



Parents Handbook

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Welcome! This Parent Handbook will acquaint you with the mission, philosophy, curriculum and policies of the Camilla's Group DayCare. We hope will give you a clear picture of the daycare and what you and your children can expect while in our care.

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I. INTRODUCTION:

Overview

Camilla's Daycare opened in 2008, running as a FGDC private, The first clients of the care were the children of the provider. She decided to take care her children because of her bad experience with her eldest son in the past with daycare. Our story began in New York City, years after we moved to NYS in Albany. Where even today, we continue to provide an excellent service to all families.

Non-Discrimination Policy

We providing services to children and their families, Camilla's Daycare do not discriminate on the basis of race, religion, gender, disability, cultural heritage, political beliefs, marital status, national origin or sexual orientation.

Philosophy and Mission Statement

A key word in our program is respect. We foster respect for self, respect for others, and children. In a secure and nurturing environment, our curriculum provides for all areas of a child's development: physical, emotional, social, and cognitive. We believe that children learn through active exploration and interaction with adults, other children, and materials and in a fun way.

Our Teachers encourage curiosity and experimentation, and have chosen materials that help expand children's thinking. Basic learning materials include sand, water, and tools to use with them, large and small blocks, puzzles, dramatic play props (dress-up clothes, puppets), items for scientific investigation (magnets, balances, and weights), computers, books, cd's, musical instruments, art and drawing supplies, and climbing structures with slides. Positive social interaction is encouraged by helping children to develop their verbal skills and to express their feelings in appropriate ways.

We recognize that the child is an individual as well as a member of a larger unit, his/her family. Strong, viable parent/teacher relationships promote effective communication and participation. The staff works closely with parents for the benefit of the child.

Staff Qualifications

The staff at Camilla's Daycare consists of a daycare Site Director, Teachers, Assistant Teachers and substitute. All staff meets the requirements of the Department of family services. Requirement for formal education for their respective positions, have had experience working with young children and their families, and approved certification in First Aid and CPR. The staff enjoys and

understands how young children learn and grow. They respond with sensitivity to each child's individual needs, desires, and interests.

In order to ensure that employees or other persons regularly providing child care or support services with potential for unsupervised contact with children and are appropriate for serving in their positions, a Criminal Offender Record Information check and, a Background Record Check shall be performed.

Hours and Days of Operation

The Daycare is open Monday through Friday, 7:00am to 5:30pm, excluding the following Camilla's Daycare holidays and two professional development days

The Center is closed on the following holidays:

- New Year's Day
- Martin Luther King, Jr. Day
- Washington's Birthday
- Patriot's Day
- Memorial Day
- Fourth of July
- Labor Day
- Columbus Day
- Veterans' Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Days

The Daycare is closed on:

- The Friday before Labor Day
- The first Friday in March for Professional Development.

II. ENROLLMENT:

Process

Parents interested in enrolling their child(ren) should call the Site Director and arrange for a visit. There is a \$30.00 non-refundable application fee to cover record keeping costs and to maintain the application if there is a waitlist, and

material. Checks for the application fee should be made payable to Camilla's Daycare

A priority enrollment system is established as follows:

- (1) Siblings of currently enrolled children will have first priority.
- (2) Regular full time 12 children, and 4 part-time children.
- (3) All others, will have third priority.

The side has an Infant Room, a Toddler Room, and a Preschool Room.

Orientation

We request that a parent visit with their child in the classroom prior to the child's actual start date. In most cases, one or two visits are best; please speak with the Site Director about your child's' pre-start date visit(s).

An enrollment form and a developmental history form must be completed by a parent prior to your child's first visit day. The child's health care practitioner will need to complete a physical form.

During the first few weeks your child will be adjusting to a new place and many new faces. We are interested in making this adjustment as easy as possible for both children and families. Options for easing your child into the program should be discussed with the Site Director and teachers.

Transitions

The Daycare is organized and staffed to minimize the number of transitions children experience. Being mindful of the importance of the bonds that are established with Teachers and peers, every effort is made to maintain continuity of relationships between teaching staff and children and among groups of children. Developmental needs or concerns are always considered when planning transitions for children and clear communication takes place between daycare and home and among teaching staff.

Please note: The daycare makes every attempt to plan for and enact transition plans that have been discussed with families; in the event of an unforeseen change to enrollment, staffing, or program operations, transition plans may need to be altered to ensure compliance with State regulation, as well as to ensure a best

practice experience for children. When transition plans must be altered, the Site Director will contact the families to discuss.

III. FINANCIAL POLICIES:

Application Fee: \$30.00 is required when submitting an application for the waiting list; this fee is non-refundable.

Enrollment Reservation Fee: An enrollment reservation fee is collected to hold a specific slot for a specified month

There will be a \$35.00 fee for all returned checks.

The amount of tuition is based on your child's predetermined schedule and has no bearing on your child's actual attendance, (i.e. sick days, vacation days, and holidays, etc.) When extra hours are requested, you must pay for the extra time that is not included in your child's predetermined schedule. For example, if your child's schedule is 9-5 and you request an extra hour in the morning (8-9), you will be charged for the extra hour regardless of whether you pick up at 4 or 5.

Payments not received by the 15th of the month will be considered delinquent. There will be a charge of \$3.00 per day for each day the tuition remains unpaid. In the event you do submit your tuition late, please include your late fee with your tuition payment. Extraordinary circumstances should be discussed with the Site Director promptly. Several late payments may lead to the termination of your child's enrollment.

Extra Hours/Days Policy

Families may request extra hours/days in addition to their scheduled hours/days. Please note, extra hours/days may not always be available due to enrollment, staffing, or program operations and the daycare must ensure compliance with State regulation, as well as to ensure a best practice experience for all children. Families must request the specific hours/days at least 24 hours in advance of the time requested. There is a flat rate of \$10 an hour or any portion of the hour for extra hours. The sibling discount is not available for extra hours/days.

Drop Off Policy

In order to uphold the integrity of the children's daily schedule, we request that children be dropped off at the daycare no later than 10:00 am with the exception

of doctor's appointments, occasional needs and emergencies. The daycare should be notified as soon as possible in advance of changes to drop off time.

We ask that drop off not occur during nap (~12:00pm -2:00pm) as this may be disruptive to the group as well as possibly difficult for your child.

IV. GENERAL INFORMATION:

Absences and Late Arrivals

Please call the Side as early as possible on a day your child will be absent or if your arrival will be delayed so we may better plan for the day. If your child is absent due to health reasons, please let the side know by call, email, or text.

Departures

Only those people authorized in writing by the parent or guardian may pick up a child from the daycare . The daycare must be notified in advance if someone other than a parent will be picking up the child, and this person will be asked to present identification. Under no circumstances will a child be released to anyone without prior written permission.

Behavior Management Policy

Our policy concerning behavior management ~ sometimes referred to as discipline ~ is based on the individual need of the child, the ability of each child to understand what he/she is doing and the consequences of their actions. A child is never made to feel that the outcome of an act will result in physical or verbal abuse. Children are not told to "sit out" and "time out" is not used. Positive reinforcement is always encouraged and children are told what they are doing well. It is the responsibility of the teacher in charge to ascertain what has taken place as clearly as possible. If an altercation between children has occurred, each child is spoken to with reason and with respect. Each child is then given the responsibility of approaching the other child in a friendly manner, with adult supervision, in order for the children to participate in the resolution to the misunderstanding. This is done in direct relation to the verbal ability of the child but can be accomplished even when the child is not yet talking.

When inappropriate behavior occurs with the adult being the recipient, the child will be approached either with a reasonable verbal response or with the technique

of redirection. Removal from an activity for a short period of time is used only if it has been ascertained that other responses have failed or if a child is at risk.

There is less likelihood of discipline problems when positive responses and remarks are the norm throughout the day. If a positive base is established in an atmosphere of respect and understanding, inappropriate or negative behavior then becomes the exception.

When any staff member feels that he/she is unable to manage a situation with a child in an effective manner, he or she will direct the child to another staff member and take a break. Staff members assist one another in creating a positive, relaxed atmosphere.

THE FOLLOWING ARE PROHIBITED

- Corporal punishment, including spanking;
- Verbal or physical abuse, humiliation, neglect, or abusive treatment;
- Speaking to a child in a manner or tone that is disrespectful, sarcastic, demeaning or threatening;
- Withholding food, drink or sleep;
- Force feeding children;
- Disciplining a child for soiling, wetting, or not using the toilet; forcing a child to remain in soiled clothing or forcing the child to remain on the toilet, or using any other unusual or excessive practices for toileting.

Biting Behavior in Young Children

The daycare recognize that biting is a normal stage of development that some young children go through. It is something they will outgrow in time. Young children who bite, bite for reasons, all of them normal and developmentally understood.

Common Reasons Why Children Bite

Teething, exploring, stress, frustration, imitating behavior, personal space is violated or crowded, lack of vocabulary, sign of affection, to obtain attention.

Classroom Strategies Used To Minimize Incidents of Biting

We “shadow” the child who has exhibited biting behavior. We carefully observe the child who has bitten to determine if there is a pattern of when the biting behavior occurs. We comfort the child who has been bitten and firmly let the child who bit know that "biting hurts." and we offer an object to bite such as a teething ring or cold cloth.

Action Taken When A Biting Incident Occurs

- The child who was bitten is comforted;
- The child who bit is firmly told that “biting hurts” while we continue to comfort and focus on the child who was bitten;
- The bitten area is washed thoroughly with soap and water and inspected for broken skin;
- If the skin is broken, an administrator is immediately notified. Both sets of parents are contacted and advised to call their pediatricians; open wounds on the face or hands are the most vulnerable to infection;
- An injury/incident report is written for each of the children involved;
- Ongoing dialog is kept with parents and staff on classroom and home strategies being used to address and curb the biting behavior;
- Relevant articles are made available to parents and staff.

Clothing

Please label all items with your child’s FIRST and LAST name, thank you

The activities in the side can be messy. 😊 please dress your child with play clothes.

We assume that you will send your child in clothes that allow your child to participate fully in our play-based program and that you understand that clothes may get stained or soiled.

Part of each day is spent outdoors, weather permitting. Please dress your child accordingly.

Appropriate and safe footwear is required for outdoor play. If your child wants to wear other shoes to school, please make sure that he/she has a pair of sneakers to change into for outdoor play. Flip flops are not safe for outdoor play and are therefore not permitted; children must wear sneakers for outdoor play; in summer, fully-closed water shoes with a solid rubber, non-skid sole are permissible; if there are questions about suitability of footwear, please verify with your classroom Teachers.

During the cold weather please make sure your child has boots, (that slip on and off easily), a warm coat, snow pants, a hat, mittens and slippers for after snow play. Each child should have a complete set of extra clothing to be kept at the daycare including underwear and socks.

Accessories and Jewelry

Children's accessories and jewelry are extremely attractive to young children's eyes, fingers, and mouths. We ask parents cooperation to be safety conscious when choosing accessories that their children wear to the centers. Small objects like barrettes and earrings can be choking hazards and necklaces can pose strangulation hazards. Therefore, we do not permit the following type of jewelry:

- Dangly earrings (small, snug-fitting pierced studs are permitted);
- Necklaces of any kind;
- Bracelets with beads or charms (rubber, cloth or thread bracelets are permitted as long as they do not contain attachments or charms).

Comfort Items

If it will help your child feel more at home during the day, we welcome comfort items such as his/her favorite pacifier, doll, stuffed animal, books or items that contribute to our activities are always welcome. These items need to be small enough to fit within each child's individual cubby space. If you have any questions about what to bring please speak to your child's teacher.

Confidentiality of Children's Records

In order to ensure the confidentiality of your child and family, staff members receive a confidentiality policy in their Employee Handbook that is reviewed upon hire.

“Records of the children are confidential, may not leave the daycare, and should not be discussed with other parents or in front of other children. Confidential information includes but is not limited to: children, their families, employment, payroll, fiscal, and management information.

Nutrition

The daycare will provide your child's meal breakfast, lunch, snacks, and supper. Infant children's will have their own personal schedule based in parents instruction.

Breakfast 7:30am to 9:00pm

Lunch 11:15am to 12:00pm

Snack 2:00pm to 2:30pm

Supper 3:45pm to 4:45pm

To promote healthy eating habits, teachers encourage children to eat. Children's interest in and enthusiasm for food is actually quite similar to that of adults; when food is prepared and presented to highlight a variety of colors and textures, it's often that much more appealing to eat and enjoy. Please feel free to ask us for ideas and suggestions and your fellow families may have some fun ideas for variety, too.

****Grapes and hot dogs must be cut lengthwise and in very small pieces. The program will not serve popcorn, raw peas, or meat larger than can be swallowed whole to reduce the chance of choking. ****

Inclement Weather Operations

The programs will do everything possible to remain open, as well, in the case of inclement weather. As is the case across employees are asked to make personal decisions about their ability to travel safely to and from work, especially as storm conditions can vary by geography. In the event that program operations must be altered, parents will be informed with as much notice as possible.

Nap

Children sleep in the two living rooms all the time under the supervision of an adult on a mat and their individual sheets. Infants sleep in a Play Yard without bedspreads, bears, toys, and sleep on their feet. When children's sheets are stored, they are kept in their individualized packaging without contact with another child's sheets. The children's mat clothes are washed weekly every Friday.

Infant, Toddlers, and Preschoolers: should bring a nap blanket and a crib sheet to cover their rest mat.

Observations and Research

Periodically, child care professionals, health care professionals and students request opportunities to observe young children; they are interested in typical behavior, developmental skills, and/or how children interact with peers/adults. All requests are with the consent of the Site Director and are scheduled in advance.

A consent form will be given to the parents explaining the reason for the observation, the name and background of the person requesting the observation and the date/time of the observation. Parents reserve the right to deny permission. Unless written on a consent form, an observation will mean that there is no interaction between the child and the observer and no identification of the individual child.

Parent Information Area

There is a parent information area located next to the front entrance to the side where we post information regarding parent workshops, classes for children, and other events happening throughout the community.

Photographs

No outside agency will be allowed to photograph the children without parental consent. The staff reserves the right to photograph or videotaping of the children during a special event. Please inform the Site Director if you do not want your child to be photographed, and post in social media.

Caring for Children with Special Needs

Camilla's Daycare accepts applications for children with special needs. We realize the benefits of supporting children with special needs and attempt to accommodate these children if appropriate and helpful for them; however, can

only provide such services as are reasonable and beneficial to the class as a whole and do not cause undue burden to the program, staff and other children. It may be necessary to turn down an application for enrollment or to terminate continued enrollment of a child with special needs when to do otherwise would jeopardize the safety and wellbeing of the child, the other children in the classroom and/or the staff. Communication is the key aspect to successfully support a child with special needs. The parents, teachers and specialists who work with the child with a disability are all equally involved in sharing information, communicating their needs and listening to each other.

Supervision of Children

Site Directors, Assistants, Substitutes, and classroom teachers are responsible for supervising the children assigned to their care at all times. Conducting regular and accurate name to face head-counts, including room and area sweeps, any time a child or group moves from one location to another, such as but not limited to: when a group is at an onsite or offsite playground, when a group is on a field trip or on a walk, to ensure children are not hiding or left behind.

Toileting and Diapering

In Camilla's Daycare , children are not required to be toilet trained by a specific age. We believe that a child should begin toilet training when he/she is physically and psychologically ready. Parents and teachers should be alert to signs of readiness, and together discuss an individual plan. We will continue the toileting process here once it has begun at home. Children must be ready to participate willingly if the process of toilet learning is to be a positive one and, to this end, the side cannot and will not force a child to use the toilet. Children in diapers are changed every other hour and on an as needed basis.

Toys From Home

We ask that children's toys stay at home, unless they are brought in for a pre-arranged sharing at group time. Toys from home are difficult to share at other times, and we cannot be responsible if they become lost or broken. We realize that this is sometimes very hard --leaving a toy in the car during the day is a tactic that

sometimes works if you can't leave the house without that special something. Comfort toys for nap are the only exception, and should be kept in the child's cubby, unless needed at "difficult" times.

Transportation

It is the policy of Camilla's Daycare, that staff does not transport children, If a medical emergency arises. children will be transported by ambulance unless in the reasonable judgment of the side providing transportation is medically necessary. The only person(s) allowed to transport children will be those noted on the child(ren)'s authorized pick up list.

School children who need transportation from school to care parent/guardian must sign a concern for transportation.

V. PARENT COMMUNICATION / PARTICIPATION / RIGHTS

Parent Participation

Parents are welcome to spend time in the classroom, visit for lunch, or share any talents they have with the children. Parents are always welcome with no notice required, but may want to notify the teachers when they plan to visit, so that the child and the group can be prepared for the visit. If your child is having difficulty with separation, please discuss with the teachers ways that would make parting easier. You may decide that extra visits during your child's first few weeks could make it more difficult for him/her to settle and adjust. Please discuss any concerns you may have with the side director

Conferences:

Parent-teacher, conferences are held on a regular basis to discuss your child's progress, adjustment to the center and other issues of concern to both parents and teachers. Toddler and Preschool teachers complete developmental progress reports for each child and conferences are scheduled twice a year. Infant teachers complete developmental progress reports every three months and schedule meetings with parents twice a year. If they wish, parents are welcome to schedule additional meetings with their child's teachers at any time.

The purpose of progress reports and conferences is to identify the children's interests and needs, to improve curriculum, to adapt teaching practices and the environment, as well as to plan for program improvement.

Newsletter

To keep you informed about center activities, upcoming events, reminders and general announcements, we publish a newsletters monthly. We urge you to read it carefully. You'll also find that the newsletter can serve as a good discussion starter when talking to your child about the latest happenings at daycare.

PARENT INFORMATION

Parental Input:

The daycare must appropriately involve parents of child in care in visiting the program, meeting with the staff and receiving reports of their children's progress. The program must have a procedure for allowing you to give input and make suggestions, but it is up to the program to decide whether or not they will be implemented.

Meeting with Parents

In group child care programs, the licensee shall assure that the administrator or his designee meets with the parent(s) prior to admitting a child to the program. The parents shall have an opportunity to visit the program's classrooms at the time of the meeting or prior to the enrollment of the child. In school age programs, the licensee shall provide and opportunity for the parents and child to visit the program and meet the staff before the child's enrollment.

Parent Information

The licensee must provide to the parents upon admission of their child the program's written statement of purpose, including the program philosophy, goals, and objectives, and the characteristics of children served; information on the administrative organization of the program, including lines of authority and supervision; the program's behavior management policy; the program's plan for referring parents to appropriate social, mental health, education and medical services for children; the termination and suspension policy; the nutritious snacks and meals; the program's policy and procedures for identifying and reporting suspected child abuse or neglect; the procedures for emergency health care and the illness exclusion policy; the program's transportation plan; the procedure for administration of medication, and, upon request, a copy of the complete health

care policy; a copy of the fee schedule, and in school age child care, the procedures for on-going parent communication. All of this information may be contained in a "Parent Handbook."

Progress Reports

At least every six (6) months the licensee should meet with you to discuss your child's activities and participation in the program. The licensee will prepare a written progress report for your child, will provide a copy to you, and will maintain a copy of the report in your child's file. If your child is an infant or a child with disabilities, you should receive a written progress report at least every three (3) months. Program staff must bring special problems or significant developments, particularly if they involve infants, to your attention as soon as they arise.

Children's Records

Information contained in a child's record is privileged and confidential. Program staff may not distribute or release information in a child's record to anyone not directly related to implementing the program plan for the child without your written consent. You must be notified if your child's record is subpoenaed.

Access to your child's record

You are entitled to have access to your child's record at reasonable times on request. You must have access to the record within two (2) business days of your request unless you consent to a longer time period. You must be allowed to view your child's entire record, even if it is maintained in more than one location. The center must have procedures governing access to, duplication of, and dissemination of children's record, and must maintain a permanent, written log in each child's record which identifies anyone who has had access to the record or who has received any information from the record. This log is available only to you and the people responsible for maintaining the center's records.

Amending your child's record

You have the right to add information, comments, data, or any other relevant materials to the child's record. You also have the right to request deletion or

amendment of any information contained in your child's record. If you believe that adding information is not sufficient to explain, clarify or correct objectionable material in your child's record, you have the right to a conference with the licensee to make your objections known. If you have a conference with the licensee, the licensee must inform you in writing within one week of his decision regarding your objections. If the licensee decides in your favor, he must immediately take the steps necessary to put the decision into effect.

Transfer of Records

When your child is no longer in care, the licensee can give your child's record to you, or any other person you identify, upon your written request.

PROGRAM RESPONSIBILITIES

Providing Information to the Office of children and family services (OCFS)

The program must make available any information requested by (OCSF) to determine compliance with any OCSF regulations governing the program, by providing access to its facilities, records, staff and references.

Reporting abuse or maltreatment

All daycare staff are mandated reporters. They are required by law to report suspected abuse and neglect to either the Department of Children and Families (DCF) or to the licensee's program administrator. The licensee must have written policies and procedures for reporting and must provide the written policy to you upon enrollment.

Notification of Injury

The licensee must notify you immediately of any injury which requires emergency care. The licensee must also notify you, in writing, within 24 hours, if any first aid is administered to your child.

Availability of OCSF Regulations

The program must maintain a copy of the regulations, Standards for the Licensure or Approval of Group Day Care on the premises of the side and must make them

available to any person upon request. If you have a question about any of the regulations, ask the side to show them to you.

Policy and Procedures on Child Abuse and Maltreatment

How does the New York State Department of Children and Families (DCF) define abuse and Maltreatment?

Under the Department of Children and Families regulations (416.10):

a) Any abuse or maltreatment of a child receiving child care or residing in the home, including the provider's children and any foster children, is prohibited. A group family day care home must prohibit and may not tolerate or in any manner condone an act of abuse or maltreatment by an employee, volunteer or any other person. An abused child or maltreated child means a child defined as an abused child or maltreated child pursuant to section 412 of the Social Services Law.

(b) In accordance with the provisions of sections 413 and 415 of the Social Services Law, caregivers must immediately report any suspected incidents of child abuse or maltreatment concerning a child receiving child care to the Statewide Central Register of Child Abuse and Maltreatment or cause such a report to be made when the caregiver has reasonable cause to suspect that a child coming before them in their capacity as caregiver in a group family day care is an abused or maltreated child. Such report must be followed by a written report within 48 hours, in the form and manner prescribed by the Office, to the child protective service of the social services district in the county in which

Abuse means

The non-accidental commission of any act by a caregiver which causes, or creates a substantial risk of, physical or emotional injury or sexual abuse to a child; or the victimization of a child through sexual abuse or human trafficking, regardless if the person responsible is a caregiver. This definition is not dependent upon location (i.e., abuse can occur while the child is in an out-of-home or in-home setting). DCF defines “sexual abuse” as any non-accidental act by a caregiver upon a child that constitutes a sexual offense under the laws of the Commonwealth or any sexual contact between a caregiver and a child for whom the caregiver is responsible.

Maltreatment means

Failure by a caregiver, either deliberately or through negligence or inability, to take those actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, emotional stability and growth, or other essential care, including malnutrition or failure to thrive; provided, however, that such inability is not due solely to inadequate economic resources or solely to the existence of a handicapping condition.

New York State law requires mandated reporters to immediately make an oral report to DCF when, in their professional capacity, they have reasonable cause to believe that a child under the age of 18 years is suffering from abuse and/or neglect. A written report is to be submitted within 48 hours.

Withdrawal and Termination

➤ Withdrawal

Parents must provide a minimum 30 days written notice for the withdrawal of a child for any reason. Parents will be responsible for tuition payment for these 30 days.

Suspension:

Partners Child Care Centers are employer-supported centers. A child's suspension may lead to an employee's inability to work with the child.

VI. HEALTH CARE POLICIES AND PROCEDURES:

Physical Examinations

A yearly physical examination, is required for each child at the center. In addition, immunization records must be kept current and submitted to the daycare upon receiving updates.

Medical Policy

The Site Directors work closely with a pediatric Health Care Consultant to determine medical policies and resolve medical issues affecting the children and staff at the daycare . A copy of the Health Care Policy may be obtained by parents through written request to the daycare Site Director.

Mildly ill children will be permitted to attend to daycare on their regularly scheduled days. For the protection of ALL children and staff, parents will be notified when their child presents with an undiagnosed condition, or is too ill to remain at care, and they will be requested to pick up their child immediately. Should a parent be unable to pick up their child within one hour, they are responsible for making arrangements for their child to be picked up by someone from their list of emergency contacts.

Criteria regarding signs or symptoms of illness, which will determine whether a child will be included or excluded from the center prior to morning drop off:

- If a child has a temperature of 100.4 * or higher, he/she will be required to stay out of the daycare until fever- free for 24 hours without the use of acetaminophen (Tylenol) or ibuprofen (Motrin or Advil).
- A child on antibiotics must be excluded from the daycare from the time of diagnosis until 24 hours after the first dosage.

Procedures for handling a child who has already been admitted to the daycare and exhibits symptoms requiring exclusion until he/she can be taken home:

The child will be kept in quiet isolated area in the classroom on a resting mat. All mats and sheets will be cleaned after the child leaves the daycare.

We have no separate facilities for long term care of a sick child, parents are asked to be especially aware of and plan for impending illness. If a child becomes sick while at the daycare , a staff member will contact the parent to ask that the child be taken home. We will ask parents to take their child home if we feel that he/she needs to see a doctor, if they present with an undiagnosed condition, is contagious, or has a greater need for individual care than staff can provide while providing care for the needs of other children. At the daycare , the child will be made comfortable on a mat in a quiet area away from the other children. Staff will provide the child with food and beverage as requested.

Some of the common conditions for which a child will be sent home are as follows:

1. Temperature - A child will be sent home if he/she has a temperature of 100.4 degrees or higher. The child must be fever-free for at least 24 hours without the use of acetaminophen (Tylenol) or ibuprofen (Motrin or Advil) before returning to

the center. His or her activity level and appetite should be back to normal as well. In cases of highly contagious illness associated with fever (such as the flu), the return to center timeframe may be extended to ensure the health and wellness of the child care center community.

2. Diarrhea - A child who has more than one instance of diarrhea (watery stools) will be sent home. Diarrhea is usually caused by viral infections however bacteria and parasites may be the cause. If your child has an allergy or condition that regularly causes diarrhea, please alert the staff to this during orientation. The child must be diarrhea-free for at least 24 hours before returning to the center. In cases of highly contagious stomach and intestinal illness (such as Norovirus), the return to center timeframe may be extended to ensure the health and wellness of the child care center community.

3. Vomiting - A child who is vomiting will be sent home and should remain home until vomiting has stopped. Most vomiting is caused by infection. Stomach viruses are highly contagious and can spread through the center very rapidly. The child must not have vomited for at least 24 hours before returning to the center. In cases of highly contagious stomach and intestinal illness (such as), the return to center timeframe may be extended to ensure the health and wellness of the child care center community.

4. Impetigo - This skin infection is characterized by crusted sores, which may appear anywhere but usually first in the facial area. When prescribed by a physician, children with this condition must have taken the prescribed antibiotics for at least 24 hours before returning to the Center and all lesions should be dry before returning to the Center.

5. Conjunctivitis - This is a contagious infection of the eye characterized by redness and tearing, a yellow discharge from eyes,oreyelashesstucktogether. Whenprescribedbyaphysician,children with this condition must have taken at least one dose of the prescribed antibiotics before returning to the Center, and all discharge must be gone.

6. Strep Throat - Is characterized by swollen neck glands and a temperature combined with a sore throat. When prescribed by a physician, children with this condition must have taken the prescribed antibiotics for at least 24 hours before returning to the Center.

7. Scarlet Fever - Is a strep throat with a rash, which is red and has a sandpaper feeling. Your physician should be consulted as to when your child should return to the center.

8. Chicken Pox - Children can attend the Center after exposure or during the incubation period (11-20 days after contact.) Your physician is the best person to consult if there is any doubt concerning your child's contagiousness during this illness. Please notify the Center if you suspect that your child has been exposed to chickenpox so that we may notify the other parents. The program will maintain a list of the children who have documented exemptions from immunizations and these children will be excluded from attending if/when a vaccine-preventable disease is introduced into the program.

9. Ear Infections (Otitis Media) - Ear infections are extremely common. When prescribed by a physician, children with this condition must have taken the prescribed antibiotics for at least 24 hours before returning to the Center.

10. Respiratory Infections - Are very common and usually are caused by viruses. It is advised that your child remain at home and if fever is associated with the infection, must be fever-free for 24 hours without the use of acetaminophen (Tylenol) or ibuprofen (Motrin or Advil) before returning to the center.

11. Head Lice - Is characterized by very itchy scalp and nits (white eggs) that resemble dandruff but can't be easily removed from the hair. Children may return to the Center after they have had one head lice treatment.

12. Scabies - Is a very itchy rash between the fingers, on wrists, under arms, at the belt line and in infants on the head, neck, palms and soles. The rash is caused by a mite. The child may return to the center after one treatment.

13. Hand-foot-mouth disease - Is caused by a viral infection. It is characterized by small ulcers in the mouth, blisters on hands and feet and sometimes near the genitalia and on the buttocks. The child is contagious until the fever is gone (typically 3-4 days) and must be fever free for 24 hours without the use of acetaminophen (Tylenol) or ibuprofen (Motrin or Advil) before returning to the center.

If a child is ill with a contagious disease (i.e., chickenpox, etc.) parents are to let the staff know so that other parents at the daycare may be informed. Daycare staff shall post notice of the type of communicable disease, symptoms, and precautionary measures that can be taken in addition to information on when an infected child can return to the daycare . In cases of highly contagious illnesses,

the return to daycare timeframe may be extended to ensure the health and wellness of the child care community.

Emergency First Aid Procedures

All staff are required to have current training in either Red Cross or EEC certified First Aid and CPR. In cases of minor injury, the staff will administer simple first aid and will notify parent(s) in writing about injury and treatment

Emergency Medical Procedures

Depending upon the severity of the emergency, the daycare will contact parents or authorized persons. Transportation to the hospital will be by either ambulance or police when time is of the essence, or if parents are not available. Should immediate transportation be necessary, the daycare Site Director or Assistant Director will accompany the child.

Administration and Storage of Medication

- Prescription Medication for Children: When prescription medicine is to be administered to a child at the daycare , the medication must be presented in the original bottle with a label affixed by the pharmacy or physician showing the child's first and last name, the dosage and schedule of administration, what the prescription contains, the date purchased and the physician's name. In addition, a medical authorization form must be signed by the parent in each case.

- Non-Prescription Medication for Children: When non-prescription medicine is to be administered to a child at the daycare , it must be accompanied by a medical authorization form signed by the parent in each case. In addition, a letter detailing the type of non-prescription medication and dosage signed by the child's physician must be on file at the daycare ; this letter must be renewed, signed and dated annually.

- Topical Non-Prescription Medication: Topical non-prescription medications such as sunscreen, diaper cream, petroleum jelly or other ointments may be applied to a child only with written parental authorization via a signed consent form. This form must be renewed annually.

When the above conditions have been met, administration of medication to children shall be limited to the Education Coordinator, Teachers or daycare Site Director. All medication is stored out of reach of children at all times. Parents must provide a medicine spoon that correlates to the measurement type listed on the prescription. After medication administration window is complete, all remaining medicine shall be returned to the parent.

We request that the Site Director or Teacher be made aware of any medication that is brought into the daycare , even if it is teething gel. **NO MEDICATION OF ANY KIND SHOULD EVER BE PUT IN A CHILD'S BOTTLE, CUP OR LEFT IN A CHILD'S BAG OR CUBBY.**

The daycare Site Director may ask to speak to your pediatrician for prolonged administration of medicines; if your child seems to have adverse effects from the medication or if there is a potentially contagious condition.

Procedure for Identifying Children's Allergies

The initial conference with parents and the enrollment forms establishes existing allergies. Teachers and assistants throughout the daycare are informed by the daycare Site Director of type of allergy, treatment, and if applicable, location of child's medication. Allergy lists are posted in each room. Children who develop allergies over the time present at the center will be added to the existing list of children with allergies.

PLEASE INFORM TEACHERS OF ANY FOOD EXCLUSIONS NOT RELATED TO ALLERGIES.

Emergency Contingency Plans

Evacuation Procedures

- 1) Staff will remove the children for whom they are responsible from the building. Floor plans indicating the evacuation route are posted by the doorway in each room. Sign in/out sheets will be taken.
- 2) They will go to the evacuation site: the tree, or Library
- 3) Daycare Site Director/Person in Charge checks all rooms including bathrooms.

- 4) At the evacuation site, attendance of children and staff is taken.
- 5) Staff will be prepared to move the children to another site. (Library)
- 6) A final decision to evacuate the area and/or to re-enter the building will be the responsibility of the commander on the scene of Albany Fire Dept. and Security Services.
- 7) Parents will be contacted if circumstances warrant.
- 8) Evacuation drills are conducted monthly.
The daycare fire alarm procedure is to provide for the safe and speedy evacuation of the building during an actual or suspected fire. Employees are aware of the closest fire alarm pull station and fire extinguisher in their work area as well as with the following fire rules.

Natural Disasters – Hurricane, Tornado, Flood, Blizzard, Earthquake, Pandemic

- 1) If a natural disaster is forecasted in advance, the daycare will close, open late, or close early based on the recommendations of the Governor, i.e. a State of Emergency.
- 2) If, during the day, the potential of a natural disaster was predicted with limited notice, the daycare Site Director/person in charge would contact security regarding the best place to keep the children and staff safe.
- 3) If a natural disaster occurs unpredictably, the daycare Site Director/person in charge would call for an evacuation (see above procedure); however, instead of bringing the children outside, the daycare Site Director should consider the safest alternative, i.e. the middle room of the building, etc.
 - a) If possible, the Security Dept would be notified of the situation. b) Proximity of kitchen and bathrooms would be considered.
 - c) Windows would be avoided.

Loss of Power, Heat, Water

1) The daycare will be contacted fire department to report the situation and request immediate assistance. The loss of power would affect heat, hot water and light.

2) An estimate will be given of when the power, heat or water will return.

3) Based on the above estimate and weather conditions, the daycare Site Director, in consultation with the Director of Child Care Services, will determine whether to close the Center. If the daycare does need to close, the daycare Site Director will call the parents as soon as possible.

What you can expect from Partners Child Care Services

- An open door policy which welcomes you to visit your child any time during the day;
- A caring, loving, warm atmosphere;
- Well-informed, knowledgeable staff who have been trained to work with the age group to which they have been assigned;
- A carefully designed, responsive and developmentally appropriate curriculum;
- Daily communication regarding your child;
- Opportunities for parent participation;
- Collaborative relationships between parents and staff members which foster children's development both at home and in the center.

