# PARENT HANDBOOK





### **Our Center**

Offering one of the finest and most progressive early childcare programs where children may have the opportunity to explore and develop their own unique individuality.



### **Our Policies**

These policies are provided for the benefit of all concerned, and to aid in better understanding and communication between you, the parent, and your child's caregiver.



## **Our Objective**

We want children enrolled at our school to feel secure and cared for at all times and havea safe, loving, and stimulatingenvironment for growing and developing.



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## **WELCOME TO THE FAMILY!**

The management and staff of The Children's Center at Cookeville Regional Medical Center welcome you to the family. We trust that the time your child spends at our center will be a happy and fulfilling experience.

We look forward to partnering with you, in creating the very best opportunities, funfilled moments and precious memories that will remain with your children for life.

The Children's Center at Cookeville Regional Medical Center offers affordable, high durability childcare for the children of its employees and the community.

This handbook will provide a program overview stressing our purpose, policies and objectives. We pledge to offer one of the finest and most progressive early childcare programs for young children in the area. Thank you for selecting The Children's Center. We look forward to spending these precious years with you and your child.

Staff at The Children's Center are always available to discuss any questions or respond to any concerns you may have. Please feel free to approach the staff at any time.

Please take the time to read through this handbook as it will give you an insight into the philosophy, goals and routines within our center. It will also explain our policies to aid in the smooth transition into the center.

We are open
Monday through Friday,
52 weeks a year
and closed on
designated holidays.
Hours are
6:15 am to 5:30 pm for
non-CRMC employees.
CRMC employees
have until 6:00 pm
to pick up their child.

#### **Purpose**

The Children's Center will ensure that top quality childcare is offered including developmentally appropriate curriculums, high nutritional standards, a sanitary environment, social and emotional enrichment and frequent parent communications.

#### Our center provides:

- Developmentally appropriate curriculum
- High nutritional standards
- · Sanitary environment
- Social and emotional enrichment
- Parent communication
- Infant Program ages 6 weeks to 1 year
- Toddler Program 12 months to 36 months
- Pre-School Program 3 to 5 years

Our curriculum will be a broad outline of material to which your child will be exposed. The teacher will use the curriculum as a guide to develop lesson plans outlining some of the various activities that will occur each day. Lesson plans will be sent home via e-mail to allow families to be more involved. If e-mail is not an option, hard copies will be placed in your child's cubby. The lesson plan will help you stay informed of activities and happenings. We use the Tennessee Early Learning Developmental Standards (TN ELDS) as a guide in all our curriculum planning.

#### **Academic Excellence**

Children come to us with the wonder and the will to learn. They need to enter school with the skills and desire to think for themselves, solve problems, work with others, communicate and gain an increasing understanding of how the world works.

Our goal is to prepare every child to:

- Be ready to learn to read: armed with the desire, the vocabulary and the language skills they have developed through experiences that are meaningful to them
- Use the social skills to perform in a school classroom: listening skills, self-discipline, patience, discipline for the task, ability to work with others and ability to solve problems.

#### **Learning Environment**

The daily schedules, learning centers and the way learning is incorporated into classroom furnishings are all carefully planned to allow children to independently explore, discover and learn in preparation for academic success. The routines and environment are organized to teach: colors, symbols and language. Teachers prepare and rotate the learning centers and provide large and small group experiences, extended projects and field trips to enrich the children's learning.

#### **Program Enhancements**

Special activities (e.g., storyteller, animals or a fireman) may be brought into the center to supplement the program. You will be notified in advance of any special activities.





## **Settling In**

Our first priority is that your child enjoys a seamless transition from home-life into our center. In order to achieve this, we tailor "settling in" according to your child's individual needs so that we may provide them with a consistent routine and high level of care.

Our educators play an active role in this process, by gathering information from you ahead of time so that we are fully prepared to meet any special requirements or expectations that you and your child may have.

Upon arrival, you will be welcomed by a primary educator, who will assist in settling your child. They will also help alleviate any feelings of uncertainty or anxiety that may arise.

We encourage you to spend time with your child so that you both feel relaxed and comfortable within our center. You are more then welcome to phone us during the day to check on your child's progress, and we will contact you directly if any issues arise.





### **We Are Partners**

At The Children's Center, we value the great benefit to children when parents and educators work together as a collaborative team. Our 'open-door policy' greatly facilitates this important partnership, as does our full calendar of family events such as Christmas parties and graduation ceremonies.

Family involvement, family satisfaction and shared decision-making about your child's experiences, as well as support of family life, are essential to The Children's Center program. We believe the center forms a caring and learning community in which families, staff and children can interact and grow.

We believe the key to family involvement is giving families a variety of ways to be involved in the life of their child at the center. Families who use our center are almost always very busy people and will have limited time to participate. We do not want families to feel guilty about the choices they have to make around involvement.

The following are some of the many ways you can be involved:

- The center's open-door policy welcomes and encourages you to call or visit any time.
- An annual survey allows you to rate and comment on all aspects of the program.
- Center wide activities will occur during the year that you may attend and be involved in.
- We encourage you to share your ideas and concerns with us at any time.
- You are invited to come into your child's room and may choose to share a special activity or project.
- You are welcome to join your child for lunch any time you wish.



#### Parent-educator communication

Information regarding your child's day will be documented daily. This includes details of sleeping habits, toilet practices, child's response to the day and any health and safety issues that may have arisen.

We are committed to creating a strong home and center connection by developing a process of open, honest communication with you regarding your child's development and experience at the center. This includes a continual exchange of information between you and the center staff and management.

Weekly and monthly formal and informal communication takes place through vehicles such as morning and afternoon greetings, bulletin boards, center calendars, newsletters and conferences. Bulletin boards may be located throughout the center (in the foyer, hallways and classrooms) to communicate news, daily events, staff changes, holiday closing dates, etc.

We use the Ages and Stages Assessment that allows parents and teachers to be involved in the assessment together. We schedule two-parent/teacher conferences per year to share observations and to create an accurate picture of your child's development.

The goals of the assessment and conference are intended to:

- assist you and the teachers in optimizing your child's experience
- provide a shared picture of your child's development
- provide a shared vision for the future
- identify any questions or concerns that you or the teachers may have and any changes that may be necessary in the child's routines and/or the program

The Children's Center seeks responsiveness to the needs of your family. The supports offered to you include: family resource library, photographs, social functions, eye screenings, and childcare during center-wide meetings.





## Your Child's Health and Safety

The Children's Center maintains stringent health and safety practices. Policies are based on Department of Human Services rules and regulations.

The Children's Center security measures promote indoor and outdoor safety on the center grounds. We provide our own security keypad system/secured access, ensuring that access is available only to parents/guardians and authorized personnel. To make certain that the center is kept as secure as possible, we ask that you not allow others to "piggyback" on your entrance or enter the center upon your departure. Center management will review the center's security program with you upon enrollment.

#### Signing a child into and out of the center

To ensure that each child is safe and supervised at all times and to foster daily communication between families and staff, a parent or authorized guardian must accompany each child into the center and ensure that the child is under supervision before leaving the premises. Parents/guardians are responsible for checking their child in and out each day on the computer at the front entrance.

Children will be released only to a parent or to persons whose names are listed on the Child Release Form.

Families should advise the center's director in advance, in writing or a phone call, if alternate, or a person not listed on the original form, is to pick up their child. For the safety of the child, photographic identification will be requested of all authorized persons picking up children.

The Children's Center cannot legally deny access to a parent or guardian unless there is an active restraining order on file or a specific schedule of court-ordered visitation rights that prohibits this. The Children's Center staff will act in a way that always ensures the safety of all children and staff.

#### **Medical Records**

In order to ensure and protect the health of all children, and to satisfy childcare regulations, we need current medical information on each child **prior** to enrollment. The center management will provide you with the specific information required. It is the parents responsibility to keep all records current including immunization and pick-up lists updated.



#### **Allergy Prevention**

Families are expected to notify the center regarding children's food or environmental allergies. A list of children's allergies is posted in the child's classroom and a center list of children's allergies is posted in the kitchen. Faculty are trained to familiarize themselves with the allergy lists and to consult the lists as appropriate to avoid the potential of exposing children to substances to which they have known allergies.

#### **Communicable Diseases**

The Children's Center will give serious consideration to all recommendations made by the public health agencies and our infection control nurse in order to ensure the health and safety of staff members and the children and families we serve. When The Children's Center is notified that a child enrolled, or an employee, has a (suspected) communicable disease, it is posted in the center for parental review.

#### **Infection Control**

All teachers are trained with regard to proper hygiene practices, which include hand-washing procedures, general infection control, safe food handling and diapering and toileting procedures which are posted in each classroom.

The following duties are performed on a regular basis:

- Infant toys are washed and sanitized with a bleach solution daily, or after they have been mouthed.
- · Classroom furniture and equipment is washed and sanitized daily, or more often if needed.
- Crib sheets and machine washable fabric toys are washed on a weekly basis or more often if needed.
- Blankets and washable toys that belong to children are sent home at the end of each week for washing.

#### Health

It is common for babies to have 8-10 illnesses a year and preschoolers almost as many. Illness of children in childcare is a difficult and frustrating problem for staff, families and children! It is inconvenient for the family member who has to leave work and for staff trying to care for a sick child. Everyone shares a concern for the child's well being, and it is easy to get frustrated under the circumstances. We are committed to developing policies that respect the needs of children, families and staff.

Children will be excluded from the childcare setting for the following reasons (this list covers most common illnesses, but is not inclusive of all reasons for exclusion):

- Illness that prevents the child from participating comfortably in program activities.
- Illness that results in a greater need for care than our staff can provide without compromising the health and safety of other children.
- Fever (100° axillary)
- Diarrhea Two stools that are uncontrolled, unformed stools that cannot be contained in a diaper/ underwear or toilet.
- Vomiting Two or more times
- Rash with fever or behavioral changes
- Conjunctivitis (defined as pink eye)
- Mouth Sores with drooling unless the child's physician has determined the illness not to be a communicable disease
- Flu
- Scabies • Pinworm
- RSV
- Chickenpox
- Ringworm
- Strep Throat
   Rash
- Croup
- Head Lice / Impetigo
- Rubella

We ask that for your child's comfort and to reduce the risk of contagion, children be picked up within one and a half hours of notification.

#### Children who have been excluded may return:

- **Fever** free of fever for a full 24 hours without medication
- Diarrhea a regular bowel movement and after a full 24 hours from the center
- Vomiting no vomiting and after a full 24 hours from the center
- Flu no less than five full days from time of diagnosis
- **RSV** no less than three full days from time of diagnosis
- Thrush after a full 24 hours on medication
- Conjunctivitis after a full 24 hours on medication and no drainage
- Slap Cheek after a full 24 hours and no fever
- **Head Lice / Scabies** after treatment and child's head is nit free (children will be checked upon return to the center)
- Strep Throat return after 24 hours on medication and no fever
- Chicken Pox until all lesions are crusted over and no fever
- **Rash** with fever or behavior change until a physician has determined the illness not to be a communicable disease
- Impetigo 24 hours after beginning treatment
- **Pinworm** 24 hours after beginning treatment
- Ringworm 24 hours after beginning treatment
- Croup fever free for 24 hours
- Rubella seven days after the rash appears

All of the above is subject to the child feeling like participating comfortably in all usual program activities, including outdoor time.

## The final decision whether to exclude a child from the program will be made by the childcare center.

If your child is sent home from the Children's Center you will be given an "Under the Weather form" a copy of which is kept at the center. If a child appears to have chronic or returning symptoms or a communicable disease such as strep, pink eye, impetigo, ear infection/ sinusitis, thrush (yeast infection) or has undergone surgery or been hospitalized, a return to group care form signed by a physician must be completed before you child can return to the program. Again, our aim is to keep all our children, families, and staff as healthy as possible. We do appreciate your cooperation and assistance in enforcing our policies.

#### Medication

#### The Children's Center does not administer medication except the following:

- Infant gas drops and teething medication. A medication form will need to be filled out by the parent.
- We will only administer Tylenol when children have had immunizations in the past 24 hours. We must have signed form from the child's physician stating child's name how much to give and how often to give. This form can be faxed to 783-2747.
- Breathing treatments if stated by a physician needed more that twice a day. We ask parents to give the morning and night treatment and we will administer the mid-day one.





## **Children's Center Policies**

There is a waiting list for most age groups. Waiting list priority is given to the children of Cookeville Regional Medical Center employees and siblings of children enrolled at The Children's Center.

#### **Enrollment**

In order to ensure appropriate staffing levels at all times of the day, you will need to provide specific hours of care needed for your child. Prior to your child's start date, please feel free to schedule as many visits as necessary to help familiarize you and your child to the center. This is an excellent way to help your child feel comfortable in the center setting.

Forms must be completed regarding your child's health and development. These forms include family information, a medical authorization and a developmental history. An updated physical and immunization record is required for your child prior to enrollment. You are also expected to read and sign an enrollment agreement that outlines the program's policies. This will ensure that you are familiar with all of our operating procedures. **DHS requires that all forms must be completed and returned to the center before your child can begin.** 



#### **Positive Guidance**

Children are accepted as they are; development is viewed as a process of growing, with each age and stage having its own characteristics, its own challenges and needs. Adults view discipline as an important aspect of teaching and learning. Through positive guidance of behavior and modeling, staff helps children to feel good about themselves and to behave in responsible ways. In our approach:

- Expectations are limited to what is realistic for the developmental level of the child, and they are clarified for children so that they understand what is expected of them.
- A "yes" environment is created, which enhances and encourages children's positive behavior.
- · Teachers model appropriate behavior.
- Teachers encourage children's efforts to build feelings of self-worth.
- Children are given alternatives, which enable them to turn destructive situations into constructive ones.
- Natural and logical consequences are used to motivate and empower children to make responsible decisions about their behavior.
- Behaviors such as cooperating, helping, negotiating and problem solving are encouraged.
- When all other avenues have been tried a child may need to sit quietly for a moment to calm down and regain self-control.

When incidences of aggression occur, parents of the children involved are informed of the incident and of any specific information pertinent to an understanding of the situation. The identity of the child who engaged in aggressive behavior is not revealed. Our policies are intended to demonstrate the utmost respect for every child and family we serve. We place a high value on the confidentiality of each child. Our policy is consistent with what we know to be the standards for excellence in early childhood education, and it is one practiced consistently by other high-quality childcare organizations.

If, in our judgment, any child's behavior places in jeopardy the well-being of other children, we will act quickly and decisively to resolve the situation (e.g., through closer supervision, anticipating situations likely to lead to frustration and aggression, redirection to more appropriate activities, removal from tense situations, firm and consistent limit-setting, providing alternative outlets for the expression of feelings, etc.). If after exhausting our resources in finding a successful solution to the problem, the aggressive behavior continues, we may consider it to be in the best interest of all children involved to ask the parent of the child who is exhibiting consistently aggressive behavior to withdraw from the program. Our commitment is to provide a quality-learning environment for every child, and we will honor that commitment unless it becomes apparent that we are not able to provide the most appropriate learning environment for a particular child.

#### Rest

Toddlers and older children will have an afternoon rest period after lunch. The center provides rest cots and sheets. Your child may bring a special blanket from home. We will send home your child's nap time blanket the last day of each week to be washed.



#### **Confidentiality**

It is The Children's Center's policy that any information regarding a child, a child's family or other matters discussed with the center management or staff will be held in the strictest confidence.

The information in your child's record is considered privileged and confidential. Anyone who is not directly related to the care of your child, or with center management or the state licensing agency, will not have access to the record without your written permission.

#### **Meals and Snacks**

Breakfast, lunch and all snacks will be provided by CRMC. Meals and snacks are carefully planned to provide children with the necessary nutritional content. A board is located in the front entrance to inform you of the daily lunch and snack menu.

We ask that no food be brought in from home. You may bring in a snack if you would like to provide enough for your child's entire class.

Families whose children have special dietary restrictions need to meet with the director and lead educator to discuss.

#### **Clothing**

Dress your child in play clothes that wash easily, so that your child may enjoy all the activities. The children are involved in active and sometimes "messy" play and go outdoors daily, it is important that they are dressed appropriately.

Please put your child's name on all clothing and footwear. Clothing will be kept in each child's cubby and used as needed.

#### Items important for each child may include:

- a favorite
   nap-time blanket,
   pillow or stuffed
   animal small
   enough to fit in
   their cubby
- diapers
- pacifiers
- a bag for sleep gear (for health reason)

Sandals, crocs, loose shoes and cowboy boots are all unsafe in a childcare setting and are not allowed.

#### **Sun Protection**

Our center takes care to protect the children and educators from direct exposure to the sun. This is extremely important as children are very vulnerable to sunburns, which can increase their chances of acquiring skin cancer by almost 50%. The center does not provide sunscreen and does not permit aerosol types of sunscreen due to children and staff with asthma. Sunscreen will not be applied to any child without prior written permission. Please provide sunscreen with your child's name clearly labeled.

#### **Birthdays**

If you wish to celebrate your child's birthday during afternoon snack time at the center, please discuss your plans with the educator. The educator can advise you of any food allergies or scheduling conflicts.

#### **Balloon Policy**

The Children's Center allows only Mylar Helium Balloons. Latex and rubber balloons are prohibited due to the potential threat of aspiration.





## The World of Infants and Toddlers

The first three years of life are an extraordinary time that set the stage for all the years that follow. From birth, babies are marvelous learners, immediately investigating the sights, sound and feel of the world.

The Children's Center provides infants and toddlers with what they need: a safe world rich with opportunities to actively explore and enjoy: to see, hear, feel, touch and move. They need a world filled with responsive interactions and language: many "conversations" with others, books (for even the youngest babies), songs and lots of listening and responding to their vocalizations and words.

#### **Transitions**

As your child grows and matures he or she will transition from one classroom to another. We strive to make these transitions as stress-free as possible for both you and your child. You will be notified and given a welcome packet in advance if your child will be transitioning to another room. Both classrooms work together to devise a visitation schedule for your child so that they will not be a stranger when they officially move.

#### **Infant Sleep Position**

At The Children's Center, your infant's health is our primary concern. The policy of DHS the agency that licenses us is that all children in a childcare setting will be put in the crib on their backs to reduce the chance of Sudden Infant Death Syndrome (SIDS). **To comply with DHS the Children's Center will put all infants who sleep in a crib on their backs.** 

Every child is "touched" every fifteen minutes while sleeping as a safety measure against SIDS.

#### **Daily Routines**

- Send a bottle and formula for each feeding (we can not reuse bottles during the day)
- 5 to 6 bottles are enough for a 10-hour day. Your child's bottle should be plastic and capped and all bottles and caps should be clearly labeled with your child's full name. All bottles will be sent home at the end of the day
- Until the child is able to eat table food and drink milk, it is the parent's responsibility to provide for their child's needs. Supplies of food and formula must be labeled. (Open jars of baby food or foods prepared at home are not accepted.) Foods that are opened at the center will be stored, dated and used within 48 hours. The child will be fed from a bowl and not from a jar.
- In order to maintain consistency from home to the center, and meet the individual needs of children, babies will eat according to their own schedule. For older infants and toddlers, the center will supply all snacks (e.g., crackers, fruit, snacks, juice, etc.).
- · To comply with DHS we do not use infant feeders
- Each child needs to bring 3 medium bibs at enrollment to keep at center.

#### **Biting**

Biting is a normal stage of development, commonly seen in infants and toddlers, and sometimes even among preschoolers. It is something that almost all young children will try at least once. When it happens, it's scary, frustrating and very stressful for everyone involved. It is a natural behavior to some children and not something to blame on children, families or teachers.

Brief episodes of biting do not mean that a child is having a social or emotional problem. It does mean that your child is going through that particular stage in his or her development. As with all stages that children go through, biting soon ends.

#### Biting may occur for any of the following reasons:

- Oral Expression
- Hunger
- Lack of awareness that biting hurts
- Inability to express feelings or needs verbally
- Inexperienced peer interactions
- Exploring holding on and letting go of relationships
- Excitement and over-stimulation

- Teething
- Fatigue
- Frustration, anxiety or stress
- · Mimicking behavior
- A way of showing affection
- Impulsiveness and lack of self-control

When biting happens, our response will be to care for and help the child who was bitten, help the biter to learn other behavior and examine our program to maintain an environment that is consistent with children's needs. Our focus will not be on punishment for biting, but on effective techniques that address the specific reason for biting. The child will not understand delayed punishment at home.

A "tear stain" report will be written for the child who was bitten. We will work together with the families of the biter and the bitten child to keep them informed and to develop strategies for change. We will make every effort to modify the behavior quickly.



#### **Toilet Learning**

Learning to control one's bodily functions is a childhood rite of passage, and it is of no small concern to all the adults in a child's life—at home and at the center. The most important factor in making this experience successful and as low stress as possible is family/teacher partnership that supports the child. There are different views on the when and how of toilet learning, and different cultures approach it differently. Research indicates that young children cannot successfully learn how to use a toilet until they are physically, mentally and emotionally ready. Most pediatricians say that most children under 24 months of age are not physically capable of really regulating bladder and bowel muscles. Thus, toilet learning is generally most successful when it is started around that age or later. Most positive toilet learning will occur only after children show signs of physical control (or awareness) of their bodily functions and when they demonstrate an interest or curiosity in the process. The Children's Center's toilet learning procedures follow the American Academy of Pediatrics guidelines. Staff will work with your child to make sure that toilet learning is carried out in a manner that is consistent with your child's physical and emotional abilities and your family's concerns.

Children that are not potty trained must supply a sufficient amount of diapers, a canister of diaper wipes and diaper rash cream. An authorization for medication form must be filled out by the parent and left with the diaper cream.

These guidelines will be followed:

- · Children will be praised for their efforts and accomplishments.
- Toilet learning shall not be forced. Individual developmental abilities of each child shall be considered.
- Children shall not be punished emotionally or physically for soiling, wetting or not using the toilet.
- Families should provide sufficient extra clothing for their children.
- To be successful when the process starts we require no pull-ups. (From years of experience we have found this only hinders the learning process.)

Clothing soiled with stool could be a health hazard unless properly cared for. Stool will be emptied in toilet. After stool is removed, clothing will be placed in a plastic bag and tightly sealed. The bag will be put in a place away from the child's reach for the parents to take home. This method of caring for soiled clothing will reduce disease-carrying germs and help maintain the other children's good health.





### **Fees and Tuition**

CRMC employees' childcare fees will be deducted from payroll checks.

Non-CRMC employees' payment is due on Monday of each week. If payment is not made on time a \$5.00 per day late fee is added until payment is made. If fees become two weeks delinquent the space can no longer be reserved and a child can no longer attend the center until the balance is current.

#### **Fees**

Infants \$165.00 per week (\$33.00 a day)
Toddlers \$150.00 per week (\$30.00 a day)
Preschool \$140.00 per week (\$28.00 a day)

A \$35.00 fee will be charged for returned checks. CRMC will have the option to refuse any future checks.

Childcare fees can only be prepaid for one month in advance. If prepayment is made and your child leaves CRMC Children's Center before the funds are used, the remaining prepayment is forfeited.

#### **Multi-Child Discount**

Families with more than one child attending shall receive a multi-child discount with the

youngest child paying full price, the oldest receiving a 10% discount and any child in between receiving a 10% discount.

#### **Activity Fee**

A yearly activity fee of \$52.00 is broken down through \$1.00 weekly increments which is added to your weekly fees.

#### **Late Fee**

It is important that children be picked up at their scheduled time of departure. A late fee of \$1.00 per minute will be charged if a child is picked up after the center's closing time 5:30 p.m. for non-CRMC employees. CRMC employees have till 6:00 p.m. before the \$1.00 per minute will be charged.

#### **Holidays**

The Children's Center will be closed during the following holidays: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day/ the following Friday and 2 days at Christmas. If a holiday falls on a weekend the day off will be the same day CRMC observes. Christmas Eve is a discretionary holiday or may close early based on need.

#### **Paid Holidays**

New Year's Day Memorial Day Fourth of July Labor Day Thanksgiving Day Christmas Day

#### **Absences**

If your child is going to be absent or arrive after 8:30 a.m. please let us know. This is necessary to get a count for lunch and to make sure we are staffed accordingly.

#### **Leave of Absence**

There are times when a child may not attend the center for a period more than the normal vacation time (e.g., birth of new baby or parents are off for the summer etc.) Regular fees will apply while the child/children are not attending to hold the position.

#### **Inclement Weather**

In the event of inclement weather, CRMC Children's Center will make every attempt to open as usual. However, to preserve the safety of our staff and children we will close if conditions warrant such action. It is at the discretion of the hospital's administration to make the decision to close earlier or open later due to natural disaster (i.e. snow, ice). The Children's Center will contact families by telephone, text. Regular fees will apply.

If the center is open, but because of severe weather and/or road conditions administration decides to close early, families will be notified by phone. Regular fees will apply.

#### Withdrawal From The Center

Because our program is based on developing partnerships and supporting families, it is only on rare occasions that a parent's actions/requests may warrant the need to find a more suitable setting for themselves and their child.

#### Some examples of such instances include:

- The parent/guardian fails to abide by the center policies or those requirements imposed by the appropriate licensing agency.
- A parent/guardian demands special services which are not provided to other children and which cannot reasonably be delivered by the program (including requests that are outside the philosophy of the program).
- A parent/guardian is physically or verbally abusive to center staff, children or anyone else at the center.
- In case of withdrawal there must be a 2-week notice prior to departure or the equivalent amount of childcare fees will be expected.



#### Staff

The Children's Center strives to provide a well-trained staff of professional caregivers. These caregivers are selected through a careful process of interviews. References are contacted to ensure both professional work conduct and excellence in childcare. Complete physicals are required to be on file for each staff member. All staff undergoes an in-depth screening and hiring process, including background reference checks and F.B.I. fingerprinting and drug screening. Drug screening is done on a random basis throughout their employment. At all times there will be a staff member on location that is certified in CPR and First Aid. Staff members must meet required childcare inservice hours outlined by state requirements and must comply with current CRMC inservice.

Each child at the Children's Center is assigned a teacher as the primary caregiver who assumes special responsibility for that child and for communication with his or her parents.

Teachers or primary caregivers strengthen the link among families, children and teachers. By assigning a primary caregiver to your child, we are encouraging you to establish a relationship with a particular staff member who will be especially focused on your child's needs and development and your concerns. At the same time, we are a team and responsibility of care belongs to all the staff on your child's team. They will interact with and provide learning experiences for every child in that classroom.

Teachers are the members of the center team who provide the environment and experiences from which children learn. They create experiences appropriate for each child, ask stimulating questions, provide challenge and help children find new answers and new opportunities. Teaching also involves helping children achieve the confidence and self-discipline to develop increasingly more sophisticated social and intellectual skills and knowledge that prepares them for success in school.

#### Fire and emergency policy

Fire drills are held at the center once a month. Fire extinguishers are strategically located throughout the center. Disaster drills such as tornado drills are routinely done throughout the year. A head count is completed during a drill. This is why it is important to ensure that you sign your child 'IN' and "OUT' of the center each day.

#### **Reporting Abuse and Neglect**

Individuals working with children are required by law to report cases to the appropriate state authorities if they have reasonable cause to believe or suspect a child is suffering from abuse or neglect or is in danger of abuse or neglect. It then becomes the role of DCS to determine if the report of abuse or neglect is substantiated and to work with the family to ensure the child's needs are met. The Children's Center of CRMC will cooperate fully with any investigation and will maintain confidentiality concerning any report of suspected child abuse or neglect. Our concern is always the protection of the child.

#### **When Good Things Happen**

Tell us! Compliments reinforce the good things that are happening in the child's life, either at home or, at the center. Keeping in touch and working together is the best way to ensure a high quality education for our children, and to help ensure their success not only in the center and the early years, but also in life.

At anytime if you have concerns or questions about your child or their care you may talk to your child's teacher or the director. We know that for your child to have a good experience here at The Children Center that communicating will need to be top priority between staff and parents.

Remember we have an open door policy for families at all times. Above all we hope to get to know you and to offer you and your child a safe, caring and discovery – filled environment.



### **Gold Sneaker Policies**

#### Policy 1.1:

Children ages 12 months or older attending a full day program shall be offered at least 60 minutes of physical activity per day, either indoors or outdoors. Children attending less than a full day program shall be offered a proportional amount of such activities. For children ages three and older, this physical activity must be a balance of free play, teacher-directed activities, and music and movement.

#### Policy 1.2:

Viewing of television, videos and other visual recordings shall be limited to no more than 60 minutes per day of educational programs or programs that actively engage child movement. Children attending less than a full day program shall be limited to a proportionate amount of such viewing.

#### Policy 1.3:

Children shall not be allowed to remain sedentary or to sit passively for more than 60 minutes continuously, except for scheduled rest or nap time.

#### Policy 1.4:

Child care facilities must ensure physical activity is a positive experience for children and is never used negatively or to control behavior.

#### Policy 1.5:

Ensure appropriate infant and child feeding patterns, including breastfeeding. Staff will be sensitive to breastfeeding mothers and infants, and their eating patterns. Each infant will have a feeding plan on file, which is completed by the parent/parents and facility as a team to address their unique feeding patterns.

#### Policy 1.6:

Ensure appropriate infant and child feeding patterns, including adequate time for meal consumption. Adequate time for meals and snacks will be allowed for all children, and will be included in classroom schedules.

#### **Policy 1.7:**

Ensure appropriate infant and child feeding patterns, including appropriate portion sizes. Appropriate portion sizes will be assured through staff training and adherence to portion sizes as found in child care licensing regulations.

#### Policy 1.8:

All eating opportunities should consist of a respect for the child and promoting a positive attitude toward food. Food shall never be used as rewards for children.

#### Policy 1.9:

Child care facility campus shall be tobacco free.

The most effective way to help children adopt healthy behaviors is to provide consistent nutrition, physical activity, and health messages from different sources: at home, in school, and through the community. The motivation and opportunities to establish healthy habits begin at home and in child care settings. Together we can provide the best possible environment for the health and well-being of the children.



## **Statement of Understanding**

Please check the boxes indicated below to ensure that we have communicated all of the following:

# Please return to center with other paperwork

☐ I have received a copy of the Summary of Licensing Requirements for Child Care Centers.
☐ I hereby authorize release for emergency medical care in the case that I, or designated adults, cannot be reached.
☐ I have read all the information in the Parent Handbook and agree to abide by the policies and procedures that are outlined.
☐ I have had a pre-visit day and orientation of my child's classroom and center.
☐ I give my consent for my child's picture to be taken and used for center projects. I understand that from time to time pictures could be used in the hospital newspaper.
☐ I understand that child care fees will be payroll deducted (CRMC employees only).
My Child (name)
will begin on (date)
The drop off time will beeach day.
The pick-up time will beeach day.
Signature:
Date:

Information contained in this guide may be subject to change.











