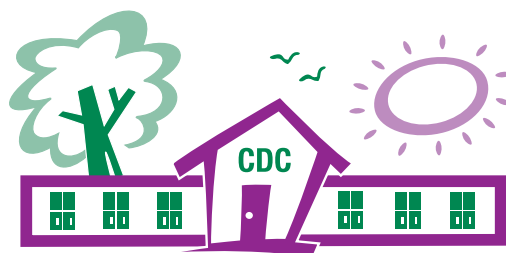



Parent Handbook & CDC Policies



Child Development Center

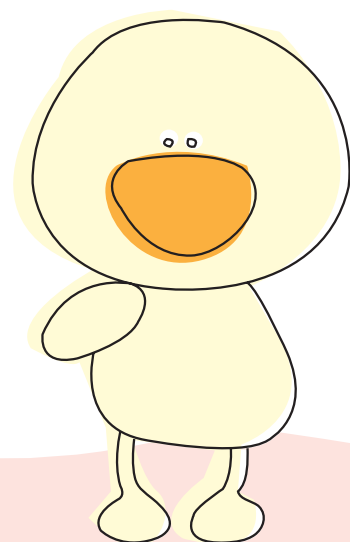
 Lexington Medical Center

LETTER TO THE PARENTS

Welcome to the Lexington Medical Center Child Development Center. Our qualified and caring staff is ready to teach your little ones how to learn while having fun. We appreciate the confidence you have in us to care for and educate your child. We strive to provide a nurturing environment using a curriculum that promotes self-esteem, independence and individuality. Our team works with parents to provide the highest quality of care and education to every child in our program.

Please read through this handbook, as it is important that you are familiar with our policies and procedures. We are always free to address questions, suggestions or concerns. It is such a delight to watch your child grow and develop as the year progresses. Thank you so much for sharing your child with us. I know it will be a great year.

The Team of the CDC
(803) 791-2339



CONTACT INFORMATION

Lexington Medical Center Child Development Center
430 Hulon Lane
West Columbia, SC 29169
(803) 791-2339
Fax: (803) 791-2847

Director

Direct Line: (803) 791-2870

Manager

Direct Line: (803) 791-2067

Hours of Operation

6:00 a.m.–6:30 p.m., Monday through Friday

6:30–7:30 p.m., By appointment

Please give 24 hours notice if you need care until 7:30 p.m.

This enables us to staff the center appropriately. Children staying until 7:30 p.m. must bring dinner from home.

Holiday closings will be announced yearly.

INTRODUCTION

Philosophy

The CDC believes that children need a safe, nurturing environment in which they can learn, develop and grow at their own pace. Through well-planned environments, the center promotes the development of physical, emotional, social and intellectual skills.

As an on-site facility, we can support employees so that they can offer their best in the workplace.

Mission Statement

The mission of the CDC is to provide families with high-quality child care and education services in a safe, nurturing environment that embraces learning through play and age-appropriate activities to develop and enhance each child's social, emotional, physical and cognitive skills while fostering trusting relationships.

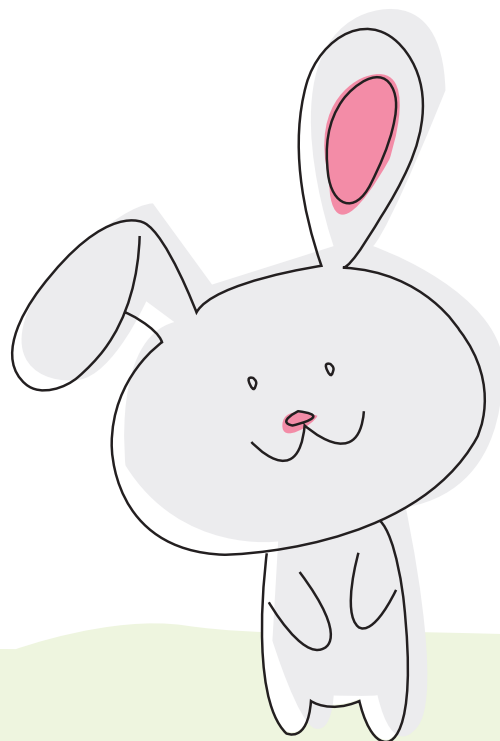
Enrollment Process

1. If space is available, a completed registration form and \$100.00 enrollment fee are required to hold a space in the program.
2. A South Carolina Certificate of Immunization for Attendance to Child Care (DHEC Form 1148) must be completed and turned in with the registration form. Shot records must be kept up-to-date at all times.
3. If space is not available, your child will be placed on our waiting list. You will be notified as soon as a space does become available. An acceptance response from the parent must be given **within 24 hours** of notification. If the parent turns down the space or does not respond to our call, your child will be taken off our waiting list. A new registration form will be required to place your child back on the waiting list. Please note that your spot is considered reserved after you have completed and turned in the registration forms and the \$100.00 fee is collected.
4. With newborns, the child needs to start within one month of the anticipated start date except in cases of premature births or medical necessities. Please contact the director in the event of a change in the anticipated start date.
5. A supply fee will be charged annually. We deduct 50% from the first payroll in April and 50% from the first payroll in October.
6. It is recommended that parents and children visit the center prior to the start date in order to get acquainted with the facility and the staff. Please call the center to schedule this appointment.

7. An adjustment period is normal and expected when a child enters a new environment for the first time. Most children need about two weeks to become acclimated and comfortable to their new environment and routine. The staff will do everything possible to comfort your child during this transition.

Required Enrollment Status

Eligibility of employees to enroll their children in the CDC depends on their employment status with Lexington Medical Center (Lexington County Health Services District). PRN employees cannot use the services of the CDC. The center is an important part of the hospital's strategy to recruit and retain the best full-time and part-time employees. Since fees are payroll deducted, we must ensure that employees work enough hours to pay for the care of their child. We require that employees with children enrolled in the CDC be employed a minimum of 24 hours.



CDC POLICIES

Entrance into the CDC

- The front door and all other exits remain locked during our normal hours of operation.
- Please use your employee ID badge to enter the building. The non-employee parent will receive a swipe card to enter the building. This security system is for the safety of the children in the center. Public Safety has given us instructions not to buzz parents into the building. If there is a problem with your swipe card or it is lost or stolen, please report it to Public Safety and our administrative assistant at the front desk as soon as possible. A new card will be issued and your old card will be disengaged. There is a \$10.00 charge to replace lost swipe cards.
- The door between the CDC offices and classrooms is on a magnetic lock system. Parents cannot use their badge or swipe cards to unlock the door. The front office staff will release the lock for you.
- Please do not try to use your swipe card or pull on the door before the release of the lock. Swiping your card and pulling on the door will automatically send a message to Public Safety that we need help in the CDC.
- **After 6:30 p.m., the front door will be locked and you will have to gain access by dialing (803) 791-2339.**

Arrival and Departure

Upon arrival to the center, parents are required to clock in their child/children and accompany them to the classroom. Take this time to quickly inform the receiving teacher of any special information or instructions concerning your child. After enrollment, parents will be issued a PIN number to use when clocking in and out. Instructions will be given on the proper use of the system. Please notify the office if there is a problem or discrepancy. The computer system is located in the lobby of the CDC office. According to DSS, we must maintain accurate attendance records on each child. It is also important that we know how many children are in the classrooms to provide the appropriate teacher to child ratios and calculate correct tuition fees. If a parent fails to clock his or her child out, the system will automatically calculate the child's attendance until 7:30 p.m., which may cause the parent to be charged overtime fees. Please take the time to ensure that your child's name and correct transactions are displayed on the monitor.

Authorized Release

The CDC must be notified in writing if anyone other than the custodial parent will be picking up your child. You can leave your written permission at the front desk or fax a written consent to (803) 791-2847. If an emergency arises and you are unable to send us written notice, please call the center so we will be aware of your instructions for release. Let us know the name of the person picking up your child and the approximate time of his or her arrival. This person will be asked to show picture identification. If you fail to notify us that someone other than an authorized person will be coming to pick up our child, your child will not be released. For the safety of your child, we will not release any child to a person who may be intoxicated.

Tracking of Children

Children are tracked carefully throughout the day by both head count and face-to-name recognition. They are counted at regular intervals throughout the day to ensure proper teacher-to-student ratios. (See sample tracking sheet.) They are also counted when moving to a new classroom, going to recess, before returning to the building and upon return to the classroom using face-to-name recognition.

On field trips, we also keep careful track of the children by taking roll using face-to-name recognition when leaving the building, getting on and off the bus, arriving at the destination and returning to the center.

IMPORTANT!

Parent Visits

The CDC maintains an open-door policy for parents to visit their child. Each classroom has an observation booth that you may utilize at any time. We do limit classroom observation to the class your child is enrolled unless you have received prior approval from the Manager.

Payment of Fees

The fee for child care services is deducted from your paycheck each pay period. This fee covers child care offered during that pay period. Fees are listed on the current fee sheet. All rates are subject to change with a minimum of a 30-day notice. Rate changes are set according to market rates and increased costs.

An initial enrollment fee of \$100.00 is due upon enrollment and billed to your account.

- If you withdraw your child from the program and re-enroll, another enrollment fee will be charged to your account.
- An annual supply/activity fee is charged to your account (50% deducted the first pay period of April, 50% deducted the first pay period of October).

These fees are non-refundable. An excessive usage fee of \$15.00 per hour will be charged when the child's attendance exceeds the allotted 47 hours per week. Our regular business hours are from 6:00 a.m.–6:30 p.m. We require 24-hour notice for extended hours. If your child is picked up after 6:30 p.m. without notice or later than 7:30 p.m., an additional charge of \$5.00 per five-minute increment will be charged. In the event that the total fee is not deducted from the employee's paycheck, the employee is required to make arrangements to pay the balance to the CDC office immediately. Payment of fees is required in order to maintain enrollment in the center.

Teacher Conferences

Please keep in mind that teachers are responsible for the children in their classrooms. If you need a conference with your child's teacher, we will be glad to make arrangements for you to speak privately with your child's teacher while another teacher is in the classroom supervising the children.

Parking

There are four designated spaces in front of the building.

These are to be used for quick (five minute) drop-off or pick-up times.

In order to avoid blocking access for others, please use the marked spaces only. Parking is provided for parents when dropping off or picking up their children. Spaces for

15-minute parking are available in the first row of the parking lot. Please do not use these spots if you plan on being in the center longer. The covered area will be used for

drop-off and pick-up assistance during severe weather.



Medical Disability/Leave of Absence

If the LMC employee is out on medical disability, the tuition fee is due in full every payday. Employees who go out on medical disability are expected to communicate their situation to the CDC director and make arrangements for payment if they intend to have the child continue at the center. If a disabled employee cannot afford to make tuition payments, he or she has the option to keep their child at home and we will hold his/her space for up to 12 weeks. We encourage parents to carefully consider their options. Children will not be allowed to continue attending if payment is not received in two consecutive pay periods.

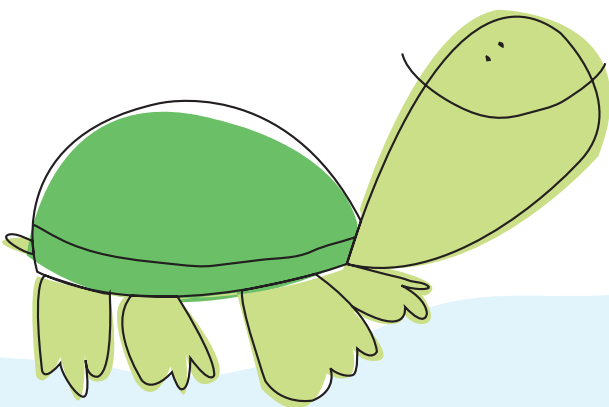
Employees who have been granted a leave of absence or will be away from their duties for an extended period of time may continue the enrollment of their child in the CDC. This privilege is based on the condition that the utilization of the center remains the same and is limited to a period of 12 weeks. Payment must be made by special arrangements approved by the center's director.

Withdrawal

Withdrawal from enrollment requires a two-week written notice. Vacation days cannot be used during this notice. Withdrawal forms are located in the CDC office. The regular fee will be charged when proper notice is not given. Withdrawal from enrollment will occur immediately if an employee is terminated.

Schedules

If you utilize the center less than four days a week, it would help the teachers to know the days you will have your child at the CDC. If your schedule changes, please call the front desk at (803) 791-2339 and we will let the classroom know of the change.



Partnering through Communication

Communication is vital in forming a partnership between parents and staff. We want to keep you informed about your child's growth and development, routine, daily care needs and any significant occurrences during the day. We encourage an open-door policy for you to visit. Please be aware that our teachers must focus their attention on the children in the classroom. When a teacher is meeting with you, there is 50 percent less supervision and care being given to the children. If you feel the need, we will be happy to set up a conference with your child's teacher.

As educators, it is our responsibility to keep you up-to-date with current information and research concerning your child's health and overall development. As parents, you need to supply us with details concerning your goals and expectations for your child. It is also important that you inform us of any significant changes in your child's routine or any significant events in your child's life. Please let us know if there are any changes in your child's emergency contact information so that we will be able to reach you at all times. For your child's safety, let us know immediately if authorizations for pick up change.

To ensure that you receive accurate information about your child's day, each teacher will complete a daily information sheet.

It is important that parents take the time to review daily sheets and folders. Communication is also enhanced through parent bulletin boards, newsletters and classroom newsletters/calendars.



Specialized Care

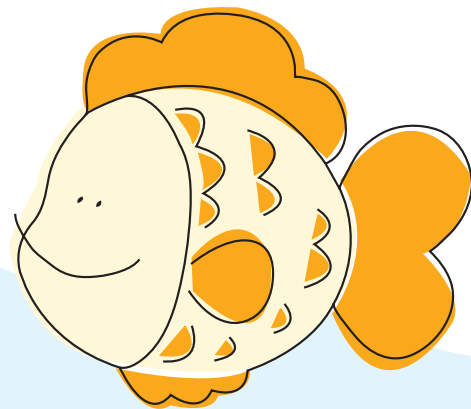
Our goal is the success of every child enrolled at the CDC. Our center is designed for quality group care and instruction. This setting does not allow one-on-one care for children with specialized needs. If your child consistently demonstrates aggressive behavior while in our program, we will work with you and the classroom teachers to resolve the issue. If we cannot resolve the issue and it affects the program for the other children in the classroom, you may be asked to remove your child and seek counseling before he or she can return to our program.

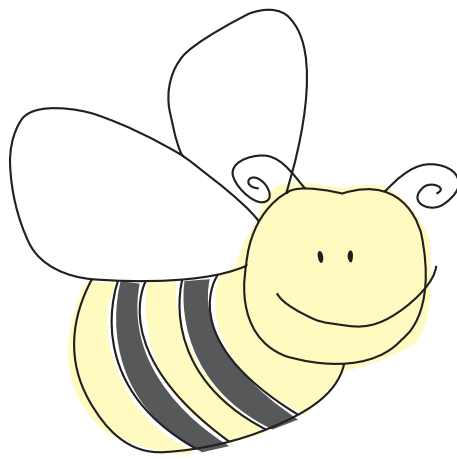
Confidentiality

All Lexington Medical Center employees sign confidentiality statements each year. CDC staff is expected to share information concerning a child with caregivers who have contact with the children, administration and the child's parents only. Staff should not share information concerning a child with other parents. All child and staff records are stored in a locked cabinet in a locked file room. Only management has keys to the file room. DSS also has the authority to look at files. We do not allow students, volunteers, or anyone beside the CDC staff or the child's parent to photograph or video inside our center.

Hiring Staff Policy

As a long-term practice, Lexington Medical Center completes state and national background checks on every post-contingency offer. This means that the offer is extended, but contingent upon the successful receipt of appropriate background checks, including a statewide SLED report and a nationwide criminal history search, before an employee starts his/her employment with the health district. Be assured that LMC has already completed both state and national background checks on all employees PRIOR to their first day on the job. Likewise, LMC does not employ anyone, even on a provisional basis, if they have a criminal background that may be harmful to children.





CURRICULUM

The center uses Creative Curriculum as a framework for developmentally appropriate practice. Teachers plan and implement hands-on learning through discovery activities that integrate all areas of development. Children learn best through play; thus, the curriculum arranges the environment to encourage exploration and connection. Teachers use their creativity and knowledge of early childhood development to plan appropriate experiences around central themes. The overall goal of our programming is to develop children to their fullest potential in all areas of growth. These areas include physical, social, emotional and cognitive development. Academics are introduced to preschoolers through literacy activities, small group instruction, real-life math concepts, problem-solving strategies, and inquiry to help children develop the ability to use higher order thinking skills. Skills are taught in an integrated fashion so that the child can experience connection with meaning. Each class will distribute packets that describe the specifics of their individual classroom.

Field Trips

Field trips are an effective way to reinforce and extend the learning goals for children. Field trip experiences are carefully planned in advance, and parents are given proper notification of details. Children will be transported on the center's buses. A parental permission form is included in the registration packet. Children will begin taking field trips in the Pre K-4 classes. Pre K-4 classes will take eight field trips per year. Field trips are a privilege reserved only for the children who we can trust to follow the rules and directions of the teachers. The first time a child misbehaves during a field trip, he/she will not attend the next field trip. The second time a child misbehaves on a field trip, the child will not attend any more field trips. Field trips for the summer are announced in March. Summer field trip fees will be payroll deducted prior to the first field trip. Field trip fees cannot be refunded.

Rest or Nap Time

Children who are 1 year and older are given a nap from approximately 12:30–2:30 p.m. each day. Rest time is required by state regulations. We would appreciate it if you could arrange pick up before or after nap. In order to eliminate a lot of disruption during nap time, drop off must be before 12:30 p.m. or after 2:30 p.m. Since resting ratios can be higher than active times of the day, nap time allows teachers to relieve each other for lunch breaks. No child will be required to sleep, but each child is required to have quiet time and remain on their mat until the rest of the period is over.

Physical Activity

Lexington Medical Center's CDC encourages children to participate in a variety of daily physical activities that are fun and appropriate for their age. We expect children to go outside every day. If your child is too sick to go outside, he or she is too sick to be at the CDC. Please keep children at home until they feel well enough to go outside. Our center provides numerous physical activity opportunities throughout the day:

Outdoor Play

- Encourage a safe environment for infant and toddlers at all times.
- Designate a safe outdoor area for infants (ages 0–12 months) for daily outdoor play.
- Provide toddlers (ages 1–2 years old) with two or three outdoor active play opportunities for a total of 60–90 minutes each day.
- Provide preschoolers (ages 3–5 years old) with two or three outdoor active play opportunities for a total of 90–120 minutes each day.
- Increase indoor active playtime, if weather limits outdoor activities.
- Offer a variety of play materials (indoors and outdoors) that promote physical activity.

Role of Staff in Physical Activity

CDC staff will encourage children to be physically active indoors and outdoors at appropriate times. For children age 3 and older, staff will provide 5–10 minutes of planned physical activities at least two times daily.

Screen Time Limitations

Screen time (e.g., television, movies, video games and computers) is not permitted for infants and children 2 years old and younger.

Appropriate Dress

Please bring your child ready to play and have fun each day. Children will participate in indoor and outdoor play. Appropriate play clothes and shoes can get dirty, and allow for free and safe movement. During every season, parents need to provide children with appropriate clothing for safe and active outdoor play.

Withholding Activities

Staff members will not withhold physical activity unless a child's behavior poses a danger to self or others. In addition, playtime and physical activities are never withheld to enforce the completion of learning activities or academic work. Our center uses appropriate alternate strategies as consequences for negative and undesirable behaviors. We would never use physical activity or exercise as punishment (e.g., doing push-ups or running laps).



Nutrition

Good nutrition is vital to a child's overall development and well-being. Lexington Medical Center's CDC follows the child care nutrition guidelines recommended by the U.S. Department of Agriculture's Child and Adult Care Food Program. We plan our meal and snack times so that children are offered a variety of nutritionally balanced, high-quality foods every four hours. **Please do not send your child to the center with foods and drinks to be eaten during our scheduled meals, unless your child has food allergies or your family has religious/personal beliefs prohibiting meat or dairy products.**

In an effort to provide the best nutritional environment for children, our center has developed the following child care nutrition policies to encourage the development of good eating habits that will last a lifetime. These policies provide a healthy and balanced diet that includes fruit, vegetables and whole grains as well as limits foods and beverages that are high in sugar and/or fat.

Fruit and Vegetables

- Two daily servings of fruit
- One daily serving of vegetables (other than white potatoes)

Grains

- One daily serving of whole grains

Beverages

- Skim or 1% milk for children age 2 and older
- Water
- 100% fruit juice, when served
- No sugar-sweetened beverages

Fats and Sugars

- No more than two servings a week of high fat meats, such as bologna, bacon and sausage
- One weekly serving of fried or pre-fried vegetables, including potatoes
- No more than two sweet foods a week

Role of Staff in Nutrition Education

Our staff provides opportunities for children to learn about nutrition at least once a week. They also act as role models for healthy eating in front of the children.

Weekly Menus

The hospitals' nutritionists carefully plan our weekly menus to follow child care nutrition guidelines for every meal. These menus are designed to provide a variety of nutritious foods that are different in color, shape, size and texture. All of our child care menus include foods that are culturally diverse and contain fresh, in-season produce when available. We also introduce new and different foods as well as incorporate some of the children's favorite recipes in our menus. We rotate these menus every five weeks, providing children with a balance of variety and familiarity.

Nutrition and Punishment

Staff will never use food as a reward or punishment.

Professional Development

Our staff members are required to participate in annual nutrition training to ensure that they understand nutrition's role in the overall well-being of children.

Serving Times

Breakfast is served in the classrooms from 8:30–9:00 a.m. If your child arrives after that time, please make sure he or she has already had breakfast.

Lunch is served between 11:15 a.m.–12:00 noon.

Afternoon snack is served at 2:45 p.m.

If your child is scheduled to be at the center after 6:30 p.m., you must send something for your child's dinner.



Transitions

Transitioning to another class for infants and toddlers is arranged according to the developmental needs of the child and availability of space. Transitions do not coincide with the child's birthday. We do transition the children in August to the appropriate preschool classrooms each year; however, transitions will occur at any time that we, in partnership with the parents, feel necessary. You will be contacted with the actual date that your child will be transitioning and other relevant information.

Your child's teacher and CDC administration will make decisions concerning transitions and classroom placement. While we welcome the parent's input, we cannot guarantee that children will be placed as requested due to space availability/limitations; however, we will consider your request. Transitions and placements are done after considering the needs of the individual child and the center as a whole. Our goal in transitions is to place your child appropriately for her or his developmental stage.

Additional Nutritional Information

It is extremely important to notify the center of any food allergies so we are aware and can keep your child's food isolated. Parents of infants should provide unopened baby foods, cereals and formulas that are not available at the center. Parents of children with allergies should provide alternative food options.

The center strives to partner with families to accommodate the nutritional and cultural needs of each child. It is important to indicate any special dietary needs (e.g., allergies or cultural/religious dietary restrictions) on enrollment forms. Parents need to bring these needs to the attention of the caregivers at the time of enrollment and when their children transition into a new classroom. Children will be offered our daily menu items unless other arrangements have been made. Parents will be asked to provide alternative meals and snacks if the regular menu cannot accommodate their children's dietary needs. All food brought from home must follow our nutrition guidelines. Do not bring sweets, fast food (McDonald's breakfasts) or soft drinks for your child at the center.

Allergies

To keep their children safe, parents of children with known allergies must provide the CDC with a note from the child's doctor stating the allergy. This note must be updated every 12 months. Parents will also be required to review and sign the center's allergy policy.

Our allergen avoidance policies are designed to reduce the risk of exposure to potential allergens. We work hard to keep children free from reactions, but it is not possible to achieve a completely allergen-free environment in any service open to the general community. Depending on the severity of the reaction to an allergen, group care may not be the appropriate setting for your child.

Positive Guidance and Discipline

The ultimate goal of discipline is to guide children in understanding right from wrong through teaching, guiding and role modeling. The CDC staff uses positive guidance to help children learn:

- self control;
- the ability to make appropriate choices;
- identify feelings and emotions and take control of them;
- develop an understanding of respect for self, others and things;
- an understanding of positive and appropriate core values;
- an understanding of right and wrong.

The CDC staff uses the following techniques to guide children in a positive ways:

1. Role modeling appropriate behavior, play and conflict resolution.
2. Positive verbal guidance with problem solving.
3. Labeling of feelings as they are demonstrated.
4. Gentle redirecting.
5. Solitary “calm-down” time when needed to regroup.
A child will be in time-out for a number of minutes equal to his or her years of age. (For example 1 year old = 1 minute, 2 years = 2 minute, etc.)
6. Taking away privileges or materials that are not handled with respect.
7. Reinforcement of limits, rules and expected behavior.
8. Praise for appropriate actions.
9. Loving assurance and acceptance under all circumstances.
10. Maintaining the dignity and integrity of every child.

Under no circumstances will staff at the CDC use any form of corporal punishment, embarrassment, belittling, or verbally abusive language or tone when interacting with children. CDC staff will never withhold or threaten to withhold food as a form of punishment. If any of the above is witnessed, please report the incident to the director or manager immediately. CDC staff is guided to use the above techniques in a nurturing way to promote positive social-emotional development.

Good discipline takes a cooperative effort between parents and caregivers. Please partner with your caregivers to offer suggestions and support from home. **If your child exhibits behaviors that are harmful to self or others (including CDC staff); you will be**

notified and may be required to have a conference with the director. Your child can return the next day unless the director requests a conference with the parents. If a conference is requested, you must meet with the director before the child can return to the CDC. If we call concerning a behavior problem with your child, you will be expected to pick up your child within 30 minutes. Occasionally a child does not respond well to positive guidance.

The Child Development Center at Lexington Medical Center does not permit any form of corporal punishment or physical force.

Behavior Plan

If a child is having behavioral difficulties that threaten harm to self or others, a behavioral intervention plan will be developed with the parents, teachers, manager and director. This plan will include the following steps:

1. A written plan will target specific behavior and give consequences that parents and the school will render.
2. After such plan is attempted for two weeks, the parents and team will have a follow-up conference.
3. If no improvement is noted, the team will review anecdotal notes of behavior samples along with intervention strategies and redevelop the behavior plan.
4. Another follow-up conference will be held in two weeks. If behaviors do not improve, exclusion from the center may be the final action.

This policy protects all children and ensures that children with social-emotional concerns receive intervention in a timely manner. If the parents of the behaviorally-challenged child do not cooperate fully with the center, the child will be excluded from the program. The center reserves the right to exclude a child due to extreme behaviors and/or a lack of cooperation by the child's parents.

SAFETY

The CDC takes safety very seriously. You have trusted our staff with the care of your most precious treasure. That responsibility is an awesome task that we take to heart. Risk management is a part of every day. From playground zoning to washing hands, the staff works diligently to provide a safe environment. If you have suggestions that will improve safety, feel free to share those at any time. The CDC can never be too careful when it comes to the safety of your child. Please be aware of your duties where safety is concerned. Watch your children carefully when exiting the building. Be sure that they do not run in the parking lot. Make certain that you have the correct child safety restraints in your vehicle. Drive slowly in our parking lot because children may dart out quickly in front of your car. Be sure to walk with your child to the classroom upon arrival and pick-up times. We will not send your child outside to your car nor release your child to an older sibling unless they are older than 18 and authorized for pick up. Watch your child closely in the hallways and lobby.



Immunizations

You must submit a Certificate of Immunization for Day Care Attendance (DHEC 1148) upon enrollment. As a courtesy, you will receive a reminder from our office before your child's immunization is due. Your child may attend the CDC for no more than one month after the "Date for Next Immunization" shown in Section One of the certificate. Please remember to ask your immunization provider for the correct form (DHEC 1148) each time your child receives immunizations. Return the form to the center's office or fax it to (803) 791-2847. This is a DSS regulation.

A child may attend the Child Development Center for no more than one month from the expiration date on the immunization record.

Emergency Medical Plan

In the event of a medical emergency (fever higher than 101°, bleeding, severe injury to limbs, possible broken bones, non-responsiveness), the CDC staff will:

- Make every attempt to contact the parent.
- If needed, the child will be transported to the Emergency department at Lexington Medical Center by bus, shuttle or Public Safety accompanied by a CDC staff member who will have with the child's medical information file. Parents will be contacted to meet us in the Emergency department.
- If needed, an ambulance will be called to the CDC. The parent is responsible for all medical costs for injury or illness. All accidents will be reported to the parents on an incident report requiring the parent's signature. A copy will be placed in your child's file.
- A CDC staff member will remain with your child until you arrive.

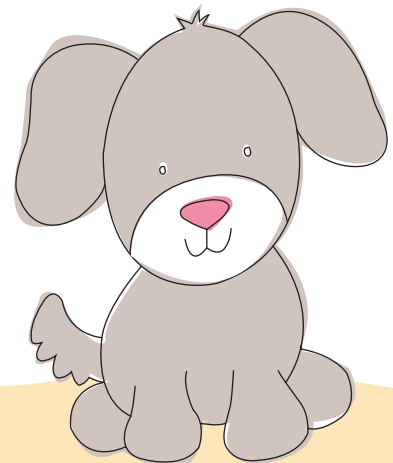
Disaster Plan

In the event of a disaster that required the evacuation of the CDC, the following steps will be taken:

1. Public Safety will be called to assist with crowd control and transportation.
2. Parents will be notified to come pick up their child if possible.
3. Children who could not be picked up would be transported to the auditorium of the hospital, which can provide access to necessary equipment and food.

Fire and Evacuation Procedures

Fire safety and prevention are important parts of our center's operations. Periodic drills are performed that are unexpected and planned. Evacuation procedures are posted in all rooms and staff is oriented on evacuation procedures. If we are unable to return to the center, the staff and children will be transported to the auditorium by the buses, Public Safety and the shuttle service.



Reporting Abuse or Neglect

The center is mandated by law to report suspicion of child abuse or neglect. The law requires reporting for the following:

1. Any physical injury, sexual or emotional abuse inflicted on a child by those responsible for his or her care, custody and control (with the exception of discipline including spanking administered in a reasonable manner) shall be considered abuse.
2. Failure by those responsible for the care, custody and control of the child, to provide the proper or necessary support and education as required by law, and medical, surgical or any other care necessary for his or her well-being shall be classified as neglect.



IMPORTANT!

Telephone Information

The telephones in the classroom are for emergency communication. Please limit calls to urgent needs. We err on the side of caution at all times and contact the parent if we see any “out of the ordinary” behavior with your child. If you are not hearing from us, know all is well. Staff will not give out information concerning a child unless the person calling can be identified as the custodial parent or guardian.

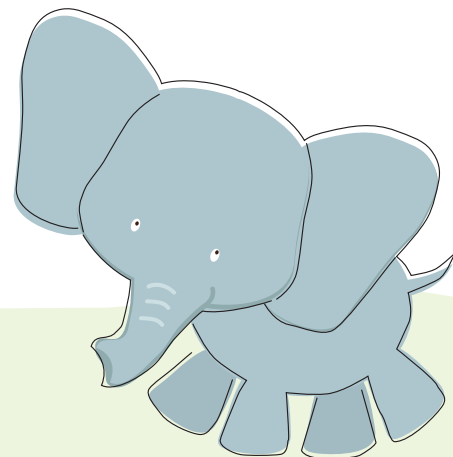
Health Policy

One of the goals at our center is to provide a safe and healthy environment for all of our children. We recognize the dilemma created for working parents when a child becomes ill; however, we are licensed and equipped to care for well children only. In addition to being unable to care for ill children, it is important for us to control and/or prevent the spread of communicable diseases among the children and the staff. It is our strong recommendation that you plan in advance for sick care for your child as we are held to DHEC illness standards for the children in attendance. We appreciate your help with maintaining the health policies of the center. Guidelines have been established in order to achieve this goal. **It is essential that staff and parents cooperate and adhere to the policy for the protection of every child.**

To reduce cross infection and ensure a speedy recovery, we are unable to care for children with the following symptoms:

- Temperature of 101° or higher
- Conjunctivitis (pink eye) until the eye has been treated and no longer draining
- Head lice (must be lice and nit free before returning; child must be checked by a CDC staff member before entering classroom)
- Strep throat
- Diarrhea (three or more times for infants, two or more times for toddlers and preschoolers)
- Vomiting
- Symptoms of possible severe illness (lethargy, irritability, persistent crying, breathing difficulties or other unusual signs)
- Contagious diseases
- Rash

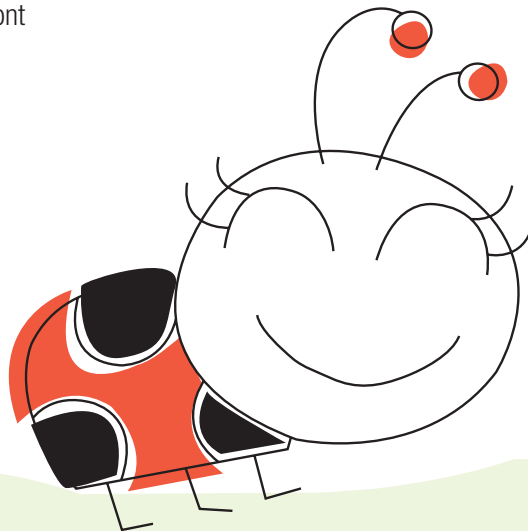
Children can return to the center after vomiting, diarrhea and fever have subsided for a full 24 hours. If antibiotics are necessary, the child has to be treated for **a minimum of 24 hours** before returning to school. If the child has contagious symptoms, you will need a note from your pediatrician telling us your child is no longer contagious. If your child has an ear infection or something that is not contagious, please inform the director or program coordinator when returning your child to school. You will be asked to pick up your child from the center if any of these illnesses or symptoms occur during the course of the day. **A prompt response by parents is essential.** If parents cannot be contacted or do not respond, the emergency contact on the child's enrollment form will be notified.



Medication

Prescription medications will only be administered with written permission from a parent and medication must be in the prescription bottle with instructions on the bottle. If your child needs prescription medication while at the center, the parent will need to fill out the purple medication permission form located in the office. Please note the following medication policies:

1. Medication prescribed for anyone other than the indicated child will not be administered.
2. A medication form is only good for one calendar week. A new form must be filled out weekly. If your child is on a daily medication, you can complete the form and write a note for your child's file giving us permission to administer the medication daily.
3. All information must be filled out completely on the form for proper dosage and times.
4. Medications that are not currently being used must go home.
5. Do not leave any medications in your child's cubby or diaper bag (book bag). If medication is found there, it will be removed and you will be notified to pick it up at the front office.
6. We cannot administer any medication with expired dates.
7. Medication that needs to be administered at the center requires a signed Medication Authorization Form and must be a prescription medication. We will administer as authorized on the prescription label on the bottle. If your child needs Tylenol® during the day, the parent needs to contact the director to administer it or administer it themselves. Over-the-counter medicine can be administered for 24 hours with a parent's authorization. Continued usage requires a physician's written authorization. This is to protect the other children from being exposed to contagious illnesses where symptoms are masked by the medicine. Teachers will not administer over-the-counter medication. If your child has an allergic reaction, we will contact the parent immediately. If necessary, we will transport the child to the Emergency department.





Sunscreen

If you want sunscreen applied to your child during the day, you will need to provide a new bottle of sunscreen each spring with your child's name clearly written on the bottle and the date you are bringing it to the center. Parents need to apply the first application of sunscreen in the morning. CDC staff will apply the next application of sunscreen after nap each day. CDC staff will apply sunscreen to your child's face and hands if it is the tear-free sunscreen or a face stick. Regular sunscreen will not be applied to your child's face or hands due to eye irritation/burning.

Diapers & Clothing

You are responsible to make sure your child has diapers, wipes and extra sets of clothing at the center at all times. Teachers will let you know if your child is running out of these items through the daily sheets. **Note: The CDC utilizes disposable diapers and wipes exclusively.**

We do not have extra clothes for children nor can we "borrow" from other parents. Please make sure you keep an extra set of clothes and shoes in your child's backpack or diaper bag.

Potty Training

At the CDC, we will begin introducing potty training to children in the 2-year-old classrooms. A child will never be forced to sit on the potty until they urinate. Potty training will always be done in the child's time with the parent and child's cooperation. The toddler age group is an aggressive stage of development and teachers need to focus their time and attention on supervision, maintaining order in the classroom and teaching the children. The transition from toddlers to the 2-year-old classroom is often more difficult for some children and, in most cases, children will begin having accidents again. All children are expected to be fully potty trained before they will be moved into a 3-year-old classroom. This includes bowel movements.

When potty training begins, it is important that parents and teachers work together to potty train a child.

- A child will need to wear Pull-ups® and elastic-waist pants to school during potty training.
- For health reasons, the child cannot be put into underwear at school until he/she is accident-free during the day.
- Once the child is ready to wear underwear, he/she will need to wear underwear at home and at school except at night when sleeping.
- If your child is unable to wear underwear in your car, on your furniture, or out on errands, they are NOT ready for underwear at the CDC.
- If a child wears underwear at school and a Pull-up at home, potty training will not work. This method confuses and frustrates the child.

This method confuses and frustrates the child. In order for potty training to work in the best interest of the child, parents and teachers have to agree when the child will be put in underwear and follow the same method. We will not start potty training in the toddler classroom unless the child is verbalizing that he/she has to go potty while at school.

Open-Door Policy

The CDC has an open-door policy and parents are welcome to come visit their child, eat lunch with their child, or observe their child in the observation rooms at any time. Free and full access will be granted to parents of children enrolled unless court order stipulates otherwise. We require that a copy of any court orders that exclude a parent from free access be on file. The visit must not disrupt instructional activities or classroom routines. Conferences with teachers will need to be scheduled in advance to staff the classroom during your conference. Pictures and videos are permitted of your child in the CDC.

Biting Policy

Why Do Children Bite?

Even the best child care program, outbreaks of biting occur among infants, toddlers and preschoolers. This can be scary, frustrating and stressful for children, parents and teachers. Unfortunately, this is a natural phenomenon and a developmental issue. We should not blame a child, teacher or parent. There is no quick and easy solution to a biting problem.

If a child is not around other children, biting usually does not become a problem, but child care is group care. Biting is a much bigger problem in a group care setting and a risk when putting your child in group care.

How do teachers handle biting?

At the CDC, when a child bites another child, the first response will be to comfort the victim and apply first aid. The biting child will be told gently but firmly, "No biting, biting hurts." He or she will help the teacher apply first aid and comfort to the bitten child. The biting child will also be set aside or sent to the front office for a short "time-out" away from his/her friends if the biting is habitual. A biting form and an incident report will be sent home with both children in their folders. If a child is bitten on the face or the bite breaks the skin, the teacher will contact the parent by phone.

While our staff strongly disapproves of biting, we also understand that toddlers bite for a variety of reasons, none of which are related to behavior problems. Toddlers do not bite to "hurt" or cause "harm." They bite because their mouths are very sensitive and they learn a lot by putting things into their mouth. Toddlers are also teething and the pressure of biting on anything relieves the pain of teething. Toddlers are easily frustrated because they struggle to communicate their needs and will bite down on something out of absolute frustration. Toddlers are aggressive by nature and do not yet know "right" from "wrong" responses and reactions. Our job as parents and teachers is to gently teach appropriate responses, encourage language development, supervise closely and make sure the learning environment is appropriate for the children.

Biting Policy (continued)

School and Parents Working Together

At the CDC, our staff strives to provide a safe and nurturing setting for your child to grow and develop. When a biting incident occurs, our focus is not on punishing the child for biting, but to effectively address the reason for the biting. Neither delayed punishment at home (which a child will not understand) nor punishment in the center (which may make the situation worse) helps. The CDC does not and will not use any strategies that harm a child or are known to be ineffective. If a child repeatedly bites, the parents and school will need to work together in order to change the behavior.

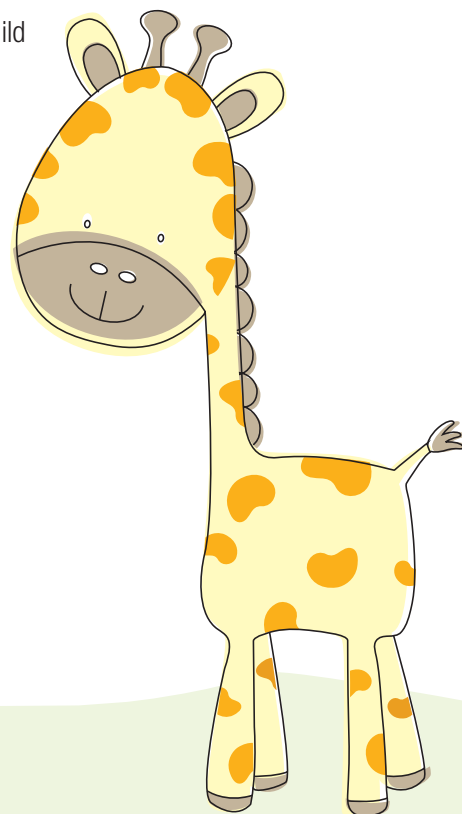
1. Both the parents of the biter and the parents of the bitten child will receive a biting form and an incident occurrence form.
2. If a child bites three times in a week, we will call a parent-teacher conference with the parents, teachers and director. At this conference, we will determine the most effective method for parents and teachers to respond to the biting. Our goal will be how to best prevent a biting environment to break the “habit” of biting. A two-week follow-up meeting will be scheduled prior to the end of the conference to follow up on how the new attempts are working.
3. If biting persists in spite of our best efforts to change the behavior, we reserve the right to request that a child withdraw if necessary.

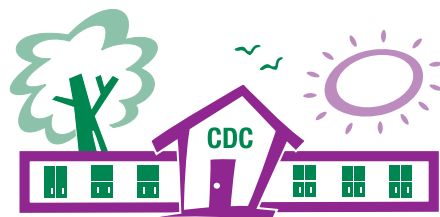
This same 3-step policy will be enforced for any excessive aggressive behavior that is significantly impacting the classroom atmosphere and safety. This would include hitting, pinching, scratching, and kicking.

Any repeated acts of aggression towards our teachers will not be tolerated.

If this should occur, we will call the child’s parent immediately, remove the child from the classroom and the child’s parent will need to meet with the director before the child can return to class.

This handbook is updated periodically. It is the parent’s responsibility to stay informed of any changes.





Child Development Center

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