

A community of learning and caring.

# Parent Handbook





Welcome to the Erwin Child & Family Center,

We look forward to getting to know you and your family. Your choice in our Center is an important decision for you. We believe that families and caregivers need to work closely together to become partners in caring for your child. It is our priority to develop this relationship and do our best to provide a loving, nurturing environment for your child and your family.

Our Center is a well-established program, having opened in the fall of 1998. Since our inception, we have continued to grow and expand our services and programming. The Erwin Child & Family Center is a program offered by Pathways, Inc. to provide quality childcare in our community. The facility is built, owned, and maintained by Corning Enterprises.

The Center has an open door policy and you are encouraged and welcomed to visit anytime. This Parent Handbook introduces you to and details most of our philosophies and general policies. Please use it as a guide; we encourage you to ask questions and let us know your thoughts and ideas.

We appreciate the trust you have placed in us to care for your child. We look forward to working with you and offering your child a happy and healthy start!

Sincerely,

Erwin Child & Family Center Staff

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# **About Our Center**

We are pleased to introduce you to the Erwin Child & Family Center – A community of Learning and Caring. This childcare center represents a partnership between Corning Incorporated and Pathways, Inc., a local human service provider and not-for-profit company.

The Center opened in September 1998 and is open to all children regardless of race, gender, ethnic or cultural background, religion, social economic status, disability or diagnosis of HIV/AIDS.

The Erwin Child & Family Center provides year-round childcare for families. The Center serves infants, toddlers, pre-school and school-age children, up to age 12. Hours are from 7:00 am until 6:00 pm, Monday through Friday. We attempt to accommodate flexible scheduling options, including part-day and part-week enrollment.

The Erwin Child & Family Center seeks to identify, understand and explore family's needs, providing a service that is both flexible and affordable. We are accredited by NECPA (National Early Childhood Program Accreditation), therefore we have met their rigorous standards of care, learning, safety and administration. We are also licensed by the NYS Office of Child and Family Services (OCFS) and meet or exceed their requirements as well.

#### Licensing

The Center is licensed in accordance with the State of New York Office of Child and Family Services (OCFS). The Center's license number is: **00044051.** 

#### **Mission Statement**

To be responsive to the needs of families in our community by providing parenting education, resources, and high quality childcare in a safe, secure, nurturing environment.

#### **Philosophy**

We believe that families should have access to childcare services that are responsive to their needs, and that are stimulating and developmentally appropriate for their children. We believe that parents and children should be offered choices that reflect their interests and desires. We further believe that the best quality care is fostered through strong partnerships and collaborative relationships with families and community.

#### **Developmental Goals**

- To provide a healthy, safe and supervised environment.
- To provide a nurturing and enriching environment that promotes young children's development.
- To provide activities, experiences and materials that are appropriate to each child's age and development.
- To create an environment that supports a partnership with parents.
- To provide an effective, well-run childcare program.
- To be a leader in quality childcare for our community.

#### Security

All doors at the Center are locked at all times. The receptionist or staff on duty will provide access if they recognize you. Otherwise, staff on duty have been instructed to ask for identification before you enter the building and will check photograph identification, if necessary, once at the front desk.

To protect the safety of the children and staff and to ensure we know who is in the building all staff, parents, visitors, and others are to exit from the front door located at the receptionist desk. Staff are expected to discourage anyone from leaving or entering via the classroom doors or playground gates.

#### **ADA Accommodation**

Erwin Child & Family Center is committed to complying with the Americans with Disabilities Act (ADA) and giving every child an opportunity to benefit from the care and learning experiences at the Center.

The Center will enroll a child with special needs if and when proper supports are in place to assure the safety and well-being of the child and others in the classroom.

At the time of enrollment, the parent/guardian is responsible for identifying whether additional care, attention and/or support services are needed for their child based on identified or suspected special needs. The Center Director and/or Program Manager will review the documentation and have conversations with the parent regarding the level of care required. If it is determined that care can be given, the Director, Program Manager, and Lead Teacher will work with the parents or guardian to establish a transition schedule with a start date once all supports are in place. Once services have started, the parent/guardian and teacher will monitor the transition of the child, if adjustments are needed, these will be assessed and wherever feasible will be implemented. We will always do our best to accommodate special needs, however, there may be times when the Center is not a good match to meet the child's needs and discharge may need to occur. If this is necessary, this will be discussed and planned with the family.

The Center will provide reasonable accommodations unless these accommodations fundamentally alter the nature of the program or would impose an undue burden to the program. A child will not be accepted if the documentation provided and initial assessment by the Center Director and/or Program Manager clearly indicates that the child's condition poses a direct threat to the health and safety of the child or others in the childcare setting.

If you have questions about other children in your child's classroom, please direct them to the Director, Program Manager, or Lead Teacher. Information will be shared with you as possible within the guidelines of the applicable laws and the Center's confidentiality policies. Patience and support of all the parents in the program are appreciated and needed.

# **Culturally Inclusive**

Parents/guardians are encouraged to share information regarding cultures and family traditions. A cultural survey will be given at enrollment to assist in obtaining this information. There will be opportunities throughout the year for families to share information with the classroom and participate in cultural diversity activities.

#### **Drug Free Campus**

The Center is a drug and alcohol-free environment. Any staff or parent who is noticed to be impaired by drugs or alcohol may be asked to find a safe ride home. If they refuse to do so, the Director or Program Manager may contact the police to ensure the safety of others in and around the Center. Children will also not be placed into the care of someone who is impaired by drugs or alcohol.

#### **Smoking**

Smoking by staff, parents, and other visitors will not be permitted in any area of the facility or surrounding outdoor grounds. This is to provide a safe and clean environment for our children and staff. The policy is in accordance with the Pro-Children Act of 1994.

Revised 08/2022

# **HOURS OF OPERATION**

Monday through Friday 7:00 am to 5:30 pm

#### Calendar

The Center is open Monday through Friday year-round. A calendar of holidays that the Center will observe is distributed each year in January and is available to view on our website: <a href="www.pathwaysforyou.org/ecfc">www.pathwaysforyou.org/ecfc</a>. Generally, we will be closed on the following holidays:

- New Year's Day
- Martin Luther King Jr. Day (staff development)
- Good Friday (staff development)
- Memorial Day
- Juneteenth (staff development)
- Independence Day
- Labor Day
- Veteran's Day (designated as community wide childcare all staff training)
- Thanksgiving Day
- Friday after Thanksgiving
- Christmas Eve
- Christmas Day

#### Center Hours - Drop Off and Pick-Up

The Center opens at 7:00 am and closes at 5:30 pm

#### **Staff Development**

All staff who have been employed over a year are required to have a minimum of 24 hours of staff development each year. We are closed on four federal holidays in order to provide essential trainings to all staff which includes but is not limited to: mandated reporting, CACFP, curriculum, behavior management, and programming.

#### **Weather Closure Policy**

It is the regular policy of the Erwin Child & Family Center to remain open unless an official local State of Emergency is declared, travel restrictions exist, or structural or utility problems occur at the Center. In general, we will be open as long as a sufficient number of staff can travel safely to the Center to care for children. The decision to open, close or delay is not influenced by the local school districts or to any particular employer in our area. Instead, the decision will be specific to the circumstances that exist within our Center. In the event of a severe winter storm that occurs while we are providing care, the Erwin Child & Family Center will be prepared to dismiss children and staff early, and/or shelter in place until all children can be transported home or to other safe shelter.

In the event that serious weather conditions are impending, the Director will notify parents the day before via email. The intent of this email will be to alert parents to a possible delay in opening or closing the Center so that families have time to make other arrangements.

In instances of bad weather that may make it difficult for staff to get into the Center to work, Pathways administration may make the decision to close the Center or to delay opening. Pathways will use the following forms of communication to alert parents and the community of their closure, with the most reliable source for parents being Tadpoles/Teaching Strategies Family, the Agency website, and Facebook page:

Pathways, Inc. website and Facebook (most reliable)

- Television WENY, WETM, Spectrum News
- Radio WINK 106, Magic 92.7/97.7
- Tadpoles/Teaching Strategies Family notifications will be used as soon as possible (most reliable)

# REGISTRATION AND ENROLLMENT

# Age Requirement

Children must be six weeks of age up through five years of age to be enrolled. School-age children may attend through age twelve. The Center will not admit children who are less than six weeks of age without prior authorization and approval from the New York State Office of Children and Family Services.

#### Registration

The Center requires a parent or legal guardian to complete a registration form and submit a non-refundable registration fee at the time of requesting care at the Center. Once received, the Center will determine if there is a current opening or the child will be placed on a waiting list.

#### **Waiting List**

A child/family is placed on a waiting list for enrollment when capacity is reached in a specific age classroom; the waiting list establishes placement by date of registration and other priority factors such as full time placements, siblings, Corning Inc. employees, date of slot availability, and the timing of the family's need.

#### Enrollment

When an opening is available, the parent or legal guardian will be notified to complete the enrollment process. The enrollment process involves completing all necessary documentation, meeting with the Program Manager for review of documentation and orientation, and meeting with the Billing Clerk to establish tuition agreement. Your child may attend only after all forms including health examination, immunization records, custody and/or order of protection papers are on file, and fees have been submitted, no exceptions. Admission is based on completing the process in a timely manner.

#### **Custody and Order of Protection Documents**

If there are current Custody and/or Order of Protection documents relating to a child or children, the Center must have on file the legal documentation to honor the conditions. Without a copy of a court order and/or Order of Protection, the Center is required to allow biological parents on-demand access to their child and any records that we have regarding their child. Any changes to court orders must be submitted in writing by the court for the Center to honor the changes.

#### Orientation to the Program for New Families

Upon admission to the Center, the Program Manager and your child's classroom teacher will orient your family to the routines, policies and procedures regarding the classroom. In this session, we will ask you for specific information related to the caretaking routines and concerns that you have for your child. We view this session as an opportunity to get to know you and begin to develop our relationship as partners in caring for your child. This time will also allow for your child to visit the classroom and begin to know staff and children in the class and Center.

#### **Procare Child Account and Pin Number**

Upon enrollment, a child and family will be assigned an account with the Center's Procare Childcare Management Computer program. This account is used for billing, attendance, and other functions. You will be assigned a pin number to sign in and out when at the Center during hours of operation.

# **WITHDRAWAL**

#### Two week Notice

In the event that a parent/guardian elects to withdraw his/her child from the Center for any reason, a two-week written notice is required. This timeframe enables us to fill the vacancy in a timely manner. If less than a two-week notice is given, you will be required to pay the difference. Withdrawal forms are available at the front desk.

Families who choose to withdraw and expect to re-enroll in the future will be placed on the waiting list based upon the date they make this request. In the event of re-entry to the Center, a re-enrollment fee will be assessed to the family's account.

#### **Dismissal - Cause and Procedure**

The Center will make every effort to keep a child in the program. Only after all procedures have failed on the part of the Center and/or parents, and with just cause, termination will occur. Causes may be, but are not limited to:

- Failure to pay tuition as required.
- Failure to complete all required documentation and procedures.
- Failure to comply with program policies, procedures, and rules of behavior.
- Failure to meet a child's individual needs based on the level of supervision of care.

# **TUITION**

#### Fees

Weekly tuition is determined according to a sliding fee scale, which is based on family size, income, and child's age. The Center has a fee schedule based on the following:

- Infant/Older Infant Fee Schedule
- Toddler/Older Toddler Fee Schedule
- Pre-school Schedule

Tuition Fee correlates with transitioning into next level of class rather than age. Transition occurs in September of each year.

#### **Payment Method and Responsibility**

Parent/guardians may elect to pay tuition on a weekly, biweekly or monthly basis.

- Payments can be made in the form of check, money order, or Tuition Express.
- Checks or Money Orders should be made payable to Pathways, Inc. and can be paid directly at the Center.
- Tuition Express is an option that allows direct payment from a banking account or the parent/guardian to manage a payment account.
- Tuition is due on Monday for the following week.
- Tuition is based on enrollment and not attendance. Credit is not given for absences due to illnesses, holidays, vacations, and other.
- It is the responsibility of the parent/guardian to inform the Center when there is a change in income and family size. It is the responsibility of the parent/guardian to submit income verification annually upon request from the Billing Office.
- The Billing Office is responsible to review each family's income and family size to keep your tuition current
  with the center's sliding fee scale. The Center's sliding fee scale is reviewed and updated each year as are
  family income verifications.
- Failure to adhere to tuition payment policies may result in discharge of your child from the Center.

#### Late Fee

Any child remaining in the program after 5:30 p.m. is considered a late pick up. A late pick up fee will be automatically added to your account. The time of pick up is noted on the Procare system and attendance sheet. Late Fees are as follows:

1 to 10 minutes = \$10.00 per child 11 to 20 minutes = \$20.00 per child 21 to 30 minutes = \$30.00 per child 30 minutes or more = \$40.00 per child

If part-time enrollment exceeds the 20 hours, full time enrollment fees will be applied.

The center will make all efforts to contact parent/guardian and emergency contacts. Any child left in program after 30 minutes without notification from the parent/guardian may be reported to the authorities for abandonment.

# Overpayment

If there is an overpayment towards tuition, the additional monies will be applied to the next billing cycle. If there is an overpayment at the time of termination, the Finance Department will provide the reimbursement in a timely manner.

#### **Tuition Assistance**

Subsidized childcare assistance may be available for families who are income eligible. This assistance is administered by the Department of Social Services in the county in which you reside.

# **CENTER MANAGEMENT AND STAFFING**

In keeping with the Office of Children and Family Services regulations, there is at least one adult for every four infants, one adult for every five toddlers, and one adult for every seven preschoolers. These ratios are a minimum standard and we make an effort to exceed that standard during peak times of program activity. We schedule a teacher or support teacher in the classroom at the beginning and end of the day; having both during the majority of each day.

Infants 1:4
Older Infants 1:4
Toddlers 1:5
Pre-School 1:7
Pre-K 1:8

#### Staff Qualifications

Director and Program Manager: Bachelor Degree or higher in Early Education, Education, or related field.

Experience preferred.

Lead Teachers: Associates Degree or higher in Early Education, Education, or related field or Child Development

Associate (CDA) Credential. Experience preferred

Support Teachers: 12 credit hours in Early Education, Education, or related field preferred

Teacher Aides: High School Degree Relief Staff: High School Degree

Staff must be able to meet the requirements of Office of Children and Family Services Regulations, National Early Childhood Program Accreditation and Pathways, Inc. requirements. Additionally, the following clearances and safety measure are completed as listed:

- Personal and Employment References
- Criminal Background Checks

- Review of Records of Abuse or Maltreatment against children
- All staff receive an annual performance evaluation and on-going feedback in regards to their performance

Prior to receipt of these clearances, staff are not left in an unsupervised situation.

We expect our staff to be committed to the early childhood field and genuinely enjoy working with children. All caregivers must have a warm and friendly personality, be sensitive to the feelings and needs of others, be able to relate well to children, and be willing to fulfill responsibilities in accordance with the Agency's and Center's philosophy.

#### **Abuse and Maltreatment Mandated Reporters**

New York State requires all childcare workers to be Mandated Reporters for Abuse and Maltreatment. All Center staff are responsible for reporting any reasonable cause to suspect child abuse and maltreatment. If a report occurs, Child Protective Services and/or Office of Child and Family Services will interview and/or examine your child immediately following the report. This can occur without your presence or permission.

# **Staff Training**

Childcare program staff are expected to participate in ongoing training and professional preparation. During the initial period of employment, newly hired staff receive extensive training within their 3-month orientation period.

- New York State Regulations require a minimum of fifteen hours of training per staff each year; new staff must complete this in the first six months of employment.
- National Early Childhood Program Accreditation requires staff to have 24 hours of training per year after their first year and newly hired staff to have 30 hours in their first year.
- Medication Administration Trained (MAT) staff have been trained and approved by the Office of Child and Family Services and Pathways, Inc. to receive, monitor, and administer medications at the Center.

# OPEN DOOR POLICY AND COMMUNICATION

# **Open Door Policy**

All parents and other persons approved by parent or legal guardian are welcome to visit their child any time during hours of operation. Parents are encouraged to take an active role in his or her child's play, learning, and care at the Center. Parent presence and contribution to the classroom especially to special occasions is greatly desired!

#### Communication

Communication is the key component in assuring your child's well-being and security while in the Center's care. There are many modes of communication that you and the Center will have on a daily, weekly, monthly, or as needed basis.

The Director, Program Manager, and Lead Teacher are three key personnel that can best address any major concerns, if needed. If you have a general concern or information related to your child, or your child's daily routine, this may be shared with classroom staff at any time, which will then be relayed to appropriate parties and/or responded to in a timely manner.

# Parent /Staff Relationships

The Center believes parents are the most important influence in their children's lives, therefore, having a strong and positive partnership with parents on the care of their children is essential for the child's well-being and growth. Staff will provide communication with families in a professional manner, communication will take place during work hours, and will be work related. Staff are not to share personal phone numbers or other means of personal contact with families. Families are requested to contact staff during their scheduled work hours by calling the Center or sending a message to their work email and not by means of social media or personal cell phones. Parents are discouraged

from requesting staff to care for their child on their personal hours. ECFC screens and hires employees for the group care setting and cannot, and will not, endorse employee's private agreements with families. Program liability coverage is only in effect during an employee's work hours for Pathways, Inc.

#### **Family Conferences**

The Center will offer Casual Quarterly Conferences throughout the year. If needed, a parent and/or Lead Teacher can request a family conference at any time a child and/or family has specific concerns or interests to be addressed in a timely manner. During family conferences, The Lead Teacher will review the Child Assessment Portfolio and other child related strengths, needs, and interests.

#### **Tadpoles/Teaching Strategies Family**

Tadpoles/Teaching Strategies Family is a mobile application that allows the teaching team to communicate your child's daily activities throughout the day, such as eating, toileting, sleeping, playing, and other. This app also allows the classroom to send pictures for you to enjoy as your child experiences fun and play throughout the day. This app can be set by the parent to receive this information at the time they chose. Tadpoles/Teaching Strategies Family allows messaging from the class to an individual, a classroom, or the entire Center, if desired. It does not allow messaging from the parent/guardian to the class.

#### **ECFC Newsletter**

This group mailing allows the Center to provide families with an electronic monthly newsletter, important notifications, updates, and other sources of information.

#### **Social Media**

Please respect our staff as professionals and communicate with our staff only during work hours. Our staff have been asked not to share their personal contact information (phone numbers, email, Facebook, etc.) with parents in order for our communication to remain professional and occur at the proper time, during work hours. Many people now use social media to voice concerns and to recruit opinions relating a matter; we emphasize and encourage a conversation as the most effective way to solve and resolve concerns. Do not hesitate to go to the Director, Program Manager, or Lead Teacher personally with any questions or concerns you may have rather than social media.

#### **Photographs and Publicity**

Photographs of the children participating in the Center will be taken for room attendance tracking care, cubby, bulletin boards, etc. Pictures of a child will be sent to a parent via Tadpoles/Teaching Strategies Family to highlight milestones and daily activity. Permission to use photographs for any other general use outside the Center, such as newspapers, magazines, brochures or other publicity materials is indicated on the Release for Photographs Form at time of registration and will be honored. As special events arise, and photos are taken, a specific authorization will be requested at that time for the parental approval if being requested for out of the Center use.

#### Confidentiality

Information relating to an individual child is confidential and cannot be disclosed to anyone other than the Office of Child and Family Services, the Department of Social Services, its designees or a Social Services District unless the parent(s) or caretaker relative(s) of the child grant(s) written permission for such disclosure. Staff of the Erwin Child & Family Center will share confidential information about a child with other agencies or professionals working with that child or family only when the parent or legal guardian has given written consent for such release.

In the event that there are requests for classroom children's names, parents' names, email addresses, phone numbers, etc., for Center events, classroom activities, and other, the Director or Program Manager's approval must be obtained and written parental permission must be given prior to the exchange.

#### Concerns

The Center is open to the concerns, conflict, or complaints that a parent and/or legal guardian may have with the Center, classroom, or staff. Any concern, conflict, or complaint may be shared with the Lead Teacher, Program Manager, or Director at any time. It is important that the Center and families work together to provide a safe, secure, and nurturing environment and care for all children.

# PARENT RESPONSIBILITY

Abide by the Office of Child and Family Services rules and regulations, National Early Childhood Program Accreditation standards, and Pathways, Inc. policies and procedures outlined in the parent handbook or available at the Center or online for review.

- 1. Complete and keep current all required enrollment documentation and requirements.
- 2. Keep the Center informed of any changes relating to information provided on original enrollment forms, such as address and phone number change, custody and order of restraints, emergency contacts, and other.
- 3. Inform the staff of any concerns or changes regarding your child since your child was last at the Center.
- 4. Notify the Center by 9:00 am when your child is absent on a day the child is scheduled to attend or if they will be leaving other than their typical time.
- 5. Notify the Center if your child currently has, or has been exposed to, a contagious illness.
- 6. If contacted by the Center to pick up your child regarding possible contagious illness or rash, fever and secondary symptoms, or other, make arrangements for your child to be picked up in a timely manner.
- 7. Provide any specific or special instructions for the day in writing and give them to the staff who is in charge of your child.
- 8. Inform the Front Desk Receptionist and classroom staff when a person other than parent/guardian, or regular person, is picking up your child. Please make sure that the person picking up your child is listed on the emergency contact form, provide us with written permission for pickup, and ensure that the person has identification.
- Please have photograph identification available, as you and others may be asked to present it at time of pick up. This is done when a staff member is not familiar with the person picking up to assure the safety of your child.
- 10. Practice caution while in the parking lot. Drive slowly and cautiously when entering/exiting the lot. Have children remain with you at all times. For the safety of your children, please do not leave any children unattended in the car. NYS law prohibits children being left alone in a car without adult supervision.
- 11. Vehicles must be turned off when unattended for the safety of the children and Center.
- 12. Bring items needed for your child to the Center. Replenish the items as needed.
- 13. Label personal items to help the staff keep track of your child's things.
- 14. Take bottles and/or soiled clothing home at the end of the day.
- 15. Pay tuition for the childcare services as agreed.

# **CHILD'S DAILY NEEDS**

#### **Items from Home**

Your child's daily needs at the Center will vary depending on age, individual preference, and our requirements. Please plan on providing the following for each age group:

#### Infants:

 You will need to provide bottles of formula or breast milk, and baby food unless you choose to participate in the Center's option, which follows the Child and Adult Food Care Plan requirements.

- You will also need to supply diaper wipes, diapers, diaper cream (in the original box), change of clothing, outdoor wear, and a picture showing the entire family.
- Optional based on your preference: bibs, burp cloths, crib sheets, and blankets. The Center can also provide these items.

#### Older Infants/Toddlers:

 You will need to provide diapers, diaper wipes, training pants when required, blanket, several changes of clothing and outdoor wear, and a picture showing the entire family.

#### Preschoolers:

 You will need to provide a blanket, a complete change of clothing and outdoor wear, and a picture showing the entire family.

**Change of clothing** includes underwear, socks, shirt, pants, sweater or sweatshirt, and seasonal items. Outdoor wear depending on the season. All items should be *labeled* with the child's first and last name. **Note:** The Department of Health regulations *prohibit us from washing or rinsing clothing that is soiled with fecal matter.* If your child's clothing becomes soiled in this manner, it will be placed in a separate plastic bag, labeled with your child's name and will be sent home to be laundered.

**Family Photographs** are used to help with the separation factor if your child is feeling a bit sad, and is a reminder of their special family. It also helps create connections for children between home and childcare center and children enjoy talking about their photographs with the caregivers and other children.

# CENTER DROP OFF AND PICK UP PROCEDURE

#### Dropping off for the day

- 1. Practice parking lot safety, have your child or children with you at all times, do not leave children unattended in the car, and turn off vehicle while in the Center.
- 2. When dropping off or picking up your child, he or she must be in line of supervision at all times when walking throughout the building, per regulation and policy.
- 3. At the door, ring the security button to the right of the building to be allowed in the building. You may be asked to identify yourself. Please do not let anyone in the building that you are not familiar with.
- 4. Upon arrival, sign in your child by using your Procare pin number; the computer with Procare management tool is located on the computer hanging on the wall by the front receptionist desk.
- 5. When you arrive in the classroom, staff is to greet you and make notation on the attendance sheet of your arrival time.
- 6. Help your child settle into the classroom by placing personal items in cubby, greeting staff and other children, and waiting for the Daily Health Care assessment to be completed.
- 7. Classroom staff will conduct a daily health care assessment per regulation and policy; this involves staff checking your child for illness, rashes, bumps and bruises, cuts and scratches, and other.
- 8. Share with classroom staff if your child has received any medication at home, did not eat at home, difficulty with sleeping, and any other concerns that you may have.
- 9. Share with classroom staff any activities or events that may be occurring with your child that he or she may want to talk about.
- 10. You and staff are to assure that the child (including infant) is awake and alert prior to leaving the Center.

#### Picking up for the day

- 1. See 1-3 above
- 2. Upon arrival, identify yourself at the front desk and go to classroom for child pick up. You may want to ask if staff and children are located elsewhere, as they may be on a walk or playground. There is a Location Board located above the sign in/out computer for your reference.

- 3. In the classroom, staff is to greet you and share the happenings of your child's day. Please be patient if only 1 staff is present, due to the level of supervision needed for others.
- 4. If there is an accident or incident report, please take time to review and sign. Your signature indicates that you have reviewed and are aware of the occurrence.
- 5. Check your child's cubby for written information from the classroom or the Center, this may be a request for items to be replaced, classroom or Center activities, specific notification, and other. Check for any items to be taken home, such as soiled clothing, art projects, etc.
- 6. Let the staff know when you and your child are leaving the room. Staff will make notation on the attendance sheet.
- 7. Before exiting the building with your child, sign your child out by using the Procare pin number on the computer located on the wall beside the front receptionist desk.
- 8. When exiting the building with your child, please have your child remain with you for safety around the parking lot.

#### **Handicapped Access Door**

For children's safety, the Center asks that only adults use the handicapped button to open the front doors if needed. The Center reinforces this with the children throughout the day, please help by consistently enforcing this with your child.

#### **Visitors**

The New York State Office of Children and Family Services requires that the Center ensure that all visitors to the facility are approved in order to protect the health, safety and welfare of the children who are in our care.

- All visitors, including volunteers in the Center, are approved based upon the purpose of the visit and the
  accessed areas will be determined based on the purpose.
- All visitors must be approved, sign in and out, and are given a visitor badge to wear.
- Visitors and volunteers cannot be left alone with a child or group of children, nor function in the capacity of a staff member.
- Parents of enrolled children are asked to sign in and wear a visitor's badge if in the building for an extended visit other than for dropping off or picking up.
- If needed, the Front Desk Receptionist will notify Director or Program Manager for visit approval and level of supervision required.

# **CLASSROOM STRUCTURE**

#### **Classroom Teaching Team**

Each classroom is made up of a Lead Teacher, Support Teacher, and one or two Teacher Aides.

# Classroom per age group and transition

Each classroom is assigned to a specific age group and will host a group of children ranging in similar ages from September to September. This will allow for the teaching team, children, and families to experience consistency in care, build and maintain relationships, and develop and/or refine the child's skills based on current age. Each July new children from the waitlist will be contacted and enrolled. Lead Teachers will arrange transition meetings.

#### **Classroom Supervision**

Competent supervision will be provided at all times; as awareness of and responsibility for the ongoing activity of each child. It requires that all children be within a teacher's range of vision and that the teacher be near enough to respond when redirection or intervention strategies are needed. Competent supervision must take into account the child's age, emotional, physical, and cognitive development; this includes strategies for indoors and outdoors:

- Attendance Sheets
- Half Hour Checks

- Transition Role Call and Head Counting
- Sign Child In and Out from Classroom
- Outdoor Tracking Board

#### **Classroom Schedules**

Each classroom will have a written daily schedule that is posted in the classroom and outside the classroom. The schedule will be implemented on a daily basis and will reflect reasonably regular routine. Schedule must include snack and meal periods, nap and rest indoor and outdoor activities, playtime, and large muscle, music and movement activities. Good personal hygiene practices, such as hand washing and brushing teeth, will also be included.

Infant schedules will be individual based on their needs. Infant schedules will include the following:

- For children less than 6 months of age, the schedule must allow for awake infants to have short periods of supervised time on their stomach, back or side which allows them to move freely and interact socially.
- Daily tummy time for young infants is required. Infants and toddlers are free to explore their environment and freely move in their environment that allows them to practice their developing motor skills.
- While awake, infants will not be left in a crib for more than one half-hour without direct staff contact.
   Sleeping infants are monitored throughout their naps by the caregivers.
- Infants will not be left in a swing, highchair, crib or other piece of equipment for more than one-half hour at any one time.

Materials and equipment for infants and toddlers will enable the children to explore by mouthing, touching, squeezing, rolling, pushing and pulling. These materials will consist of a variety of textures, softness and firmness.

#### **Classroom Activities**

The planned daily schedule for each classroom will consist of a variety of indoor and outdoor activities that meet the children's needs and interests and allows for periods of individual and group interaction, as well as child-initiated and adult-initiated activities. Physical activity will be appropriate to the age of the children and given each day.

#### **Toys and Sharing**

The Center is equipped with toys and learning materials appropriate to the children's ages. It is important to remember that when a child brings a favorite or special toy from home, the potential for that toy to be broken or lost is present in a group setting. Any war and weapon toys must be left at home.

Each Lead Teacher of a classroom will provide parents/guardians guidelines for toys from home including appropriate time for play. The Teaching Team is expected to be consistent in implementing the guidelines with child and parent. If a child comes to the Center with a weapon toy, the parent/guardian will be asked by the classroom teacher to take the weapon toy with him/her.

Toys from home do not have to be shared with all of the children at the Center. The child who owns the toy can decide whom he/she shares the toy with or can decide not to share the toy at all. If this situation becomes upsetting for the child who owns the toy, the child will be asked to put the toy away until time to go home.

A group setting provides a child with the opportunity to learn to share. This is a difficult concept for young children to learn. All toys and learning materials that belong to the Center will be shared by all children. The Teaching Team will assist each child in learning this social behavior. Children are encouraged to use words to ask for a turn with a toy or activity. The child using the toy or doing the activity will be encouraged to respond, letting the other child know that he/she will give that child the toy or activity when they are finished. The classroom teacher monitors this situation to make sure that the child finishes with the toy or activity in a reasonable time frame and that both children are able to cope with the sharing opportunity.

# **Comfort Objects**

The Center recognizes the need for some children to use a "comfort" or transitional object at different times of the day. Children use these objects, such as blankets, pillows, stuffed animal, or other, when they need help with difficult emotional and/or physical transitions. Since the object is associated with the security of home and family, it brings comfort. The use of these objects during this time is natural.

The teaching staff will work with both parent and child to gradually transition the object from the child until he/she uses only during naptime and times of stress, such as early morning departures. In addition, the Teaching Team, in caring and nurturing ways, will help the child learn when it is his/her responsibility to put the object away when redirected or finished. The goal is to provide the child with security and trust, so that he/she will no longer feel a need for the comfort object while engaged at the Center.

# **CURRICULUM AND ENRICHMENT**

#### **Curriculum Statement**

Learning through play is best during early childhood and is a time to excite each child about the wonders of learning! At this stage learning involves children using their senses to explore their world and interact with others. Lead Teacher is responsible to plan age appropriate activities and have appropriate materials to support play-based curriculum to enhance children's needs and natural interests. Our approach is based on developmentally appropriate practices as defined by the National Early Childhood Program Accreditation (NECPA).

Program activities will follow the standards guidelines of best practice as developed by NECPA (National Early Childhood Program Accreditation) and NAEYC (National Association for the Education of Young Children) and Creative Curriculum.

For children two to three years of age and older, the classrooms are divided into specific areas which provide children an opportunity to manipulate materials and interact with peers and adults. These areas include but are not limited to:

- art
- blocks
- dramatic play
- language arts
- music
- science
- small-motor
- quiet
- other

# **Creative Curriculum**

The Center utilizes Creative Curriculum; research and theory-based foundation for early childhood assessment and learning. Creative Curriculum guides our teaching team to focus on three types of information for education and learning experiences:

- 1. child development and how children learn per age/stages
- 2. individual strengths, needs, and interest of a child
- 3. child's family and community culture

#### **Child Assessment Portfolio**

The Center utilizes Creative Curriculum Child Assessment Portfolio for each child. This assessment allows initial and ongoing evaluation, observation, and monitoring of specific skills and behavior of the child while attending the center. The assessment captures birth through school-age milestones.

There are 9 objective areas for development and learning that are incorporated into daily activities, learning centers, and most of all play, including outdoor play, based on age/stages:

- 1. Social-Emotional
- 2. Physical
- 3. Language (including English language acquisition)
- 4. Cognitive
- 5. Literacy
- 6. Mathematics
- 7. Science and Technology
- 8. Social Studies
- 9. The Arts

#### **Outdoor Play**

Outdoor play is also a component of our curriculum; this is a very important part of a child's daily experience and developmental growth. A period of daily supervised outdoor play is required for all children in the program, except in extreme inclement weather or unless ordered by a physician. The Center recognizes that there are times when a parent/legal guardian has a 1-2 day request due to illness or other health concern, this will occur as long as required adult: child ratios are maintained.

Outdoor play allows for not only fresh air and outdoor experiences, but also a time and place to engage in a variety of physical activities such as crawling, walking, running, climbing, playing in the sand or snow, and discovering the wonders of the outdoors around them.

Provided children have the appropriate attire for the nature of the weather conditions and type of activity planned, they are to go outdoors each day. Supervision and care will be taken during inclement weather conditions to minimize children's length of exposure and the times of day outdoors. The Program Manager and/or Director will monitor for extreme conditions to ensure that staff and children are not outdoors when conditions may be harmful to the children.

#### **Playground Practice**

The Center staff will ensure that children are properly supervised while on or near the playground equipment. Staff are responsible to set safe guidelines appropriate to the age and development level of the children in the group, the equipment being used, and the activity. Children will be guided and informed regarding the safety rules and the way to utilize the playground equipment to promote the highest level of safety possible, based on their age and developmental skills. Thus, for the children their playground expectations and/or rules will be:

- I keep myself safe
- I keep others safe
- I keep my school safe

#### Garden

The Center is fortunate to have an area for outdoor learning and gardening for all classrooms. The garden is a place of wonder, sensory experiences, and dirty play and work. The garden activities generally run from April through September with vegetable and flowering plants. Parents and other family members are encouraged to get involved with the garden!

#### **Messy Art Day**

Messy Art Day in mid-August allows children, parents, and staff to experience different means of art techniques and textures from slinging to spraying paint as well as other forms of messy expressions!

#### **Monthly Special Scheduled Activities**

Each month the Event Committee, Room Parents, or other will plan special activities to enhance daily schedules and activities. A Center calendar will be provided as well as notices.

#### Field Trips

At the time of enrollment, parents will be given a permission form for his/her child to be taken off site on "walking" field trips; depending on ages, the daily activity is achieved through buggy rides or walking for short distances (such as to the park across the street). All trips will be well supervised and within the recommended guidelines for adult: child ratios.

#### **Pet Policy**

Visiting pets or classroom pets must be approved by the Director and all parents must give written permission. If children or staff have allergies to the animal, the pet will not be allowed. Visiting animals will be caged, leashed or in the control of the owner. If required, the animals must be licensed and the owner of all pets must show proof of immunizations. OCFS regulations do not permit reptiles and amphibians at childcare centers.

#### **Videos**

Videos and movies may be utilized as a part of the curriculum and activity planning, but only as a special event and on a very limited basis, and must be part of planned, developmentally appropriate activities. The use of media such as television and videos must be included in the written weekly lesson plans addressing educational objectives and approved by the Program Manager. Staff will discuss what is viewed with the children to begin developing critical viewing skills. The choice of movies is restricted to G-rated.

#### **Parent Resources**

The Center has a wide variety of reading resources available for staff and parents. Resources include articles on childcare, parenting, children's health issues, teaching and curriculum. If interested in a particular topic, please notify the Lead Teacher, Program Manager, or Director.

# **HOLIDAYS AND CELEBRATIONS**

The Erwin Child and Family's holiday and celebration policy is derived from the National Association for the Education of Young Children (NAEYC). Erwin Child & Family Center supports the recognition of celebrations around the world in the Center and classrooms. Celebrations can be wonderful opportunities for children to learn about the traditions and values that are cherished parts of people's lives around them. Celebrations should respect the cultures represented by all children and be age appropriate and a part of the curriculum.

The Center philosophy is for staff and families to work together to create developmentally and culturally appropriate learning experiences. Decisions about what holidays to celebrate are best made together by each classroom; teachers, parents, and children, based on the make-up of the group. These conversations should occur during classroom orientation for new families and each year during casual quarterly meetings with the Lead Teacher. When planning holiday or celebration days, the best practices continue to apply and the following is to be considered:

- Are the recognition and activities meaningful to the children?
- Are their needs and interests being met?

- Is the activity valuable to children?
- Is the activity acceptable and approved by parents?

Holiday and/or celebration recognition is to be incorporated in the lesson plans and approved by the Education Training Specialist. Lead Teachers are responsible for having conversations with parents prior to submitting the plans to assure appropriateness of the activity. Most likely, the classroom activities will vary year to year and be different in each age group based on the make-up of the families.

When preparing for a holiday or other celebrations, parents can expect Lead Teachers to have conversations with them and to have the classroom practices as followed:

- Lead Teachers and parents ask themselves why children should learn about this holiday. Is it developmentally appropriate for those in the group? Why is it important to specific children and families?
- Curriculum demonstrates respect for everyone's customs. If children are observing different holidays at the same time, the values and traditions of each child's culture should be acknowledged.
- Activities demonstrate the fact that not everyone in the same ethnic group celebrates holidays in the same
  way. Activities are connected to specific children and families in the group. Families may provide
  examples of their own unique traditions.
- Every group represented in the classroom is honored (both children and staff). This does not mean that
  every holiday of every group must be celebrated. Each will be treated as a learning experience to
  understand cultural differences. Children should recognize that everyone's holidays are culturally
  significant and meaningful and fun.
- Parents and teachers work together to plan strategies for children whose families' beliefs do not permit
  participation in holiday celebrations. Families should take part in creating satisfactory alternatives for the
  child within the classroom.
- Lead Teachers and parents will focus on activities that are meaningful ways to celebrate holidays without requiring families to spend money.
- The focus with gifts will be the opportunity to help by showing children that homemade costumes and gifts
  are very special, and celebrating can be joyful without gifts.

#### Religion

Teachers will not teach the religious aspect of a holiday or teach one religion or religious holiday as the correct one. Religious aspects will be explained matter-of-factly, with simple language. Questions such as, "Did that really happen?" or "Is there really such thing as \_\_\_\_?" will be seen as opportunities to build on thinking skills. A simple reply such as, "What do you think?" is an appropriate response. Children will be referred back to their parents for more specific answers.

#### **Birthdays**

Parents/guardians can make arrangements with the classroom Lead Teacher to celebrate a child's birthday at the Center. Arrangements should be made prior to the day of to assure that any treats, especially food-related, are acceptable. Any food must meet the "peanut free practice" and honor any known allergies within the group. Healthy treats are encouraged with the children.

If a family chooses to have birthday celebrations away from the Center (a birthday party), the Center prefers invites be made outside the Center. Please pay special attention to the fact even young children can feel excluded if not invited and the Center will only distribute invites if the entire class is being invited.

#### **BEHAVIOR MANAGEMENT**

#### **Behavior Management Policy**

The quality of the young child's environment and social experiences has a decisive and long lasting impact on their well-being, ability to play and learn, and trust. The Center is committed to using positive behavioral strategies when responding to children and in helping children learn how to manage their own behavior and interact with others. Classroom management and strategies help promote positive social skills, foster mutual respect, strengthen self-esteem and support in an emotionally and physically safe environment.

The Center staff are responsible for assisting children in a loving and nurturing manner; staff are responsible for helping children in the following manner, but not limited to, when needed:

- Help to label and understand a child's feelings. It is stressed that all feelings are valid and in order to
  express them appropriately, first one needs to understand them and be assisted to express them in an
  appropriate manner.
- Show respect for the child by giving advance warning for transitions and changes in routines (i.e., "in a few minutes it will be time to clean up for lunch").
- Explain how a child's behavior affects and impacts others, as well as themselves.
- Problem solving is taught by giving children choices and opportunities to resolve conflict.
- Cooperation among children is fostered rather than competition. Each child is an individual, avoid making comparisons.
- Use praise, encouragement, and other means of recognizing appropriate behavior.
- The learning environment is organized to minimize conflicts, i.e., toys are easily accessible, the room is set up in a manner that allows children to play in an "organized" fashion, activities that are planned are of interest to the children and are developmentally appropriate, choices are offered and teachers are actively engaged with the children in these activities.
- Caregivers are expected to model respectful behavior and show evidence of good communication with other adults as well as with the children.
- The behavioral expectations are clear, consistent, and reinforced. The basic expectations of the Erwin Child & Family Center are:
  - a. I keep myself safe.
  - b. I keep my friends safe.
  - c. I keep my school safe.

#### Inappropriate behavior

Each classroom teaching team is responsible for creating a safe and organized class environment to provide appropriate care, play, and learning throughout the day for all children. Positive classroom management has positive outcomes of children's behavior; establishing clear limits, expectations, routine that meets the developmental skills and needs of a specific age group, as well as meet the need for affection and attention are key factors for a child to thrive. Despite efforts that are in place for children to thrive, some will display inappropriate behavior towards staff, children, or even to self from time to time. It is the responsibility of the teaching team to develop appropriate responses and supports so that the child will replace inappropriate behavior with a skill or behavior to meet his or her need.

#### Consequences

The teaching team is responsible to assure that appropriate consequences used in the classroom are appropriate for the age and developmental needs and understanding of the child. Consequences are to be appropriate support to the inappropriate action. It is not to be used as punishment, but a teaching tool or guide for the child.

• Any consequence used will relate to the child's action and handled without prolonged delay so that the child is aware of the relationship between his/her actions and the consequences.

- Consequences look to the future and help the child to make better decisions.
- All consequences are to be directed, administered, and supervised by program teaching staff. The Lead
  Teacher is responsible to ensure all staff are utilizing positive, supporting, and nurturing techniques at all
  times.

## **Disruptive Behaviors**

Disruptive behaviors occur when a child's needs are not being met, stress level is high, cognitive abilities are limited, and sensory input is overloaded. The child may feel a need for control, power, attention, or seeking something from another.

Techniques used by staff to support the child may be the following, but not limited to:

- Redirecting the child's attention to another activity or to conversation with a child or caregiver.
- Suggest activities that may be of interest. Providing help or support with the current activity.
- Examine the environment and determine if changes or adjustments in the activity level, transitions or routines should occur.
- Addressing the child's needs for food, rest, emotional or physical care.

If disruptive behaviors continue and escalate to physical altercation by the child, the following will occur if necessary:

Physical intervention is permitted when;

- Physical intervention is the act of using gentle bodily contact as a short-term immediate response to
  prevent children from incurring substantial or serious injury to themselves or injuring others. This technique
  allows the child to regain self-control as quickly and safely as possible.
- Physical intervention may be involved if age appropriate: picking up a child and moving him away from
  danger or conflict, holding the child's hands or gently touching the body to direct their movement, rocking a
  child to soothe them, blocking a child's path when they are about to injure themselves or others or destroy
  property. Any use of physical intervention due to physical altercation will be communicated to parent and
  an Incident Report will be completed.

Separating the child from the group is permitted for one on one support.

- When a child's behavior harms, or is likely to result in harm to the child, others or the property.
- Where a child seriously disrupts or is likely to seriously disrupt the group interaction.
- The separation is intended to help the child calm himself/herself and regain composure that will enable discussing the problem with the caregiver.
- A child may be separated only for as long as is necessary for the child to regain self-control and rejoin the group.
- If separation is utilized the child will remain in constant supervision of a staff member.
- Immediately following this separation the caregiver will guide the child in rejoining the group. The caregiver will facilitate this process to ensure that the child is actively and successfully reentered into the group.
- Any use of time away from the group will be communicated to the parents. An Incident Report will be completed.

#### **Ongoing Disruptive Behavior**

If a child attending the Center has ongoing disruptive behavior and/or exhibits physical altercations and is having an impact on the wellbeing of self or others, the teaching team is responsible to ensure the safety of the child and others by acting immediately to lessen the risk to the child or others. If the Center is unable to provide the necessary support to keep a safe environment, termination will occur.

A child may need to be picked up from the Center during the day if exhibiting disruptive behavior such as physical aggression against children and/or staff, willful destruction of property, spitting, kicking, hitting, punching, throwing items and furniture, and running away from staff. All of these behaviors put children and staff safety at risk.

The Director or Program Manager will decide when a child needs to be picked up immediately. When requested this must be adhered to by the parent. If this occurs, there must be a meeting with the parent, Lead Teacher, Program Manager, and/or Director to ensure a support plan is in place, or revised, prior to the child returning to the Center.

An Incident Report will be written for disruptive behaviors with physical altercations and reviewed by the parent, Lead Teacher, Program Manager, and Director.

#### **Prohibited Techniques**

- Corporal punishment is not allowed under any circumstances. The term corporal punishment is defined as
  physical contact inflicted directly on the body. Staff are not allowed to: spank, bite, shake, slap, twist,
  squeeze or pinch. Children are not to be asked to do excessive physical exercise, such as run laps, do
  pushups, or be put in bizarre and/or strenuous postures. Withholding or using food, rest, or sleep as a
  punishment is not allowed. Force-feeding, or making a child eat is not allowed. Making a child eat soap,
  foods, hot spices or foreign substances are not allowed.
- Physical restraint is prohibited as defined as the act of using force to extremely limit a child's body
  movements for a lengthy period of time. It involves holding a child against his will and putting pressure on
  the child's chest and/or extremities in an effort to significantly restrict movement. It may also involve
  holding a child flat on the ground and restricting his body from movement.
- Isolating a child in any area where the child cannot be seen and closely supervised by a staff member is not allowed. Isolating a child in a closet, small room, adjoining area or darkened area is also prohibited.

# **CHILDREN AND BITING**

The Center recognizes that biting is not unusual when children, especially toddlers, are in group care. It is concerning when children are biting and/or bitten and recognize how upsetting to a child and parents the occurrence is. Children bite for a variety of reasons; most of these reasons are not related to behavior problems.

The Center staff will focus on effective techniques that address the specific reason for the biting. When biting occurs our four main responses are:

- 1) To care for and help the child who was bitten.
- 2) To help the child who bit to learn other behavior.
- 3) To work with the child who bit.
- 4) To understand the reasons for the biting behavior so the biting will stop.

When there are episodes of on-going biting, a parent-teacher conference will occur to develop a plan of specific strategies; techniques and timelines to monitor and review the progress. If needed, a review of the Center's "biting training" will occur with the classroom teaching team. Staff receive training on biting behavior and proper interventions at the time of hire and at least once a year thereafter.

Current resources on bite prevention and interventions are available for staff and parents. Parents are encouraged to bring their concerns and frustrations directly to the Lead Teacher, Program Manager, or Director. A discussion will help to identify the proper interventions – what is found to be effective and not harmful for the child.

An incident report is used to document the biting by a child. This will document what was occurring before, during and after the incident. This information is reviewed by the Lead Teacher and management to determine patterns

and to identify what may be causing this behavior to occur. As needed this information will be used to develop a support plan for the child in conjunction with the parents in order to decrease/eliminate this behavior.

#### Parents can expect that:

- Current information and resources on biting is available for staff and families.
- Appropriate programming will be provided for toddlers to help prevent biting.
- Teaching team will have adequate knowledge and training to deal appropriately and effectively with biting.
- If a child is bitten, staff will provide appropriate first aid, comfort, and notify the parent.
- In order to lessen the biting, the child will be provided guidance as well as sensory items, such as teething ring, and other appropriate items. The environment and happenings will be evaluated which may have fostered the incident and necessary changes will be made.
- The Lead Teacher will provide parents with what specific steps are being taken to address biting and explain the reasoning behind those steps.
- Parent concerns are responded to with understanding and respect.
- The Child's identity will be kept confidential if he or she bites. This helps avoid labeling or confrontations which will slow the process of learning not to bite.

# **NUTRITION, MEALS AND SNACKS**

The Center participates in the Child and Adult Care Food Program (CACFP) that is a federal program administered by the Department of Health in New York State. The Center provides breakfast, lunch, and an afternoon snack daily in accordance with the Day Care Regulations and the CACFP regulations. All children who are enrolled in the childcare program, including infants under 12 months old, must have access to CACFP meals as long as the child is in care during our meal service periods.

#### Infants

The food components that we offer for infants are consistent with the Infant Meal Pattern as established by the CACFP of New York.

- The Center provides one option of a selected iron-fortified milk based infant formula, as well as a variety of
  iron-fortified infant cereal, commercially prepared fruits and vegetables, and other baby foods as
  appropriate to your baby's age and nutritional needs.
- Parent or guardian is required to sign the Statement Regarding Infant Feeding form indicating your choice to accept the provision of infant formula and/or other baby food options.
- This option allows you to accept or decline the formula and/or food being offered by the Center and/or supply some or all of your infant's foods yourself.
- If not participating in the Center's meal program, parents/guardians of bottle-fed infants are required to
  provide formula prepared and in bottles, along with jars of baby food. The bottles and jars must be labeled
  with the child's first and last name. Bottles will be warmed in a hot water bath for feeding.
- Parents/Guardians need to provide the formula and food amount and feeding schedule in writing. Our caregivers will record the child's intake and any unused portions of formula will be discarded after each feeding.
- Breast milk should be in a labeled bottle or breast milk bag. Thawed breast milk is preferred due to the
  time it takes to defrost. If breast milk is frozen it must be dated and used within two weeks from the date it
  is brought in.
- Infants will be held for bottle feedings. The propping of bottles is prohibited. Infants may not be placed in a crib or cot while drinking a bottle regardless of its contents.
- Infants and Older Infants will be held or placed in a chair for spoon-feeding.

#### **Toddlers through Pre-K**

The Center provides breakfast, lunch, and afternoon snacks to all children who are able to eat table food, usually at the age of one year. The noon meals are provided to us from a local contracted vendor, meeting the food requirements for each age group based on CACFP.

- At the time of enrollment or when change occurs, the parent/guardian is responsible for indicating the type
  of diet preferred and if there are any restrictions or allergies in writing to the Center.
- Any special diet that does not meet the CACFP criteria and requirements set forth for each age group must have a physician's written order indicating the components and amounts of the diet.
- The Center will provide a vegetarian menu option, and soy milk option.
- The menu is a four-week rotating menu; the weekly menu is given at time of enrollment, upon request, posted in each classroom, and at time of any permanent changes.
- Family-Style meals are practiced; skill level of each age group will reflect the level of family-style practice.
- Caregivers are to help children relax and prepare to eat based on age and skill level. This includes, but is not limited to, hand washing, table preparation, assisting with eating skills, manners and appropriate behavior, family-style serving, and clean up.
- Caregivers are to sit with the children and role model good eating habits and socialization.
- Caregivers are not permitted to force children to eat certain foods or certain amounts of food. Food is not used as a reward or punishment at the Center.

#### **Drinking Water**

Safe drinking water is available to children at all times and offered at intervals responsive to the needs of individual children. As the child ages, water is accessible to him/her and they are encouraged to get water independently.

#### **Eating and Self-Regulation**

Familiar and popular foods are offered along with unfamiliar foods. Caregivers will encourage children to eat, especially unfamiliar foods, however they will allow them to eat as little or as much of the food as they desire. Children are responsible for how much and whether they eat. Children are trusted to manage their own eating; some days children eat a lot and other days not as much.

#### **Food from Home**

The parent or guardian is responsible for identifying any food brought in from home. This is with the child's name and food items labeled indicating what it is and the ingredients. This practice is to safeguard and protect any child with a specific allergy that may have a life threatening reaction if exposed. When food is brought from home the following will occur:

- Keep contents sealed and packaged until the parent can review it with the caregiver. Please do not let child walk freely about the Center eating or drinking an item.
- Caregivers will determine if the food content is appropriately identified, including ingredients, to ensure safe
  practices including references to any known allergies in classroom or Center.
- Caregivers will determine if it meets the nutritional guidelines for that age.
- Caregivers will ensure that the food is properly stored. Food that requires heating will be heated in the proper manner by the kitchen staff.
- Parents and guardians are expected to honor and practice safety measures relating to allergies. Refer to allergy section.

# **DIAPERING AND TOILETING**

#### Diapering

The Center will train staff to properly and safely diaper an infant while in care. Staff is expected to be caring and nurturing while following the diapering procedure. The diapering procedure addresses sanitation, proper hand washing, techniques for a girl and boy, applying ointment if required, and proper diaper disposal.

#### **Intimate Care**

Erwin Child & Family Center has an intimate care policy in place; intimate care refers to diapering, toileting, or bathing, applying ointment or medication to the buttocks, vagina or penis area. When an infant or child requires intimate care, this will be done by a trained female staff.

#### **Toilet Learning**

The Center will assist you and your child with his or her toileting needs and skills based on his or her age, developmental readiness or acquired skill level. A child will begin to show signs of recognizing bladder and bowel movements around the age of 2-3 years old.

Classroom staff working with children ages 2-3 will work in the classrooms focusing on toileting learning as well. The Lead Teacher is responsible for coordinating with the parents the procedure for toileting learning and an individual plan for a specific child to ensure consistency between home and the Center. Toileting learning and procedures consist of the following:

- Toilet learning should be a non-stressful experience that is appropriate to each child's individual development and involves the child, parent, and staff as caregivers.
- Readiness indicators are present and are the key to a positive and successful experience for a child.
- Each child's timetable, emotional and physical needs, awareness and focus, and self-esteem, are key
  factors to be considered when making the transition between diapers to using the toilet independently.
- Toilet learning is one task that we as parents or caretakers cannot initiate or control for the child.
- Toilet learning methods which frighten, demean or humiliate a child are prohibited.
- Toileting reinforcements such as food, stickers, or other awards are not permitted at the Center. Positive
  encouragement and verbal reinforcement is given to boost the child's success and sense of
  accomplishments.
- Classroom staff is responsible for proper and timely toileting of children. Classroom staff is expected to
  interact and assist children with respectful and nurturing ways. Children are not to receive negative
  interaction by caregiver if the child is incontinent ("has an accident").
- Classroom staff is responsible to ensure a child is cleaned and changed immediately if incontinent.
   Clothing will be placed in a plastic bag and placed outside his or her cubby with an "OOPS" note attached.

# **HYGIENE**

#### Hand washing

The most important deterrent to the spread of infection is good hand washing practice. Staff members, children, parents, and visitors are expected to wash their hands upon arriving in the classrooms. Staff visitors, and children are expected to wash hands throughout the day using the hand washing guidelines and required times (posted by sinks).

Children who are old enough to understand, are taught to follow many basic hygienic procedures to prevent the spread of germs such as:

- When coughing or sneezing, to cover mouth and nose, and to wash hands following
- With a running nose, use tissues to wipe and discard immediately, then to wash hands following
- Wash hands before eating, cooking, after using the bathroom, after outdoor play, and other times based on regulations and standards

#### **Tooth brushing**

The Center will provide toothbrushes for all children. Parents will provide toothpaste being mindful that toothpaste or toothpaste gel with fluoride will not be used with children under the age of two. If there is a preference of specific

toothbrush, the parent or guardian is responsible to provide. Children who are old enough to understand are taught the importance of brushing and brushing techniques.

#### Sanitation Practices

The Center will follow sanitation procedures to assure well-being and health of children. Solutions used are following:

- Spray Bleach Solution #1 for food contact surfaces ½ teaspoon of bleach to 1 quart of water.
- Spray Bleach Solution # 2 for diapering surfaces or surfaces that have been contaminated by blood or bodily fluids 1 tablespoon of bleach to 1 quart of water.
- Spray Bleach Solutions #3 for soaking toys that have been mouthed 1 teaspoon of bleach to 1 gallon of water.

# **SLEEPING, NAP, AND REST**

#### Infant Sleeping

In order to provide the proper sleeping position as recommended by the American Medical Association, infants must be placed on their backs to sleep in order to prevent Sudden Infant Death Syndrome (SIDS\*).

In the event that a parent or legal guardian requests that their child should sleep in the prone position (on his/her stomach) we are responsible to:

- Obtain written confirmation from the child's physician that the child should sleep in the prone position.
- Identify any health conditions or birth defects requiring the infant to sleep in the prone position;
- Develop an Individual Special Health Care plan with instructions for staff and reviewed and signed by the parent.
- Absent of any of this documentation, infants must be placed on their backs to sleep.

The Center will not "swaddle" an infant in the childcare setting. This is based on the recommendations from Office of Child and Family Services, American Academy of Pediatrics, and National Health and Safety Performance Standards Guidelines for Early Care and Education Programs.

- \* Sudden infant death, or crib death, is the sudden, unexplained death of a healthy infant. It usually occurs during sleep and often affects newborns. SIDS is often reported during the winter months when children are overdressed or covered with heavy blankets, this includes "swaddling", especially when an infant is placed on his/her stomach or is able to roll to stomach. American Academy of Pediatrics recommendations on creating a safe sleep environment include:
  - Place the baby on his or her back on a firm sleep surface such as a crib or bassinet with a tight-fitting sheet.
  - Avoid use of soft bedding, including crib bumpers, blankets, pillows, soft toys, and blankets. The crib should be bare.
  - Swaddling can increase the chance your baby will overheat, so avoid letting your baby get too hot, monitor for sweating, damp hair, flushed cheeks, heat rash, and rapid breathing.
  - Swaddling increases the chance of the blanket coming unwrapped and covering your baby's face and increased risk for suffocation.
  - Share a bedroom with parents, but not the same sleeping surface, preferably until the baby turns 1, but at least for the first six months. Room-sharing decreases the risk of SIDS by as much as 50 percent.

Avoid baby's exposure to smoke, alcohol, and illicit drugs.

Other practices that will occur in the Infant rooms during sleep time are:

- A firm crib with a washable mattress is provided for infants six weeks to 12 months of age.
- Infants are checked every 5 minutes during naptime. Their color will be observed and the rise and fall of the child's chest. A timer will be used to alert the staff to check child at 5-minute intervals.
- Wedges, special mattresses, specialized sleep surfaces, pillows, stuffed animals, additional blankets, or other items will not be permitted inside of the crib of a sleeping infant.

#### Nap and Rest for Older Infants to Preschoolers

Rest and naps will be provided for all children ranging from older infants to preschool-aged children. A rest/nap period for most children is scheduled following lunch, however, children up through toddler age must be allowed to nap as needed.

Parents/guardians will complete a "Nap Arrangement" form at enrollment and at the time of each age/classroom change if needed, or any time the need arises. The Nap Arrangement agreement will cover some of the following information:

- A firm, washable rest cot of adequate size is provided for each child 12 months to two years of age.
- A firm, washable mat of at least ¾ inch thickness and of adequate size is provided for each child two to five years of age.
- Each child who spends more than four hours in the Center will have his/her own crib, cot or mat.
- Cots and mats will be used in areas free of draft and arranged so no one can step on the children occupying the cots or mats.
- Individual bed coverings are available for each child, which are removable and washable. These items are not shared between children, nor do they come in contact with another child's rest equipment when stored.

Other than school-age, all children will be offered a brief rest period in which to lie on a cot, crib or mat. Children may not be forced to rest for long periods of time. Children unable to sleep after this period, not to extend 30 minutes, will not be confined to their mat or cot and will be offered a supervised place for quiet play.

#### Nap and Rest Procedure

- During nap/rest periods (naptime) children are positioned in their cot or mat. A child may have a comfort object and/or blanket from home to provide comfort at this time.
- Noise is reduced, lights are turned low, light music may be played and gentle touch/patting back provided to encourage rest.
- Staff in the room are positioned strategically throughout the room and the sleeping area to ensure that all children can be seen and supervised during nap/rest time.
- Staff is responsible to ensure that children's heads are in full view and not obstructed from view by a
  blanket or covering. Blankets that cover children's heads and obstruct this view will be positioned below or
  away from head and face.
- Children who are unable to sleep or rest will be provided the opportunity to play quietly in another area with adequate staff ratio and supervision, so that the sleeping children can continue to rest undisturbed.
- Children cannot be forced to sleep or to remain awake as a punishment. Children's individual rest
  requirements will be responded to, and are not considered to be bad behavior nor will result in the loss of
  privileges.

# **HEALTH**

#### **Health Care Plan and Consultant**

The Center contracts with Pathways Inc. for the services of a Health Care Consultant. The Health Care Consultant is a Registered Nurse who reviews our health care plan, provides input to health-related policies, monitors the Center periodically or as needed, and is available for advice, consultation, and training.

The Center observes universal precautions for blood borne pathogens and infection control. And, all health-related information that you provide to us is protected information and is subject to the privacy protection laws and regulations governing medical and health-related information.

#### **Physical Examination**

Parent/guardian must submit a physical form stating that their infant/child is in good health and free from contagious or communicable disease.

- An approved form by OCFS and ECFC is best to use to ensure all necessary information needed is covered. This form is provided at enrollment, for yearly updates, or upon request.
- The form also needs to show the child's immunization record and lead testing/screening results. (Lead screening is strongly suggested for children 1-6 years of age.)

#### **Immunizations**

Parent/guardian must submit additional immunization updates as they occur. A written note from the health care provider stating the date and type of immunization received must be given to the Center office.

#### **Daily Health Care Checks**

Upon arrival each day, your child will receive a health check by the classroom staff. Staff will examine the child for any markings on the body and possible illnesses. Please let classroom staff know of markings from an accident, rashes, possible illness, or medication given at home. During flu season and periods of increased signs of illness temperatures will be taken as soon as the child arrives and noted on health care check.

#### Illness or Serious Injury

If a child becomes ill or seriously injured during the day, parents will be notified as soon as possible. The exclusion criteria and procedure to go home will be followed as determined by the Director, Program Manager, or Next-in Command

#### **Exclusion Criteria**

The child may not remain in care if he/she does not feel well enough to participate comfortably in the usual activities of the program and the staff cannot care for the sick child without interfering with the care of the other children. The child cannot remain in care if he/she has any of the following that indicates an illness; contagious disease, or an immediate need for a medical evaluation based on the following, but not limited to:

Children may stay in program with a low-grade temperature as long as they are able to actively participate and have no other symptoms (unidentified rash, vomiting, diarrhea that is not able to be contained in the toilet/diaper, or difficulty breathing).

#### Child must be picked up immediately when:

#### **Fevers**

- Babies who are less than two months of age: Any fever should get urgent medical attention.
- Babies who are less than 6 months of age with a temperature of 100° F axillary (armpit or temporal) or aural (in the ear).

- Children over 6 months who have a temperature of 101° F or higher orally <u>and</u> is acting sick, i.e., behavior change, stiff neck, rash, unusual irritability, poor eating, congestion, vomiting, excessive crying, or other symptoms.
- Children over 6 months who have a temperature of 100° F or higher axillary (under the arm), aural (in the
  ear), or temporal (across the forehead or on the temple), <u>and</u> is acting sick, i.e., behavior change, stiff
  neck, rash, unusual irritability, poor eating, congestion, vomiting, excessive crying, or other symptoms.
- The child will be required to stay home until 24 hours fever free without the assist of fever reducing medication.

#### Output

- Not urinating at least once in 8 hours, dry mouth, no tears, or sunken eyes.
- Diarrhea is defined by stools that are more frequent or less formed for that child and not associated with changes in diet.
- Exclusion is required for all diapered children whose stool is not contained in the diaper and toilet-trained children if the diarrhea is causing "accidents." In addition, diapered children with diarrhea should be excluded if the stool frequency exceeds two stools above normal for that child during the time in the program day.
- Readmission after diarrhea can occur when diapered children have their stool contained by the diaper (even if the stools remain loose) and when toilet-trained children are not having "accidents" and when stool frequency is no more than 2 stools above normal for that child during the time in the program day and the child seems well otherwise.
- Stool that are black or have blood mixed content.
- Vomited more than 2 times in a 24-hour period or less if the child is unable to participate in program, determined not associated with possible infectious condition. Less than four months of age – forceful vomiting more than once
- Any infectious medical diagnosis with diarrhea must be cleared by the physician to return.

#### Respiratory

- Breathing so fast or hard that the child cannot play, talk, cry, or drink.
- Congestion, coughing, wheezing, etc., that interferes with daily activity and is worsening.
- Continuous clear drainage from the nose after a hard blow to the head.
- Respiratory Syncytial Virus (RSV). Infant/child may return to care with a low-grade temperature and no secondary symptoms along with a physician's note of approval for return. If, due to level of care required for child, staff are unable to care for the infant/child along with providing quality care to other children in the group, exclusion from the program will occur even with approval to return.
- Pertussis (5 days on appropriate antibiotic treatment. (Must have physician statement to return.)

#### Pain

- A severe stomachache that causes the child to double up and/or scream.
- A stomachache without vomiting or diarrhea after a recent injury, blow to the abdomen, or hard fall.
- Neck pain when the child's head is moved or touched. Stiff neck or severe headache and looking very sick.
- Earaches accompanied with fever, behavior change, drainage, or pain.

#### Rashes

- A rash that is unidentified; also includes not healing; accompanied with fever; has oozing, open lesions.
- A rash of hives or welts that appears, spreads quickly, and does not dissipate, especially with child that has
  no history.
- Identified rash or condition that is open, oozing and not able to contain and/or may be contagious.
- A blood-red or purple rash made up of pinhead-sized spots or bruises that are not associated with an injury.
- Rubella (6 days after rash appears and physician note to return).

#### Common child contagious diseases or conditions

- Conjunctivitis (may return 24 hours after he/she is on medication).
- Mouth Sores with drooling until healed (unless physician states the child is not infectious).
- Strep throat (may return 24 hours after he/she is on medication and Fever Free.)
- Mumps (until 5 days after onset of parotid gland swelling). Physician return note required.
- Measles (until 4 days after the onset of rash). Physician return note required.
- Impetigo (may return 24 hours after he/she is on medication, affected areas are crusted and dry and physician return note).
- Scabies (may return 24 hours after treatment has begun and physician return note.)
- Ringworm (may return 24 hours after treatment has begun and physician return note).
- Chicken pox (may return when all lesions are crusted and dry; usually about 6 days. Must have a return approval and date by physician).
- Lice (may return after treated, nits are removed, and child is checked and cleared by a Center staff upon arrival to the Center).
- Hepatitis A Virus (until the child is approved to return to care, physician return note).

#### Other

- Looking or acting very ill or getting worse quickly. Acting unusually confused, unequal pupils, or other.
- A seizure for the first time or as indicated in the special health care plan.
- Other symptoms of a possible serious condition.
- Any child determined by local health department to be contributing to the transmission of illness during an outbreak.

#### **Exclusion Procedure**

If an infant/child needs to leave the Center due to illness or serious injury, the following will occur:

- The classroom person in charge (following the chain of command being Lead Teacher, Support Teacher, and then Teacher Aide) will consult with the Director, Program Manager, or Next-in Command regarding the child's condition. It is the ultimate responsibility and authority of the Director, Program Manager, or Next-in Command to make the decision regarding when a child should be sent home or excluded from care.
- Classroom person in charge will notify the parent/guardian regarding child's symptoms and the decision that the child needs to go home.
- Staff will obtain information from the parent/guardian regarding who will be picking up the child and at what time. Pick up is expected within an hour of request.
- When possible, a supervised quiet area for the child to rest will be provided until they are picked up.
- Staff will observe and document child's symptoms.
- Staff will continue to wash their hands frequently.

If your child contracts a serious illness or contagious condition, parents/guardians should notify the Center as soon as possible. When a child or staff in the Center exposes other children in the Center to a contagious illness, the Director will notify the other parents/guardians in writing, without disclosing names, and will have available a written description of the illness; this is typically done by using the Heath Notification at the sign-in desk.

#### **Health Notification**

A weekly health notification will be used indicating any illness or contagious diseases diagnosed by a physician concerning a child in the program. The health notification is printed on bright pink paper posted at the front desk near the sign in/out computer. The illness or contagious disease will have a date marked by the category. Parents are encouraged to check this daily to be notified of any health concerns. Depending of the severity of the illness or

condition, communication via Tadpoles/Teaching Strategies Family, or direct contact with classroom parents may occur.

# **ALLERGIES**

It is the responsibility of the Center, made up of staff, parents, children, visitors, and others to assure that all children with any allergies are kept well and safe by practicing and honoring any allergy restrictions in a classroom. This includes not allowing children to have food out openly throughout the Center such as during drop off and pickups. Please only allow children to have foods from outside the Center in the classroom once approved by the Lead Teacher.

#### **Peanut Free Center**

Peanut Free Center means that any foods that contain peanuts or have been processed on machinery that may contain trace of peanuts or peanut oil are not permitted in the Center.

# **Food Allergies**

Food allergies are most common in children under age five, and can be life threatening. Peanuts are one of the leading causes of food-allergic reactions in children; children allergic to peanuts are at risk for a severe reaction. Other foods common to young children are eggs and milk, however, children have allergies to other specific foods. If your child has an allergy to a food type, the Center has the following practice in place:

- Parent or legal guardian is responsible for identifying food allergens at the time of enrollment or diagnosis.
   This includes providing information of allergic reaction and safety plan. If medication such as an epi-pen is required, completing proper documentation and procedure before the child begins.
- Center management, classroom staff, and kitchen manager, will be informed of the food allergy and safety measures.
- Classroom will have an "Allergy List" that provides information of children with allergies. This list is posted in classroom for quick and frequent reference to staff but covered for public to see.
- Classroom Lead Teacher is responsible for educating both staff and parents of any food allergies in the class. This information will not identify the child but only the food allergens and the safe practices to be implemented and honored.
- Individual Health Care Plan Notebook in the classroom will have detailed information relating to a child's need if non-medication is required.
- If a special diet is required and the Center's menu does not provide, parent or legal guardian is responsible to supply those components for eating. The Center will ensure that the food is stored and reheated in the proper manner.
- If medication must be on hand for emergency use due to a severe reaction, all medication and medication consent forms will be easily accessible to staff at all times.
  - Refer to Medication Section.

#### Birthday and Other Celebrations with Food

Each classroom will have specific guidelines and practices for food during birthday or other celebrations based on the makeup of the class and any identified food allergies. The Center encourages nonfood items for celebration; however, recognizes the desire for food items on different occasions. Parents and others bringing food to a classroom must adhere to the following:

- Talk with the Director, Program Manager, or Lead Teachers for help and guidance in selecting foods to be used in classroom parties or other special events; see Peanut Free Center definition.
- Talk with the Lead Teacher to determine any food restrictions in the classroom.
- Read the ingredients label of all food, and ensure any food brought from home includes the ingredient label so that staff may double-check it for everyone's safety.
- Do not allow your child to bring in or eat any candy-type products, as they are often manufactured on
  equipment that processes peanut related foods and are of little nutritional value.

 Do not allow your child to eat foods openly while being carried or walking throughout the Center. Keep food exposure to classroom and abide by any food restrictions in a classroom.

#### **Other Allergens**

Children are also allergic to other items found in the classroom or outdoors. It is the responsibility of the parent or legal guardian to ensure that the Center and classroom has that information for safe practices.

# **MEDICATION**

#### Prescription and orally-administered over-the-counter medication

Medications may only be administered at the Center when a Medication Consent Form has been completed by a health care provider stating that the child day care provider may administer such medication/ prescription as well as specifying the circumstances, if any, under which the medication must be administered, and additionally having written permission of the parent on the consent form. All medication forms and medication must be received, reviewed, and approved by a medication trained staff at the Center.

#### **Medication Administration Trained Staff (MAT)**

The Center has trained staff by the Office of Child and Family Services and Pathways, Inc.to administer all prescription medications, as well as receive/return medications into and out of the Center based on the medication regulations and policies. MAT staff must be trained and approved by OCFS and renew his/her certificate every three years. These staff also must be CPR and First Aid certified.

#### **Emergency Medication Trained Staff**

The Center's Medication Administration Trained staff is trained by Pathways, Inc. to carry and administer any medication identified as needed for life threatening condition. Those medications are typically an epi-pen, inhaler, nebulizer, or other. These staff must be CPR and First Aid certified.

# To begin your child on medications at the Center, the following must occur:

- 1. ECFC/OCFS Medication Consent Form must be completed by the physician or the physician may provide a medication health care plan as long as the document provides all necessary information required on the ECFC/OCFS form.
- 2. ECFC/OCFS medication forms can be obtained at the front desk at the Center for your use.
- 3. The medication form or medication plan must be filled out completely and indicate time of renewal. For children under the age of 5 years old, the medication form must be filled out every six months per regulation. For children older than 5 years, the medication form or plan is valid for one year.
- 4. When getting the medication listed on the medication form, you must make sure that the medication matches the physician's order. For example, if a physician indicates Children's Tylenol tablets, the medication must be Children's Tylenol (no other brand) and must be in tablet form and not liquid.
- 5. Medication must be in the original container labeled with the child's complete name, the medication name, recommended dosage, time intervals for administration, method of administration, expiration date, and for prescription medication, the prescriber's name.
- When bringing a medication consent form and/or medication to the Center, the parent or legal guardian must sign it in at the front desk, including all prescription and orally-administered over-the-counter medications.
- 7. The medication consent form and medications must be reviewed and accepted by a Medication Administration Trained (MAT) Certified staff. This is typically the Director, Program Manager, and/or designated Lead Teacher overseeing Center medications.

- 8. MAT staff receiving the medications will complete proper documentation and notify the classroom Lead Teacher. The MAT staff will take the medication consent form and medication to the classroom.
- 9. The medication will be kept in a dry, locked area in each classroom which is inaccessible to children. Any medication needing to be refrigerated will be kept in the staff lounge refrigerator.
- 10. Medications no longer needed by the child, or that has expired, will be returned to the parents by a MAT staff in a timely manner. It is the responsibility of the Lead Teacher to monitor expiration dates and make arrangements for the return to parents.

#### Parent and/or Family Administrating Medication

A parent and/or legal guardian is able to administer medication to his/her child while at the Center. He or she is responsible for communicating to the Lead Teacher or other staff present prior to giving the medication. The Lead Teacher or trained staff is responsible for creating a medication log with the following information: type of medication, amount of medication, purpose of medication, time/date, and list signs/symptoms to watch for following the dose. The parent and/or legal guardian is responsible to sign the documentation along with the staff member present.

Parents must give written permission for a family member, such as grandmother/father, aunt/uncle, or sibling at least 18 years of age, to administer the medication.

# **Over-the-Counter Topical Ointments**

Over-the-counter topical ointments may be used and applied by classroom staff with the written permission of the parent or legal guardian. This permission is typically noted on the child's Over-the-Counter Topical Ointment permission card, also referred to as the Yellow Card. The Yellow Card is posted inside the child's personal cabinet in the classroom.

To begin your child on an over-the counter topical ointment, the following must occur:

- Complete the Over-the-Counter Topical Ointment permission card (yellow card) and list ointments to be given. If the yellow card is not available in your child's cabinet, see the Lead Teacher or Front Desk Receptionist.
- 2. Over-the-counter topical ointments will be kept in the child's cabinet in a basket with child's name labeled on the basket.
- 3. All classroom staff can apply topical ointments. Staff can only apply ointment based on the product's instructions with no variations based on parental request or preference.
- 4. When adding over-the-counter topical ointment to a child's care, the parent or legal guardian is responsible for showing the Lead Teacher or Support Teacher the product, the purpose, and instruction prior to placing it in the child's cabinet.
- 5. The product must be labeled with the child's name and the instruction present and able to be read by staff.

# **ACCIDENTS AND INCIDENTS**

Program staff provide supervision, redirection of activity and management of children's behavior in order to prevent accidents or incidents from occurring that may result in a minor or major (serious) injury. All classrooms are equipped with a portable first aid kit that is also taken outside of the classroom including other center space and outdoors.

#### **Accidents**

All injuries are documented on an Accident Report Form; injuries are defined as minor or major. Staff member observing and/or providing first aid or care to the child is responsible for completing the form. The Lead Teacher is responsible for reviewing the Accident Report and making recommendations to prevent the accident from occurring

again if possible. The parent or legal guardian is also responsible for reviewing, responding, and signing the form to indicate being informed. The Accident Reports are forwarded to the Director and/or the Program Manager for review in a timely manner. An Accident Report is filed in the child's main file.

#### **Minor Injury**

When a child is hurt during an accident or incident, the injury is defined minor when the care is basic nurturing and first aid. First aid may require a cold pack, Band-Aid, and nurturing. Classroom staff may notify parents during the day via Tadpoles/Teaching Strategies Family or at the time of pick up.

#### **Major Injury**

When a child is hurt during an accident or incident, the injury is defined major when the care results in first aid and the need for possible medical attention. Depending on the nature of the injury, staff will determine the actions to take place:

- Treat the child
- Call 911 and/or,
- Notify the Program Manager or Director
- Notify Parent or Emergency Contact

#### **Serious Reportable**

When a major injury occurs, the Director, Program Manager, or Next-in Command is responsible for reporting the accident or incident to the Office of Child and Family Services and/or Child Protective Services on the day of occurrence.

#### **Incident Report**

When an incident occurs that involves physical altercation, such as hitting, kicking, spitting, biting, and other aggressive behaviors as well as other incidents that warrant concern and documentation. The Incident Report is reviewed by parent, Lead Teacher, Program Manager, and/or Director.

#### **SAFETY AND EMERGENCY**

The Center has placed numerous safety and emergency plans throughout the building, which are required by the Office of Child and Family Services. These drills are practiced on a regular basis with staff and children.

**Fire Evacuations**: An emergency plan is in place for the Center and emergency exit routes are posted by each classroom door. Staff will respond in a timely manner and will remove children from the building, meeting at a designated area. At this time, attendance will be taken and the decision will be made by the Program Manager and/or Director if evacuation off-site needs to occur. Once this occurs, parents and designated others will be notified immediately by the Program Manager or Director. Staff are required to bring the attendance sheet, evacuation bag, first aid kit, and iPad. An unannounced fire drill is conducted once a month by the Program Manager or Director. The fire drill records are kept on file with the Director.

**Evacuation Off-Site**: Health Works is the emergency off-site location. If there is a need to evacuate to this location, the Center will be notified and classrooms will meet at the designated area and will walk in an organized and systematic order to Health Works. This drill will be conducted at least once a year with parents being notified at least one week prior to the drill.

**Shelter in Place:** If parents or emergency contacts are unable to pick up children due to unexpected emergency situations such as inclement weather, the Center has a shelter in place plan that would involve staff remaining on

duty and providing care and meals for the children until pick up is possible. The shelter in place drill is reviewed once a year.

#### **Crisis Management**

The Center has different types of emergency plans depending on the nature of circumstances and drills are reviewed and/or practiced throughout the year:

- Hold in Place: Staff and children must remain in place and not move about the building as a result of a non-threatening emergency or situation in the building.
- Shelter in Place Severe Weather: Staff and children are to seek designated safety areas as a result of severe weather that may cause harm or damage.
- Lock Out: Staff and children remain in the building and no one enters the building without the approval of
  the Program Manager or Director. This may be used when there is concern in the area but not directly
  related to the Center, such as a custody issue or disgruntled staff.
- Lock Down: Staff and children will take shelter in classroom or designated area behind locked doors and hidden due to circumstances that may be harmful or life threatening, such as intruder in the building.

If other emergency situations arise due to weather conditions, heating, water and plumbing or electrical problems, parents/guardians will be notified of the emergency by the Program Manager, Director and/or the Next in Command. Tadpoles/Teaching Strategies Family will also be used to notify parents. See Weather Closure Policy for media information.

In the event that the Center must close, Parents/Guardians will be requested to pick their children up immediately. Parents/guardians are to have an emergency contact person that can do so if parent is not available or able to respond immediately.

#### **Use of Pesticides**

This Center is required by the New York State Office of Children and Family Services regulations to provide prior notification to all parents not less than 48 hours prior to the use and application of pesticides in the facility or on the premises. MSDS Documentation (Materials Safety Data Sheets) are required and available for all pesticide products that are applied in the facility or on the grounds.

These applications are generally done by professionals only when absolutely necessary and every precaution is taken to choose the proper pesticide, apply it as directed, and protect the staff and children from exposure to the chemical.

The 48-hour notice requirement does not apply to:

- Applications of anti-microbial products (disinfectants), bio-pesticides or substances exempt from federal pesticide regulation;
- Use of pesticides in aerosol cans for personal protection;
- Use of nonvolatile rodent and insect baits in tamper-resistant containers or areas inaccessible to children;
- Use of silica gels and other nonvolatile ready-to-use paste, foam or gel insecticides in areas inaccessible to children;
- Use of boric acid related compounds;
- Emergency applications to protect against an imminent threat to human health (which must be immediately reported to the Commissioner of the New York State Health Department); and applications after which the facility will be unoccupied for at least 72 hours.

# Addendum: Emergency Procedures due to Pandemic

The Center will implement the Pandemic Section of the Parent Handbook under the guidance and direction of the program administration, local licensing agency, federal, state and local governmental agencies. To ensure the safety of children, families and staff, the Center will monitor the situation and take into account the guidance and suggestions from the authorities. Decisions made by the Center will consider the safety of children, families and staff. Program changes may include:

#### **Unplanned Center Closures**

On occasion, we may need to close due to circumstances beyond our control and without much warning. We may need to shorten our day with a later drop off or earlier pick up. Drop off rooms may need to close and rooms will be unable to combine. During these situations, we must strive to ensure the financial sustainability of our center, as well as work as creatively as possible to provide care and support to our families and staff.

#### Remote Learning Opportunities During Closure (if staff remain employed):

- Teachers will maintain ongoing communication with families and children.
- Online platforms (such as Facebook, Zoom, and Tadpoles/Teaching Strategies Family) will be utilized for activities, sing along and story time; individually and in group settings.
- Phone calls, emails and newsletters will be sent regularly from teachers and administrators.

#### Changes When Program is Re-opening or Remains open during pandemic:

When the program reopens or continues to stay open, all required protocol mandated by our local licensing agency, and our Health Care Consultant will be initiated. Some examples of practices that may be implemented are:

- Enhanced health screenings and temperature checks upon arrival. Any temperature 100 degrees or higher will result in no admittance into the Center in regards to staff, parents, and children.
- Stricter child exclusions for signs of illness: Refer to Emergency Health Policy.
- Limitation of family members in the building: Rest assured, you will always have access to your children, but in an effort to reduce the number of people coming into the building we have amended our drop off/pick up policy, see below. Please note, if you do enter the building, you will be required to follow our health screening procedures, must wear a mask, and follow physical distancing guidelines.
- Elimination of non-essential visitors into our building.

**Pick Up and Drop Off:** To create a safe and manageable way for children to arrive and leave our program, we will be implementing the following protocol:

Children will be received from the front foyer. Families will be greeted by staff as they sign their children in. Children will have their temperature screened and staff will escort them to their classrooms.

At the end of the day, parents may enter the foyer and sign children out. Staff will bring children to parents in the foyer.

Please adhere to physical distancing when picking up and dropping off your child. Colorful cones have been placed six feet apart on the sidewalk area.

Teachers will communicate with families via, phone, email or our app (Tadpoles/Teaching Strategies Family).

#### Meal times and tooth brushing

- Tooth brushing will be temporarily discontinued. Please consult with the director if you are in need of a toothbrush or toothpaste so you can continue this practice at home.
- Family style dining will be temporarily discontinued. Food will be plated for each child individually by the Teacher. There will be extra food available if the children want extra portions.

**Amplifying our daily cleaning efforts:** While this is part of our normal routine, there will be additional efforts made to disinfect the classrooms, gross motor spaces and high traffic areas, paying special attention to doorknobs,

phones, tables, chairs, keyboards, handrails, gates, etc. We will be disinfecting with a higher concentrated bleach/water as recommended by the CDC. In addition to classroom cleaning, all staff members will be assigned various areas of the building for frequent disinfecting. Daily sanitization checklists will be used to verify completion of additional cleaning in classrooms and at the front desk.

# **CONTACT NUMBERS**

#### Pathways, Inc. Program Contacts:

Carol Berry – Director Erwin Child & Family Center 111 Canada Road Painted Post, NY 14870 (607) 962-0536

John Simonds Chief Operating Officer 33 Denison Parkway Corning, NY 14830 (607) 937-3200 State of New York Office of Children and Family Services

Rochester Regional Office Licensor – Dave Sutton (585) 238-8123

Rochester Regional Office Licensing Supervisor- Penni Orlando (585) 238-8531

Rochester Regional Office Address: Division of Childcare Services 259 Monroe Avenue, Room #301 Rochester, NY 14607

The State Office of Children and Family Services maintains a toll-free complaint line for complaints about day care programs. Call this number during normal working hours and a staff person will take the information. The Office is empowered to investigate any possible violation of childcare regulations. If you think a person or program is operating without the proper license or registration certificate, this is also a basis for making a complaint. Your complaint will be investigated, and if it is substantiated, staff will work with the provider to correct any violations.

Day Care Complaint Line 1-800-732-5207

A listing of the name, title, address, and phone numbers of the New York State Office of Child and Family Services Field Representative and Regional Bureau Director from the Bureau of Early Childhood Services is posted and available to parents in the Center or upon request.



# **Erwin Child & Family Center Agreement of Understanding**

I acknowledge that I/we have received a copy of the Parent Handbook. My/our signature(s) constitutes my/our understanding to abide by the policies described in the handbook.

Signature			
Date	-		
Date			
Signature			
	_		
Date			