's contact number or email address	Immediate
9	Administrative matters • Addition / Deletion of new age group / programme within a class of licence • Change in operating hours	At least 1 month before the change
10	All other administrative matters • Change in the Centre particulars (e.g. GST registration)	Immediate

S/N	Type of Change(s)	Written Notification Period (to Parents or Guardians, and the CLO)
Health and Hygiene		
11	Change in menu (Major change e.g. introduction of new food)	At least 1 month before the change
12	Infectious disease	Inform within 24 hours when there is any reported / clinically suspected case of infectious disease
Programme & Curriculum		
13	Change in programme plan and curriculum	At least 1 month before the change
Administrative Requirements		
14	Fee increase for registration, deposit and/or programme	By 1 September of the preceding year
15	Incidental charges	By 31 January of the year which the charges are to be levied
16	Annual Centre Closure for Development Days	• All parents/guardians are informed of annual centre closure for Development Days by 31 January of the year • Remind parents/guardians 1 month before Development Days
17	Renovation works • No or minimal impact to children and infants, and/or disruption of services (e.g. minor works, no relocation of children and infants)	At least 1 month before the commencement of works
	• Moderate to high impact to children and infants and/or disruption of services (e.g. major works, relocation of children and infants)	At least 3 months before the commencement of works, regardless of whether or not children and infants will be relocated

Annex C: List of Required Standard Operating Procedures

STANDARD OPERATING PROCEDURES (SOPs)

The licensee must maintain SOPs relating to health, hygiene, safety, and child and infant management for all staff to follow. This is to prevent incidents and to ensure that staff are aware of the procedures in the event of an accident or emergency. These SOPs must be reviewed regularly, and all staff must be briefed on these SOPs.

Safety

Procedures related to children's and infants' safety include the following:

- Crossing of vehicular/service roads (only for centres which require the children to cross roads to move between bays or access outdoor spaces, refer to paragraph 5.3 for more information)
- Sleeping and showering arrangements for children and infants (including measures to ensure adequate supervision by programme staff who are approved by CLO, segregation of children by gender during nap and shower)
- Handling of safety-related incidents, major and minor injuries, death of a child or infant, and reporting to parents/guardians, and relevant authorities within 24 hours
- Supervision of children or infants when they are within / outside the Centre premises (e.g. excursions)
- Ensuring child safety when they are brought out of the Centre premises (e.g. during transportation, conducting risk assessment, safety briefings and headcount checks)
- Dismissal of children or infants and measures to ensure they are dismissed to authorised persons
- Non-collection of children or infants at dismissal
- Mandatory and voluntary centre closures
- Emergency evacuation and response plans for crisis situation

For Class A Licences, the following additional SOPs are required:

- Diaper change
- Bathing
- Sterilisation of milk bottles
- Measures to prevent Sudden Infant Death Syndrome

Health

Procedures related to children's and infants' health include the following:

- Daily temperature-taking and visual health checks for the children, infants, staff and visitors
- Management and reporting in the event of an outbreak of infectious disease
- Emergency contact tracing procedures
- Management of Haze situation
- Management of Heat Stress
- Preparation and handling of food
- Management of allergies
- All special events and celebrations held in the Centre involving the provision of food
- Washing and disinfecting equipment such as toys and manipulatives, as well as contaminated surfaces (e.g. vomitus or faeces)
- Administration of medicine for the children and infants, where applicable

Child and Infant Management

Procedures related to management of children and infants include the following:

- Appropriate child and infant guidance, and behaviour management
- Child-safe policies
- Guidelines on handling children and infants with suspected intra-familial child / infant abuse

Annex D: Letter of Notification (LON)

In order for a staff to be certified by ECDA, the applicant must meet the professional, academic and language requirements (or equivalent) of the respective certification category. The educator's certification level, as reflected on the LON, indicates the age group of children the applicant can be employed to teach.

Generally, there are 4 certification levels assigned by the CLO to qualified educators. The professional, academic and language requirements[28] for each level and their corresponding deployment levels are shown in the table below.

Educator Certification Level	Professional	Academic	Language	Deployment Level
L2	Diploma in Early Childhood Care & Education – Teaching or equivalent	5 GCE "O" level credits in 5 different subjects or equivalent	B4[29] in GCE "O" Level English Language 1 / Mother Tongue Language, or equivalent	Kindergarten, Nursery, Pre-Nursery and Playgroup (18 months – 6 years old)
L1	Advanced Certificate in Early Childhood Care & Education or equivalent	3 GCE "O" level credits in 3 different subjects or equivalent	C6 in GCE "O" Level English Language 1 / Mother Tongue Language, or equivalent	Nursery, Pre-Nursery and Playgroup (18 months – 4 years old)
EY2	Advanced Certificate in Early Years or equivalent	Completed Secondary 4 Education (local) or Completed 10 years of formal education	Workplace Literacy (WPL)[30] SOA Level 5 (Average), including min. SOA Level 5 for Writing component / A pass in Hanyu Shuiping Kaoshi (HSK)[31] Level 5 and a pass at Advanced level for the Oral component	Pre-Nursery, Playgroup and Infant (2 months – 3 years old)

28 *Other factors such as recency of qualifications may be considered on a case-by-case basis for educator certification.*

29 *Educator with min of C6 in GCE "O" Level English Language 1 / Mother Tongue Language (or equivalent) will be given 2 years from the date of certification to meet the B4 language requirement.*

30 *Consists of Reading, Speaking, Listening and Writing components.*

31 *Consists of Reading, Listening and Writing components.*

Educator Certification Level	Professional	Academic	Language	Deployment Level
EY1	Higher Certificate in Infant Care or equivalent	Completed Secondary 2 Education (local) or Completed 8 years of formal education	Workplace Literacy (WPL) SOA Level 4 (Average) / A pass in Hanyu Shuiping Kaoshi (HSK) Level 4 and a pass at Advanced level for the Oral component	Infant (2 months – 18 months)

Application for educator certification can be submitted through the ONE@ECDA system.

It is required for the following groups of educators who do not possess any ECDA certification as of 1 January 2025 to complete the CPD course "Cultural Compass: Guiding EC Educators through Singapore's Diversity" within the period stipulated in their conditional certification:

i. Foreigners who possess local[32] or foreign EC qualifications; or
ii. Singapore Citizens or Permanent Residents who possess foreign EC qualifications and no local EC qualifications[33]

Definition of Classes

Class	Description
Infant	Refers to a class conducted at the Centre for children who are 2 months of age or older but are below 18 months of age
Playgroup	Refers to a class conducted at the Centre for children who are 18 months of age or older but are below 3 years of age
Pre-nursery	Refers to a class conducted at the Centre for children who attain 3 years of age in the year that the class commences
Nursery	Refers to a class conducted at the Centre for children who attain 4 years of age in the year that the class commences
Kindergarten 1	Refers to a class conducted at the Centre for children who attain 5 years of age in the year that the class commences
Kindergarten 2	Refers to a class conducted at the Centre for children who attain 6 years of age in the year that the class commences

32 Foreigners who have completed local ECDA-accredited Early Childhood programme with course end date before 1 January 2025 are not required to complete the mandatory course.

33 Local EC qualifications refer to ECDA-recognised or accredited pre-service training programmes.

Annex E: Medical Examination Requirements

REGULATION 30 OF THE EARLY CHILDHOOD DEVELOPMENT CENTRES REGULATIONS

(1) Under Regulation 30 of the Early Childhood Development Centre (ECDC) Regulations 2018, any individual who is deployed to perform any service at an ECDC is required to adhere to the following requirements:

(a) the individual has undergone a medical examination and a chest X-ray by a registered medical practitioner, or any other health screening or investigation as may be specified by the Chief Licensing Officer;

(b) the individual has been certified by a registered medical practitioner to be fit to work or provide a service in a Centre and free from active tuberculosis; and

(c) the individual has provided a written declaration to the licensee that —

i. the individual has received vaccination against mumps, rubella and varicella;

ii. the individual has previously been diagnosed by a registered medical practitioner as being infected by any of the diseases mentioned in sub-paragraph 1(c)(i), and the individual has since recovered from the diseases; or

iii. the individual has taken a serological test and the serological test shows that the individual has immunity against all the diseases mentioned in sub-paragraph 1(c)(i).

(2) Before the individual starts to perform any duty at the Centre, the individual must also provide documentary evidence (in English) to the licensee, such that the documents can be uploaded onto ONE@ECDA within the timeframe specified in Paragraph 5, that –

(a) the individual has received two doses of vaccination against measles; or

(b) the individual has received one dose of measles vaccination (to be taken before commencing work at the Centre); and within 12 months of the first dose of measles vaccination, the individual must provide to the licensee a certificate issued by a registered medical practitioner stating that the individual has received a second dose of measles vaccination; or

(c) the individual has previously been diagnosed as being infected by measles, and has since recovered from the disease; or

(d) the individual has taken a serological test which shows that he or she has immunity against measles.

(3) Paragraph (2) does not apply to an individual who was born in Singapore before 1 January 1975 and is a Singapore citizen or permanent resident of Singapore as at the date the individual performs any duty at the licensee's Centre as a member of the licensee's staff or provides any service at the licensee's Centre as an education service provider.

(4) For the purposes of Paragraph (2), the documentary evidence which an individual may provide to a licensee includes the following:

(a) a certificate or other statement signed and issued by a registered medical practitioner or any other person on behalf of a healthcare licensee, the Government or the National University of Singapore stating that the individual has received 2 doses of measles vaccination;

(b) a record of the notification mentioned in Regulation 18 of the Infectious Diseases (Diphtheria and Measles Vaccination) Regulations (Cap. 137, Rg 3) stating that the individual has been vaccinated against measles;

(c) a serological test result stating that the individual has immunity against measles; or

(d) a certificate or other statement signed and issued by a registered medical practitioner, or a laboratory test result, stating that the individual was previously infected by measles, and has since recovered from the disease.

(5) Licensees / Staff are required to:

(a) upload the staff's medical information (measles vaccination only) in ONE@ECDA within 28 days of his / her commencement of employment, and

(b) upload the latest medical information in a timely manner in ONE@ECDA, if there is any change or when necessary.

Annex F: Guidelines on Handling Children and Infants with Suspected or Actual Abuse by Persons Who are Not the Licensee's Staff

Child abuse is any action or inaction by an individual (e.g. parent, caregiver, family friend) that endangers or damages a child's physical or emotional well-being. Child abuse may be in the form of physical abuse, emotional and psychological abuse, sexual abuse and neglect.

Centres are one of the key touchpoints that can help to ensure that children and infants are safe when they return home from preschool. As such, we need centres to stay vigilant and keep a lookout for any signs of abuse amongst the children and infants attending your Centre. **All child protection concerns must be reported in a timely manner.**

In accordance with the Children and Young Persons Act 1993, where the Protective Service (PSV) under the MSF assesses that there are serious safety or welfare concerns for a child in the home environment, PSV may need to immediately remove the child from the Centre. The licensee and any staff member must cooperate and facilitate the process for the child's immediate removal from the Centre.

In such instances, **centres are not to alert or inform the child's caregivers** (e.g. parents, grandparents) due to sensitivities of the case. If centres anticipate that the child's caregivers may turn up before the Protective Officer's (PO) arrival, the Centre may consider contacting the Police or discuss with the PO on how to handle the caregivers' response or how to ensure the safety of the child (e.g. the Centre may assign a staff to accompany the child).

Workflows on subsequent pages in this Annex illustrate and explain the steps that centres should take to report cases of suspected or actual child abuse.

Background Information

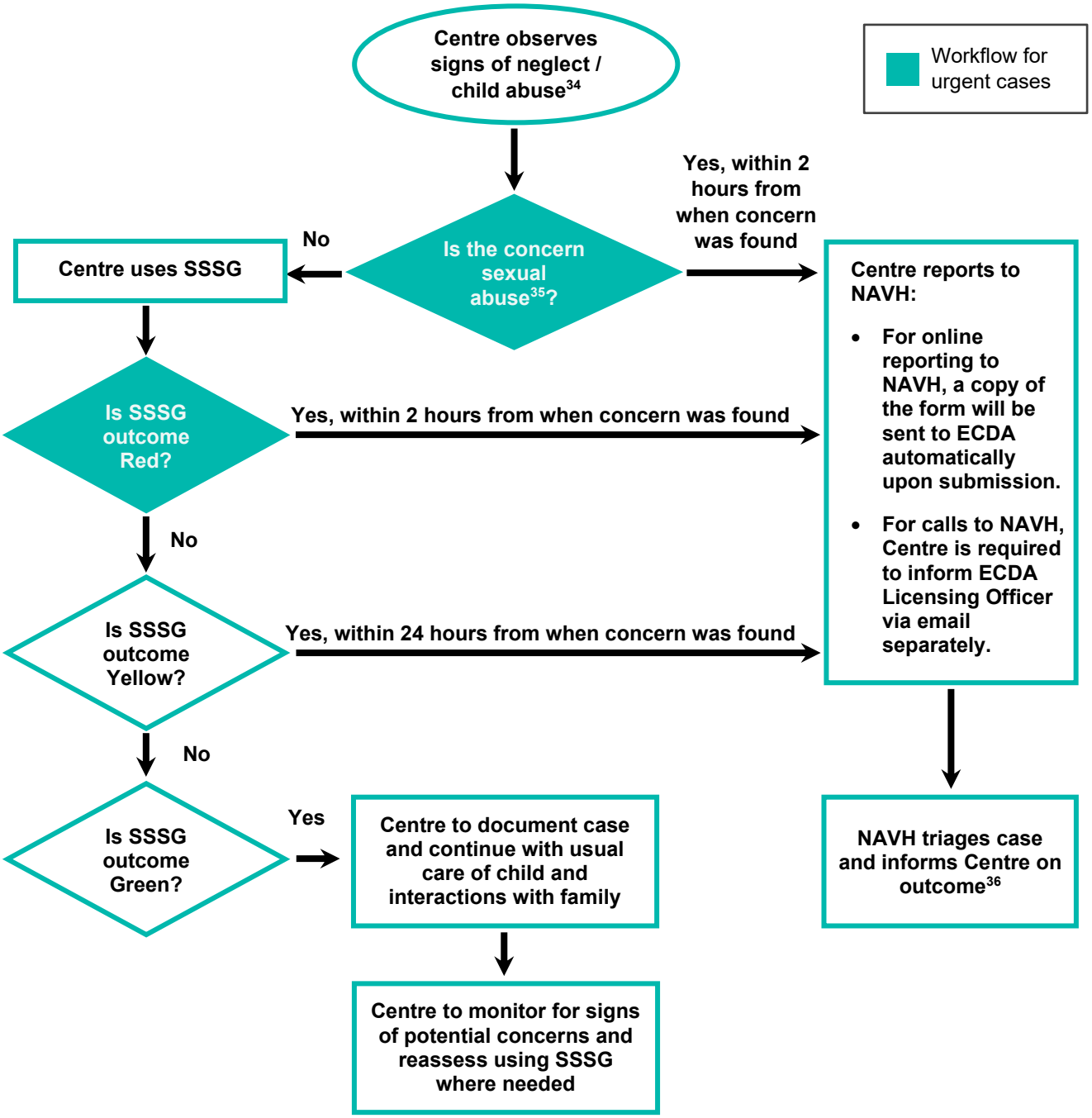
National Anti-Violence & Sexual Harassment Helpline (NAVH): 1800-777-0000

Online Reporting Form: *https://go.gov.sg/navhpreschools*

Acronyms Used

AWO: Approved Welfare Officer
CARG: Child Abuse Reporting Guide
CPSC: Child Protection Specialist Centre
FSC: Family Service Centre
LO: Licensing Officer
NAVH: National Anti-Violence & Sexual Harassment Helpline
PO: Protective Officer
PSV: Protective Service under the MSF (formerly known as Child Protective Service or CPS)
CPO: Child Protection Officer
SSSG: Sector Specific Screening Guide
SSA: Social Service Agencies
SW: Social Worker

1.1 Reporting of Child Abuse Cases



34 *No contact should be made with a parent/caregiver or household member if – (a) the parents/caregiver or household member is the suspected perpetrator, or if (b) this is related to a concern of sexual abuse. Centre is to report suspected sexual abuse cases immediately (i.e. within 2 hours).*

35 *Sexual abuse is defined as any act by a household member where the CYP is exploited for sexual gratification or taken advantage of sexually, which can include contact (e.g. inappropriate touching, rape) or non-contact (e.g. exposure to pornography, voyeurism, exhibitionism).*

36 *There will be 3 triage outcomes from NAVH/PSV: 1) Screened-in and escalate to PSV Investigation, 2) Divert to CPSC / FSC, 3) Screened-out and referral agencies to continue relationship with family.*

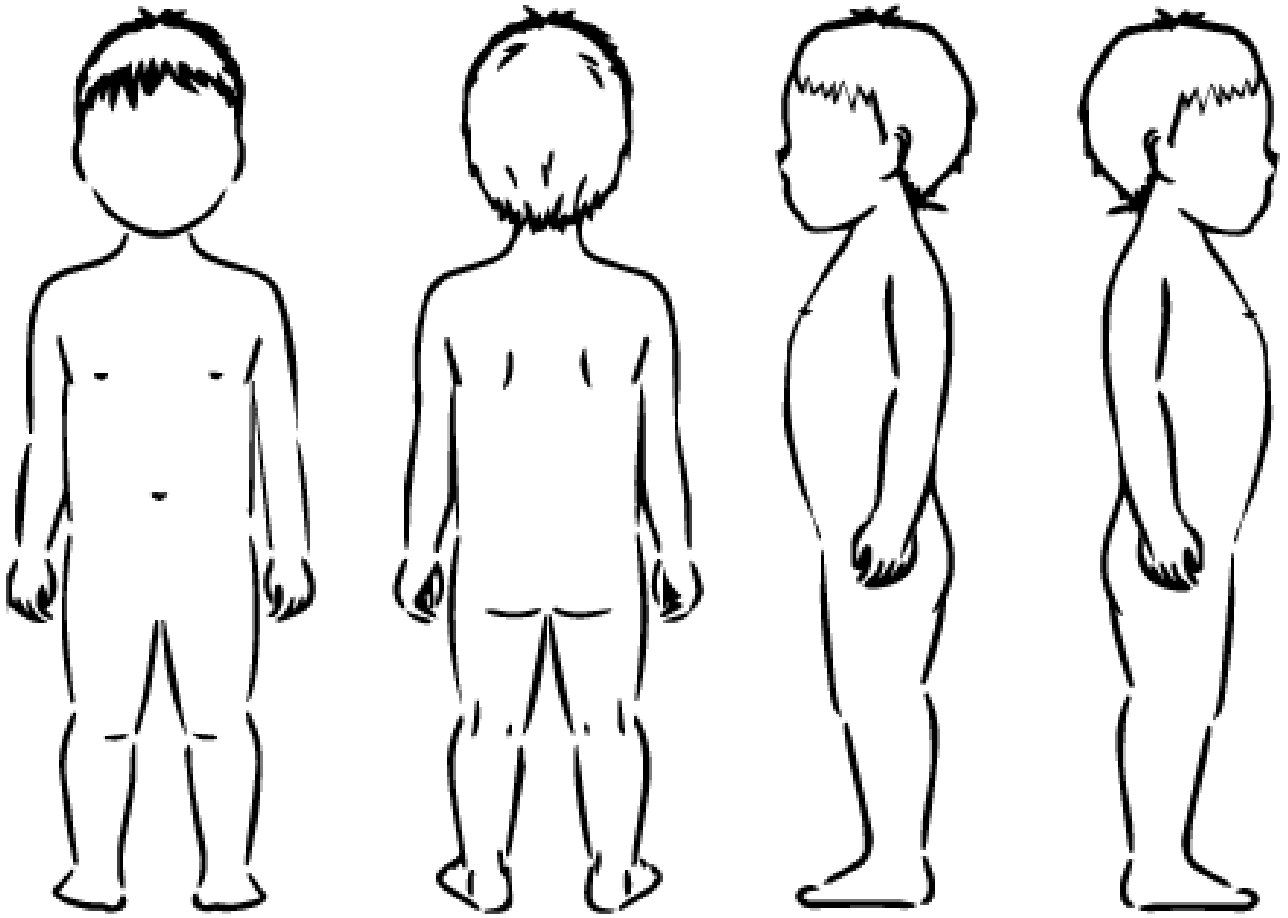
1.2 Reporting Child Abuse Cases – Reporting Template

Centre name	
Centre address	
Reporter name	
Reporter designation	
Reporter contact number	
Reporter email address	
Details of Child	
Full name	
Full BC number (unmasked)	
Date of birth	
Age	
Sex	
Race	
Language spoken	
Residential address	
Is the child currently attending preschool?	
When was the child last sighted in preschool?	
Outcome of SSSG assessment (Red, Yellow, Green)	
Category of SSSG assessment (Child's Physical Condition, Child's Behaviour, Child's Emotional Condition, Parent / Carer's Condition, or Family Violence)	
Is the child currently presenting with injury?	
Brief description of bruises / Presenting concerns (e.g. signs and symptoms of abuse observed, if preschool addressed the concern with parents(s) and the responses)	

Details of Parent/ Caregiver			
Name		Relationship to child	
Full NRIC number (unmasked)		Residential address	
Contact number		Is the family aware of the report to NAVH?	

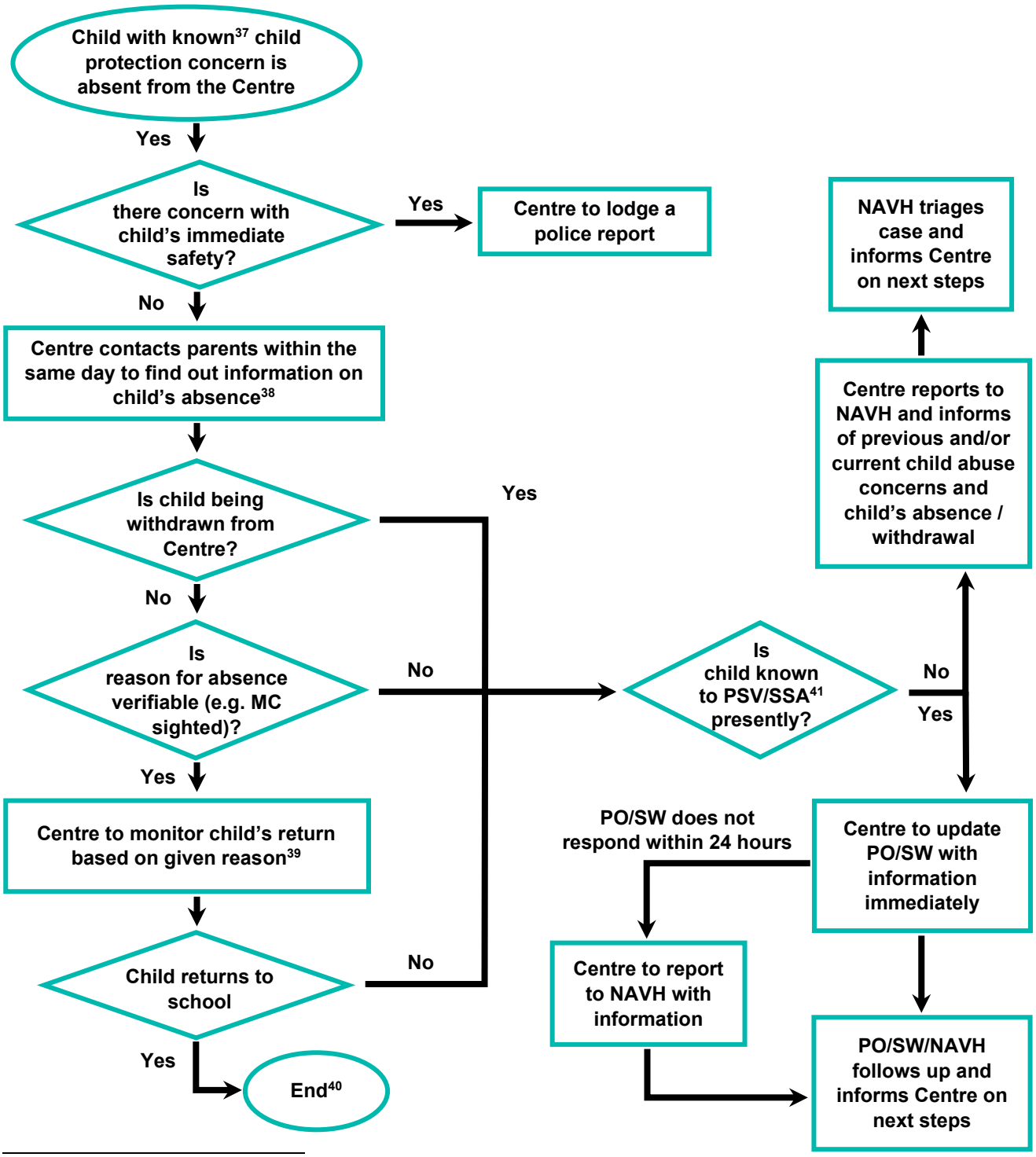
Is parent/caregiver a person causing harm? (If yes, please ensure that centre staff do not alert the caregiver of the centre's reporting to NAVH.)	
Risk factors (to the best of your knowledge)	
What is going well (e.g. presence of a safe adult)	
What needs to happen (e.g. presence of safety plan)	
Additional information • Are there other agencies working with the family? • Include body diagram showing the child's injuries, if any, as an attachment to this form, and describe the injuries (e.g. severity, number, location, nature of injury such as cane marks/bruises/cuts).	

Template of Body Diagram



1.3 Reporting of Child's Absence in/Withdrawal from the Centre

(Referring to children and infants known to an agency (e.g. PSV, FSC, NAVH) for child protection concerns)



37 *This includes both previously and currently known child protection concerns.*

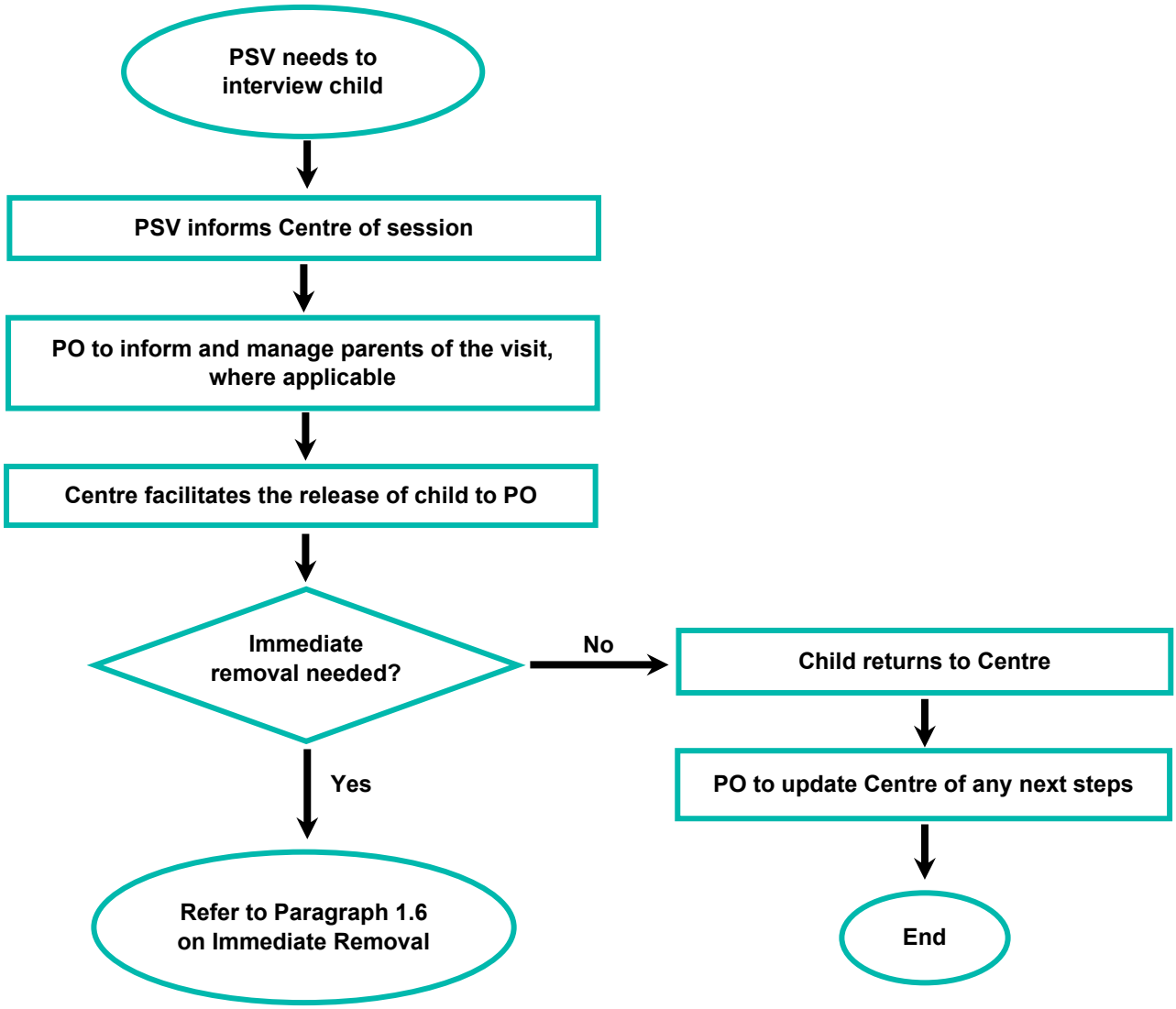
38 *If Centre is unable to contact the parent after multiple attempts, Centre should contact NAVH, or PSV/SSA if a Protection Officer/Social Worker is already working with the family.*

39 *For example, if child is absent due to MC, child should return to school upon the expiry of the MC. If child is away for holiday, child to return at the said date stated by parents.*

40 *If Centre remains concerned about the child's absence, it may consult NAVH for advice.*

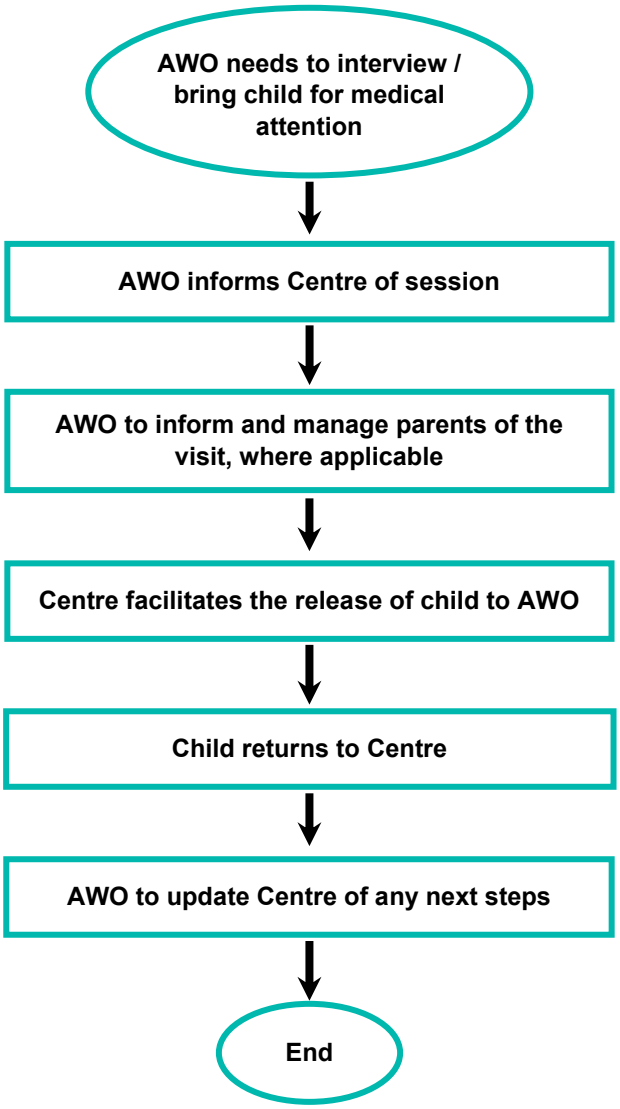
41 *SSAs include FSCs and CPSCs.*

1.4 Facilitating PSV's Interview of the Child



PSV to provide to Centre	**Centre**
Before visit to Centre: • Child's name and age • PO's name and handphone number • Availability of court order, if any • Concerns over safety During visit to Centre: • PO Authorisation Card • Protector's Order (if needed)	Centre leader to concurrently update ECDA Officer, once informed of child's removal by PSV

1.5 Facilitating AWO[42]'s Interview of the Child



AWO to provide to Centre

Before visit to Centre:

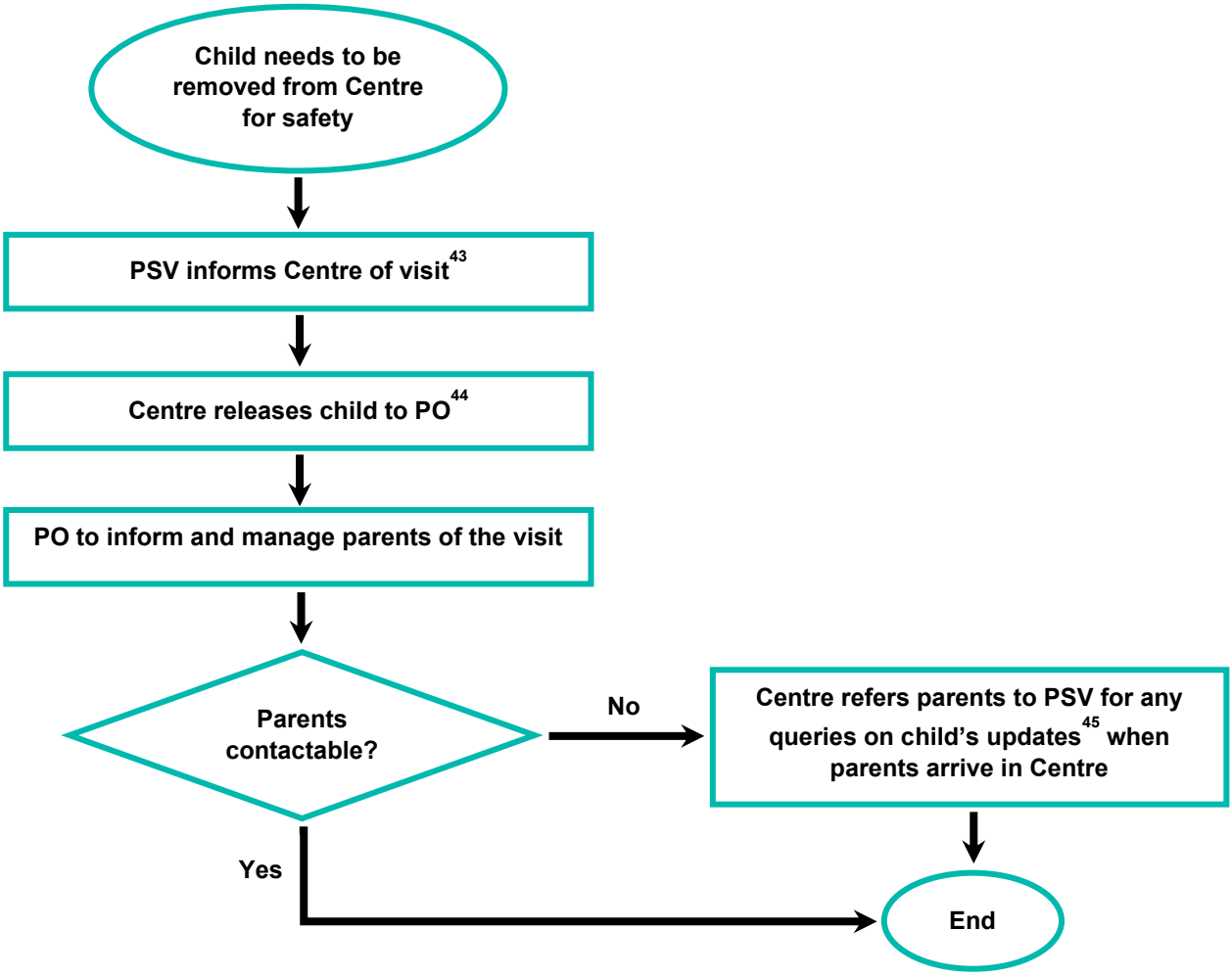
- Child's name and age
- AWO's name and handphone number
- Availability of court order, if any
- Concerns over safety

During visit to Centre:

- Appointment Letter

42 *An Approved Welfare Officer (AWO) is authorised to only conduct interview with the child or accompany him/her for medical assessments. The AWO will return the child to the Centre after the session and cannot remove the child from the Centre.*

1.6 Facilitating PSV's Immediate Removal of Child from the Centre



<u>PSV to provide to Centre</u>

Before visit to Centre:

- Child's name and age
- PO's name and handphone number
- Availability of court order
- Concerns over safety

During visit to Centre:

- PO Authorisation Card
- Protector's Order (if needed)

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43 PSV has powers under the CYPA 2020 to immediately remove the child from the Centre, if there are serious safety or welfare concerns for the child in their home environment. The licensee and any member of its staff must cooperate and facilitate this process for PSV. Centres are not to alert/inform child's caregivers.

44 Centres may choose to assign a staff to accompany the child and PO.

45 Centres to take down PO's contact and pass contact to parents, in the event that parents turn up at the Centre after child is removed by PSV.

Annex G: Child-Safe Policies

This checklist sets out the minimum requirements an organisation must meet to demonstrate that it has in place appropriate policies and procedures to establish and maintain a child safe environment.

A checklist can help your organisation to develop and maintain a Child Safe environment by:

- Informing organisational priorities
- Identifying strengths and flagging out gaps that need action
- Facilitating discussion and encouraging reflective self-assessment

N.B: The Checklist is not exhaustive — further discussion may surface other areas for attention in your organisation.

Part 1: Organisation details	
1.1	Name of your organisation _____
1.2	Type of service(s) provided ☐ Infant Care ☐ Child Care ☐ Kindergarten

Part 2: Policy				
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**
2	Every organisation should have a documented child safe policy that outlines its commitment to children and infants' safety and well-being. The policy can be embedded in existing SOPs or as a separate document. The policy should be reviewed on a regular basis. At the minimum, the child safe policy should have the following components below:			
2.1	A written statement on the Organisation's commitment to child safe principles.	☐	☐	☐
2.2	A documented risk management plan that guides the organisation to: • Identify, assess and take proactive steps to minimise and prevent risk of harm to children and infants[46]. • Put in place corrective and preventive measures to avoid further risk of harm. • Sets clear procedures for the handling of disclosures of harm and, support for all parties (e.g. child, parents/guardians, workers) affected by the reporting of harm.	☐	☐	☐

46 Harm is defined as any detrimental effect of a significant nature on the child's physical, psychological or emotional wellbeing. Harm can be caused by physical, psychological, or emotional abuse or neglect; or sexual abuse or exploitation.

Part 2: Policy				
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**
2.3	A code of conduct for adults and, where applicable, children and infants that sets out expected standards of appropriate behaviours in relation to children and infants within the organisation and its activities, aligned with the *Code of Ethics for Early Childhood Professionals*.	☐	☐	☐

Part 3: Human Resource Management				
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**
3.1	My organisation has a comprehensive procedure for recruiting suitable staff to work with or around children and infants. At a minimum, this includes: a. Comprehensive application form b. Declaration form for offences, if any c. Pre-interview screening d. Professional and personal reference checks e. Confirmation of educational and professional qualifications f. Medical screening and declaration of immunity against infectious diseases g. Declaration of mental well-being h. Staff training in recruitment practices i. Thorough personal interview	☐	☐	☐
3.2	A code of conduct for adults and, where applicable, children and infants that sets out expected standards of appropriate behaviours in relation to children and infants within the organisation and its activities. The code of conduct must comply with ECDC Act, Regulations and Code of Practice requirements, and aligned with the *Code of Ethics for Early Childhood Professionals*.	☐	☐	☐
3.3	My organisation provides orientation programmes to induct and socialise new staff on the organisation's values, attitudes and expectations.	☐	☐	☐

Part 4: Staff Training				
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**
4.1	My organisation provides ongoing training and development opportunities for staff to maintain their knowledge on: • Child safe principles • Definitions and types of child abuse and family violence • Signs and symptoms of child abuse • Managing sexualised behaviour in children • Sector Specific Screening Guide (SSSG) for child protection concerns • Reporting requirements for suspected child abuse cases • Legislations involving children such as the Early Childhood Development Centres (ECDC) Act 2017 and its Regulations and the Children and Young Persons Act 1993 (CYPA) • Section 424 of the Criminal Procedure Code 2010 on mandatory reporting requirements[47] • Educating children on body safety and clear boundaries (e.g. asserting right to say "NO" to any inappropriate touching)	☐	☐	☐
4.2	My organisation provides regular training for staff to maintain their knowledge on ECDA's requirements and organisation's rules regarding appropriate child management practices.	☐	☐	☐

Part 5: Volunteer Recruitment, Supervision and Training (if applicable)					
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**	**N/A**
5.1	My organisation has a comprehensive procedure for recruiting suitable volunteers[48] to work with or around children and infants (under the supervision of approved Centre staff). At a minimum, this includes: a. Thorough personal interview b. Declaration form for offences, if any c. Medical screening and declaration of immunity against infectious diseases d. Declaration of mental well-being	☐	☐	☐	☐

47 *Full text of the section is available at https://sso.agc.gov.sg/Act/CPC2010?ProvIds=pr424-.*

48 *This applies only to volunteers who are expected to have regular contact with children and infants, though they must still be under the supervision of approved Centre staff while doing so.*

Part 5: Volunteer Recruitment, Supervision and Training (if applicable)					
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**	**N/A**
5.2	My organisation provides orientation programmes to induct and socialise new volunteers on the organisation's values, attitudes and expectations.	☐	☐	☐	☐
5.3	My organisation provides briefings to all new and existing volunteers to ensure that they are familiar with: • Child safe principles • ECDA's requirements and organisation's rules regarding appropriate child management practices • Legislations involving children such as Early Childhood Development Centres (ECDC) Act 2017 and its Regulations and the Children and Young Persons Act 1993 (CYPA)	☐	☐	☐	☐

Part 6: Information-sharing and communications				
S/No	**Item**	**Yes**	**No**	**Partially / In Progress**
6.1	My organisation conforms to the Personal Data Protection Act 2012 (PDPA)'s guidelines on releasing information, internally and externally (such as disclosure of children's and infants' personal information limited to those who need to know), to deal with requests for information from donors/media/visitors /other agencies.	☐	☐	☐
6.2	My organisation conforms to PDPA guidelines on use of children's and infants' information for media reporting (e.g. interviews, photographs, voice or video recordings), such as obtaining a consent form and ensuring children and infants are portrayed appropriately.	☐	☐	☐

Part 7: Self-Reflection
In the implementation of child safe practices, please describe your organisation's: • Improvements since the last completion of the checklist (for organisation completing this checklist for the second or subsequent time) • Strengths/weaknesses • Current or anticipated challenges

References

Australian Children's Commissioners and Guardians (2013). *Submission in response to Royal Commission into institutional Responses to Child Sexual Abuse – Issues Paper 3 – Child Safe Institutions*.

Australian Children's Commissioners and Guardians (Australia). *Principles for Child Safety in Organisations.*

Department of Education and Child Development (South Australia). *Child Safe Environments. Compliance Statement for single organisations.*

Families SA (South Australia) (2012). *Child Safe Environments. Principles of Good* Practice.

Office of the Children's Guardian (New South Wales). *Getting Started Checklist.*

Annex H: Basic Subsidy Rates

INFANT AND CHILD CARE BASIC SUBSIDY RATES

Infant / child care basic subsidy rates for Singapore Citizen infants and children are based on the working status of the subsidy applicant and the programme type enrolled.

To qualify as a working mother, she must work for at least 56 hours per month.

Please refer to the table below for the infant and child care basic subsidy rates.

Basic Subsidy Rates for Singapore Citizen Infants and Children

Infant Care Basic Subsidy Rates		
Programme (Daily Care)	**Working Mother**	**Non-Working Mother**
Full-day Care	$600	$150
Half-day Care	$300	$150
Flexible Care Programme by Number of Hours Per Week	**Working Mother**	**Non-Working Mother**
12 hours to 24 hours	$220	$55
Above 36 hours to 48 hours	$440	$150

Child Care Basic Subsidy Rates		
Programme (Daily Care)	**Working Mother**	**Non-Working Mother**
Full-day Care	$300	$150
Half-day Care	$150	$150
Flexible Care Programme by Number of Hours Per Week	**Working Mother**	**Non-Working Mother**
12 hours to 24 hours	$110	$55
Above 36 hours to 48 hours	$220	$150

ELIGIBILITY FOR PRO-RATED INFANT AND CHILD CARE BASIC SUBSIDIES

Pro-rated subsidy is given to new / trial enrolments, or existing children and infants enrolled in full day or half-day programmes for the month of withdrawal.

Children enrolled in a Flexi-Care programme are not eligible for pro-rated subsidy.

The pro-rated basic subsidy rate is based on the working status of the subsidy applicant, the programme type enrolled and the fee payment amount.

Example A (Full Day)

Child whose working mother paid 50% fees for full day child care programme:

Pro-rated Child Care Subsidy:
Pro-rate 50% fee = $150

Example B (Half-Day)

Child whose working mother paid 50% fees for half-day child care programme:

Pro-rated Child Care Subsidy:
Pro-rate 50% fee = $75

Please refer to the table below for the pro-rated infant and child care basic subsidy rates.

Pro-rated Basic Subsidy Rates for Singapore Citizen Infants and Children

Infant Care Basic Subsidy Rates			
Programme Type	**Pro-rate Fee Paid**	**Working Mother**	**Non-Working Mother**
Full Day	Pro-rate 25% fee	$150	$37.50
	Pro-rate 50% fee	$300	$75
	Pro-rate 75% fee	$440	$110
Half-Day	Pro-rate 25% fee	$75	$37.50
	Pro-rate 50% fee	$150	$75
	Pro-rate 76% fee	$220	$110
Child Care Basic Subsidy Rates			
Programme Type	**Pro-rate Fee Paid**	**Working Mother**	**Non-Working Mother**
Full Day	Pro-rate 25% fee	$75	$37.50
	Pro-rate 50% fee	$150	$75
	Pro-rate 75% fee	$220	$110
Half-Day	Pro-rate 25% fee	$37.50	$37.50
	Pro-rate 50% fee	$75	$75
	Pro-rate 76% fee	$110	$110

Annex I: Guidelines to Support Inclusion Coordinators (ICO) in the Centre

Role	Guidelines
Principal	Ensure that the ICO has sufficient resources and support to carry out the role. This includes putting in place centre processes and facilitating environmental adjustments to support children with developmental needs.
Early Childhood (EC) educator	Overall responsible for the children's learning needs and holistic development in the classroom. The EC educator should work with the ICO and relevant EI professional[49] to support children with developmental needs, where needed. This includes: • Working with the ICO to observe and flag out children with potential developmental needs; • Engaging parents/guardians to share the child's developmental milestones and needs; and • Working with the EI professional to incorporate EI strategies in the classroom.

49 The EI professional could include learning support educators from the DS-LS programme, EI educators from the child's EI centre.

Early Childhood
Development Agency

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