

# OUR CHILDREN'S CENTER, INC.

## 2016 PARENT HANDBOOK

*Dedicated to  
excellence in  
the early care  
and education of  
young children*



### WELCOME!

**Our Children's Center**

90 North Main Street

West Hartford, CT 06107

Phone: 860-561-0569

Web: [www.occd daycare.org](http://www.occd daycare.org)

Email: [our\\_childrens\\_center@yahoo.com](mailto:our_childrens_center@yahoo.com)

Christina Pascale, Executive Director

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***The purpose of this handbook*** is to provide you with information about policies and procedures of OCC. We want new and existing parents to feel a part of our community by knowing what goes on and how to prepare your child for the best experience possible. Please don't hesitate to contact Our Children's Center with questions.

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### ***The Vision of Our Children's Center***

We are an **early childhood education program**, which means that, we...

- Emphasize warm, loving caregivers who create a comfortable, family type atmosphere.
- Make keeping our children safe and happy a priority.
- Understand that learning takes many forms for young children and academics are only one type.

We are a **community** and strive to create a family atmosphere, which means that, we...

- Believe that raising our children well is the most important job we have in this life.
- Believe in supporting the center through time, energy and donations.
- Welcome new families into our community.
- Cherish our staff as valuable professional resources and strive to integrate them fully into our community.
- Host OCC events that allow families and staff and children to get connected.
- Encourage the relationships among older / younger children.
- Stay small so that we remain connected.
- Is a non-profit organization that is parent-run.

We provide a **diverse** and non-biased environment which means that we...

- Expose our children to a wide variety of people and experiences and teach them that all of them are valuable.
- Welcome all families that are interested in our center regardless of background or family characteristics as long as we can meet the child's needs.

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### ***Parent's Role at OCC***

OCC is a place where each child is treasured as a unique human being. Teachers are our major asset. The Directors and teachers are genuinely dedicated to working with children in their early years and have been prepared by education, experience, or a combination to help guide children during their formative years. However, without you to complete the partnership it is incomplete. Expect daily contact from your child's teacher on progress and feel free to bring up ideas and thoughts or to provide feedback. As a partner in the development of your child, the Board, the Executive Director and the staff are always interested in your comments regarding the care and education of your child. Feel free to drop in on the Executive Director, give a call or send an e-mail. The OCC Board of Directors governs all functions to assure that quality standards are met. It is parent run. Ask the Executive Director for more information about becoming a Board member.

## Our Staff Goals

Overall we strive to serve the needs of working parents by dedicating ourselves to excellence in the early care and education of young children by:

- Providing a warm and nurturing atmosphere within a safe, healthy environment
- Encouraging the growth of the whole child - mentally, physically, and spiritually
- Designing an environment that helps children recognize their value as individuals and that promotes self-respect.
- Allowing opportunities for the children to grow in social skills through positive interaction with other people, while respecting each others' diversity
- Creating a sense of community based on love and mutual respect.
- Developing, through a variety of creative and discovery experiences, a love of learning that will sustain the children throughout their lives.

## How to Enroll?

Policy	Details
Requirements	<p>OCC welcomes children age 8 weeks up to Pre-Kindergarten, if space permits and the following requirements are met:</p> <ol style="list-style-type: none"> <li>1. The child and his/her parent/guardian have visited and understand the program and goals.</li> <li>2. The Executive Director believes we can meet the needs of the child.</li> <li>3. Written verification of a physical exam is provided to us prior to enrollment, and annually for children three and under.</li> <li>4. Written verification of required immunizations is provided for all children.</li> <li>5. Signed enrollment agreement, the medical form and emergency numbers, and an understanding of OCC policies are completed.</li> </ol>
Fees	<p><b>A non-refundable registration fee of \$150.00 is due prior to enrollment.</b></p> <p>An escrow (deposit) payment equal to two weeks tuition is also required at the time of registration. This amount is applied to the child’s last two weeks at OCC when 4 weeks written notice is given.</p> <p>See <b>Current Fees</b> appendix for specific information.</p>

## Schedule

<b>Regular Days</b>	<p>OCC is open year round from 7:30 a.m. to 5:30 p.m., Monday through Friday.</p> <p>The program is closed on the following holidays - New Year's Day, President’s Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving and the day after, Christmas Day and either Christmas Eve or the day care Christmas - depending on when the holiday lands on the calendar.</p> <p>OCC occasionally closes on additional days depending on when holiday</p>
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falls. We reserve the right to close additional days if deemed necessary by the Board.

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**Late Pick Up Charge**

If a parent anticipates being late, a phone call should be made to the center letting the Executive Director and teachers know the situation for being late and when a parent will pick up their child(ren). (Note this does not relieve parents from paying a late fee if they pick up late; see below for the amount charged for a late pick up. If a parent does not call the center to let staff know they will be late, the following procedures will take place:

- First, the child is brought to the office to be picked up after 5 minutes;
- A first attempt phone call is made to the child’s parent(s); if a parent cannot be contacted;
- The teacher or Director will attempt to contact the individuals listed as emergency contacts which are located in the child’s folder and on the emergency card in each classroom, if none of the emergency contacts can be reached;
- One more attempt will take place to call the child’s parent(s); if still unsuccessful and more than 20 minutes have passed;
- West Hartford Police will be contacted and they will give instructions to the teachers/director regarding how to handle the situation.

If a parent does pick up their child late (more than 5 minutes) a \$25 late fee will be applied to their account and \$1.00 will be added for every minute thereafter.

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**School Closings**

In case of inclement weather, the OCC Board President and Executive Director make a decision storm by storm as to whether the center will open late, close early or close for the day. If the Governor closes all office of the government, OCC will be closed. Information regarding the status of the center can be found on Channel 30 news and our answering system – 561-0569. Any decisions are made by 5:45am and are posted by 6:00am.

If a problem arises at the Center, such as no heat or water, we will also close. Otherwise, we remain open.

If the Center closes during the day, parents are called individually.

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**General Policies**

Policy	Details
<b>Arrival and Departure</b>	Parents are required to SIGN IN (your name, time, and phone number) upon arrival and SIGN OUT (your name and time) departure from the Center (The sign in forms assure accurate headcount in the event of an emergency). The sign in and out sheet is found on a clipboard in <u>each classroom</u> .  Children are never permitted to be dropped off at the curb or front door or called to the car.  Parents must turn their vehicles off. <b>Do Not Leave Your Car Running!</b>

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Upon arrival, you should drop off your child in their classroom. Encourage your child to follow all classroom and OCC policies. When picking up, please gather projects, soiled clothing, etc. and let the teacher know you are leaving.

**Note: If a family has more than one child, the youngest child should be picked up first and signed out accordingly.**

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**Authorized Persons** Only persons authorized in writing by the parent may pick up a child from OCC. Children must be signed in and out by the persons dropping off or picking up. People picking up children for the first time must show identification. No child is released without prior approval and ID. OCC assumes no liability if not properly advised.

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**Security Procedures** See Appendix I for Security Procedures

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**Medication** Medications are given to children when their doctor and parent have completed the appropriate required forms. Records are kept on file. All teachers must be trained in Medication Administration, Epi Pen Trained and CPR/First Aid prior to be allowed to give children any form of medication. Topical medications require a permission slip from the parent as does any other type of liquid medication.

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**Emergencies** The staff at OCC makes every effort to ensure the safety of your child.

- ✓ Unfortunately, minor accidents occur. In that event, a trained staff administers first aid.
- ✓ To keep you informed, an accident report is provided. Both you and the staff person sign it. You receive a copy and one is filed. Our School Nurse reviews the report and files them.
- ✓ In case of a serious accidental injury, we will contact you immediately.
- ✓ If we cannot reach you, we call the person indicated on the enrollment form. Please keep these numbers updated!
- ✓ The Executive Director or Staff person stays with your child until you arrive.
- ✓ If necessary, your child is taken to CCMC in Hartford via ambulance.

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## **Health and Safety Policies**

The following guidelines are designed to ensure a safe and healthy environment for your child and the entire center. Please respect them.

<b>Policy</b>	<b>Details</b>
<b>General Illness</b>	Your child's health is of major importance to you and to us. If your child becomes ill at OCC, parents may be notified to arrange for <b>immediate</b> pickup. Your child may be isolated from other children until you arrive.

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Policy	Details
	<p>A call is made when a child exhibits one or more of these symptoms:</p> <ol style="list-style-type: none"> <li>1. A temperature of 100.5 degrees or more.</li> <li>2. Vomiting.</li> <li>3. More than one loose/liquid stool (diarrhea).</li> <li>4. Unexplained rash.</li> <li>5. Symptoms of a communicable disease. See <b>Appendix A</b> for more information.</li> </ol> <p>Please notify the Executive Director as soon as possible of any illness or communicable disease that prevents your child from attending OCC so that parents and teachers can be alert for the symptoms in others.</p> <p>If a child becomes ill during the day but may not have to be sent home for the day, the Executive Director or head teacher will call the parents to discuss the situation.</p> <p>Health records are on file and available in case of an emergency.</p> <p><b>See Appendix 1 for list of illnesses.</b></p>
<b>Supervision</b>	<p>Children are supervised by an adult at all times. Children are not allowed to leave or enter the building without an adult.</p> <p><b>Before children are dropped off in their classroom and upon arrival of a parent to pick up their child, the parent must maintain supervision of his/her child.</b></p>
<b>Fire Drills</b>	<p>Our building is equipped with a fire alarm system and fire extinguishers are placed throughout the building. Monthly fire drills are held (with the exception of the winter months), recorded in the log and kept on file for inspection. Emergency drills are held periodically to acquaint the children with evacuation procedures.</p>
<b>Weather Alerts</b>	<p>If OCC receives a weather alert from a radio station, via telephone or internet, staff will escort the children to safe areas. Fire emergency and weather alert evacuation plans are posted in each classroom.</p>
<b>Emergency Plans</b>	<p>Medical emergency plans and emergency numbers are posted near the telephone in the Executive Director's office and with each telephone located in the center.</p>
<b>Appropriate Shoes</b>	<p>We discourage flip-flops and other types of loose-fitting footwear. These are inappropriate items because they hinder active participation and may cause an accident.</p>
<b>Allergy Posting</b>	<p>Each classroom and various places within the center have a list of children and their allergies; names are not posted for confidentiality reasons. Teachers are aware of each child's name in their classroom that may have an allergy.</p>
<b>Hygiene</b>	<ul style="list-style-type: none"> <li>✓ Staff is required to wash their hands before and after each diaper change.</li> <li>✓ Children must wash their hands especially before eating food and after using the restroom.</li> <li>✓ Diaper changing stations are sanitized after each change.</li> </ul>

Policy	Details
	<ul style="list-style-type: none"> <li>✓ Older children are not allowed to pick up, carry, or feed smaller children.</li> <li>✓ Toys and equipment are inspected frequently for dangerous conditions.</li> <li>✓ Toys that are put in children’s mouths are regularly disinfected.</li> <li>✓ Cots are cleaned and sanitized before reassignment to another child.</li> </ul>

## Daily Routines

Our entire center emphasizes social skills for young children. Children are encouraged to express feelings and articulate rather than act when problems occur. Preschool academic skills are offered as expose experiences, but clear priority is given to teaching children how to get along in the world. All classrooms expose the children to a letter of the week. The craft projects, books and materials available reflect the letter of the week. Weekly/monthly themes are also followed in each classroom. OCC follows the Connecticut Preschool Assessment Framework as developed by the Connecticut State Department of Education.

Each family has a file folder in their child’s classroom. Please check daily for specific information regarding your child, his/her class and the monthly calendar/newsletter, as well as important announcements and tuition invoices and statements.

Ages	Room Descriptions
<p><b>Infants</b> <b>8 weeks to crawling</b></p>	<p>The classroom is bright and colorful and contains bouncers, swings, crawling areas, a library, circle time mats, and much more. The infants have a separate sleeping area away from their daily routine. A teacher monitors the infants when they are sleeping. This infant program provides activities such as singing, dancing, talking, “tummy-time” for sensory stimulation to encourage brain development and mastery of motor skills. Teachers use sign language with the infants on a daily basis as a way of communication.</p> <ul style="list-style-type: none"> <li>✓ This class takes walks in strollers when weather permits.</li> <li>✓ The room is equipment with large and small gross motor development equipment along with books and toys</li> <li>✓ No other children are allowed in the infants' classroom other than the infants themselves.</li> </ul> <p><b>For families with multiple children, please drop off the older child first and pick up the infants first at the end of the day.</b></p> <p><b>This room is designed for non crawlers. Once an infant starts crawling, the move on to the next infant room where they can start to stand and creep along and take their first steps. This room holds only 7 infants.</b></p>
<p><b>Waddlers (Older infants) 9 months to 16 months</b></p>	<p>The classroom is our second infant room but for our older infants. It is designed for the older infants who have started to crawl or starting to stand but need more activities. This classroom holds 6 children and allows them to develop their gross motor skills and social skills with children their own age. The room is colorful, has large gross motor skill</p>

Ages	Room Descriptions
	development materials, warm and cozy corners and lots of planned activities. The areas of development also include a library, mirrors, a ball pit, circle time mats, and much more. This class takes walks in strollers when weather permits.
<b>Toddler I (Walking Toddlers) 10 to 20 months</b>	<p>Once the children have grasped walking and no longer need to hold on to items to get around, they graduate to this classroom. This toddler room is an open concept room with lots of area for your energizer bunny to move, dance, sing, jump, roll, etc. This room emphasizes large gross motor development and is the first room offering structure. Morning free choice, morning snack, planned activities, outdoor/indoor play, lunch, nap, play, afternoon snack followed by more circle time, stories and crafts. The children follow a schedule but also have room for the unexpected. Bottles are no longer needed in this room and independence is encouraged. This room has 8 children.</p>
<b>Toddler II (Younger) 20 months to 34 months</b>	<p>The Toddler II Program includes a variety of activities that build on the toddler's natural curiosity and enhance the child's social development, these include creative and craft art activities, playdough, sand and water tables, circle time, singing and dancing. This group begins to start group projects and circle time activities including calendar, weather watchers, who came to school today, story time, hands on art activities, cooking projects, movement and music and preschool readiness activities. If the child is developmentally ready, toilet learning begins in this room but may be offered in the prior classroom if requested. This room has 8 children.</p>
<b>Toddler II (Older) 24 months to 36 months/3 years</b>	<p>This advanced Toddler II program provides an environment very much similar to our 3 year old preschool program. The teachers in this room work with children who may not be toilet trained to enter the preschool or are very advanced for their age. Language skills, science, hands on art, calendar, weather, assigned responsibilities and more are all included in this advanced toddler program. Children in this classroom are usually potty trained or still working on it and have not yet reached independent skills or have a late birthday which does not allow them entrance into a preschool program. This is a time for a lot of hands-on learning! All activities enhance thinking skills necessary for preschool.</p> <p>If the child is developmentally ready for preschool but may not be completely toilet trained. This classroom has 8 children.</p>
<b>Preschool (2<sup>nd</sup> Floor) 2.9 to 3.5 years and Pre- Kindergarten  3.5 years up to Kindergarten</b>	<p>The preschool program focuses on language, activity and movement with additional emphasis on large muscle activities. In addition to many of the activities that are listed above in the Toddler2 and older Toddler program, the preschool program provides a variety of activities to develop small motor skills, concentration, basic math concepts and problem solving skills.</p> <p>Critical to this age and stage is the on-going development of social skills to prepare the children to enter school. Children must be toilet trained to be in the Preschool. These classrooms combined have 19 children.</p>

## Our Learning Environment

Children between birth and seven years of age are going through a time of the most rapid learning, when attitudes are developed and patterns formed. Their basic feelings toward themselves, other people, and life in general are established during these years. OCC attempts to provide the best learning environment possible with a variety of activities, settings, experiences and interactions. The following list describes some aspects of our learning environment.

Topic	Descriptions
<b>Value of Play</b>	Play is the primary way that children learn. Through a variety of play activities, children use their natural curiosity to master skills, make decisions, accept responsibility, and learn to love and trust. We play a lot at OCC!
<b>Your Child's Personal Plan</b>	<p>Qualified and experienced teachers are dedicated to helping each child achieve his or her potential by encouraging the child's own curiosity and knowledge.</p> <p>In each classroom, children are provided with a rich environment that can be experienced with all their senses. Units of discovery are planned to expose the children to various areas of learning, including practical life, development of the senses, literature, and appreciation of other cultures.</p>
<b>Field Trips (Within the neighborhood)</b>	<p>Using the bye-bye buggy, walking and strollers our children are out and about the town visiting:</p> <ul style="list-style-type: none"> <li>✓ Local Fire Station, Adjoining grounds and Neighborhood parks</li> </ul>
<b>Field Trips (Out of the Neighborhood)</b>	<p>In addition to the regular program activities there are field trips and special activities. Permission slips are sent home with children with details of the trip.</p> <p>A parent must sign a permission slip for each field trip prior to participation by the child. Whenever OCC has permission from a parent to remove a child from the building for a field trip, all necessary precautions are taken. Parents must accompany their child for all trips.</p> <p>We follow the guidelines below to provide quality care:</p> <ol style="list-style-type: none"> <li>1. Children are supervised at all times.</li> <li>2. Parents stay with the group.</li> </ol>
<b>School Pictures</b>	School pictures may be taken during the year. Purchase of these pictures is optional. General pictures are taken of the children and posted throughout the classroom depicting the daily happenings in the center.
<b>Play Areas</b>	A large indoor playroom and 2 spacious outdoor play areas, with informal and planned activities develop coordination, balance and poise.
<b>Special Event &amp; Activities</b>	<p>To emphasize our community values and to provide the children with socialization opportunities special events take place. All families are encouraged to attend even if their children are not actively participating.</p> <ul style="list-style-type: none"> <li>✓ Holiday Parties: Halloween Party, Thanksgiving Play and Feast, Winter Holiday Party, Special Events Include: Pre-school graduation, Open House, Mother's Day Breakfast, Father's Day Breakfast, Scholastic Book Fair, Family Fun Nights, Art Shows, Music classes, Jump Bunch.</li> </ul>

Topic	Descriptions
<b>Open Door Policy</b>	OCC has an "open door" policy. We invite you to drop in unannounced at any time. Stop by and see us whenever you wish. Visitors are always welcome but must stop in the director's office to sign in and take a visitors pass. The visitor must state the room they are visiting and sign out accordingly.
<b>The Value of Parental Interest</b>	Parents are urged to show interest in their child's learning and development. Conferences may be held at least annually with particular attention given to transition times. Additionally, interviews can be scheduled as desired by parents or teachers.

### **Guidance and Discipline**

Topic	Descriptions
<b>Philosophy</b>  <b>Teachers are trained yearly at when hired to understand OCC's Behavioral Guidelines for the children in the center</b>	<p>We believe in a preventive approach to inappropriate behavior. The teacher maintains adequate and orderly conditions within the classroom to provide an atmosphere conducive to learning. Activities are age appropriate to ensure positive interaction and foster self-esteem. We encourage self-control and stress successful learning experiences. Only positive reinforcement, redirection and time out techniques will be used to discipline children. Children are respected as individuals, and therefore, redirecting a child for behavior problems through words and examples are our primary means of discipline.</p> <p>Children in our care are not subject to physical discipline, nor are they threatened, or subjected to any means of discipline in the child's self image is damaged. Children are not put in unsupervised areas or put into another age group as a discipline measure.</p>
<b>"Time-Away"</b>  <b>Teachers are trained yearly and when hired the guidelines of Time Aways</b>	<b>See Appendix G</b>
<b>Teachers are Mandated Reporters and are trained yearly</b>	<b>See Appendix H</b>

## Food and Nutrition

Topic	Descriptions
<b>Eating</b>	No child is ever forced to eat food. Teachers are instructed to offer food and gently encourage a child to eat.
<b>Snacks</b>	OCC provides two healthy snacks a day for each child (Waddlers and up – older infants are also given a snack if needed).
<b>Allergies</b>	As always, we make every accommodation for our children with allergies. <b>OCC is a peanut free day care.</b> <u>If a child has allergies to other food items, those foods will be avoided in the classro which they attend, or the child will be offered another food item.</u>
<b>Birthday and Holiday Treats</b>	Your child's birthday and holidays are special days at OCC. Please inform the Executive Director or teacher in advance if you plan to bring in a treat for your child's class. We will then notify you if any students in your child's class have allergies. Parents do not have to be present for this event, but are very welcome. Balloons and candles are not allowed in the daycare center.
<b>Meals</b>	There is a growing concern among parents, Public Health professionals, OCC staff and administrators, politicians and pediatricians regarding improving student health and nutrition. Although we do not prepare individual lunches for the children, we do know that kids believe that <i>we are giving them</i> their lunch. In a proactive response to impending legislation and to assist the Federal Healthy 2010 goal to reduce childhood obesity, we request that healthy lunches be sent to school with your children. We hope that by promoting this ideal we encourage healthy eating habits that will last a child's lifetime. OCC strives to offer Organic foods in all classrooms during the school year.

### Food Suggestions

*As always, use your best judgment for your child.*

More Appropriate	Less Appropriate
✓ Sliced deli meats	✓ Dessert Items (Cookie, cakes, etc)
✓ Homemade pasta dishes/casseroles	✓ Candy
✓ Meats light on breading/sauce	✓ Kool-Aid
✓ Cheese / Yogurt	✓ Soda (any type)
✓ Fresh Fruit and Vegetables	
✓ Canned fruit / Applesauce	
✓ Pre-packaged dried fruits	
✓ Plain Cereals (Cheerios, Rice Krispies, Corn Flakes)	
✓ Whole Milk (Cow, Goat, Rice, Soy)	
✓ Water	
✓ 100 % fruit juices	

## Personal Belonging Guidelines

Topic	Descriptions
<b>Toys and other Treasures</b>	<p>OCC reserves the right to consider certain toys, games, books and other personal belongings inappropriate for our program. Play weapons are not allowed. Please check with your child's teacher or the Executive Director on specific items.</p> <p>OCC is not responsible for damage or loss of items brought to the program.</p>
<b>Clothing</b> <b>All Clothing or personal affects should be labeled with child's name or initials</b>	<p>Children should be dressed in comfortable, easy-to-clean clothing suitable for daily activities. Precautions are taken to care for clothing. However, OCC cannot be responsible for damage to clothing.</p> <p>All children play outdoors daily unless weather prohibits it. Outerwear should be sent as needed and anticipated. Swim clothes are necessary during summer months, including appropriate water shoes and towels.</p> <p>All clothing should be clearly marked with your child's name. Extra sets of clothing must be available at all times.</p> <p>Soiled clothes must be taken home each day and clean clothes returned the following day. Extra clothing should include socks and underwear. Children who are toilet learning should have two or three extra sets of clothes.</p>
<b>Diapers / Wipes</b>	<p>Please provide Diapers and Wipes – label bag of diapers and wipes to avoid any confusion. These diapers are sent home daily.</p>
<b>Nap Items</b>	<p>Please send in whatever items will help your child rest at nap time. Examples include: comfortable crib sheets (must fit well on our cots and cribs in infant room), blankets, pillows (not for infants please), love objects.</p>
<b>Bibs</b>	<p>Supply them if they are used or desired. Cloth bibs must be taken home each day, as we have no washing facility.</p>
<b>Extra clothing</b>	<p>At least one full set for all children, several sets for infants and children who are in the process of toilet training.</p> <p>Hats (with ties or bonnets for infants) for sunny days</p>
<b>Pacifiers (if used)</b>	<p>It is suggested, that pacifiers be only allowed at naptime in the Toddler I classroom only but whenever necessary in the infant room. This policy is for health reasons and also prevents other children in the classroom from trying to play with them.</p>
<b>Topical Medication</b>	<p>OCC staff will apply topical medications such as diaper rash ointment, sunscreen, bug lotion (no spray please) if provided by the parent and appropriate written authorization is obtained.</p>
<b>Food</b>	<p>Infants need to bring all foods, prepared bottles (we cannot mix bottles), bowls and utensils. Bottles must be labeled with child's name. <b>Left over foods items (glass jar) cannot be served in the infant room unless they are placed in a Tupperware food container.</b> State Regulations do not allow staff to serve foods from jars unless they have never been opened. Toddlers and up, please bring lunch and several sippy cups (if still used). When bringing in beverages, State Regulations require unused drink items to be thrown away. It is suggested that separate containers are sent in with extra beverages for the teachers to refill.</p>

## Tuition Payments

Policy	Details
<b>Tuition Payments</b>	<p>Tuition fees are due and payable on the Thursday with a grace period of Friday for the up and coming week. Payments received after Friday will receive a late fee of \$25. (Tuition is paid one week early)</p> <ul style="list-style-type: none"> <li>✓ Make Cash payment directly to the Executive Director – <b>a receipt will be given.</b></li> <li>✓ Make checks to "OCC". Indicate period for which the check is being paid. Deposit in the tuition box located <b><u>in the daycare center's secured hallway.</u></b></li> <li>✓ Statements of account are issued monthly. They can be requested at other times. Year end statements are available and are given during January of the New Year.</li> </ul> <p><b>Note:</b> Tuition fees are set based on market-rate and are at the discretion of OCC's Board of Directors. Typically tuition is set in late December for the upcoming year.</p>
<b>Late Tuition Payments</b>	<p>Tuition received after Friday will be assessed a late fee on the following Monday. See <b>Current Fees</b> appendix for specific information.</p> <p>Failure to pay the tuition fees for two (2) consecutive weeks can cause the child(ren) to be excluded from the program.</p>
<b>Alternative Payment Schedules</b>	<p>Payments, which cover more than one (1) week's tuition, are acceptable, but must be made at least one week in advance.</p>
<b>Escrow/Registration Fees</b>	<p>A one-time non-refundable registration fee of \$150.00 is due with the initial registration. In addition, an escrow payment in an amount equal to two (2) weeks tuition is due prior to enrollment. This money will be held in trust until the child withdraws from Our Children's Center. Four (4) weeks written notice is required when leaving the center. The escrow payment is applied to the last 2 weeks a family attends the center. If a child increases the number of days of attendance, it is advised that parents make an additional escrow payment for the added days.</p>
<b>Absences</b>	<p>Notify the Executive Director when your child will be absent, regardless of the reason.</p>
<b>Add on Days</b>	<p>Part-time families may, from time-to-time, add additional days if there is space available on that day and if has been approved by the Executive Director and the Head Teacher. This add on day must be used in a timely manner. Families are responsible for the extra tuition cost of the additional day.</p>
<b>Vacations, Holiday and Snow Day Payments</b>	<p>Due to fixed costs, averaged over a calendar year, <b>there is NO reduction in tuition when there is a holiday, family vacation or when the center is closed due to inclement weather or other type forced closing (i.e., power failure).</b> This applies to full-time and part-time children. Tuition charges for holidays, vacations and "snow" days are calculated as though the child were present and if it is the child's regularly scheduled day of attendance. Families are required to make tuition payments prior to going on vacation. There is no credit for vacation time.</p>

Policy	Details
<b>Returned Checks</b>	There is a charge each time a check is returned. After two (2) returned checks, parents must pay cash only. See <b>Current Fees</b> appendix for specific information.
<b>Termination of Enrollment</b>	<b>Provide, in writing, notice of intent to withdraw your child from the Program at four (4) weeks prior to withdrawal. More notice is appreciated.</b>

## APPENDIX 1: DESCRIPTIONS OF CHILDHOOD DISEASES

Disease	Description
<b>Chicken Pox</b>	<p>Incubation period is 7-21 days prior to the appearance of the first vesicle. A child is considered contagious for 7 days after the first appearance and until all vesicles are dry and scabbed over. Children are contagious for 24-48 hours before the first lesion appears.</p> <p>Many children experience "flu-like" symptoms – fever, fussiness, and vomiting before they actually break out with the rash.</p>
<b>Colds</b>	<p>Children have colds, especially during the winter months. If the cold is accompanied by fever, greenish-yellow drainage from the nose, or fussiness, the child should be kept home.</p>
<b>Cold Sores</b>	<p>Cold sores (and/or fever blisters) usually appear on or around the mouth and present raised vesicles filled with clear fluid.</p> <p>Healing begins 7-10 days after onset and is completed by 21 days.</p> <p>The child may attend if it is just an uncomplicated cold sore, If a secondary infection sets in or if there is drainage, the child is sent home.</p>
<b>Conjunctivitis (Also known as "Pink Eye")</b>	<p>Conjunctivitis is an extremely contagious illness. It is easily treated. Because it is so contagious, the child should not return until the eyes are clear or 24 hours after treatment begins and with a note from a doctor.</p> <p>Symptoms include "weeping eyes" many times with a white to greenish-yellow drainage. The child may also complain that his/her eyes itch or hurt.</p>
<b>Coxsackie Virus /Hand Foot, &amp; Mouth Disease</b>	<p>Symptoms of this virus may include complaints of sore throat, fever, and/or cold. A blister type rash accompanies these symptoms on the palms of hands, soles of the feet and/or inside the mouth. It is not necessary to have them in all three areas; many people with this virus have them only in one or two areas.</p> <p>Important things to note with this virus:</p> <ol style="list-style-type: none"> <li>1. The Coxsackie virus is extremely contagious. Anyone with the blisters continues to be contagious until all have faded. The infected person</li> </ol>

Disease	Description
	<p>also can pass the virus through their stool for up to three weeks after the blister stage. A person is probably most contagious just before breaking out with the blisters. A child with this virus must be out of the Center until the blisters are gone.</p> <ol style="list-style-type: none"> <li>2. As with chickenpox, the virus is transmitted through the respiratory system (airborne).</li> <li>3. Because the symptoms are mild (many children never run a temp or have a cold) the blisters may be overlooked or mistaken for poison ivy.</li> <li>4. The virus is not limited to children. Very often it is passed on to adults in the family.</li> </ol>
<b>Croup</b>	<p>Croup is a highly contagious infectious illness of the respiratory system involving the larynx (voice box, vocal cords), trachea (windpipe) and the airways leading to the lungs (bronchial tubes). Croup can result in serious breathing difficulties in children.</p> <p>Causes – It can be caused by many different viruses, including those responsible for the common cold and influenza. It is more common in the early winter month or when the weather turns cold.</p> <p>Croup is spread by airborne infectious droplets sneezed or coughed into the air by the infected child. Symptoms include increased hoarseness and a sore throat. A hacking “croupy” cause which sounds like a barking seal and becomes worse at night. The cough is usually accompanied by a fever of 100.4 to 104 degrees. The major part of the illness last for 3 days and is usually followed by a “wet” cough for several weeks.</p>
<b>Diarrhea/ Vomiting</b>	<p>A child developing diarrhea and/or vomiting will be sent home. Diarrhea is more than one loose/liquid stool.</p> <p>Children shall be symptom free for 24 hours and tolerating a regular diet before returning to the Center.</p>
<b>Ear Infections</b>	<p>Although there is some controversy as to whether or not ear infections themselves are contagious, most physicians agree that the virus/bacteria in the cold that usually accompanies the ear infection is contagious.</p> <p>All children diagnosed as having an ear infection must be on an antibiotic for 24 hours before returning to the Center.</p>
<b>Fevers</b>	<p>If any child has a fever of over 100.1 but under 101.0, the child's parents will be advised of the situation. If any child has a fever of 101.0 or higher, he or she will be sent home. If a child is sent home ill with a fever of 101° or higher, generally, the child must stay home for an entire day (24 hours) before returning to the Center fever free. In order for the child to be returned to the Center less than 24 hours from the time they are sent home, i.e., the next morning, a doctor’s note (either from the child’s physician or a walk-in medical center) must be presented to the Director stating that the child is not contagious to others. If the parent cannot present a note from the doctor during the 24 hour period, the child must stay home for an entire day (24 hours) before returning to the Center fever free.</p>
<p>When returning to the Center, the child should not be on any fever reducing</p>	

Disease	Description
	<p>medication.</p> <p><b>Fever Notes:</b></p> <p>Low grade fevers which run under 100° are not of great concern, are common, and have many causes. The exception is for infants less than 3 months old: at this age, fevers of 100.4 or greater should be investigated immediately.</p>
<b>Fifth Disease</b>	<p>Fifth Disease is a mildly contagious viral illness that usually occurs in small outbreaks in spring and early summer. The most distinctive symptom is the appearance of having slapped cheeks. Typical symptoms include: red cheeks, fever, rash that develops 1-4 days after red cheeks, rarely joint pain. Incubation period is 4-14 days. Consult with your doctor for the return to center.</p> <p>A child with symptoms should be kept away from pregnant women until the rash has cleared.</p>
<b>Head Lice</b>	<p>Very contagious. The incubation period is 21 days.</p> <p>Check with your doctor or pharmacy for appropriate shampoo.</p> <p>Bed sheets and pillowcases, clothing, hats and other headgear such as combs, brushes, etc. must be washed in hot water (130 degrees) with soap or detergent.</p> <p>Anything that can't be washed should be placed in a tightly sealed plastic bag for 10 days.</p> <p>Hair must be fine combed daily for 7 days. At the end of the seven days, repeat the shampoo.</p> <p>Children who have been treated for lice may return to the Center after treatment. A note may be requested from your child's physician.</p>
<b>Immunizations</b>	<p>Any time your child has received an immunization, please let us know. This avoids us calling you if a fever develops as a result.</p> <p>A heads up is especially important for the MMR shot, which is given at 15 months of age. A possible side effect of this vaccine is a "delayed reaction" which means the symptoms of fussiness, fever, and rash do not occur until 5-15 days after the immunization.</p>
<b>Impetigo (Infectious skin lesions – "scab-like")</b>	<p>Lesions may have signs of honey colored drainage. They are found many times on the face or diaper area.</p> <p>A child is considered contagious until an oral antibiotic has been given for 24 hours.</p>
<b>Rashes</b>	<p>An unidentified rash appearing on more than one part of the child's body must be seen by a doctor.</p> <p>The child cannot return to the Center until we receive a written confirmation from the doctor that it is not contagious.</p>
<b>Roseola Infantum</b>	<p>Roseola occurs in two stages after a 5 to 15 day incubation period.</p> <p>The first symptoms are fever of 102-104 degrees though the child will</p>

Disease	Description
	<p>probably appear to be fine otherwise, Other symptoms in the first stage may be: mild diarrhea, cough, enlarged lymph nodes in neck, earache.</p> <p>The second stage is approximately 4 days following the sudden fever, the symptoms may include sudden disappearance of the fever and the appearance of a rash comprised of tiny, distinct spots usually distributed over the head and trunk. The rash usually lasts for 4 days. Contagion period continues until the rash disappears.</p>
<b>Slivers</b>	<p>If your child gets a sliver under his/her skin, we will wash the area thoroughly with soap and water and apply an adhesive bandage, and then you will be called. We will not remove slivers. We will observe the area for the remainder of the day for signs of infection.</p>
<b>Strep Throat</b>	<p>Strep throat is a contagious illness, which must be treated with an antibiotic. Symptoms include: sore throat, usually accompanied by a fever and a headache. The child may also complain of a stomachache or nausea.</p> <p>If your child is diagnosed as having strep throat, she/he must be on an antibiotic for 24 hours before returning to the Center.</p>
<b>Ticks</b>	<p>During the spring, summer, and fall months, ticks can be found in the area. If a tick is found at OCC, you will be called. We do not remove ticks. Your doctor will advise you about the best procedure for removing ticks.</p>
<b>Thrush</b>	<p>Thrush is a fungal infection usually limited to the mouth. It is characterized by raised white bumps, which resemble milk or formula coating on the tongue or gums. Unlike milk, however, it cannot be wiped off.</p> <p>It is highly contagious, even while the child is being treated. A suspected case of Thrush is sent home. Any child over 5 months is not allowed to return until all the white bumps have disappeared.</p> <p>It is transmitted by anything that comes in contact with the mouth.</p> <p>Treatment usually consists of ten-day course of oral prescription Nystatin.</p> <p>An infant between the ages of 6 weeks and 5 months is allowed to return after he/she has been treated with the antifungal for 24 hours.</p>

# APPENDIX 2: 2015 TUITION & FEES

## Enrollment Fees

Type	Amount
Registration, Non-Refundable	\$150 (per family)
Escrow (required prior to first day of daycare) <b>OCC must receive written notice of withdrawal four (4) weeks before the child's last day.</b>	Two Weeks tuition Held in an escrow account to be used for the final tuition payments.

## Full-Time and Part-Time Tuition\*

*Tuition is due every Thursday.*

### FULL TIME

	Infants (younger and older)	Toddlers	Pre-School 3 & 4 yr olds
One Day	\$110.00	\$105.00	\$80.00
Two Days	\$200.00	\$190.00	\$160.00
Three Days	\$277.00	\$262.00	\$228.00
Four Days	\$345.00	\$327.00	\$289.00
Five Days / Full Time	\$365.00	\$346.00	\$307.00

### PART TIME

	Infants (younger and older)	Toddlers	Pre-School 3 & 4 yr olds
One Day	\$65.00	\$62.50	\$60.00
Two Days	\$110.00	\$105.00	\$100.00
Three Days	\$148.50	\$141.00	\$134.00
Four Days	\$182.50	\$173.50	\$164.50
Five Days / Full Time	\$192.50	\$183.00	\$173.50

All Part Time Children must be picked up no later than 12:30pm and can arrive at the center no sooner than 7:30am. Late fees are applied if a part time child is picked up after 12:30pm (see below)

A 25% discount is given to families with more than 1 child. The discount is applied to the youngest child(ren). A reduction in summer enrollment means families must make other forms of donations to cover the costs lost during the summer. *Application fee voided on second child.*

*\*Due to fixed costs, tuition fees are calculated on an annual basis; this means there is no reduction to weekly fees when families take a vacation or when there is a holiday or OCC is closed due to inclement weather. See Executive Director for personal matters regarding time away from the center during the summer.*

### **Miscellaneous Fees**

<b>Type</b>	<b>Amount</b>
Late Pickup Fee	\$25 first 5 minutes \$1 per minute thereafter
Returned Check Fee	\$35
Late payment (after grace period)	\$25 each instance

# APPENDIX 3:

## ENROLLMENT AGREEMENT & FORMS

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### **Enrollment Agreement**

With my payment of the registration fee and escrow payment and completion of all enrollment papers, I hereby enroll my child (full name) \_\_\_\_\_ (if new infant - due date) \_\_\_\_\_ in Our Children’s Center as of \_\_\_\_\_ (date to begin attendance).

#### **Scheduled Hours**

Full-time is five (5) full days a week. It is considered part-time when a child attends less than five (5) Full Days a week. The daily rate is then implemented and should be included in the following week’s tuition.

#### **My child will attend the following schedule:**

Please fill in your child’s approximate schedule so that we may plan for staffing. The program opens at 7:30 am and closes promptly at 5:30 pm. It is required that you pick up your child by closing time. Otherwise, it will be necessary for Our Children’s Center to charge a late fee of \$25.00 for the first 5 minutes and \$1.00 a minute thereafter.

	Monday	Tuesday	Wednesday	Thursday	Friday
Drop-off Time					
Pick-up Time					

#### **Payment**

I understand that the weekly tuition will be payable on the Thursday with a grace period until 5:30 p.m. on Friday. If payment is made on or after Monday of the following week, a late charge of \$25.00 will be assessed. I understand that failure to pay tuition for two (2) consecutive weeks, unless arrangements are made with the center Executive Director, may cause my child to be excluded from the program. All fees for this will be the responsibility of the parent enrolling the child at Our Children’s Center. I also understand that payment is due and payable even if my child is out sick; on vacation and holidays (i.e., if my child normally attends on the day a holiday is observed – payment is still due). I understand, a service charge of \$25.00 will be assessed each time a check is returned. After two (2) times of having a returned check a "Cash Only" policy will then be enforced.

#### **Registration/Escrow**

I understand that I am responsible for a one-time non-refundable registration fee of \$150.00, due with the initial registration. In addition, an escrow payment in an amount equal to two (2) weeks tuition is due prior to enrollment. This money will be held in trust until such time I withdraw my child from Our Children’s Center. **I understand that I need to give at least four (4) weeks written notice in order to have my escrow payment refunded. Note: Escrow is applied to the last two (2) weeks of daycare.**

I will inform the Executive Director of any changes in my job, address, telephone or childcare schedule.

With my signature below I confirm that I have read, understand and agree to abide by the policies of Our Children’s Center as contained in this agreement and the Parent Handbook.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Address: \_\_\_\_\_

Parent Phone Number: \_\_\_\_\_

**I have read OCC’s discipline policy and accept and understand it. Parent’s Initial \_\_\_\_\_**

## Child Enrollment Record

Form Completion Date: \_\_\_\_\_  
Child's Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
Current Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Allergies: \_\_\_\_\_

### FAMILY INFORMATION

Parent's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Parent's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Are both parents in the home? \_\_\_\_\_ Marital Status: \_\_\_\_\_

Describe any aspects of the children's home/family you think your child's teacher should be aware of:

\_\_\_\_\_

\_\_\_\_\_

List Name and Ages of Siblings:

1) \_\_\_\_\_ Birth Date: \_\_\_\_\_  
2) \_\_\_\_\_ Birth Date: \_\_\_\_\_  
3) \_\_\_\_\_ Birth Date: \_\_\_\_\_  
4) \_\_\_\_\_ Birth Date: \_\_\_\_\_

\*Periodically we publish an OCC phone list so families can connect more easily. Include your family?

\_\_\_\_\_ Yes, I would like to be included on the list distribution list and please share the following:

\_\_\_\_\_ All \_\_\_\_\_ Names \_\_\_\_\_ Numbers \_\_\_\_\_ Address \_\_\_\_\_ E-Mail

\_\_\_\_\_ No, I don't want to be included on the list.

---

### **Pickup Authorization (Mandatory)**

Name(s) of person(s) authorized to call for this child. The child will not be permitted to leave the program with anyone else without a written permission letter from parent: List according to who should be called first.

#1 Name: \_\_\_\_\_ #2 Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

#3 Name: \_\_\_\_\_ #4 Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

---

### **Emergency Medical Authorization**

With my signature below I give consent to Our Children's Center to obtain emergency medical treatment and care for my child \_\_\_\_\_ in case of an accident, injury or illness of a serious nature. I understand that I will be contacted immediately or as soon as possible should I not be at the phone number stated on Our Children's Center "Child Enrollment Record" that I completed for my child. I will be responsible for payment and any and all medical bills that my child may incur.

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby give my consent for emergency medical authorization for my child.

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

---

### **Field Trip Permission / Authorization**

I hereby give consent to Our Children’s Center to take my child on walking trips in the neighborhood, special excursions or other field trips away from the program. This permission is being given with the understanding that such trips are under supervision of the program staff. Further, the staff will take all the required precautions to ensure the health and safety of each child during these field trips. *For field trips requiring transportation by car, an additional permission will be sent home prior to that activity.*

\_\_\_\_\_

(Signature of Parent or Guardian)

\_\_\_\_\_

(Date)

---

### **Transportation Permission / Authorization**

I hereby give permission for Our Children’s Center to transport my child in a motor vehicle when seeking emergency medical treatment or during field trips. A separate form will be sent home when field trips are planned.

\_\_\_\_\_

(Signature of Parent or Guardian)

\_\_\_\_\_

(Date)

---

### **Pictures and Art Permission for Use**

I hereby give permission for Our Children’s Center to photograph my child and/or use my child’s artwork for classroom and center use. I understand that my child’s name will never be attached to any photographs and will not be used for publicity unless I have given approval.

\_\_\_\_\_

(Signature of Parent or Guardian)

\_\_\_\_\_

(Date)

---

### **Topical Ointment Authorization**

Regulations require that parents and guardians give their written permission before a childcare center can administer topical ointments. Below, please indicate the ointments that the staff of Our Children’s Center can administer to your child.

I \_\_\_\_\_ give the staff of Our Children’s Center permission to administer the following ointments to my son/daughter \_\_\_\_\_.

Sunscreen                       Diaper Rash Ointment (over the counter or prescribed)

Insect Repellent               Other (please specify) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

---

**MEDICATION ADMINISTRATION (EPI PEN, NEBULIZERS, ANITBOTICS AND FEVER REDUCING  
Parents must have a doctor’s order and complete attachment J in order for a teacher to  
administer any of the above medications.**

## Getting To Know Your Child

This information sheet helps the teacher get to know your child and his/her needs, interests, special activities etc. It is for the teacher's use only.

Child's Full Name \_\_\_\_\_

Favorite Toy(s) \_\_\_\_\_

Special Interests \_\_\_\_\_

Pets \_\_\_\_\_

Have caregivers other than parents cared for your child? \_\_\_\_\_

If yes, who? \_\_\_\_\_

What opportunity has your child had to play with other children the same age?  
\_\_\_\_\_

What would you like your child to gain from this program?  
\_\_\_\_\_

What do you think are your child's strengths?  
\_\_\_\_\_

### **EATING:**

Does your child have a good appetite? \_\_\_\_\_

Does your child feed him/herself? \_\_\_\_\_

Are there any food allergies known? \_\_\_\_\_

Any difficulties with eating or special diets \_\_\_\_\_

### **SLEEPING:**

What time does your child usually go to bed? \_\_\_\_\_ get up? \_\_\_\_\_

Does he/she have a rest period or take a nap? \_\_\_\_\_

Does your child nap with a special toy or blanket, what is it? \_\_\_\_\_

### **PHYSICAL NEEDS:**

Is your child toilet trained? \_\_\_\_\_

What term/words does he/she use when they need to use the toilet? \_\_\_\_\_

Does he/she need help with clothing? \_\_\_\_\_

With which hand your child cut/color? \_\_\_\_\_

### **SOCIAL/EMOTIONAL:**

Explain any fears or anxieties that your child may have \_\_\_\_\_

How your child is best comforted, when upset? \_\_\_\_\_

Please feel free to include additional information on the back or on a separate sheet.

---

## Child's Routine (for Infants and Toddlers)

Child's name: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Parent's name: \_\_\_\_\_ Date: \_\_\_\_\_

### Sleeping Routine

How many naps per day? \_\_\_\_\_ Length? \_\_\_\_\_ Preferred position? \_\_\_\_\_

**Note State Regulation:** *infants are placed on their backs at naptime.*

How does your child go to sleep? \_\_\_\_\_

Waking behavior/routine: \_\_\_\_\_

Special concerns: \_\_\_\_\_

### Eating Routine

**Parents may supply a more detailed routine in writing for teachers to follow.**

**Please Note: Infants must be able to take a bottle successfully prior to enrollment.**

### Milk Routine

Circle:        Formula        Breast milk

Circle:        Bottle        Cup

Amount: \_\_\_\_\_ Times of day: \_\_\_\_\_

### Additional Fluids

Circle:        Juice        Milk        H2O

Amount: \_\_\_\_\_ Times of day: \_\_\_\_\_

**Solid food:** Specify: \_\_\_\_\_ Times of day: \_\_\_\_\_

### Allergies:

### Special concerns:

### Diapering Routine

Lotions or ointments your child uses: \_\_\_\_\_

### Comforting/Distress/Other

How does your child like to be comforted? \_\_\_\_\_

Does your child use a pacifier? \_\_\_\_\_

Does your child have a security object? \_\_\_\_\_ If yes, name: \_\_\_\_\_

### Other information:

# CURRENT STAFF

## Meet Our Children's Center 2015 Staff

	Name
<b>Executive Director</b>	Christina Pascale
<b>Supervisors</b>	AM – Yesenia McCall; PM – Sharon Pascale
<b>Teachers</b>	<b>Infants Classroom</b> <b>8 weeks up to 9/10 months</b> Yesenia McCall - Head Team Teacher Fran Nagle – Assistant Team Teacher Kim Tirado – Assistant Team Teacher
	<b>Infants – Older (Waddlers)</b> <b>9 – 16 months</b> Ms. Hairis Paredes (Heidi) – Head Team Teacher Mrs. Maria Pineiro – Assistant Team Teacher
	<b>Toddler 1 Classroom</b> <b>Walking up to 20 months</b> Arlina Cordero – Head Team Teacher Janyda Rivera – Assisting Team Teacher
	<b>Toddler 2 Classroom - Younger</b> <b>20 months – up to 2 ½ years</b> Amanda Nagle– Head Team Teacher Mrs. Catherine Campagna - Assistant Team Teacher
	<b>Toddler 2 Classroom - Older</b> <b>22 mo up to 3 ½ years</b> Christina Pascale – Head Team Teacher Mariya Kreyndel – Assistant Team Teacher Miss Stephany Domenech – Assistant Team Teacher
	<b>Preschool Classroom</b> <b>27 months up to 4 years</b> Stephanie Linden – Head Certified 4 Year Old Team Teacher Sharon Pascale – Head Team Teacher – 3 year olds Mrs. Edna Remy – Assistant Team Teacher (3&4)
	Nurse Consultants, Inc. – Ashley Mills
<b>Nurse</b>	Maria Seirra
<b>EC Consultant</b>	
<b>Dentist</b>	Brian Bottaro

# BOARD OF DIRECTORS

Our Children's Center Board, September 2016-2017

	<b>Board of Directors</b>
<b>Executive Director</b>	Christina Pascale
<b>President</b>	Kevin Prestage
<b>Vice President</b>	Lara Zier
<b>Treasurer</b>	Laura DeLibero
<b>Secretary</b>	Danielle Sondeen
<b>Members At Large</b>	Christen Snyder, Meghan Scursso

# APPENDIX G:

## BEHAVIORAL MANAGEMENT & DISCIPLINARY POLICY/GUIDELINES

The goal of child discipline is to help the child develop inner controls so that he/she may learn more appropriate social behavior and learn how to resolve conflicts. OCC's methods to resolve conflicts the children may have are:

- The use of positive guidance
- The teacher's ability to redirect a child
- The teacher setting clear limits
- Supervision of the teachers and/or the Executive Director
- Prohibiting abusive, neglectful, corporal, humiliating or frightening punishment
- Prohibiting physical restraint, UNLESS such restraint is necessary to protect the health and safety of the child or anyone else involved
- Record keeping of incidents wherein OCC had to redirect a child due to their behavior
- Communicating with parents as much as possible when a child's behavior needs to be dealt with and their actions need to be redirected.
- Getting the assistance of Social Services, OCC's Educational Consultant or School Nurse when needed

### OCC's Goals

The overall goal of OCC's policy on discipline is to help a child learn skills needed to deal with situations that may cause them to react inappropriately. Our policy is also created to help teachers redirect children when they are experiencing inappropriate behavior.

### Preventive Approach

We believe in a preventive approach to inappropriate behavior. The teacher maintains adequate and orderly conditions within the classroom to provide an atmosphere conducive to learning. Activities are age appropriate to ensure positive interaction and foster self-esteem. We encourage self-control and stress successful learning experiences. Only positive reinforcement and redirection techniques will be used to discipline children. Children are respected as individuals, and therefore, redirecting a child for behavior problems through words and examples are our primary means of discipline.

Children in our care are not subject to physical discipline, nor are they threatened, or subjected to any means of discipline that could affect or harm a child's self image. Children are not put in unsupervised areas or put into another age group as a discipline measure. Staff shall not be abusive, neglectful, or use physical, corporal, humiliating or frightening punishment under any circumstances. No child shall be physically restrained unless it is necessary to protect the safety and health of the child or another child or adult.

### Time-Aways

Time-aways are only to be used for children 2 years old and above. They are not used when a child is under 2 years old. A time away is used as a teaching tool, when a child has lost control of his or her behavior and needs time to regain that control. "Time Aways" are used as a last resort.

A time-away is no longer than one minute per year of age of the child, unless the child wants to stay in "time away" longer to regain composure.

**When a time away is used:**

- ✓ The child is seated in a chair or on the floor close enough to supervise but far enough away from the activity to not participate.
- ✓ As a child seems to be ready to discuss why they were sent to time away, a teacher asks the child if they are ready to talk about the problem.
- ✓ The teacher then helps the child problem solve or brainstorm ways in which the child could have handled the situation better.

**Consistent Behavioral Problems**

A child with consistent behavioral problems is brought to the attention of the Executive Director and parents in order to help the child and improve the classroom situation. This information is confidential and is shared with the parents and staff who need to know.

**Behavioral Parent/Teacher Conference**

A Parent/Teacher conference may be arranged and a Behavioral Plan is discussed and followed by both the parent and the Teachers. Social Services may be called if a family is having continuous difficulties with their child and if they ask for assistance with their services. OCC reserves the right to ask that a family withdraw the child from the program if the child's needs cannot be met.

**Parent Acknowledgement**

On \_\_\_\_\_, (date of review), \_\_\_\_\_ (family name) reviewed and discussed OCC's Behavioral Management and Disciplinary Policy as above written. Discussion with this family took place on \_\_\_\_\_ with (teacher)\_\_\_\_\_. This family was asked if they understood these guidelines and asked if they had any concerns or questions. OCC staff answered questions (if any) and with their signature below, indicates that they accept and understand OCC's Guidelines for Behavioral Management.

I, \_\_\_\_\_, parent of \_\_\_\_\_, have reviewed the above guidelines with \_\_\_\_\_, (OCC staff name) on \_\_\_\_\_ (date staff and parent met).

With my signature, I understand and accept these guidelines and if I ever have any questions, I will speak with either my child's teacher or the Director of Our Children's Center.

Parent's Signature	Date	Staff Signature	Date

**Office – family questions:**

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# APPENDIX H:

## CHILD ABUSE & NEGLECT POLICIES AND PROCEDURES

Our Children's Center has the responsibility of preventing child abuse and neglect of children enrolled in our center which is located at 90 N. Main Street, West Hartford, CT at all times and under all circumstances.

Connecticut's General Statutes section 46b-120 - definition of child abuse and neglect are:

Child Abuse includes:

- any non-accidental, physical or mental injury (i.e., shaking, beating, burning, hitting, etc.)
- any form of sexual abuse (i.e., sexual exploitation or inappropriate touching).
- Neglect of a child (i.e., failure to provide food, clothing, shelter, education, mental care, appropriate supervision)
- Emotional abuse (i.e., excessive belittling, berating or teasing which impairs the child's psychological growth)
- At risk behavior (i.e., placing a child in a situation which might endanger her by abuse or neglect)

Child Abuse is defined as: A child who has had . . .

- a non-incident, physical injury inflicted upon him/her
- injuries which are at a variance with the history given of them
- is in a condition which is the result of maltreatment, such as, but not limited to malnutrition, sexual exploitation, and deprivation of necessities, emotional, maltreatment or cruel punishment.

Child Neglect is defined as: A child who has been . . .

- abandoned
- denied proper care and attention physically, educationally, emotionally or morally
- allowed to live under circumstances, conditions or associations injurious to his well being.

Implementation of child abuse and neglect policies and procedures is a necessary component of child abuse and neglect prevention strategies in a program or facility that serves people under the age of eighteen (18). Child abuse and neglect policies and procedures should include (but not be limited to) the following:

- A statement that the facility has a responsibility to prevent child abuse and neglect of children enrolled in the program or facility.
- Definitions of child abuse and neglect (refer to CGS Section 46b-120).
- Reporting requirements (refer to CGS Sections 17a-101, 17a-101a, 17a-101b, 17a-101c and 17a-101d).
- The Department of Children and Families Hotline telephone number to call for reporting abuse or neglect is (1-800-842-2288).
- Staff responsibilities should they witness or become aware of, abuse or neglect of a child enrolled in the program or facility.

- Administrative responsibilities to protect children (including notification of the parent or guardian) once there is an allegation of abuse or neglect of a child enrolled in the program or facility.
- Steps to be taken to provide victims of abuse and neglect with needed medical services.
- Administrative actions (which support zero tolerance for abuse and neglect) to be implemented should there be an allegation that a staff member abused or neglected a child.
- Information that staff is protected by law (refer to CGS Section 17a-101e) from discrimination or retaliation for reporting abuse or neglect.
- Staff training in (at a minimum) the facilities abuse and neglect policy, prevention and detection of child abuse and neglect and reporting requirements as a mandated reporter.
- Documentation requirements and records to be maintained.
- Provisions for informing parents of the facility's abuse and neglect policy and procedures.

OCC's Staff Responsibilities:

- As a child care provider, we are mandated by law to report actual or suspected child abuse and/or neglect or the imminent risk of serious harm of any child to the appropriate authorities.

What to do if a staff member suspects a case of abuse or neglect:

- Call the Department of Children and Family Services (DFC) hotline – 1-800-842-2288.
- Call the Department of Public Health (DPH) hotline – 1-800-282-6063 or 860-509-8045.
- The reporter's name is required, but may be kept confidential.

What to do to in order to provide a victim of abuse and neglect medical services.

- If needed call 911 immediately.  
Call the Department of Children and Family Services (DFC) hotline – 1-800-842-2288.
- Call the Department of Public Health (DPH) hotline – 1-800-282-6063 or 860-509-8045.
- Call the parents or caregiver.
- Prepare reports – have witnesses sign if available.
- Give any information on hand of any priors to the police, DCF and DPA.

When filing a report of abuse or neglect, the following information will be needed:

- name of the child
- address of child
- phone number of the child
- name of parents/guardian of the child
- address of the parents/guardian of the child
- phone numbers of parents/guardians
- Relevant information such as: physical or behavioral indicator, nature and extent of injury, maltreatment or neglect.
- Exact description of what the reporter has observed.
- Time and date of incident.
- Information about previous injuries, if any.
- Circumstances under which reporter learned of abuse.
- Name of any person suspected of causing injury.
- Any information reporter believes would be helpful
- Any action taken to help or treat the child
- Seek medical attention for the child if needed.

- 1 - Mandated reporters must report orally to DCF or a law enforcement agency within 12 hours of suspecting that a child has been abused or neglected. Within 48 hours of making the oral report, the mandated reporter must submit a written report (DCF-136) to DCF. This form is found at the DCF website under forms.
- 2 - Staff is protected by law from discrimination or retaliation for reporting suspected abuse or neglect (CT GS Section 17-a-101e). All phone calls to DCF shall be documented and kept on file at the center. A copy of all statements from staff and DCF-136 shall also be kept on file.
- 3 - The management of OCC supports a zero tolerance for abuse and neglect and has implemented immediate action (suspense, reassignment of job duties, etc.) should there be an allegation that a staff member abused or neglected a child.
- 4 - Staff Training - All OCC's teachers will receive training on a bi-annual schedule. These training classes will take place either at staff meetings or at an outside facility. The training classes will take place in January and August of every year. The training will focus on steps for reporting suspected abuse and neglect and the role of a mandated reporter. All new staff will be trained in these procedures prior to their start in a classroom.
- 6 - Provisions for informing families of abuse and neglect policy:  
Every family will be given this policy on a yearly basis or when a new family joins the center along with an acknowledgement of receipt which will be turned into the office for filing. A copy of the policy is to be posted on the parent board with any updates as are created or changes that are observed.
- 7 - When an accusation of abuse or neglect by a staff member is made, the Executive Director must immediately inform the parent/guardians that a report has been made to DCF. Health Officials may need to talk to a child's parent to access the cause of the child's injuries and offer support and guidance.

## **DCF Abuse and Neglect Hotline – 1-800-842-2288**

The child abuse and neglect hotline is available 24 hours a day and seven days a week. Anyone who suspects that a child has been abused or neglected or is in danger of abuse or neglect is strongly encouraged to call the Hotline immediately.

# APPENDIX I:

*(GIVEN DURING TRANSITION TIME)*

## SECURITY PROCEDURES FOR SECURITY DOOR

**Every family is assigned a 4-digit security code to be used by family members and others who are on the emergency contact list. The 4 digit code is assigned when families officially start or sooner for transitioning purposes.**

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### **Directions:**

Press the assigned 4 digit numbers followed by the **\***; the door will unlock and the light will turn green – you will have approximately 5 seconds to open the doors (the right side of the double doors will unlock only) – if you would like another number that may be easier to remember, please see Christina.

Please do not share this number to anyone unless they are on your emergency contact list. Please let Christina know if you have any changes to your emergency contact list.

**If anyone not on the emergency contact list is picking up your child, you must notify the Director that someone other than the child's parents are picking up their child. An email or phone call is accepted. Whoever is picking the child will be asked for identification.**

If at any time, the Executive Director is not at her desk and visitors need to enter the center, a doorbell is available, on the wall above the keypad; this will signal staff that a visitor needs access.

If at any time you notice the door(s) open, please feel free to close them. At times the mechanism at the bottom of the doors falls down or a child puts in down to see what happens.

## PARENT ACKNOWLEDGEMENT OF HANDBOOK

I HAVE READ THE PARENT HANDBOOK AND ALL OF ITS GUIDELINES INCLUDING MANDATED REPORTER, TIME AWAYS AND LATE PICK UPS AND WITH MY SIGNATURE I ACKNOWLEDGE UNDERSTANDING OF THESE GUIDELINES AND WILL ADHERE TO THEM.

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PARENT NAME

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CHILD'S NAME

---

DATE

**Thank you!**

**Our Children's Center**

90 North Main Street

West Hartford, CT 06107

Phone: 860-561-0569

Web: [www.occd daycare.org](http://www.occd daycare.org)

Email: [our\\_childrens\\_center@yahoo.com](mailto:our_childrens_center@yahoo.com)

Christina Pascale, Executive Director

First Baptist Church 860-521-9460