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Meriden New Britain Berlin YMCA Parent Handbook

New Britain YMCA Little Scholars

New Britain YMCA Childcare Academy

New Britain YMCA Childcare Center

Little Huskies

Little Spartans Preschool

Little Hounds Preschool

Little Panthers Preschool

Meriden YMCA Infant & Toddler Learning Center

Meriden YMCA Early Learning Center

Meriden YMCA Little Rascals Day Care

Meriden YMCA Martin Gaffey Child Care Center

Meriden YMCA Preschool

Meriden YMCA Toddler Care



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Meriden New Britain Berlin YMCA Child Care Philosophy

The MNBB YMCA Child Care Programs are accredited Early Start and Child Care programs. These programs serve the community by providing a proven, safe learning environment in the classroom that makes it possible for teachers to teach and children to learn. We provide quality supervision outside the home for all children who are 6 weeks to 5 years old. The MNBB YMCA Child Care Programs create a comfortable, secure environment that allows each child to develop his/her sense of self-esteem, sense of belonging, and a sense of accomplishment.

These programs encourage all to develop a partnership with families, working together to support children's optimal development and learning. We want children to choose their daily activities. Our child care programs are designed to be comprehensive and based upon the fundamental factor of positive child development relative to physical, social, emotional, cognitive and language development.

Mission

Our mission is to provide all children with high quality educational programs in a safe friendly environment that will develop trust and self-worth, build awareness, confidence and self-esteem. We challenge children to accept and demonstrate the values of caring, respect and responsibility. We will develop a program that promotes family and community involvement which will enhance the well-being of our children.

1. MNBB YMCA Child Care Program Goals

The MNBB YMCA Child Care programs are designed to be comprehensive child care programs based upon the fundamental factor of positive child development relative to physical, social and emotional, cognitive and language growth. The YMCA programs will provide a comfortable, secure environment that allows each child to develop his/her sense of self-esteem, belonging, security, accomplishment, self-worth, and self-expression and have experiences that make each child feel unique while having fun. Program goals for the children include the ability to:

- demonstrate a sense of self as a learner;
- demonstrate a sense of responsibility;
- demonstrate effective functioning, individually and as a member of a group;
- demonstrate control, balance, strength and coordination in gross motor tasks;
- demonstrate coordination and strength in fine motor tasks;

Program goals for the children include the ability to:

- participate in healthy physical activity;



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- practice appropriate eating habits, hygiene, and self-help skills; through modeling of good health practices, sound nutrition and safety awareness
- demonstrate the ability to think, reason, question and remember;
- engage in problem solving;
- use language to communicate, convey and interpret meaning;
- establish social contacts as they begin to understand the physical and social world;
- use different art forms as a vehicle for creative expression and representation;
- Develop an appreciation of the arts.

1.1 Program Objectives

- Encourage independence through tasks & programs.
- Introduce children to new situations and provide children with support and comfort with these new situations.
- Introduce children to group activities through circle time, learning time, music, and story time.
- Provide children with new experiences.
- Encourage children and compliment children with their activities
- Provide children with experiences that provide children with fine motor skill development.
- Each staff member will encourage the development of self-esteem, security, belonging, accomplishment, and self-expression.
- Provide children with opportunities that enable them to increase physical skills.
- Encourage children to join each other through play, sports, sharing and cooperation.
- Provide children with opportunities to pretend and be creative through centers, art, play, activity and music.
- Provide children with plenty of activities that enhance language development through spontaneous conversation as well as experiences with books, poems, stories and songs.
- Provide teachers with professional development that will continue to impact the quality of the program. We encourage staff to continue their professional development by offering financial assistance, in-service programs and professional speakers to provide the most up to date and appropriate practices that will benefit children and program.
- Families will feel supported and nurtured in their child-rearing efforts.
- Children will experience growth and learning in their social-emotional, physical, language, and cognitive development.



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2. Program Operations

2.1 Hours of Operation

The Meriden New Britain Berlin Child Care Programs operate between the hours of 7:00am and 5:30pm, Monday through Friday.

2.2 Vacation Days/Weeks

The MNBB Childcare Programs will be closed in observance of the following holidays:

- New Year's Day
- Good Friday
- Memorial Day
- Juneteenth
- Independence Day (July 4th)
- Labor Day
- Veterans Day
- Thanksgiving Day
- The Day After Thanksgiving will be surveyed
- Christmas Eve
- Christmas Day
- New Year's Eve

Please note that some programs are closed for Christmas Break and the 3rd week in August for Professional Development. Check with the program coordinator for specific dates of closure for your program.

2.3 Open Enrollment/Admission Policies

The Meriden New Britain Berlin YMCA Childcare Programs are open to all children ages 6 weeks through 5 years old. The Meriden New Britain Berlin YMCA Childcare Programs are open to all children regardless of race, color, national and ethnic origin. We do not discriminate on the basis of race, color, national or ethnic origin in administration of our educational policies, admission policies, scholarship and loan programs or athletic and other school- administered programs. The YMCA Child Care Centers do not discriminate on the bases of religious beliefs or physical/mental handicaps. The MNBB YMCA attempts to make opportunities available to parents through marketing efforts, community events and community collaboration.

Families wanting to enroll their child into the MNBB Childcare Programs need to complete the registration packet. Vacancies in the program are filled on a first come



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first served basis. In addition to the child's application, a state issued health form, emergency permission slips, and parent handbook acknowledgement form must also be completed upon enrollment. **These forms are mandatory for the State of Connecticut and must be on file at the office BEFORE your child can begin this program.** Our staff collects documentation over time that informs their decision about instruction.

The following forms must be completed before a child can begin attending:

- Registration Form (to be updated yearly)
- Health Record (completed by the child's physician and needed every year) with the most up to date immunization record
- CACFP Income Eligibility form for the food program
- Alternate Persons Pick-up Authorization Form
- Policies and Procedures Form
- Medications Authorization Form (if needed)
- Individualized Health Care Plan (if needed)

Required forms must be submitted at least one week prior to enrollment. Records are kept on file in accordance with state law. The contents of each child's file are confidential. No information contained in a child's file will be released to an unauthorized person without the knowledge and written consent of the parents/guardians. At the written request of the parents, records can be forwarded to other child care providers, school systems, physicians, etc. Parents have the right to review the contents of their child's record. However, the records are personal property of the YMCA Infant, Toddler and Preschool Center. Full copies can be made upon request. The person giving consent or making requests for records MUST do so in writing and be the child's parent or legal guardian.

It is the parent's responsibility to keep all enrollment information up to date, such as changes in telephone number for home, work and cell. These changes must be submitted to the center in writing within 24 hours of the change or on the first day the child is back in the center.

Each child must have had all immunizations required by the State Dept. of Public Health mandated for licensed child care facilities, including the flu shot. A child must have had a physical examination within the year before entry into the Center. Yearly physical updates are required. Please ask the program supervisor for the ED191 Form. Program staff and nurse consultant tracks immunizations and physicals reviewing them on a monthly basis.

The MNBB Childcare Centers have a trial enrollment period of two months. At the end of the two months, enrollment shall be accepted as permanent. If a child is expelled from the program due to serious consistent behavior problems beyond the centers capabilities to handle the director will give the parents/guardians a 30 day notice, during this 30 day notice the director will also assist in finding an available suitable childcare center if needed. During the first 30 days of enrollment the program staff and director will observe each child in efforts to adequately plan



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lessons and activities for your child. During the assessment process the staff may also decide which classroom will best suit your child's needs.

We recognize toilet learning is a developmental milestone. A group care situation can be a great way to help the process along and we would like to partner with parents.

2.4 Open Door Policy (A.2.03)

The MNBB Childcare and Preschool Programs has an open door policy to assure you, the parents and your child that they are receiving the best care available while at our program. If at any time you would like to make an unscheduled visit to our facility, please do so.

2.5 Orientation to our Program

We are always happy to tell you all about our program and show you around the center. We would like to discuss our policies and handbook with each parent. We will provide opportunities for you and your child to spend time visiting. We want to assist you in making this transition as smooth as possible for you and your child.

2.6 Referrals (R.2.050)

Our mission is committed to providing **all** children with higher educational programs a safe, friendly environment that will develop trust and self-worth, build awareness, confidence and feelings of self-esteem. The MNBB YMCA Child Care programs are proud of our proven track record in meeting the needs of children and families. We have a close working relationship with the Meriden New Britain Berlin Health Departments, board of education, and our social services consultant. We offer a variety of screenings throughout the school year. Parents will receive prior notice of the testing times and dates. Parents also receive a copy of the reports from the referrals when we receive them.

Periodically throughout the year there will be times when we will be updating children's records that do not require parent's permission. Children's records are used to aid us in helping children in areas where help may be warranted.

We also hold parent and family workshops throughout the year to aid and inform parents and families about Care 4 Kids, immunizations, health, dental, nutrition and Husky medical insurance.

List of Community Resources: **Meriden Community Resources:**

SNAP PROGRAM

Department of Social Services
2081 S Main St B



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Middletown, CT 06457
1-860-704-3100

*Services: Helps low-income families buy food. Eligibility is determined on the income and resources of the individuals in the household.

Food Pantries:

NEW OPPORTUNITIES

74 Cambridge St
Meriden, CT 06450
(203) 639-5060 Ext. 10

*Services: Provides a summer food program for children in Meriden

Housing:

CARABETTA RENTAL

200 Pratt Street
Meriden, CT 06450
(203) 237-7400
Days/Hours: Monday-Friday 7-5 pm
*Service: Subsidized housing

Disabilities:

EASTER SEALS BIRTH TO THREE & REHABILITATION CENTER

158 State Street
Meriden, CT 06450
(203) 237-1448

*Services: Teams of therapists, teachers and other health professionals help each person overcome obstacles to independence and reach his or her personal goals. Easter Seals also includes families as active members of any therapy program, and offers the support families need.

New Britain Community Resources:

Food Pantries:

SALVATION ARMY

78 Franklin Square
New Britain, CT 06050

* Serves everyone from low income families, single parents, senior citizens, unemployed individuals, disabled veterans, working poor, and anyone else in need of our assistance.



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Housing:

NEW BRITAIN HOUSING AUTHORITY

16 Armistice St.
New Britain, CT 06053
(860)225-3534
Days/Hours: Monday-Friday 8:30 am-3:45 pm
*Service: Subsidized housing

Disabilities:

CONNECTICUT BIRTH TO THREE

Website: www.Birth23.org
*Services: Provides equitable access to all families and connections to resources within the community.

2.7 Attendance Policy

Parents are required to call when child will not be attending or make us aware of family vacations. If your child will be absent, please notify us by 9 a.m. If you are going to be late, you must call us so your child is accounted for on the lunch and snack count. The Meriden New Britain Berlin New Britain Berlin Child Care program takes the responsibility of having continuity in the children's attendance. On the third day of absence, a teacher, office manager or director will call the child's home. On the weekly attendance sheet, it will be noted the day of the phone call. If the parent is not reached, teacher will make daily calls to work, home and cell. If after 15 days there is no response from the parent, a letter is sent home to let the parents know that the slot is available to another child. We will fill that slot with the utilization of the School Readiness List of availability of children looking for care.

2.8 Confidentiality (R.9.04)

The MNBB YMCA Child Care staff takes their responsibility of working with you and your child to heart. We have dealt with many delicate issues and maintained a level of confidentiality. We ask that you also maintain a level of confidentiality with children and family matters you may hear. We respect the right to people's personal lives and will do our best to only share the information with staff that deals with your child. Due to confidentiality reasons in order to protect the safety of all enrolled children, families and staff members' video footage under no circumstances will be released to parents or guardians.

The following agencies require access to your child's developmental screenings and assessments and full health assessment when requested, State of Connecticut Department of Public Health Child Day Care Licensing at the Office of Early Childhood, The Department of Children and Families, The YMCA Nurse Consultant, the City of Meriden Health Department and NAEYC. With consent of the family information may



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be shared with the Meriden Board of Education and or Birth to Three agencies or any other agency specifies by the family or guardian.

3. Child Abuse and Neglect: Identification and Reporting

State law in Connecticut (public policy 17a-101, 17a-101a, 17a-101b, 17a-101c and 17a-101d) requires that anyone who suspects child abuse and/or neglect must report that suspicion to the Connecticut.

Department of Children and Families (DCF), and child day care licensing within 12 hours of first suspicion. All child care workers are considered mandated reporters. DCF hotline 1-800-842-2288 open 24 hours per day, or Department of Public Health 1-800-282-6063, 1-800-439-0437 or 860-509-8045. If any employee or parent witness another employee and/or parent using physical discipline, we ask that you report it immediately using the Incident Report to the director. This report must be filled out and filed within 12 hours. Failure for staff to comply with this strict policy is grounds for disciplinary action and may lead to termination. The YMCA has zero tolerance for abuse and neglect.

The YMCA staff have the responsibility to protect and prevent all of the children under their care from abuse and neglect. If any staff member has reasonable cause to suspect or believe that a child attending the child care program has been abused and or neglected, they **MUST** report it. **CHILD CARE PROFESSIONALS ARE MANDATED REPORTERS BY LAW.** Abuse is defined as a child who has a non-accidental physical injury inflicted upon him/her; or is the result of maltreatment. Child neglect is defined as a child who has been abandoned, is being denied proper care and attention physically, emotionally or morally or is permitted to live in conditions, circumstances or associations injurious to his/her well-being (public policy 46b-120). By law it is DCF's responsibility to determine whether or not to investigate based on their findings. We encourage you to discuss any accidents which may have occurred at home with your child's teacher and/or the Director.

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All staff members are mandated reporters for Child Abuse and Neglect. Per Federal/State Regulations all staff is required to report suspected child abuse or neglect to the appropriate agency.

Sometimes we are unable to let parents know if a report has been made. This lets the Department of Children and Families (DCF) investigate. Reporting does not place blame. By law, we must report signs and symptoms of suspected abuse or neglect.

3.1 Reportable situations include:

- Bruises, sores or other injuries observed on the child's body, even though the source or event of injury is unknown;
- Abandonment of a child by a parent or guardian;
- Suspected sexual abuse;
- Absence of proper parental support, education, medical, or other care necessary for the child's well-being.

There are four general types of abuse and neglect.

1. Physical Abuse
2. Neglect Abuse
3. Emotional Abuse
4. Sexual Abuse

3.2 Description / Examples: Physical Abuse

Physical abuse is any physical injury inflicted on other than by accidental means, any injury at variance with the history given of them, or a child's condition which is the result of maltreatment such as malnutrition, deprivation of necessities or cruel punishment.

Examples of injuries which may result from physical abuse include:

- Head injuries
- Bruises cuts or lacerations
- Internal injuries
- Burns, scalds with substances, cigarettes, matches, electricity, scalding water, friction, etc. Injuries to bone, muscles, cartilage, and ligament fractures, dislocations, sprains, strains, displacements, hematomas, etc.,
- Death

3.3 Description / Examples: Sexual Abuse and Exploitation

Sexual abuse is any incident of sexual contact involving a child that is inflicted or allowed to be inflicted by the person responsible for the child's care. Sexual abuse includes, but is not limited to the following:

- Rape
- Intercourse
- Sodomy
- Fondling
- Oral Sex
- Incest
- Sexual penetration: digital, penile, or foreign objects
- Sexual exploitation of a child includes permitting, allowing, coercing, or forcing a child to participate in pornography or engage in sexual behavior
- Emotional abuse or maltreatment is the result of cruel or unconscionable acts / or statements made, or allowed to be made or threatened to be made, or

allowed to be made by the person responsible for the child's care. Emotional abuse of maltreatment may result from:

- Repeated negative acts or statements directed at the child
- Exposure to repeated violent, brutal, or intimidating acts or statements among members of the household
- Cruel or unusual actions used in the attempt to gain submission, enforce maximum control, or to modify the child's behavior
- Rejection of the child

3.4 Neglect

Neglect is the failure, whether intentional or not, of the person responsible for the child's care to provide and maintain adequate food, clothing, medical care, supervision and/or education. A child may be found neglected who:

- Has been abandoned
- Is being denied proper care and attention physically, educationally, emotionally, or morally
- Is being permitted to live under conditions, circumstances, or associations, injurious to their well being

3.5 Types of Neglect

Medical Neglect is the refusal or failure on the part of the person responsible for the child's care to seek, obtain, and or maintain those services for necessary medical, dental, or mental health care. Withholding medically indicated treatment from disabled infants with life-threatening conditions.

Educational Neglect occurs when, by reason of the actions or inaction on the part of the person responsible for the child's care, a child age 7 years through 15 year old either is not registered for school or is not allowed to attend school.

Emotional and Moral Neglect is the denial of proper care and attention to the child, emotionally and or morally, by the person responsible for the child's care that may result in the child's maladaptive functioning. Harmful behaviors by the person responsible include but not limited to the following:

- Encourage the child to steal or engage in other illegal activities
- Encourage the child to use drugs and or alcohol
- Recognizing the child's need but failing to provide the child with emotional nurturance
- Having inappropriate expectations of the child given the child's developmental level

Circumstances Injurious

Descriptions / Examples: In Danger of Abuse

In danger of abuse includes:

- Actions or statements conveying threats of physical or mental injury



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- A real threat to the child's well-being as perceived by the child
- The person responsible for the child's care exposing the child to dangerous and / or violent situations

Description / Examples: High Risk Newborns

Newborn children will be considered at risk because of a combination of both their own special needs and their mother's condition or behavior.

Indicators of abused and neglected newborns include:

- Positive urine or meconium toxicology for drugs
- A positive test for HIV virus
- A serious medical problem

Indicators in the mother's condition or behavior include:

- Substance abuse
- Intellectual limitations which may impair the mother's ability to nurture or physically care for the child
- Major psychiatric illness
- Young age, causing inability to care for self or the newborn

Reasonable Cause

If staff or parents witness abuse or neglect by another staff member or parent, they must notify the director immediately. A written report specifying exactly what was observed must be submitted to the director. We have a zero tolerance policy for this type of behavior or treatment toward anyone under the age of 18. The Y has a zero tolerance policy for abuse and neglect of children. If staff is involved in an act of abuse and neglect, the staff members will be subject to the following:

- The discipline in the center's Personnel Policy the question of suspending a staff member during the investigation will be decided by the program director, and executive director.
- The decision as to whether the staff member should be allowed to stay working or suspended from work will be based on the allegations and safety of the children.
- The administration has the responsibility to protect (including notification of the parent and/or guardian) once there is an allegation of abuse and/or neglect of a child enrolled in the program. Steps will be taken to provide the victims of abuse and/or neglect with medical services as needed. Staff are protected by law (refer to Connecticut General Statutes, Section 171-101e) from discrimination or retaliation for reporting abuse and/or neglect. Each staff member is trained in reporting suspected child abuse and neglect on a yearly basis. Administrative actions (we support zero tolerance for abuse and neglect) will be implemented should there be an allegation that a staff member abused and/or neglected a child. All records will be maintained and kept in the incident/accident report folder as well as in the child or staff number.

All families are informed of the laws regarding child abuse and neglect. These laws are discussed at enrollment and throughout the year.



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Training on the identification of abuse and neglect takes place every year for staff. All new employees are trained on child abuse and neglect identification and reporting.

4. Tuition

4.1 Fees

Several programs offer sliding fee scales, please speak with the director to determine if sliding fee slots are available.

Full-time – rate varies per program please speak with the program coordinator. School Readiness Preschool Programs utilize the OEC School Readiness Sliding Fee Scale to determine the weekly cost of childcare. This sliding fee scale is based upon income and family size, families must provide weekly bi weekly pay stubs, the previous year's income taxes, or a statement of benefits issues by the Department of Social Services. Program directors will review the calculation with each individual family.

4.2 Tuition Policy

All tuition is due on the first day of each week and you must keep one week ahead. You can pay by the month, but it must be paid by the first of the month. **Please do not place the YMCA in the position of reminding you of your obligation. This fee not only pays for your child's tuition but also reserves the child's spot. As a result, no refund or restitution will be given in the event that your child is absent for any reason.** Parents who fall one month behind need to work out a payment plan or lose their child's spot in the program. After one month, this account will then be turned over to the MNBB YMCA's finance department for payment collection.

There Is no reduction in weekly fees for delayed school starts or shortened days, absences due to illness, inclement weather, holidays, emergency closings, etc.

Payment is expected every week even when your child is absent for any reason. You have reserved your child's spot. We do not replace your child's spot when he/she is absent so therefore payment is still expected the first day of every week. Please keep your receipts.



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4.3 Sliding Fee Scale Policy

(FOR FAMILIES ENROLLED IN FUNDED SLOTS) The Meriden New Britain Berlin YMCA programs use a sliding scale within certain locations. The requirements for the sliding scale fees are as follows:

- Bring in 4 recent weekly pay stubs or 2 biweekly pay stubs.
- The Director or office Manager of the program will help calculate the formula for you.
- If you are on Care 4 Kids, you need to change providers and fill out Care 4 Kids paperwork.
- Sliding scale fees must be re-calculated once a year in September.
- Parents must bring in their pay stubs when asked and 1040 tax form.
- It is a policy that all families at a 50 SMI level and meet eligibility must fill out the Child Care Assistance Program.
- All fee calculations are reviewed and signed by the parent and director and parents are given a copy.
- We use the current funding sources sliding fee scale to calculate the parent fee.

4.4 Child Care Assistance Program (Care 4 Kids)

The State of Connecticut has a program to help subsidize child-care payments. This program is called "Care 4 Kids" and any parent or legal guardian who feels that they may qualify for this program should obtain the Care 4 Kids forms and documentation, complete the application and meet with director for assistance. When enrolling your child, we ask that you pay the FULL weekly tuition rate until Care 4 Kids approves your application. Once Care 4 Kids begins paying we will then make the necessary credits to your account. Should you incur any changes in your work schedule and or salaries it is your responsibility as a parent to notify Care 4 Kids of the changes. Parents are responsible for the Care 4 Kids re-determination status and necessary paperwork. Parents will be responsible for any changes in fees whether they are in your favor or our favor. All Programs do accept care4kids and will work with eligible families to complete the eligibility process.

4.5 Auto Draft Policy

Monitoring auto draft is the responsibility of the parent. We do not receive notification if your account is not current, or if your debit card information has changed. Please check your account weekly to make sure your payment has been deducted. You must notify the office if your card or account changes immediately to avoid fees if the funds are not available when the YMCA draws from your account at the scheduled time. You are responsible for any and all fees incurred for non-payment if we cannot retrieve funds at your scheduled time. Child Care payments are due weekly, **AND MUST BE AUTODRAFTED**. Please work with the program coordinator to schedule auto drafts accordingly.



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4.6 Rate Increases

The MNBB reserves the right to review childcare rates and to raise them periodically to accommodate increasing business costs. We will provide advance written notice to parents in the event of a rate increase.

***Prices may increase \$5.00 bi-annually

4.7 Late Fee Policy

The MNBB YMCA childcare and preschool programs are open Monday-Friday from 7am-5:30pm. Our doors open precisely at 7am. We close at precisely 5:30pm. We expect parents to be out of the building by 5:30pm. If you know you are going to be late, please call your Back-Up-Person so that your child/children will be picked up on time.

Late Fees A late pick up fee of **\$25.00** for the first 15 minutes and **\$5.00** for every additional minute after that will be charged and due with the following week's tuition.

4.8 Outstanding Balance

After having an account balance for three weeks, the participant is referred to the Director or Office Manager to set up a payment arrangement. This payment arrangement is then put in writing and submitted to billing department. The payment arrangement is to be monitored by the Office Manager, Child Care Director and finance department.

If no payment is received within 7 days from the payment plan set up date termination from the program will follow with signed approval by the CEO of the MNBB YMCA.

4.9 Refund Policy/ Withdrawal

The MNBB YMCA is an agency that meets staffing ratios daily. Therefore we do not offer any refunds. If you plan on removing your child, we ask you for a 2-week written notice. In extreme cases you can discuss this matter with the Director of the Meriden New Britain Berlin Child Care Program. This policy will be reviewed by management in the event the program is mandated to close for an extended period of time.

4.10 Termination Policy

MNBB YMCA reserves the right to cancel the enrollment of a child with or without notice for the following reasons.

- After four weeks of returned payments or excessive late payments of fees, the program will terminate the families' enrollment if an agreement cannot be reached.



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- If a payment plan is established and families do not adhere to the agreement (returned payments), the program will terminate enrollment.
- Not observing the policies of the MNBB YMCA Child Care program as outlined in the parent handbook.
- Disruptive behavior by a parent or a child in the classroom or on YMCA property.
- Physical, emotional, and/or verbal abuse of the staff by a parent or a child.
- The termination policy is not limited to the above reasons. If the Meriden New Britain Berlin Child Care program cannot meet the needs of the parent or the child, the Meriden New Britain Berlin Child Care Director reserves the right to terminate a child(ren) from the program. We will try to help parents to find alternate child care for their child. The director of childcare operations reserves the right to terminate in extreme circumstances

4.11 The MNBB Child Care Guidelines for Hardship Policy

The MNBB recognizes that some families may, from time to time, experience temporary financial hardship that impacts their ability to pay the determined family fee. All MNBB families may apply and are treated with sensitivity and circumstances kept confidential.

Families who need temporary assistance must complete a Hardship Application and bring in supporting documentation that may be helpful in ascertaining eligibility. We will try to provide information and resources in the community or government assistance programs that may be helpful. After reaching an agreement regarding a new payment schedule, it will be put in writing within 10 business days of the agreement. The YMCA will conduct a review every 6 months (this program is for a limited time). Program representatives will meet with the family and review all options and materials.

5. Curriculum and Assessment

5.1 Ratios (R.6.06)

Ratios are the number of staffed required to supervise a certain number of children. Group Size is the maximum number of children in one group. Ratios and group sizes for licensure are shown below.



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Age of the Child	Teacher: Child Ratio	Maximum Group Size
0-12 Months	1:4	8
12-24 Months	1:4	8
2 Years Old	1:5	10
3 Years Old	1:10	20
4 Years Old	1:10	20
5 Years Old	1:10	20
School Age	1:12	

5.2 Classroom/Curriculum R.4.01

Classrooms are divided up according to age, ability and size. Working with families the MNBB YMCA Childcare staff, director and teaching assistants will make a collective decision as to when a child will move from one classroom to another. Please be advised that space is limited to licensed capacity, ratios must be maintained at all times and group sizes for infants and toddlers up to age 25 months cannot exceed 8. Children ages 24-36 months group size cannot exceed 10. Per state regulations with written parental permission a child may age 2.8 years old may be enrolled in a preschool classroom. However, space is limited; depending on the availability your child may or may not be held over until a slot opens up. Infants and toddlers may be enrolled in mixed age classrooms per regulations.

Our activities are themed based, play based and child centered and reflect a balance of both children initiated and staff initiated activities encouraging exploration and discovery. There are varied choices for children in materials and equipment that promote skills and support active engagement. Our schedules are predictable yet flexible to the individual's needs and include a time for rest, sleep or quiet activities, include nutritious snacks and meals, provide time for toileting and cleanup as well as both individual and group activities. Lessons and pre planned curriculum activities may or may not change depending on the interests of the children. Moderate and vigorous physical outdoor activities for children developmentally able unless the child has a documented disability or delay.

The Preschool program uses The Creative Curriculum, aligned with the Ct. Early Learning and Development Standard to assist in the implementation of developmentally appropriate practices. The Creative Curriculum is very compatible with the "Connecticut Early Learning Development Standards" from the State Department of Education and allows us to use a variety of approaches.

Child outcomes are measured using the Creative Developmental Profile form and the DOTS Assessment. This form is a guide that helps staff look at the child's performance in areas of development such as social/emotional, physical and cognitive and language development. Teachers will use this assessment to help gain access to the DOTS and the Ct. Early Learning and Development Standards. These children's



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outcomes are closely aligned with Connecticut State Standards. These forms show scores on one form for assessment in the fall, winter and spring of each year. Per state regulations with written parental permission a child may age 2.8 years old may be enrolled in a preschool classroom. However, space is limited; depending on the availability your child may or may not be held over until a slot opens up. Infants and toddlers may be enrolled in mixed age classrooms per regulations.

Parents are surveyed and fill out a questionnaire to collect information during the first parent conference, or teachers request information is shared. Parents and teachers are partners in the child's education.

Please remember that space is limited in all of our programs, should you be interested in changing the schedules days that your child attends you must see the program director for availability. Here at the MNBB Childcare Programs our curriculum reflects the interests and needs of the children. Our activities are themed based, play based and child centers. Our schedules are predictable yet flexible to the individual's needs.

5.3 Assessment Policy (R.5.01/R.5.02)

1. Fall, winter and spring assessment.
2. Children's development and learning are assessed through observation.
3. Documentation is taken from what is seen and heard.
4. Collection of children's work samples.
5. Assessment is done to support learning
6. Identify special needs, individual needs and interests.
7. Assessment of children development and learning to inform overall program or provider improvement is done for program accountability.
8. Curriculum and program improvement.
9. Referral recommendations to meet individual needs. Children are assessed formally 3 times a year. In the fall, winter and spring and also are assessed informally through play, interactions, through various activities and conversations. These informal observations are done on a weekly basis to ensure that we are meeting the needs of every child and adapting our teaching practices to meet the children's needs and align with the ELDS (Early Learning Development Standards)

Children are also assessed through product outcome based testing. This testing is used to identify the children's needs and interest for individual or small self-contained groups. Curriculum, teaching practices, and environment are conducive to individualized learning goals set by both the parents of the individual child and teaching staff. The assessment is done in a natural classroom setting. The assessment is used to inform planning for children and curriculum development.

Hearing, Vision, Developmental and Cognitive Screenings are available through collaboration with other agencies. These diagnostic assessments are used if necessary for referral process for the Meriden New Britain Berlin New Britain Berlin



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Board of Education. Our program offers all children access to all screenings. This is free for our children. This handbook serves as notification of these screenings. Screenings are important to catch concerns early to help children be healthy and successful in school.

Children's files are kept in a file cabinet for staff use only. At formal and informal conferences children's files may be taken to discuss further action to help the children achieve their goals. Families are asked to complete questionnaires at registration time to involve and identify their child's interest, needs and be part of planning. Formal parent conferences are held once a year and informal ones are held twice and at the request of a parent or teacher. Teachers communicate with parents on a daily basis positive thoughts and concerns. After completing an initial assessment teachers will facilitate the developmental and learning process of each child. Surveys, staff meetings and children's assessments will guide our improvements for our children, family and program.

6. Policies and Program Procedures

6.1 Signing Your Child In & Out Daily

To ensure the safety of all of the children, all children **MUST** be escorted in to the building and signed in by a parent or guardian. Attendance is taken every morning. If you know that your child will not be attending on any certain day, please call the office and let us know. Please remember that children must be in the program before 915am unless a doctor's note is provided.

The sign out procedure is established for the safety of your child. Children **MUST** be signed out each day before leaving the building by any adult who is listed on the child's pick up form. Please have a picture ID available with you the first week of the program until the staff becomes familiar with you.

6.2 Arrival and Departure

The MNBB Childcare Programs are open Monday – Friday from 7:00am to 5:30pm year round. The doors will be unlocked at precisely 7:00am. We expect all children to be in the building no later than 9:15am and all parents and children to be out of the building by 5:30pm. Families and guardians who are un-employed families must follow the 8:30am to 3:30pm schedule. If you know that you are going to be late, please call an alternative pick up person so that your child/children will be picked up on time. Two staff members ages 18 or older are in the building until all of the children have been picked up. Upon arrival children **MUST** be accompanied by a parent or responsible adult, at least 18 years of age, into the building and into the child's classroom. Please be sure to sign your child in and out every day. We are required by



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child day care regulation (19a-79-3a) to maintain hours of attendance for a period of two years.

- You must enter and exit from the building through the main entrance
- All children must be brought to their classroom and sign in and out daily
- If someone other than yourself will be picking your child up they **MUST** be listed on the pickup list, they need to be at least 18 years old and they **MUST** have ID on them. If the person is not on the list your child will not be released to them.

If your child has not been picked up by 6:00pm and we have been unsuccessful in reaching you and / or your alternate pick up person by 6:30pm, we will contact the Department of Children and Families CARELINE at 1-800-235-28158 and the local Police Department.

6.3 Child Custody and Pick Up Issues

The MNBB Child Care Centers cannot refuse to release a child to the child's parent or legal guardian who has or shares legal custody. In most cases, both parents have equal custody rights; unless a court order states otherwise, even if parents have separated and one has moved out of the family home. In the event of divorce, separation, joint custody ruling, both parents will be treated equally. If there is a change in legal custody, we need a copy of the order as soon as possible. This will help us plan to keep you and your child safe.

6.4 Parking Lot Safety (A.6.14)

Remember to hold your child's hand while in the parking lot. It can be difficult to see a child from behind the wheel of a car. Also please drive slowly with extreme care and caution while you are in the parking lot.

We have an "anti-idling" policy addressing environmental health. Vehicles should not idle in the MNBB's child care facilities parking lots. This includes drop-off and pick-up.

6.5 Other Closings

In the event the Meriden Child Care Programs loses power which cannot be restored and / or the Governor declares a state of emergency, the center will follow his / her directives. Parents will be notified of such a closing via telephone communication. The South Meriden Infant Toddler Program reserves the right to close if weather conditions present a safety risk. Announcements will be made via television or radio announcements. Parents can also contact 211 Info Line.

6.6 Plan of Supervision Infant/Toddler Program (R.6.06)

1. A staff ratio of 1 teacher per every 4 children will be maintained at all times, including during indoor activities and during naptime.



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2. Group sizes for children ages 6 weeks to 23 months will not exceed 8. Group sizes for children ages 24 months-36 months will not exceed 10.
3. All staff present in the classroom will always be able to see and hear infants and toddlers at all times.
4. Classrooms and outdoor areas are arranged to ensure all children are able to be supervised by sight and sound at all times.
5. Supervision of children and a staff ratio of 1 teacher per every 4 children will be maintained at all times, including and during indoor activities, outdoor activities and during naptime.
6. At least 2 staff members 18 years of age or older will be present on site for all operating hours of the day.
7. The group size shall not exceed 8 children.
8. Children are carefully watched during outside play activities, stationing themselves in a position where they are able to view the entire play yard at a glance.
9. Staff will rotate around the play yard to ensure children are using equipment appropriately and to facilitate activities.
10. When a child goes inside to use the restroom from outdoors, a staff member will accompany any and all children.
11. Children are never allowed to travel from the outdoor play area to inside without a teacher present.
12. In the classroom, children are carefully watched while at play or during an activity within the building including bathroom use.
13. Staff will rotate around the classroom to monitor children's play in the learning areas as well as to facilitate and/or provide learning opportunities, guide language development and more.
14. All children will be accompanied to the bathroom facilities by a staff person and adequate ratios will be maintained at all times.

6.7 Plan of Supervision Preschool Program

1. MNBB YMCA Child Care programs serve children three years of age and older.
2. The group activity size shall not exceed 20. There is always extra staff in this facility.
3. The required ratio of one staff member to every ten children is maintained at all times at the Meriden New Britain Berlin New Britain Berlin Child Care including indoor, outdoors, and nap time.
4. At least two staff will be on the premises at all times.
5. Children transported by bus are supervised at all times. A staff member waits for the Board of Education bus, takes the children off the bus, and puts the children back on the bus every day.
6. Children are carefully watched both indoors and outdoors. While playing outdoors staff is stationed at the play equipment at all times, while other staff members rotate among the different play areas. Indoor staff moves



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around the classroom accordingly. Frequent head counts are instituted both indoors and outdoors and as traveling from the playground indoors.

- 7.** During naptime staff remains in the classrooms with children at all times.
- 8.** Preschoolers are primarily supervised by sight and sound with brief periods where they may be supervised by sound only as is developmentally appropriate.
- 9.** If a staff member is on break, the Director or Office manager may fill in.
- 10.** The parent or anyone picking up the child will be asked to show I.D. if a staff member does not recognize the person and the individual is not on the child's pick up list, the child will not be released to that individual.
- 11.** Children are never allowed to go from the outside to inside by themselves.
- 12.** Children are encouraged to use independent self-help skills such as toileting on their own, staff members will supervise by remaining outside the bathroom.

6.8 Under age 3 Outdoor Supervision Policy

All classrooms have scheduled daily opportunities for outdoor play. Providing that the air quality remains safe for outdoors each day children are expected to come to school ready to participate in outdoor activities. Play areas are mulched with woodchips in order to create shock absorbing fall zones. While outdoors the under 3 age group will be supervised in group sizes that do not exceed 8, remaining with in the 1 to 4 ratio. Children will be monitored to ensure that they do not place woodchips in their mouths, noses, or ears. Staff will be sure that wood chips remain on the group, outdoors for the safety of all children at all times. A staff member with CPR/First Aid certification, will be outdoors on the playground at all times with a communication device.

6.9 Playground Rules and Supervision- Preschool

Expect your child to play outside every day. Daily outdoor activities are part of the program. We follow that State of Connecticut child care regulations concerning playing outside. When the weather does not prevent playing outside, the teachers have an alternate indoor plan. If your child is well enough to attend school, they should be well enough to go outside and play. Due to safety issues we ask parents not to let their children wear open toe shoes.

6.10 Communal Water Play

Infectious disease must not be spread by contact with water in communal water play in classrooms. Precautions must be taken to reduce. Therefore, the following precautions should be taken.

- Children with sores on their hands may not engage in water play.
- Fresh water must be used at all times.



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- Each group may engage in water play and will be changed between groups (classes).
- The water in each table must be emptied, the container disinfected with a 10% bleach solution at the conclusion of each activity period.
- Staff will be certain that bottles, toys, funnels and other water play materials are also disinfected at the conclusion of each water play session.

6.11. Transportation Policy

Drop Off and Pick-Up Policy

Parents, as well as authorized persons **over the age of 18** are asked to come into the facility to pick-up or drop-off their children. **No one under the age of 18 can sign a child out unless there is express written consent signed by the Director.** All parents must sign in when dropping off and sign out when picking up. **It is a state mandated code.** No child will be dismissed from the program with anyone other than the parents or persons listed on our authorization slips unless we have **written permission from the parent.** Please note it is the responsibility of the parent to inform the staff of any changes regarding authorization. Parents must check the child's file with the staff for correct or updated information. **(Please be advised, all people, including parents, who pick up your child will need to show a form of a picture I.D.) If your child will be absent, please notify us by 9 a.m. If your child is going to be arriving later than 9am, please contact the office first thing in the morning.** If you know you are going to be late in picking up your child, please contact the program coordinator

If a child is not picked up after closing hours the following steps will be taken:

- Two staff members over the age of 18 will always remain on site.
- The child/children will be kept calm, busy and reassured that he/she will be taken care of and their parents are probably held up at work.
- Parents will be called at work, home, and cellphone to try to reach them.
- If parents cannot be reached the emergency contact person will be called at 5:30p.m.
- When the emergency contact person has picked up the child staff will leave notes on the doors to tell the parents who picked up the child and when the child was picked up.
- After one half hour if the program is unable to reach an emergency contact or alternative pick up person, the YMCA will have no choice than to call the police department. At that time, the child will be released to the police.
- Staff members are aware of usual pick up times for individual children and will call if the parent has not picked up around their usual time.

6.12. Field Trip Policy

The Meriden New Britain Berlin Preschool programs do go on field trips throughout the year. Parents are asked to volunteer to chaperone. Parents will receive prior notice of



any trip that we take. All school rules apply. We give the children every opportunity to have hands on learning experiences.

7. Food Policy FOR PROGRAMS SERVING MEALS

7.1 CACFP Policy & Procedure: Entry & Transition from Infant to Toddler Application / Enrollment Time

Staff will explain to Parents/Legal Guardians the CACFP (**C**hild **A**dult **C**are **F**ood **P**rogram) used by all children attending any MNBB 's Child Care Program. Parents will complete the CACFP state required forms. Parent will be informed of CACFP requirements and family choices allowed for infants, "opting out" of the formula component only. All children in child care will be a part of the MNBB 's CACFP program. Infants only up to age one unless otherwise noted by the child's healthcare provider will be given the choice of the formula or breast milk component allowing parents or guardians to supply their own formula or breastmilk. All other components will be supplied by the program.

At 6 months, or older infant entry: Families will be up-dated on the transition expectations for infants enrolled and the introduction of eating solid foods starting at home. This discussion will be documented in writing. Families will share in writing with program staff what single item solid food or foods (baby food) their infant child has had without a reaction at least 3 times. This single item food (baby food) will be added to the child's diet, as applicable in the child care setting. This will continue to occur with the addition of new foods as the infant is introduced to new foods. Textured foods will also be added as tolerated per parent's written documentation. Infants will be encouraged to feed themselves as developmentally appropriate for their age and ability.

At 10 months, or older infant entry: Families will be up-dated on the transition expectations for infants turning one year (Toddler) within the next 2 months. This discussion will be documented in writing. Textured foods will be added as tolerated per parent's written documentation. Infants will be encouraged to feed themselves as developmentally appropriate for their age and ability. Any child with a food concern, i.e. self-feeding, food allergy, solid texture; etc. will have the state CACFP "Medical Statement for Children With / Without Disabilities" shared and discussed with the responsible family/guardian. The state CACFP form will be given to the family to bring and discuss with their child's medical provider.

Toddler to Pre-School: All state CACFP forms will transition for any child with a noted concern.

All CACFP requirements will be met for all children in MNBB 's child care programs.

CACFP Documentation: Written documentation of menu modifications* will be submitted to the program on the state's CACFP form at least one (1) week prior to the



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child's first birthday, upon entry if over age one(1) year, and on-going thereafter. Documentation will be forwarded to the dietary department for the purpose of reasonable accommodation. A written Individual Health Plan (IHP) will be developed for each child and signed by the parent/guardian and staff. Reasonable accommodations will be made for any child with a documented nutritional concern, after submitting the required CACFP's "Medical Statement for Children with / With Disabilities" form. CACFP forms must be updated as changes occur and at least annually.

*** Menu Modification:** Fluid 1% milk may be substituted with fluid fat free lactaid per parent written request and does not require the state's CACFP form. This is inclusive for drinkable milk only (fluid milk). All other liquids or solid foods require the state CACFP form be completed.

An important part of health & development is good nutrition. Parents and guardians are responsible to share any food allergies or special diet their child may have. Food allergies and / or restrictions are required to have medical documentation. Reasonable accommodations will be made for children with special dietary needs. The state food program requirements (CACFP) must be met, prior to any changes to the meal service menu. Children are fed following the Child Adult Care Food Program (CACFP) nutritional guidelines. Depending on the time your child is in attendance, breakfast, lunch, and / or snack will be offered. All meals meet the standards of good nutrition, and menus are reviewed by a registered dietitian. Head Start requires all meals to be high in nutrients, and low in fat, sugar and salt. Drinking water is available at all times (tap water).

Mealtime is used as a learning time. Children help set the table and clean up. Meals are served family style. This means, children and adults sit and eat together. Children serve themselves. Adults eat the same foods the children eat. Adults model good eating habits and table manners. A relaxed atmosphere is encouraged through conversation. Children are encouraged to try new or disliked foods. Enough food is prepared and offered to meet the nutritional guidelines according to the Child and Adult Care Food Program (CACFP) which the program participates in. No more than two servings of any one food will be served to one child. Children will not be forced to eat. Food is never used as a reward or for punishment.

The MNBB YMCA Child Care Programs participate in the Child & Adult Care Food Program (coo) and serves all children and staff nutritional breakfast, lunch and afternoon snack as part of the daily program at no additional cost to our families. Enrollment in this program is not optional, yet you can make allowances for food allergies and religious preferences during the registration process. For programs participating in CACFP **NO OUTSIDE FOOD OR DRINKS CAN BE BROUGHT INTO OUR FACILITY FOR DAILY CONSUMPTION PER THE GUIDELINES OF THE CACFP. Any child arriving at our program while eating food must finish their food outside the classroom with the parent, and all uneaten food must be discarded before entering the classroom.** Breakfast will be served to the children arriving before 8:45am. Supplemental CACFP Materials, and individual nutrition plans



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are provided in a supplemental packet. **Due to some children having severe peanut allergies, we are a peanut and tree nut-free facility. For programs not participating in CACFP families must provide nutritious meals and snacks each day.**

A monthly menu will be sent home. It is also posted in each classroom. Parents are offered nutritional information. Outside foods are not allowed. This includes hot/cold drinks, cake, cupcakes, and candy. All adults, when with the children, may only eat the food that the program is serving. For children who are under one-year-old they may opt out of the food program. If you choose to opt out you will have to provide all of their formula, cereal and baby food. The MNBB Child Care centers will provide Enfamil, baby cereal and baby food if you choose for your infant to participate in the food program.

7.2 Safe Food Handling Practices

Hands must be washed with soap and water for 20 seconds before and after handling food. Although human milk is a body fluid, it is necessary to wear gloves when feeding or handling human milk. Unless there is visible blood in the milk, the risk of exposure to infectious organisms either during feeding or from milk that infant regurgitates is not significant.

7.3 Breast Milk and Formula Heating and Storage (A 6.07)

- Breast milk and ready to feed formula may be stored in the refrigerator no longer than 48 hours, and breast milk in the freezer no longer than 6 months.
- The bottle or container of breast milk MUST be properly labeled with the infant's full name and the date and time the bottle was expressed. The bottle or container should be immediately stored in the refrigerator on arrival.
- Non-frozen human milk should be transported and stored in the containers to be used to feed the infant.
- Frozen human milk may be transported and stored in properly labeled single use plastic bags and placed in a freezer (not a compartment within the refrigerator but a freezer with a separate door).
- The caregiver/teacher should check for the infant's full name and the date on the bottle so that the oldest, milk is used first.
- Frozen breast milk may be thawed in the refrigerator or under cool running water.
- Thawed breast milk may be heated briefly in bottle warmers or under warm running water so that the temperature does not exceed 98.6 F.
- After warming, bottles should be mixed gently (not shaken) and the temperature of the milk tested before feeding.
- Once, thawed, breast milk should be used within 24 hours. Breast milk should not be re-frozen.
- Breast milk may be left un-refrigerated for up to 1 hour.



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- Bottles of breast milk or formula should be warmed in a pan or crock pot of water no warmer than 120 F for no more than 5 minutes. Bottles may not be heated in the microwave.
- Breast milk that is in an unsanitary bottle, is curdled, smells rotten, and/or has not been properly stored (according to storage guidelines of the Academy of Breastfeeding Medicine) should be returned to the mother.
- Any breast milk or formula left over from a feeding should be discarded immediately and contents may not be poured back into original container.

7.4 Infant Feeding Procedures

- Infants must be removed from their cribs and held for all bottle feedings. They will be placed in chairs for all other feedings;
- Unused portions of formula, breast milk or other liquids shall be discarded after each feeding.
- Baby food shall be served from a dish unless the whole contents of the jar will be served.
- Each child's bottle MUST have their name on it.

Infants who are unable to sit are held for bottle feedings. At no time are bottle propped up. Infants and toddlers will not be put on cots or in cribs with a bottle or a sippy cup. Children do not carry cups or bottles with them while crawling or walking. Teaching staff and families will work together to decide when a child is developmentally ready to drink from a cup.

7.5 Heating Foods/Food Temperatures (For Programs that do not have CACFP Program)

- Baby food shall not be heated in the microwave.
- Once baby food has been opened it must be refrigerated and discarded after 24 hours.
- Foods reheated in the microwave should be heated in microwave safe containers.
- Food and beverages are not heated in plastic containers or when covered with plastic wrap that touches the food. BPA-free plastic with #1, #2, #4, or #5 are acceptable containers. Plastic food containers, toys, feeding bottles, and spill-resistant drinking cups labeled without a recycle number or with the number 3, 6, or 7 are not used. Scratched plastic articles are discarded.
- Leftovers should be heated to at least 165 degrees F or until hot and steamy, and then left to stand for at least 2 minutes before serving to reduce the risk of burns upon eating.
- Ready-to-eat food stored in hermetically sealed containers must be heated to at least 140 degrees F.
- Perishable foods are checked with a thermometer if they do not seem cold or hot enough on arrival. Food that is not at a safe temperature when it arrives is discarded. Checking of food brought from home included a determination of food safety and storage requirements for the food when it arrives at the facility. Perishable foods are kept hot, at or above 135 degrees F, until



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served, they are allowed to cool to 110 degrees F so they will not cause burns. Fully cooked and ready-to-serve hot foods should be held for no longer than 30 minutes and used only once.

- Leftovers should be reheated and used only once.
- Leftovers should not be mixed with fresh food as this can increase the risk of food borne illness.
- Soup should be heated long enough to just break a boil.
- To avoid contamination, food should not be served from commercial containers or from containers brought from home, such as baby food jars. Food will be served in a clean bowl, cup or plate.
- After a meal or snack, any leftover food in the table serving containers should be discarded and not put back into the original container (this includes baby food, breast milk, formula, and food from family style serving dishes or from individual plates). The only food that staff members may return to the family is unopened commercially wrapped food that does not require refrigeration or holding at a hot temperature.

7.6 Dry Food Storage

- Food may only be stored in plastic bags and containers meant to be used for food. Due to the increased risk of food borne illnesses, all other plastic bags or garbage bags may not be used to store food. Plastic bags may not be re-used since they cannot be properly sanitized.

7.7 Safe Food Supply

- All foods stored, prepared, or served should be safe for human consumption by observation and smell.
- Home-canned food, food from dented, rusted, bulging, or leaking cans, and food cans without labels should not be used.
- Foods should be inspected daily for spoilage or signs of mold, and foods that are spoiled or moldy should be promptly discarded.
- All dairy products should be pasteurized and Grade A where applicable.
- Raw, unpasteurized milk or milk products, unpasteurized fruit juices, and raw or undercooked eggs should not be used.
- Meat, fish, poultry, milk, and egg products should be refrigerated immediately upon arrival at the Center.
- All fruits and vegetables provided by the center should be washed thoroughly with water prior to use.

7.8 Meal Times

There are 3 meal times during the day.

- Breakfast will be served between 9:00 - 9:30
- Lunch will be served between 11:30 - 12:30
- Afternoon snack is served between 3:00 - 3:30



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The following foods ARE NOT served:

- ✓ Hot Dogs, whole or sliced into rounds
- ✓ whole grapes
- ✓ nuts
- ✓ popcorn
- ✓ raw peas
- ✓ hard pretzel's
- ✓ spoonful of peanut butter
- ✓ chunks of carrots
- ✓ no meat that can be swallowed whole

The staff cuts food into pieces no larger than 1/4 square inch for infants and 1/2 inch for toddlers and 2 year olds and according to each child's chewing and swallowing capability. All menus are reviewed by the programs nutrition consultant on a weekly basis for approvals and recommendations based upon CACFP regulations.

8 Infant/ Toddler Program

8.1 Infant Sleep Position

Infants under 12 months of age will be placed in a supine (back) position for sleeping within a crib with a snug fitting mattress and sheet. When infants can easily turn over from the supine to the prone position, they will be put down to sleep on their backs, but allowed to adopt whatever position they prefer for sleep. No items will be placed in cribs without a doctor's written note. Children will have all bibs, clothing with ties or hoods and pacifier clips removed before being placed within their cribs. Soft surfaces such as pillows, extra blankets and stuffed toys, quilts or soft bumpers will be kept out of the infant's cribs. Infants will not be swaddled unless a written note from a medical provider with instructions and a time frame for swaddling the infant. Infants will be physically observed every 15 minutes. No child under 3 years of age will have access to any jewelry that poses a hazard, including teething bracelets and or necklaces. Should an infant fall asleep inside of the swing, carrier, stroller, or bouncer seat the child will be moved to their crib unless the child has written documentation from a physician, physician assistant, or advanced practice registered nurse specifying a medical reason for their use.

8.2 "Shoe-Free" Environment in the Infant Room

With infants commonly on the floor, we want to provide a clean, safe and healthy environment in the Infant Room. We practice a "shoe-free" policy in the room. We ask that before entering the infant room you remove your shoes or wear shoe covers



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8.3 Diapering Policies

Diapers will be checked every hour and will be changed when needed. Parents need to provide diapers, wipes, any other ointments or powders that may be needed. Parents will be notified when their child is running low on diapers so more can be brought back in.

- ✓ Infants and toddlers shall be diapered at an appropriate diapering area that is used only for the purpose of diapering.
- ✓ Staff will wear gloves while diapering or toileting any child.
- ✓ Diapering areas MUST be disinfected after each use.
- ✓ Staff will wash their hands before and after diapering or helping the child go to the bathroom.
- ✓ The child's hands will be washed before and after diapering and toileting.

For children who use cloth diapers the cloth diapers have to have an absorbent liner completely contained within the outer covering made of waterproof material that prevents the escape of feces and urine. Both the diaper and lining are changed as one unit. Soiled clothing and cloth diapers are immediately placed into a plastic bag without rinsing to avoid handling and sent home for laundering of diapers and sanitizing the container each day.

Children's diapers are only changed in the designated diapering and changing areas of the classroom.

8.4 Daily Record Keeping & Communication (R.2.01)

Daily record keeping occurs at the MNBB Child Care Programs. Records are kept regarding attendance, food service, and incidents relating to a child's health. Reports will be made when a child has an injury, illness, or change not usual for the child. In return, we ask that you communicate with the classroom teachers any unusual behavior or incident that may have occurred while the child was at home, so we are well informed and can take care of your child in the best way possible. Teachers communicate daily with families in a variety of ways. These include when they drop off and pick up their child, through conversations, and notes sent home, or through telephone calls. If there has been an unusual or special circumstance during the day, information will be pass on to the parents verbally or though written communication. Serious incidents or ones which the staff feels may be upsetting to the parents will be communicated verbally to the parent and with a follow up incident report.

8.5 Daily Charts / Reports for Infant & Toddlers (R.2.01)

Each day the staff will prepare individual charts for each child which is sent home electronically at the end of each day. This chart includes information regarding what and when your child ate and drank, when they had diaper changes and naps, daily temperament and behaviors as well. The center utilizes the app Tadpoles to communicate with parents, send daily reports and take attendance.



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8.6 Health Forms

Upon enrollment into the South Meriden Infant and Toddler Program we **MUST have a completed physical with most up to date immunization records signed by the child's licensed health care provider (MD, DO, APRN, PA)**. A physical is required, and all health forms must be updated every year. This is required by the State of Connecticut. We must also have a complete immunization record to be kept on file with your child's physical.

9 Illness/Accident Reporting

9.1 Illness Policy (R.6.01)

A child should be kept home from the MNBB YMCA Child care if he/she develops any of these symptoms listed below after leaving childcare that day, during the night, or the morning before coming to the YMCA Child Care:

- begins to vomit
- begins to have loose bowel movements (diarrhea)
- develops a temperature of 100.5 degrees or higher
- has a persistent cough, even with the use of a cough medication
- has any one or more of the following eye symptoms: redness, eyes sealed shut with crust, swelling, or itching ie: pink eye
- heavy persistent greenish discharge from the nose
- is not acting like himself/herself (i.e. wants to be held all the time, not eating or drinking, crying a great deal, laying around, falling asleep, having extremely difficult time with teething or basically wants/needs one-on-one care, something that we cannot give here at childcare)
- shows any signs of lice or nits.

A child must be **symptom free for 24 hours** without the use of acetaminophen, ibuprofen, cough medication, cold medication, or any other medications that might be masking a more serious condition before they can return to our program. This does not include: antibiotics, eye medications, asthmatic medication, yeast infection medication, or any other medication that a Physician/Physician's Assistant (P.A.)/Nurse Practitioner (NP) prescribes to make the child feel better and his/her condition "non contagious." Please remember that this is for the health of our staff as well as other children.

***Sometimes the best medication for a child's ailment is "TLC." It's keeping your child home where he/she can rest, get plenty of fluids, the proper food and care that he/she cannot get at child care.



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If your child develops any of the above symptoms while at child care, your child will be isolated from other children in the program and brought into the director's office. The child will be supervised during this time by the director and you will be called to come get your child. We expect you to do this within a reasonable period of time **(NO MORE THAN ONE HOUR) WE DON'T EXPECT TO SEE YOUR CHILD IN CHILD CARE THE NEXT DAY AFTER BEING SENT HOME.** It is for this reason a backup child care is recommended. If your child is acting "differently" (i.e. not like he/she usually acts or behaves), but is not presenting any of the above symptoms, we will give you a phone call to let you know that your child is coming down with an illness. This is for the health and safety of all attending children and YMCA.

It is important that you tell a staff member if you gave your child any antibiotic prior coming to child care. This is in case your child has a reaction staff may react appropriately.

- What is the name of the antibiotics? What time did you give the antibiotics?
- What is the reason for giving the antibiotics?

If a throat culture is positive for an infection, your child must be on medication for 24 hours before he/she can return to child care and must not have a fever for 24 hours.

If your child is diagnosed with conjunctivitis (pink eye), he/she must be on medication for 24 hours before returning to child care.

If your child needs a prescription or over the counter medication to be administered during child care hours, the doctor must sign an Authorization for the Administration of Medication Form that is specific to this facility and can be obtained in the office. The prescription must have the tag from the pharmacy with your child's name on it in order to be accepted into the program.

Any other communicable diseases must be reported to the staff so that we can take proper precautions and relay any information to other parents if necessary.

Children should remain home when they have:

- An axillary body temperature over 100 degrees F and experiencing behavior changes or signs or symptoms of illness, or a temperature of 101 degrees F or greater
- Signs of drowsiness, irritability or persistent crying, loss of appetite, and unwilling to participate in usual activities
- An illness resulting in greater need for care than the child care staff can provide without compromising the health and safety of the other children
- Uncontrolled coughing, difficulty breathing, or wheezing
- Two or more episodes of vomiting in the previous 24 hours
- Two or more episodes of diarrhea (watery stools) in the previous 24 hours



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- Mouth sores with drooling
- Rash with fever or behavior changes
- Conjunctivitis (pink eye) with white or yellow discharge (until treatment has been initiated)
- Head Lice (until treatment has been initiated)
- Scabies (until treatment has been initiated)
- Impetigo (until treatment has been initiated)
- Strep Throat (until 24 hours after the initial antibiotic treatment and cessation of fever)
- Ringworm (until treatment has been initiated)
- Chickenpox, measles, mumps, rubella and pertussis (until the appropriate treatment has reduced the risk of transmission and no longer infectious to others)
- Tuberculosis (until receiving the appropriate therapy)

Children may return back to the child care center when they are:

- Able to participate comfortably in program activities, tolerating a regular diet and do not require continuous one-on-one care
- **24 hours' fever-free and 24 hours without fever-reducing medications such as Tylenol or Motrin**
- No longer experiencing diarrhea or when continuous loose stools are deemed not to be infectious by a health care provider
- 24 hours free of vomiting and have tolerated at least one regular meal
- Receiving treatment for conjunctivitis, head lice, scabies and ringworm
- On antibiotics for 24 hours or longer for impetigo and strep throat

COLDS, COUGHS, UPPER RESPIRATORY INFECTIONS, EAR INFECTIONS, OR THICK DISCHARGES FROM THE NOSE: The conditions usually do not go away overnight. They can linger, and sometimes develop into something more serious. You may want to give your child's doctor a call to see what he/she advises. If your child is not responding to the medication(s) that you are giving him/her, may want to get him/her examined by the doctor. **Children who do have one or more of the above conditions and appear to be getting worse will be sent home and we ask you keep them home until the symptoms subside.**

NON PRESCRIPTION TOPICAL MEDICATIONS (includes diaper changing ointments that are free of antibiotic or steroid components, medicated powders, insect repellents, teething medications, and sunscreen protect ants that are free of amino benzoic acid-PABA or its derivatives: A parent/legal guardian must sign the Non Prescriptive Topical Medication form before the staff can administer the above medications. A physician needs not sign this form. When purchasing a sunscreen for your child/children, we recommend purchasing a "No Tears" formula sunscreen because it has been our experience that children rub their eyes a great deal in warm weather and the sunscreen gets into their eyes. This can be very irritating and painful. If your child needs a prescription medicine to be administered during daycare hours, the doctor must sign an Authorization for the



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Administration of Medication Form and medicine should be in the vial that comes from the pharmacy.

A child must be symptom free for 24 hours without the use of acetaminophen, ibuprofen, cough medication, cold medication, or any other medications that might be masking a more serious condition. This does not include antibiotics, eye medications, asthmatic medication, yeast infection medication, or any other medication that a Physician/Physician's Assistant (P.A.)/Nurse Practitioner (NP) prescribes to make the child feel better and his/her condition "non-contagious." Please remember that this is for the health of our staff as well as other children.

***Sometimes the best medication for a child's ailment is TLC. It's keeping your child home where he/she can rest, get plenty of fluids, the proper food and care that he/she cannot get at day care. A little "TLC" goes a long way.

If your child develops any on the above symptoms while at day care, your child will be isolated from other children in the program and brought into the director's office. The child will be supervised during this time by the director and you will be called to come get your child. We expect you to do this within a reasonable period of time (**NO MORE THAN ONE HOUR**) **WE DON'T EXPECT TO SEE YOUR CHILD IN DAY CARE THE NEXT DAY AFTER BEING SENT HOME.** It is for this reason a backup day care is recommended. If your child is acting "differently" (i.e. not like he/she usually acts or behaves), but is not presenting any of the above symptoms, we will give you a phone call to let you know that your child is coming down with an illness. This is for the health and safety of all attending children and YMCA Staff as well. Remember we must maintain proper ratio at all times.

IT IS IMPORTANT THAT YOU TELL A STAFF MEMBER IF YOU GAVE YOUR CHILD ANY ANTIBIOTICS PRIOR COMING TO DAY CARE IN CASE HE/SHE HAS A REACTION. THIS IS SO IF YOUR CHILD HAS A REACTION WE MAY REACT APPROPRIATELY:

- What is the name of the antibiotics? What time did you give the antibiotics
- What is the reason for giving the antibiotics?

If the culture is positive, your child must be on medication for 24 hours before he/she can return to day care and must not have a fever for 24 hours. If your child is diagnosed with conjunctivitis (pink eye), he/she may return to day care once treatment has been initiated. Any other communicable diseases must be reported to the staff so that we can take proper precautions and relay any information to other parents if necessary. Reporting that your child is on medication is also important so that we can monitor your child for any possible allergic reactions or changes in your child's behavior.



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9.2 Accident Reports/Behavior Reports

All injuries requiring any kind of attention will be documented and kept on file. The information will be shared with the parent. An Accident report will be filled out and will be signed by the staff making the report, the director and the parent. A copy of the report will be given to the parents within 24 hours of the incident or the following business day. If your child has had an inappropriate behavior during the day a behavior report will be filled out explaining the behavior that has occurred. The report will be signed by the staff member making the report, the program director and the parents. A copy of the report will be given to the parents.

9.3 The YMCA Exclusion Policy

In order to maintain a healthy environment for all children, the MNBB Child Care Programs, we follow the National Health and Safety Performance Standards for Out-Of-Home Child Care. A copy of these standards is available for all parents and families. If a child becomes ill at the child care center, the parent or guardian will be notified by telephone and will be expected to pick up their child as soon as possible. The child will be allowed to rest in a comfortable, supervised area while awaiting the parent's arrival.

9.4 Administration of Medications

The MNBB Child Care Programs are not required to administer medications to children. Since most medication prescriptions can now be given at home, the Center prefers not to give medications. When other arrangements cannot be made, and it is in the best interest of the child to receive a medication (prescription or over the counter) during the school hours we follow all State and Federal regulations as outlined in Section 19a-79-9a of the State of Connecticut Statutes.

Medications to treat asthma, allergic reactions and anaphylaxis, and ongoing special health care needs such as a seizure disorder or gastroesophageal reflux will be administered with the proper parent and prescriber authorizations. Families are responsible for administering the first dose of the day except in the case of emergency medication or as needed asthma or allergy medication.

The types of medications that will be administered will be limited to oral, topical, inhalant and injectable (the injectable must be a regulated system, Epipen). Prescriptions and over the counter medications to be administered at the Center, **MUST be accompanied by a fully completed "Authorization for the Administration of Medication" form** approved and meets the DPH regulations by the State of Connecticut, which is to be signed by a physician and/or dentist and by the child's legal guardian. On the authorization form, the physician, dentist,



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podiatrist, APRN or PA must note the reason for the medication and any side effects that may occur. We must have certified staff on site that is specially trained to administer medications.

Medications must be in the pharmacy prepared containers, labeled with the child's name, name of the medication, strength, dosage, method of administration, and frequency of dosage, name of physician and date of original prescription. On the authorization form, the physician and/or dentist must note the reason for the medication and any side effects that may occur. Children may not medicate themselves.

All medication will be administered in accordance with the written directions of the physician. Individual written medication administration records for each child will be maintained according to State regulations.

Personnel will keep all medications in a locked container in a cabinet and/or refrigerator except emergency medication such as asthma medication and EpiPen. All unused medications will be returned to the parent or destroyed if it is not pick up within one week following the termination of the order, or expiration of the medication, whichever comes first. Medication administration errors, such as missed or late dosage, will be reported to the parent. All staff has First Aid, CPR and Medication Training Certificates.

9.5 Vaccination

Children can have reactions to vaccinations. Children under age 1 may not return to childcare for 24 hours after receiving a vaccine. It is important to speak with your child's doctor/physician assistant/nurse practitioner about reactions and how to treat them. Our concern is that your child may develop a fever and/or become irritable and uncomfortable after a vaccination. If this should happen, it is better to keep your child home for that particular day. Asking your doctor about your child acetaminophen or ibuprofen might help your child feel a little more comfortable however children are not permitted within the center for 24 hours after such circumstances. Due to beliefs or medical condition, if your child is not vaccinated and this facility becomes aware of a vaccine-preventable disease i.e., measles, etc. - your child will be isolated and you will be asked to pick up your child in a reasonable amount of time. Your child will not be allowed to return to the center until the contagious period has passed.

Children can have reactions to vaccinations. It is important to speak with your child's doctor/physician assistant/nurse practitioner about reactions and how to treat them. Our concern is that your child may develop a fever and/or become irritable and uncomfortable after a vaccination. If this should happen, it is better to keep your child home for that particular day. Asking your doctor about your child acetaminophen or ibuprofen might help your child feel a little more comfortable. **Due to beliefs or medical condition, if your child is not vaccinated and this facility becomes**



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aware of a vaccine preventable disease i.e., measles, etc. - your child will be isolated and you will be asked to pick up your child in a reasonable amount of time. It is State mandated that Flu vaccination and Hep A (2 doses) is given to every child attending child care.

Colds, coughs, upper respiratory infections, ear infections, or thick greenish. yellowish discharges from the nose are conditions usually do not go away overnight. They can linger, and sometimes develop into something more serious. You may want to give your child's doctor a call to see what he/she advises. If your child is not responding to the medication(s) that you are giving him/her, you may want to get him/her examined by the doctor.

Children who do have one or more of the above conditions and appear to be getting worse will be sent home and we ask you keep them home until the symptoms subside.

Non prescription topical medications (includes diaper changing ointments that are free of antibiotic or steroid components, medicated powders, insect repellents, teething medications, and sunscreen that are free of amino benzoic acid-PABA or its derivatives

A parent/legal guardian must sign the Non Prescriptive Topical Medication form before the staff can administer the above medications. A physician needs not sign this form. When purchasing a sunscreen for your child/children, we recommend purchasing a "No Tears" formula sunscreen because it has been our experience that children rub their eyes a great deal in warm weather and the sunscreen gets into their eyes. This can be very irritating and painful.

9.6 Reporting other contagious illnesses

It is very important to inform the staff if your child has, or has had any communicable disease or illness (Chickenpox, Strep Throat, Fifth Disease, Scarlet Fever, Coxsackie Virus, Meningitis, Roseola, Conjunctivitis, etc.) We do everything we can to properly disinfect the entire program and sleeping areas. The staff will follow proper hygiene regulations and the cots, toys, and **equipment** are also properly maintained. Remember that some diseases may need to be reported to the state and parents to be notified.

If your child becomes sick and needs to be taken to the hospital while at the Meriden New Britain Berlin New Britain Berlin Child care and parents cannot be reached in time, we will have an ambulance transport the child to Mid-State Medical Center in Meriden New Britain Berlin New Britain Berlin. The YMCA Staff if possible will accompany the child. If we are on a field trip, out of town, we will get the child to the nearest hospital.

9.7 Doctors Note

The program director reserves the right to request a doctors written note should the staff observe that your child exhibits any signs or symptoms of common contagious



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childhood illnesses. Should your child be sent home with any signs and symptoms of any contagious illness the program also reserves the right to request a written doctor's note with a written diagnosis and instructions for when the child may return. Please remember that this is for the safety of all enrolled children in efforts to reduce the spread of childhood illnesses and germs.

9.8 Hardships of missing time from work

We realize that missing work or being called out of work can be a hardship, both at the work site and financially. We do not mean to be responsible for problems at work, but we must think about what is best for your child, the other children, and the staff. We cannot give "one-on-one care here. We encourage you to have a backup child care to help out in these situations.

9.9 Dental Emergencies

Dental emergencies will be given first aid by staff that has had training. If emergency dental care is required, office manager will call the parent. A staff member if possible will accompany the child and remain with child until parent or legal guardian assumes responsibility for the child.

9.10 Allergies

It is not unusual for children with allergies to food or other substances to be enrolled at the Center. With food allergies, the YMCA Child Care will remain a PEANUT FREE FACILITY. A list is posted in the classroom as well as kitchen which document children and their food allergies. Parents should provide this information on the enrollment forms. Adjustments are made as necessary to ensure individual children with other types of allergies can safely participate in the Center's activities.

9.11 Health and Safety Procedures

The MNBB Child Care Programs must be able to reach you in an emergency.

Be sure to share new telephone numbers when you get a new telephone number
Be sure to add new contacts to your pick up list. All new information regarding your child should be shared with teachers and program directors immediately. It is very important that all files are kept up to date. The State of Connecticut requires up to date emergency contact information.

Accidents & Incidents- Simple, minor accidents/incidents are common at this age. The parent/guardian will be notified of any injury/accident. Basic first aid will be given by trained staff. If the injury is serious, emergency action plans will be followed. All accidents or incidents are written. A copy is given to the adult picking up the child that day. The pickup person will sign the report. The original is kept on file in the main office.



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Emergency medical Care- Each family signs a form to allow their child to be given first aid care. This form will be used if more advanced care/treatment is necessary. This form will only be used until the parent/guardian arrives. If a serious accident occurs emergency plans will be followed.

10 Disruptive Behaviors

10.1 Discipline Policy

Positive guidance will be used for all children. Teachers will promote the development of children's conscience and self-control through positive guidance techniques; setting clear limits in a positive manner, involving children in establishing rules for social living, in problem solving of misbehavior, redirecting children to an acceptable activity; use of manners, and meeting with an individual child whom is having problems and/or with the child and parents/caregiver.

Teachers maintain their perspective about misbehavior, recognizing that every infraction does not warrant attention and identifying those that can be used as learning opportunities. Problem solving is an opportunity where children in class can work together to come to a solution. This helps children put on a path to making good choices.

Redirection is a method where the child is lead into another activity to get their mind off activities causing difficulties. This is a more acceptable way in helping a child self-regulate.

Children cannot become self-disciplined unless adults teach them right from wrong. At the MNBB, children will be taught the expectations for appropriate behavior and encourage to live accordingly. When children know that something is unacceptable and choose to do it anyhow consequences will follow in effort to communicate that their behavior is not acceptable and will not be tolerated within the classroom at school. The use of positive guidance will always be utilized. At the YMCA discipline not punishment will be used to guide children and redirect them to appropriate behaviors by setting clear limits. There is no one way to discipline all children. Each child is an individual and must be treated as such.

Child development includes learning self-discipline which is better learned through guidance rather than punishment. Any form of discipline that violates a child's personal rights shall not be permitted. The following forms of discipline and punishment will not be used.

- No child will be humiliated, shamed, frightened, or subject to verbal or physical abuse by staff or volunteers.



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- The Y prohibits abusive, neglectful, physical, corporal, humiliating or frightening treatment or punishment including but not limited to, spanking, slapping, pinching, shaking or striking a child.
- No child will ever be withheld food, or threatened that food will be withheld.
- Teachers will not speak about child's undesirable behavior in front of other classmates or staff members who are not directly working with the child.
- Teachers will not use the threat of being sent to another classroom as means of discipline (Example: "if you can't behave you'll go back to the baby room")
- Children will not be moved temporarily to another classroom without a member of management facilitating the move.
- Physical Restraint is prohibited unless such restraint is necessary to protect the health and safety of the child or others.

All parent communications must be positive and focus on accomplishment NOT challenging behaviors. On a daily basis, teachers will observe the children in the classroom and gain perspective on the area of development. While observing, if a problem may arise among children, the teacher will first oversee if the children are able to resolve the issue on their own. We feel that it is important that children learn how to work out their own disputes, just as we learn as adults. If the children are unable to perform the task on their own, the teacher will intervene and provide guided support. Teachers will document their findings to be used in formulating a behavior plan if necessary

Our discipline procedures will consist of the following strategies:

1. Encourage children to use their words when having a disagreement with another child.
2. Facilitating children in their attempts to settle their own disputes in an age-appropriate manner.
3. Redirecting negative behavior; modeling positive behavior
4. Separating a child from the group through the proper use of a "quiet area" allowing the child time to regroup.
5. Counseling children individually about their behaviors.
6. Making parents aware of disciplinary concerns through parent conferences and daily written reports

Techniques and Tips for Positive Guidance in the Classroom
Guidelines for redirecting behavior

Children who hear "NO" or "DON'T" all of the time tend to tune those directives out. Instead of telling a child what not to do, offer a positive behavior to replace the misbehavior. Young children do not always have control of their bodies, minds, and behaviors, so it is the job of the teachers to help redirect children when inappropriate behaviors occur. Often it is not what the child is doing but rather how they are doing it. When this occurs, redirecting or teaching the child a different way to complete the same task can be effective.



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- If a child is using books to build, remove the books and say, "Books are not for building with" offer a substitute and at the same time say "If you want to build use these blocks"
- If the child is climbing on a chair to make his structure taller, help him down, saying "that is too dangerous standing on the chair, lets lay your tower down on the floor to see how long you can make it."

Simply requesting that a young child find something else to do usually doesn't work well. It takes action and gentle words to accomplish the goal of redirecting a child to a more appropriate behavior. Redirecting is NOT a reward for undesirable behaviors. Using redirection is a proactive move on the teacher's behalf to take a negative situation and turn it into a positive one.

Disruptive Behaviors

Disruptive behaviors distract from the full benefit of the program. Disruptive behaviors will result in consequences. The following behaviors are considered to be disruptive.

- Requires constant attention from the staff
- Inflicts physical or emotional harm on other children, adults, or self
- Disrespects people and materials provided in the program
- Consistently disobeys the rules of the classroom
- Verbally threatens other students and staff
- Uses verbal or physical activity that diverts attention away from the group of children

When a child is disruptive the teacher is responsible for taking the following steps:

- Document examples of undesired behaviors.
- Discuss the behaviors with the director or supervisor on site, provide notes and examples to provide a clear picture of what is happening in the classroom.
- Develop an individualized behavior plan with the director and management staff which takes into account the triggers of this particular child and the known factors that contribute to success.
- Be patient and calm when dealing with the child, remember that it is frustrating for them to always disappoint the adults in their life.

What are the consequences of continued disruptive behavior and or biting?

One of the biggest frustrations for teachers is children who are having difficulty meeting expectations of the classroom. Remember, each child is an individual and our plan for them will be tailored to meet their needs. The consequences will vary based upon an individual child and the behaviors as well as the needs of the family and resources being utilized by the family.



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Possible consequences include:

- Removal from the learning situation
- Exclusion from rewards, special activities or events
- Five-minute cool down with a member of management staff
- Parent conference to discuss behavior strategies
- After every attempt has been made to modify the child's behavior, the management team may make the decision to suspend, or discontinue care if they cannot adapt to the program and or work with appropriate resources and outside consultants

One of our main responsibilities is helping children learn how to get along in the world. Children should enjoy being around other children. A caring and positive approach will be taken regarding behavior management and discipline. All staff will focus on the positive behaviors of children and reinforce those behaviors as often as possible.

Biting

Children biting other children are unavoidable occurrences of group child care, especially with toddlers. It is a common happening in any child care program. When it happens, and sometimes continues, it can be very scary, very frustrating, and very stressful for children, parents and staff. **Every child in the Infant and Toddler classrooms is a potential biter or will potentially be bit.** It is important to understand that because a child bites, it does not mean that the child is "mean" or "bad" or the parents of the child who bites are "bad" parents. Biting is purely a sign of the developmental age of the child. Biting is not something to blame in the child, parents, or caregivers. Biting is purely a sign of normal child development. Biting is not something to blame on the child, parents or caregivers. When a child bites confidentiality must be practiced within the YMCA. We cannot tell a parent who bit their child. There are many possible reasons as to why an infant or toddler may bite.

- Teething
- Impulsiveness and lack of control. Babies sometimes bite just because there is something there to bite. It is not intentional to hurt, but rather exploring their world.
- Making an impact. Sometimes children will bite to see what reactions happen.
- Excitement and over stimulation. Simply being very excited. Very young children do not have the same control over their emotions and behaviors as some preschoolers do.
- Frustration. Frustrations can be over a variety of reasons- wanting a toy that another child has, not having the skills need to do something, or wanting attention. Infants and toddlers are simply lacking the language and social skills necessary to express all of their needs, desires, and problems.

If a child bites more than five times in one day, the child's parents will be contacted and will be required to pick up their child for the remainder of that day. If biting incidents are continuous and the family refuses to work with the center and other outside resources the child's schedule may be reduced and or the child may be asked



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to leave. The child will be shadowed during group and center play times; a staff member will remain within an arm's length of the biter. Such precautions are aimed at decreasing the amount of biting within the classroom but may not always prevent the biting.

The MNBB reserves the right to dismiss a child due to ongoing biting issues and incidents if the situation cannot be resolved after all efforts to correct the issue have been enforced.

"Time to myself" is when a child has to be removed from the activity because they did not make good choices. This is after many strategies have been tried especially if the child is in danger of hurting themselves or another child. The child is usually given several warnings before "time to myself" is imposed. The child usually sits in a supervised area for a short length of time—1 minute per year in age- away from the activity to think about their behavior that they exhibited or when they are ready to come back to the group. The child is talked to about making better choices.

When a child is consistently disregarding safety and program rules an incident of behavior report will be written by a staff member and signed by Director. A parent will receive a copy of this report within 24 hours or the next business day and one will be put in the child's file.

If a child is exhibiting challenging behaviors on a consistent basis and the methods we are using are not working, the director, head teacher, or staff will discuss what options we might try to change or correct these behaviors. When we have come across a situation where everything has been exhausted and the child is not benefiting from the programs this facility has to offer, the parents will be advised to look for another childcare facility that will be able to deal with the child's specific needs. The Meriden New Britain Berlin Child Care staff will assist as much as possible. We will not dismiss a child without a series of teacher and parent strategies and possible screening and referrals.

Disciplining in our facility is done by staff or a child's own parent or guardian only. Any disciplining done by a parent to another child (i.e. another child other than their own) may be grounds for termination of child care services for the child of the parent who disciplined another child. If such a situation is presented a meeting will be held to discuss whether termination, suspension or other actions such as an investigation will occur. The YMCA Executive director has the ability to make a deciding factor. If you have a problem with another child within this facility, you need to address that problem with the director or head teacher of that program. You are not to take matters into your own hands. Any staff member witnessing such action will report it to the director immediately. If you should have a problem with one of our staff members please see the Director. Parents are not allowed to discipline any of our staff members either.

Under no circumstance will staff be abusive, neglectful, use corporal, humiliating or frightening, punishment including but not limited to shaking, hitting, spanking,



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striking, slapping, jerking, squeezing, kicking, biting, pinching, excessive tickling, pulling of arms, hair or ears, requiring child to remain inactive for an inappropriate amount of time, shaming, name calling, ridiculing, humiliating, sarcastic remarks, cursing at, making verbal threats, frightening or ostracism and withholding affection are strictly prohibited as well as rough handling, forcing a child to sit or lie down except when restraint is necessary to protect the child or others from harm. No child shall be physically restrained unless it is necessary to protect the safety and health of the child or others. Under no circumstance will food be taken away for a child misbehaving.

All staff members are expected to act professionally when they are dealing with children. Appropriate language must always be used to emphasize the positive. Discipline is always under direct staff supervision.

10.2 Behavior Policy

If a child continues to have unacceptable behaviors an incident of behavior report will be written by a staff member and signed by the Director. A parent may receive a copy of this report and one will be put in the child's file. Persistent (consistent) behavioral problems can result in the termination of childcare or suspension.

11 Emergency Plans

11.1 Emergency Preparedness Plan (A.6.19)

YMCA Child Care Center is designed with guidelines to prevent emergencies, however, as natural disasters and fires do occur, we take the necessary safety precautions as follows:

- Each room has a fire/disaster evacuation plan posted, with primary and secondary evacuation routes.
- Fire drills are conducted monthly and are documented. These drills are to help children understand how to get out of the building while trying to keep them calm.
- In the event the building becomes unsafe for the children and staff, each parent/guardian is notified and asked to pick up their child. The rectory across the street from the school is the programs alternate location.
- The Center is well equipped with fire extinguishers and all staff is specifically instructed in their appropriate use.
- In the event of a power outage, parents will be notified to pick up their children.



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- A cellular phone is available for use in case of an emergency. NO SMOKING is allowed in the Center by staff, parents and/or visitors and NO SMOKING signs are posted.
- A fire alarm is on the premises in case of an emergency.

The Fire Marshall tours the Center and performs safety inspections once every year.

11.2 Medical:

Procedures for personal emergency—procedure for accident or illness Designation of a licensed physician or hospital for emergency service to be rendered. Transportation to medical facility and notification of parents.

In case of a medical emergency, a qualified staff member will assess and attend to first aid as needed. For extreme emergencies 911 will be called. Another staff member will notify the child's family. Attempts will be made to consult with the child's physician/dentist. If neither is available, the Center's medical consultant will be contacted. An ambulance will transport the child and if possible a staff member will accompany the child to the nearest hospital. If a staff member accompanies the child they will take the child's emergency form with them. Another staff member will notify the family, or alternate pick up person to meet them at the emergency room. Additional staff will be called in if necessary to maintain required ratios.

Should a child become ill while at the Center, parents will be notified and the child maybe moved to the Director's office or front office. Parents and or guardians will receive a written incident report within 24 hours or the next business day for any incident accident or illness. Incident/Accident/Illness reports will be written when visible bruises, scratches, or bumps are visible on a child, when first aid is assumed on a child, when children are sent home from the program ill, when a parent is contacted or a an incident raises concern.

11.3 YMCA Child Care Weather Policy

We never know what Mother Nature has in store for us—so when the Meriden, New Britain, Berlin Schools are closed due to inclement weather Meriden New Britain Berlin Child care will be closed. Turn on Channel 8 for Meriden, New Britain, or Berlin School closings.

When the Meriden New Britain Berlin schools have a delayed opening, we will open one hour later (When schools have a delayed opening in Meriden New Britain Berlin, it means that the roads are not properly cleared for travel. The staff also needs time to clear their own driveways and cars and arrive safely.)



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If the weather forecast is not good for the day, we will try to give you a verbal warning in the morning when you drop off your child/ren that we might close early for that day. We will follow the closing schedule of the local Board of Education as related to weather related early dismissals, when schools are released early due to in climate weather our programs will close at 4pm.

Should we lose electrical power, we will be forced to close. Operating a childcare center without electrical power is against the State Mandate for Operating a Child Care Center in the State of Connecticut. We will try to call you as soon as we know that the power will be off for an extended period of time, and that you will have to come and pick up your child/ren. Please try to leave work as soon as possible and arrive at the day care facility within a reasonable amount of time.

The weather can be unpredictable in the summer. We try to keep the building at a very comfortable level. If we lose power and the temperature rises to an uncomfortable level in the building, we will have to close down. Please try to come as quickly as possible after we notify you to pick up your child. If there is a severe thunderstorm, hurricane, or tornado warning, please call us to inform us about on the conditions at your work site. We will let you know what conditions are here. If we are definitely going to get a tornado, you will need to pick up your child/ren immediately. If the children need to be in a safer environment in the building, we will direct the children and staff to enter the bathrooms where there are no windows.

Unfortunately, no refunds can be given for days that we close. We put every effort into opening our facility and keep it clean and safe for travel and the building suitable for occupancy. Should you have any questions, please don't hesitate to ask.

If you have any questions please see Director or Office Manager. All parents will be notified by cell phone, if their child has been moved. Emergency and or Alternates will be called if parents cannot be reached.

11.4 Evacuation

- Transportation
- Location of an alternate shelter
- Community resources
- Notification of parents

In the event that the Center must evacuate the children will be transported by YMCA Activity vehicles to the MNBB YMCA. This location is approximately 5 miles from the Center. Notes will be posted to alert parents of the location of their children. Parents will also be notified by cell phone to pick up their children. Our staff to child ratio will be maintained at all times, and two staff members will remain with the children until all of the children are picked up.



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11.5 Fire

- Identification of means of egress
- Roles and responsibilities of staff
- Designated safe place for reconvening
- Notification of parents

In the event of a fire the Head Teacher gathers the attendance books, emergency telephone numbers and leads the children out through the closed fire exit. The Assistant Teacher holds the door and keeps the children moving in a calm, quiet manner. The group will walk to the designated area at the end of the property, safely away from the building. Head Teachers will then take attendance. Office Manager and staff will be responsible for taking the classroom sign-in and out sheets, portable first aid kit, cell phone, and emergency files. Should it not be possible to return to the building staff will notify parents via cell phone to pick up their child/ren.

11.6 Shelter in Place/Lockdown

If evacuation of the center is not feasible the local emergency management director will notify administration. Programs practice a lockdown procedure and drill on a monthly basis. Programs will utilize the most interior space of the building, window shades will be closed, and all exterior doors and windows will remain secured. No one will be allowed inside or outside of the building until the area has been cleared and administration has been notified.

11.7 Domestic / Family Dispute

If parents had or have been having marital difficulties, certain problems can arise. A parent or guardian may not want the other to take the child out of daycare. What can happen here may be strictly legitimate or it might involve a plan to take the child and move to an undisclosed location. Either way, the daycare center is put in an awkward situation. In a case such as this, the staff is well informed and has delegated responsibilities that protect the child and other children in question and within the entire building. The plan calls for a staff member to call the police while the director speaks with the parent who has arrived to remove their child. Another staff member is given instructions on what to do with the child in question for safety purposes. The director will then contact the other guardian and request that they come to the center where both parents/guardians can discuss the matter and come to an amicable conclusion that is satisfactory to both parties. The police remain until the situation is resolved.

12 For Parents

12.1 Parents Concerns (R.2.02/A.2.03)

We welcome all parental feedback for program improvement.

As a child care center we are a community of children, parents, and staff all interacting and sharing our lives together. In a community, people, work closely together and hopefully interactions are positive, kind, and understanding. Yet it is to be expected that from time to time people will experience some conflict, some concerns, and some difficulties. We recognize that parenting is one of the most difficult, intense and rewarding experiences in your life. We want you to share your thoughts, hopes, and dreams for your child. You want what is best for your child we know it is your job to advocate and protect your child.

When you have a concern, please remember....

- Teachers want the parents to feel very satisfied with the care their child is receiving.
- Talk to the teachers directly whenever possible. If you feel comfortable, ask your child's teacher first about any concern. Teachers prefer that you talk with them directly, but they do understand if you would prefer to talk with the director.
- Realize that if you have a concern with a teacher, the assistant director or the director will need to investigate and talk with the teacher directly about your concern and deal with the issue in a
- Straight forward manner so that the teacher can improve her performance and/or correct any mistakes or misunderstandings.
- Be assured that teachers do not hold a grudge against your child or "take it out" on your child after you have expressed a concern. We would not hire anyone at our center that would react in such an inappropriate manner.
- Do not let concerns build up. As concerns occur, share them with the teachers so we can deal with any concerns that you may have when they have them.
- Open door policy states a parent is welcomed into our center at any time
- Schedule a meeting with the teacher and/or director to communicate any concerns.

12.2 Home-School Transition: Separations

Because children are individuals, they tend to respond to different ways to the first days and weeks of school. Many children will quickly become acclimated to the infant and toddler program and will not be the least bit concerned with saying good-bye. Some children may be apprehensive and initially but rapidly adjust to the new environment. A few children will take longer to adjust. The staff at the YMCA Infant



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and Toddler Program will assist families in making this transition as smooth as possible.

At the MNBB Infant & toddler Programs, to accomplish a smooth transition we do the following things:

1. Before enrollment, families are encouraged to come for visits with their child so that the child can investigate the environment with the security of a nearby parent.
2. Adjustment to school will be easier if the child is prepared for it. In addition to visiting the YMCA Infant and Toddler Program with your child, you should begin to talking with your child about going to school as soon as possible. Talk about things the child will be doing such as playing with friends.
3. During the first few days, families are encouraged to spend time at the YMCA Infant and Toddler Program getting their child settled.
4. With the initial few separations, parents are encouraged to let their child know when they will be returning. Due to the developmental characteristics of children, it works best if parents use a concrete marker of time such as "I'll be back to pick you up after lunch"; instead of saying, "I'll be back here to get you at 1 o'clock."
5. Teachers will assist parents in establishing a consistent routine for the separation. This routine may include waving at the window, walking to the classroom door together or finding a teacher to play with.
6. In the case where the child is upset at the time of separation, teachers will comfort the child and encourage the parent to complete the separation routine and promptly leave.
7. Parents are encouraged to call later in the morning and/or afternoon to find out about their child's.

12.3 Transition Plan

The MNBB YMCA Child Care Program would like to help you and your child prepare for the transition to Kindergarten. We work with the Board of Education and School Readiness program to assist with determining their home school, completing kindergarten registration forms, and providing orientation information. We will support you with any information or assistance that you may need with your permission when you register for Kindergarten. Your child's teacher will fill out the assigned information to give to child's new teacher. We recognize this might be a stressful and emotional time for you and your child and want to support you through this process.

To help prepare your child for kindergarten some of our activities include, but not limited to:

- stories about kindergarten;
- bus trips;
- providing you with a kindergarten registration packet to prepare you for registration day;
- help you find your home school;
- visiting our kindergarten program and buddies for a day;



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- pre-Kindergarten teachers and kindergarten teachers meet and collaborate in the spring near registration time;
- teachers and director attend PPT's for our YMCA children throughout the year;
- Our staff will fill out paper work/records and send to kindergarten teachers.
- Our staff will attend a "Meet & Greet" with kindergarten teachers.

12.4 Toys from Home

TOYS ARE NOT TO BE BROUGHT FROM HOME except on specified days. There are many similar types of toys. Children can become easily upset if their toy get lost, forgotten, or two children bring in a toy that looks like another toy in the classroom and it goes home to the wrong house. Even though your child may want to bring their toys to school, we are asking that toys are not brought into the classroom except on special days.

12.5 Items From Home

Children like to bring items from home to school. This practice often assists the child in the transition from home to school. While this practice is supported, it must be noted that the MNBB Infant & Toddler Center will not be responsible for lost, broken or stolen items. Your child is welcome to bring in a stuffed animal and/or a special blanket to rest on his/her at nap time.

ALL ITEMS MUST BE LABELED WITH YOUR CHILD'S NAME

12.6 Safe Attire & Jewelry

Necklaces, and bracelets of any kind may not be worn by infants and toddlers at any time while at the child care center. Necklaces may be worn by preschoolers while in their classrooms. The necklaces **MUST** be removed while the child is on the playground and during naptime. It is recommended that preschoolers leave necklaces at home to avoid losing or breaking the jewelry in the process of removal.

Closed-toe, sturdy shoes, preferably sneakers, are required for outdoor playtime. Flip-flops and "Crocs" are not allowed to be worn on the playground due to the increased risk of splinters from the mulch and falls from the equipment. Sandals must be closed-toe with ankle strap.

12.7 What My Child Will Need

Below is a list of what your infant or toddler will need when they begin the program. The items that you send in with your child **MUST BE LABELED** with your child's name.

- Bag/Box of Diapers
- Box of Wipes
- Diaper ointment or baby powder if needed
- Bottles prepared for feeding (*Only for children under 1-year-old*)
- Extra formula to leave at center (*Only for children under 1-year-old*)



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- Extra bottles if needed (*Only for children under 1-year-old*)
- Light blanket / Sleep Sack
- Bibs
- Burp clothes
- 2 complete sets of clothes (to be changed when the seasons change)
- 2 pacifiers
- A picture of your family

All bottles, spoons, and bowls will be sent home daily (for children in the infant room who are not on the food program) to be washed every night. There is a refrigerator located in the infant room to refrigerate bottles and food. All bedding will be sent home at the end of every week to be washed and returned the following week.

PLEASE LABEL EVERYTHING.

CLOTHES- it is very helpful to us if the children have their names written on the inside tag of the child's extra clothes. An extra pair of clothes should remain in your child's cubby. As the season's change, please make sure to check your child's cubby to ensure that the extra clothing is appropriate for the season. Children **MUST** always have socks and shoes on upon arrival no matter what the season is.

DIAPERS, POWDER, OINTMENT AND WIPES- these items should also be labeled with the child's name, and reminders will be sent home when more of these supplies are needed. Please make sure to read the daily reports that are sent home each day, this report will notify you of anything that your child may need. Written parent authorization is required for the application of non-prescription topical medication such as diaper cream and sunscreen.

12.8 Parent Communication Agreements and Involvement (R2.03/R.5.03/A.5.08)

The teachers welcome the opportunity to talk informally with parents for a few minutes each day. Parents and teachers are encouraged to discuss how family and staff handle different aspects of childrearing such as discipline, feeding, toileting and other important topics. Teachers may also give parents specific ideas for prompting children's healthy development at home. We encourage parents to involve themselves with events and the child care facility. Parents are always welcome at any of the MNBB Childcare Programs.

1. Parents are welcome and encouraged to visit at any time. They may accompany field trips, reading volunteer and help in a classroom.
2. Parents are asked to serve on the advisory board. The advisory board meets every other month for a half hour. The advisory board is a committee that works with staff to actively involve parents in decision, aiding, family activities and program development. Parents are recruited through newsletters, personal invites and teacher's suggestions. The advisory board
3. Changes with the new school year. Teachers, administrators and parents all bring up topics to the advisory meeting.



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4. Parents may request a conference with your child's teacher, assistant director, or director at any time. Teachers may also ask for a teacher/parent conference at any time.
5. Family activities are planned several times a year.
6. Donations are welcome (craft materials, toys, furniture, etc.)
7. At holidays please consider purchasing gifts for our classrooms.
8. It is parent's responsibility to keep staff updated with information (phone numbers, work information and emergency numbers). This is very important especially during an emergency situation.
9. We strongly believe in a partnership between home and school. Some of the things we do to promote this is a family need survey, monthly newsletters, verbal communication and conferences.
10. Family has the opportunity to assess their child at home with an ASQ assessment form and/or ELDS/DOT Family input to discuss with teacher.
11. During conferences, goals are set for parents to achieve at home and teachers will work on while child is at center.
12. We appreciate parents understanding the importance of education for children and seeking opportunities to further their own education. In our welcoming room, we have resources for continuing education. The family needs survey includes a section where parents check off their needs and staff will respond.

12.9 Things for parents to remember

1. Please provide a pillow and blanket for naptime and take home each Friday for laundering.
2. Emergency clothes should be stocked and weather-appropriate.
3. Your child grows throughout the year, please make sure that the clothes in the cubby fit.
4. Please remember to call us when your child will be absent.
5. Please address concerns with a staff member or the Director
6. Every month, for your information there is a newsletter about the events of the month, please take one home and read it.
7. Make sure you sign up for parent-teacher conferences.
8. Make sure you sign your child in and out every day.
9. Payment is due first day of the week.
10. If your child was sent home sick, they must be symptom free for 24 hours before returning to the YMCA Child Care without the administration of medication.
11. In order for your child to start the MNBB YMCA Child Care program, all registration forms must be completed.
12. To start the program, your child needs to have updated physical and immunization forms on file.
13. It is the parent's responsibility to make sure that their children do not bring in the things that this center does not allow. This center does not allow children to bring in any matches, lighters, medication or any form of weapons.
14. Please keep your child's toys at home.
15. We do celebrate **all** holidays.



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- 16.** Your child must be here for the school readiness part of program by 9:00 a.m. everyday.
- 17.** When you change any telephone numbers or addresses, please give us the new updated information. It is your parental responsibility.

13. Administrative Oversight

The purpose of this Administrative Oversight Policy is to ensure that the childcare facility operates with high standards of safety, quality, and accountability, in compliance with all applicable laws and regulations. This policy outlines the roles, responsibilities, and procedures for administrative oversight to maintain a safe and effective childcare environment.

13.1 Administrative Oversight Responsibilities

Program Director:

- Oversee daily operations of the childcare facility.
- Ensure compliance with local, state, and federal regulations related to childcare.
- Implement policies and procedures in accordance with established best practices.
- Supervise the recruitment, training, and ongoing professional development of staff.
- Conduct regular evaluations of staff performance and the quality of care provided.
- Ensure that all staff are adequately trained in child protection, health, and safety protocols

Supervisors/Lead Teachers:

- Monitor the implementation of daily schedules, activities, and curricula.
- Ensure that child-to-staff ratios are maintained according to regulatory standards.
- Provide guidance and support to staff members
- Report any incidents or concerns regarding child safety or well-being.
- Maintain clear and open communication with parents and caregivers.

Administrative Staff:

- Assist in maintaining accurate records for children, including enrollment, attendance, health, and emergency contact information.
- Support the Facility Manager in maintaining compliance with regulatory standards.
- Assist with periodic audits of the facility's operations and safety standards.



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- Ensure that supplies and equipment meet the required safety and health standards.

13.2 Child Safety and Well-being

Risk Management:

- Conduct regular safety audits of the facility, including playgrounds, classrooms, and other common areas.
- Ensure that all equipment is safe, functional, and age-appropriate.
- Implement emergency protocols for medical, fire, weather-related, or other incidents.
- Ensure that all staff are trained in CPR, first aid, and emergency evacuation procedures.

Supervision:

- Children must be supervised at all times by qualified staff.
- Clear guidelines will be in place for staff to ensure that appropriate supervision ratios are maintained throughout the day, including during transitions and outdoor activities.
- Ensure that staff adhere to child supervision protocols when using equipment or during any field trips.

13.3 Staff Training and Development Staff Recruitment and Hiring:

- All staff must undergo background checks, including criminal history and child abuse clearance.
- Staff must hold relevant certifications or be provided with on-the-job training specific to childcare, health and safety, and child development.
- New staff will be oriented to the facility's policies, as well as the completion of the required Care4kids Health and Safety training within 3 months of hire as well as the programs oversight policy.

Ongoing Professional Development:

- Staff will participate in regular training programs, workshops, and certifications to enhance their knowledge and skills in child development, safety practices, and effective caregiving.
- Supervisors will evaluate staff performance annually, offering feedback and identifying areas for improvement.
- Professional development plans will be created for each staff member to support their



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13.4 Compliance and Record Keeping

Regulatory Compliance:

- The childcare facility will comply with all applicable laws, regulations, and licensing requirements for childcare services.
- Regular audits will be conducted to ensure compliance with child care standards, safety guidelines, and health regulations.
- The facility will maintain up-to-date documentation, including staff certifications, training records, child attendance records, incident reports, and licensing documentation.

Record Keeping:

- All required records, including staff records, child records, safety inspections, and incident reports, will be maintained in a secure and organized manner.
- Staff and child records will be confidential and only accessible to authorized personnel.
- Electronic records will be stored securely and comply with data protection regulations.

13.5 Incident Reporting and Follow-Up

Reporting Incidents:

- All incidents, including accidents, injuries, or any suspected cases of child abuse or neglect, must be reported immediately to the Facility Manager or Director.
- An incident report will be completed and maintained for each reportable event.
- The reporting staff member must also inform parents or guardians of any incidents involving their child.

Investigation and Resolution:

- Each reported incident will be investigated promptly, and appropriate action will be taken to address the situation.
- If the incident involves potential child abuse, neglect, or serious harm, the facility will follow the mandatory reporting procedures outlined by local authorities.
- Follow-up procedures will ensure that corrective actions are taken and that any changes to policies or practices are implemented to prevent recurrence.

13.6 Director's Authority

The Director retains the right to add or subtract, change or revise anything within this contract. Such changes will be made in writing and parents/legal guardians will be



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given anywhere from a 1-2 weeks' notice (depending upon the change) before such change/changes takes effect.

13.7 Parent/Guardian Communication

Communication with Parents:

- The facility will maintain open lines of communication with parents and guardians, including regular updates on their child's progress, activities, and any incidents.
- Any changes to policies, schedules, or other significant operational matters will be communicated to parents in a timely manner.

Parent Concerns:

- Parents are encouraged to voice any concerns or suggestions regarding the care and operation of the facility.
- The facility will provide a clear process for addressing parent complaints and concerns, ensuring that responses are timely, respectful, and constructive.

13.8 Policy Review and Updates

Policy Evaluation:

- This policy will be reviewed annually to ensure its effectiveness and relevance.
- Any updates or changes to local, state, or federal regulations will be incorporated into the policy as necessary.
- Feedback from staff, parents, and regulatory bodies will be considered during the policy review process.

12.9 Continuous Improvement:

- The facility will continuously strive to improve its administrative practices through staff feedback, parent feedback, and self-assessments.
- Regular evaluation of operational procedures and training programs will help identify opportunities for improvement in service delivery.

Thank you for taking the time to read our handbook! Please let us know if you have any questions or need further clarification on anything contained in the handbook.