



Parent Handbook

Scalliwags Infant Toddler Childcare



Table of Contents

- Philosophy (pg 3)
- Emergency Center Information (pg 3)
- Organizational Chart (pg 4)
- Admission Requirements (pg 5)
- Program Fees (pg 5-6)
- Program Calendar (pg 6)
- Inclement Weather (pg 7)
- Parent Notification (pg 7-8)
- No Shoe Zone (pg 8)
- Lunch/Bottle Policy (pg 8)
- Nutritious Foods (pg 8)
- Diapering (pg 9)
- Toileting (pg 9-10)
- Transitions (pg 10-12)
- Access to Records (pg 12)
- Progress Reports (pg 12)
- Mandated Reporters of Abuse & Neglect (pg 13)
- Child Guidance (pg 13-15)
- Termination/Suspension (pg 15-16)
- Referral Services (pg 16-17)
- Requirements for Children with Disabilities (pg 17)
- Health Care Consultant (pg 17)
- Injury Prevention Plan (pg 17)
- Allergies (pg 18)
- First Aid and Emergency Procedures (pg 18)
- SIDS (pg 18-19)
- Medication Administration (pg 19-20)
- Managing Infectious Disease and Mildly Ill Children (pg 21)
- Infection Control (pg 22)
- Transportation/Emergency Evacuation (pg 22-23)
- Safety Drills (pg 23)
- Evacuation Plan (pg 24)
- General Security Measures (pg 24-25)



Philosophy

Scalliwags Infant Toddler Childcare is a brand new program located in Wellesley, MA that serves children from ages 0-5. Scalliwags' main objective is to provide exemplary education and care in a fun, nurturing, and home-like environment through a creative, play-based curriculum. Our goal is to provide high quality care that will help your children grow and develop based on their age. Scalliwags' teachers are committed to ensuring a positive, respectful relationship with your children in the hopes of helping them develop a level of self-control, self-esteem, and self-respect. Our teachers will provide a safe, loving environment that will allow children to freely express themselves.

The Scalliwags Infant/Toddler classroom will help children develop a strong foundation for learning self-confidence in a rich learning environment. We will provide activities taught through stories, songs and play, modeling care and kindness to others. We will encourage curiosity and endeavor to build confidence and explore our world through imaginative sensory play, yoga, music, and nature learning activities.

The Scalliwags Toddler/Preschool classroom will create a rich learning environment where the children will feel comfortable and secure in a warm friendly atmosphere. We all know children feel safe and thrive when their days have structure. We will develop a progressive curriculum according to Massachusetts early learning standards, learning through play and exploration. Scalliwags does NOT require children to be toilet trained for enrollment in the progra. Scalliwags is a fully accessible program.

Emergency Center Information

Physical Address: 445 Washington Street Wellesley, MA 02482

Phone Number: 781-328-1616

Emergency Numbers:

Police: 781-235-1212

Fire: 781-235-1300

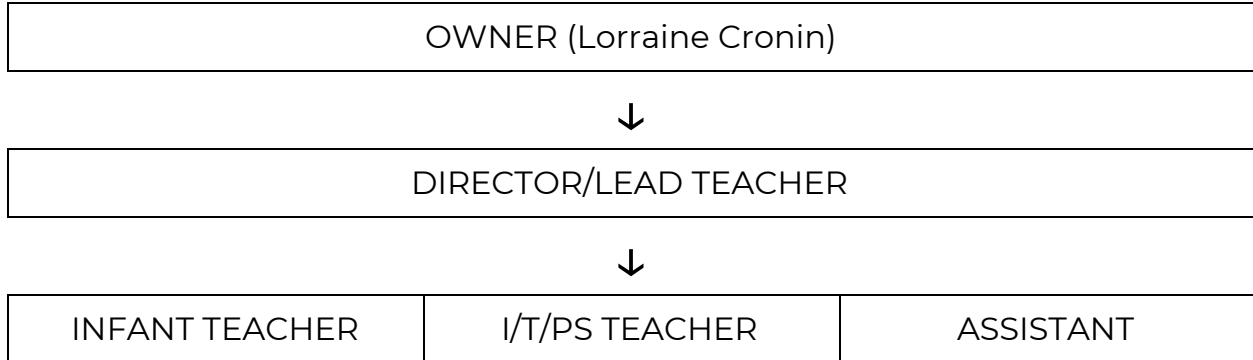
Poison Control Center: 1(800)-222-1222

Healthcare Consultant: Kristen McGourty, NP 339-364-0965

15 Belnap Road, Norwood, MA 02062



Organizational Chart



The Director/Lead Teacher will be the director/supervisor for all employees at Scalliwags Infant Toddler Childcare. They will also be responsible for administrative supervision of the program at all times.

All teachers will report directly to the Director/Lead Teacher, and the Director/Lead Teacher will report to Lorraine Cronin, the Owner.

Department of Early Education and Care (DEEC)

Scalliwags is licensed under the Massachusetts Department of Early Education and Care (EEC). A copy of the Early Education and Care Regulations is available on the internet at <http://www.mass.gov/edu/docs/eec/regs-policies/20100122-606-cmr.pdf>. The Department of Early Education and Care can be contacted about Scalliwags regulatory compliance at any time.

Our licensing specialist is Karen Lessard. Her contact information is:
karen.lessard@mass.gov

Department of Early Education and Care:
324 Clark Street Worcester, MA 01606
(P) 508-798-5180 (F) 508-798-5181

A copy of our license is posted in the center.



Admission Requirements

All children must have a medical form on file as required by the Department of Early Education & Care prior to their first day. This form is valid for one year from the actual physician's examination, and this must be renewed annually. The medical form must include evidence of a lead poisoning screening (this must have been completed since the child's second birthday). Please note, the Department of Early Education and Care requires the lead poisoning screening be done annually starting between 9 and 12 months until age 3, so please have your doctor perform this test.

Program Fees

Regular Schedule Tuition is based on the child's regular schedule. Parents will be charged additional tuition if their child's attendance increases beyond their chosen schedule. If their schedule changes in any way, parents will notify the center immediately. Tuition and fees are not prorated for illness, holidays, vacations, or emergency closures. Parents will agree to pay the full tuition even if their child is absent for one or more days.

1. **Absences** Parents will notify the center when their child will be absent, the morning of the absence.
2. **Child Not Picked Up** If the parent/guardian fails to pick up their child and/or contact the center, and they or another authorized person cannot be reached within 60 minutes after closing time, center staff may release their child to the custody of Department of Child and Families or other local authorities.
3. **Payments** Child care fees are paid in advance on a weekly basis (they can also be paid bi-weekly, monthly, quarterly, or yearly at parent's discretion) on the Friday before the week begins or the last scheduled day of attendance for the week. Payment obligation is based on the days agreed to use child care, not on actual attendance. There is no change in fee due to child's absences. If a child is absent or the center is closed when payment is due, it is the parent's responsibility to make the payment on time. In the case of a vacation or absence, parents should make their payment before leaving. A personal check, credit card, direct debit/ACH are all accepted forms of payment; however if a check is returned for any reason and we incur any bank charges from the return of a check, \$25.00 will be charged. Non-payment or consistent late payments is cause for termination immediately without the required 2 weeks notice. A two week notice of any increase in tuition will be



communicated to families via email or the Brightwheel App messaging system.

- **Deposit** With enrollment, Scalliwags requires a one time, nonrefundable deposit equivalent to two weeks tuition. The deposit gets credited to the parent's tuition for the final two weeks in the program.
- **Late Payment Fee** A \$25 late payment fee (per child) applies for any payment not received on the Friday morning before the week begins. If payment is not received on the Monday of the week an additional \$10.00 fee per day will be charged. The child will not be permitted to return to child care until both the payment and the late fee are paid in full.
- **Registration Fee** A nonrefundable annual registration and/or equipment fee of \$ 50.00 is due at the time of enrollment and payable each year. If the child has withdrawn from the program and subsequently re-enrolls, a new registration and/or equipment fee is due at that time.
- **Late Pick-Up Fee** A late pick-up fee of \$ 5.00 per minute per child will be assessed when a child is left beyond the center's operating hours. The late pick-up fee does not constitute an agreement to provide after hours service.

Additional Fees Children at Scalliwags *may have* the opportunity to participate in special programs, summer programs, or field trips.

Program Calendar

Scalliwags is a year round program and will run Monday through Friday from 8 A.M. to 12 P.M.

The center will follow the Wellesley Public Schools calendar. This includes snow days, December vacation, February vacation, and April vacation. We will be closed on the following holidays:

- Rosh Hashanah
- Columbus Day
- Veteran's Day
- Thanksgiving Recess
- Christmas Day
- New Year's Day
- Martin Luther King Jr. Day
- Good Friday
- Memorial Day
- Fourth of July



- Labor Day

Inclement Weather and Emergencies

Every effort will be made to have the program open on snowy and icy days. However, in the event that we need to close, the Owner/Director will contact you two hours before opening, or as soon as we know we will be closing. We will follow the Wellesley Public School inclement weather closings.

Parent Visitation and Communication

Scalliwags has an open door policy for parents. Parents may visit the program unannounced at any time while their child is present at the center.

Parents are always welcome to provide input on the policies and procedures of Scalliwags. We recommend that this input be put in writing or in an email and submitted to the Director or Owner.

We will communicate with parents through e-mails, phone calls, and the Brighwheel App when necessary.

If a parent's primary language is not English, we plan to use Google Translate for all communication purposes.

Parents will be able to track their child's progress throughout the day via the software/app called Brightwheel. It is an integrated childcare app that is a wonderful resource for families and teachers.

Parent Notification

Scalliwags will inform parents of the following situations:

- Immediately of any injury which requires medical care beyond basic first aid or of any emergency administration of medication.
- Immediately of any allegation of abuse or neglect involving their child while in the care of Scalliwags.
- Prior to or as soon as possible following the change of educators.
- At the end of the day regarding any minor first aid administered; and in writing, within 48 hours of any incident involving their child.
- Whenever special problems and significant developments arise



- Whenever a communicable disease or condition has been identified in the program
- In writing, 7 days prior to the implementation of any change in program or policy or procedures
- Prior to your child transitioning to another classroom
- Prior to the introduction of any pets to the program
- Prior to the use of any pesticides
- Prior to any tuition increases or change in fees.

No Shoe Zone

In order to keep Scalliwags a clean environment for children, everyone who enters will need to remove their shoes by the cubbies. Children and staff must wear slippers for indoor use. Families must provide slippers for their children.

However, all children are required to wear closed-toe and closed-back shoes for the playground.

Lunch/Bottle Policy

All snacks, lunches, and bottles need to be provided by families. Families must provide food and bottles premade with labels on every bottle and container, including sippy cups and water bottles. We will not be refrigerating any items so please put appropriate cold packs in the lunch boxes with food and bottles so they can be stored properly. We are unable to heat any items, as we do not have a microwave. For hot food, please bring in a thermos. Bottle feeding is an important time for children to bond with their caregivers. All children drinking from a bottle will be held by staff.

Nutritious Foods

| Sandwiches | Bread | Vegetables | Fruit | Other |
|--|--|--|---|--|
| Turkey Chicken Cheese Chicken Salad Tuna Jelly Cream Cheese Ham | Whole Wheat Rye Pumpnickel Oatmeal Pumpkin Raisin | Carrots Cucumbers Celery Broccoli Tomato Sweet Potato | Strawberries Avocados Apples Bananas Cantaloupe Kiwi Pears Peaches Raspberries Blueberries | Cheese Cottage Cheese Goldfish Eggs Hummus |



| | | | | |
|--|--|--|----------|--|
| | | | Honeydew | |
|--|--|--|----------|--|

Diapering

1. Teachers will place a disposable paper cover on the diapering surface and will wear disposable gloves.
2. The teacher will lay child on diapering surface. The child should never be left unattended, and a hand will be on the child at all times.
3. The teacher will remove the soiled diaper and put the soiled diaper in the diaper pail. Soiled clothes will be wrapped in plastic bags and handed to the parent at dismissal.
4. The teacher will clean the child with a moist disposable wipe. She will wipe front to back using the wipe only once and repeat with fresh wipes as needed. The teacher will dispose of wipes in the diaper pail.
5. The teacher will remove gloves and dispose of in diaper pail.
6. The teacher will diaper and dress the child.
7. The teacher will assist child in washing his/her hands with liquid soap and disposable towels. All infants must wash their hands once they can lift their head up.
8. The teacher will remove the diaper covering and dispose in the diaper pail.
9. The teacher will wash the diapering area with soap and water. It will then be disinfected with CaviCide, an EPA registered disinfectant. This will occur after each diaper change.
10. The teacher will wash her hands with liquid soap and running water and dry with disposable paper towels.
11. Preschool children may be changed while standing up in the bathroom. A mat and changing table paper will be placed under the child while the child is standing up. The teacher will wear gloves and assist the child in hand washing after the changing is complete.

Toileting

Children are allowed to use the bathroom whenever they need to and will wash their hands afterwards with soap and running water, using individual paper towels to dry their hands. We find it very helpful if you encourage your child to use the bathroom before arriving at school; however, if your child does not use the bathroom before, staff will make every effort to encourage your child to use the bathroom shortly after arrival.



If a child has an accident, a staff member will help the child change into clean, dry clothes (a change of clothes should always be available in the child’s backpack). Soiled clothes will be wrapped in a plastic bag and sent home.

Scalliwags realizes that not every child will be completely toilet-trained and we do have accommodations for assisting your child with accidents. Parents will need to supply pull-ups or many changes of underwear and extra clothing. If your child is in the process of being toilet-trained, we will work with you and your child to achieve that goal by:

- Having the child wear pull-ups or underwear that is easily pulled up and down independently
- Encouraging the child to use the toilet independently
- Encouraging your child to redress him/herself
- Assisting in any way necessary

Transitions

The First Transition

The first transition a child experiences at Scalliwags is the one from home to school. Families are encouraged to visit the program prior to their child’s first day and introduce the child to his or her teachers, show them where their cubby will be, and spend some time in the classroom. On the first day enrolled, parents are welcome to visit. Some children will jump right into playing and quickly say goodbye to their parents. Others may feel quite anxious or cry at the first signs of the parent’s departure.

Classroom Changes

We change classrooms depending on the child’s age and developmental progress. EEC defines infants as birth-15 months, toddlers 15 months-2.9 years old, and preschoolers 2.9 years-5 years old. If your child is going to be transitioned into a new classroom, Scalliwags teachers will arrange a meeting and a visit in the new classroom with both the parents/guardian and the child. There will be a two week transition schedule for Full Day and 3-Day per Week children. There will be a three week transition schedule for 2-Day per Week children. Parents will be kept informed of their child’s progress using an app called Brightwheel.

Transition Schedules

Full Time Child Week 1:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|-----------|-------------|------------|-----------------|--------|
| 15 minute | Circle Time | Snack Time | Playground Time | Lunch |



| | | | | |
|-----------------------------------|--|--|--|--|
| introduction with current teacher | | | | |
|-----------------------------------|--|--|--|--|

Full Time Child Week 2:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|----------------------|---------------------------------|------------------------------|-----------------------------|----------|
| Circle through Snack | Circle through Music & Movement | Circle through Art/Free Play | Drop Off through Playground | Full Day |

3-Day Per Week Child Week 1:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|---|---------|---------------------------|----------|--------------------------|
| 15 minute introduction with current teacher | | Circle Time through Snack | | Playground through Lunch |

3-Day Per Week Child Week 2:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|------------------------------|---------|----------------------|----------|----------|
| Circle through Art/Free Play | | Circle through Lunch | | Full Day |

2-Day Per Week Child Week 1:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---|-----------|---------------------------|--------|
| | 15 minute introduction with current teacher | | Circle Time through Snack | |

2-Day Per Week Child Week 2:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|---------------------------------|-----------|--------------------------------|--------|
| | Circle through Music & Movement | | Circle Time through Playground | |

2-Day Per Week Child Week 3:

| Monday | Tuesday | Wednesday | Thursday | Friday |
|--------|------------------------|-----------|----------|--------|
| | Drop Off through Lunch | | Full day | |



Transitioning Out of Scalliwags

Whether or not we are ready for them to go, our preschoolers will eventually leave to transition into Kindergarten. Over the course of their time here, they have grown in every way possible: socially, emotionally, developmentally, and physically. The main part of our transition process at Scalliwags is to let the children enjoy their time as preschoolers. As they learn more about their new school, it is our job to be active listeners. We will listen to what they are excited about and what they are nervous for. We will tell them all of the fun experiences they will have at their new school.

If a school district reaches out for our educators to fill out a transition form or a Kindergarten assessment form, parents will be required to sign a written consent form. This form gives Scalliwags permission to fill out the form given to us. We will fill out the transition form and/or Kindergarten assessment form and give it back to the parents to send to the school.

At the end of their time at Scalliwags, we will provide the parents with their last Progress Report, and it can be given to the child's new school.

Access to Records

You have full access to your child's records. We must provide access to them within two business days, unless we have your permission to take longer. You have the right to add information, comment on data, or add any other relevant materials to your child's records; you also have the right to request deletion or amendments of any information contained in your child's records. Such requests shall be made in accordance with the procedures described below:

Upon your written request, when your child is no longer in care, the licensee can give you a copy of your child's records. Per EEC requirements, Scalliwags must keep the child's original record for five years after any child leaves the program.

Progress Reports

Scalliwags will provide progress reports for all children enrolled in the program. All children will receive a progress report every three months (dates to be determined). When staff record observations/assessments on your child, it will be through the Brightwheel App. Families will receive the observations/assessments in real time from the app.



Parents can request a conference to discuss the progress report. Parents can also request a conference with their child's teacher. Once as parent has requested a conference, the child's teacher and the director will work together to set up a time to meet with the parents and discuss the progress of the child, as well as any questions concerns.

Mandated Reporting of Abuse and Neglect

Educators are mandated reporters and must by law (M.G.L. c119, 51A) report suspected abuse or neglect to the Department of Children and Families (DCF) and EEC if allegations involve a child while in the care of the program.

Parents will be notified of the allegations of abuse and neglect involving their child while in the care of the program.

Child Guidance

Scalliwags is committed to using positive behavioral strategies when teaching young children how to manage their own behavior. Our child guidance and classroom management techniques will provide a safe class environment, help promote positive social skills, facilitate communication between peers, foster mutual respect, provide opportunities for children to express needs and feelings, strengthen self-esteem and help children learn self control.

These are the four main rules at Scalliwags:

1. Walking feet
2. Hands on your own body
3. Listening ears
4. Kind words

These positive behavioral strategies will typically include the following:

- Teachers will use praise, encouragement and other means of recognizing appropriate behavior. Children will always be treated in a respectful and courteous manner.
- Teachers will clearly state expectations for appropriate behavior in a neutral, non-judgmental voice.
- Teachers will teach positive social skills through a positive attitude, direct teaching, modeling and practicing with peers.



- Teachers will be proactive in situations and help provide alternate choices and redirection away from inappropriate behavior whenever possible.
- Teachers will help the child to verbalize feelings and needs as well as to help the child to understand the effect their behavior has on others.
- Teachers will create consistent routines and plan ways for smooth transitions, enabling children's wait time to be productive.
- Teachers will state to the children what is expected of them, for example "use walking feet" instead of "no running".
- Teachers will create rules that are clear, reasonable, and consistent. These rules will be introduced at the beginning of the school year and introduced to new students as they enroll.
- Teachers will understand how individual children respond to different cues and understand that no single technique works for all situations.
- Teachers will work as a teaching team to communicate with each other and ask for help if they feel they are becoming too involved in the situation.

Children may "act out" in disruptive ways for a variety of reasons, many of which are developmentally appropriate. Teachers will respond to the disruptive behavior with the goal of always providing the child support and teaching self-control in a calm, nurturing way. "Discipline" does **not** mean punishment, but rather an opportunity to provide a learning experience for the individual and the group.

Strategies to help resolve disruptive behavior may typically include:

- Teachers should assist in resolving problems as they occur and remind children of the rules as a problem occurs.
- Teachers should recognize children's feelings when discussing their inappropriate behavior with them. "I understand that you are angry, but we don't hurt someone else because we are angry."
- Teachers will assist children with coping mechanisms such as "taking a break" or "choosing another activity."
- Teachers will use natural consequences as they appeal to a child's sense of logic. Typically this strategy links the inappropriate behavior to a loss of privilege. For example, teachers may explain that "when you hit someone, they may not want to play with you."
- Teachers realize that sometimes children need a "break" from the situation to have an opportunity to get his/her emotions together. If this is needed, the child will sit in a quiet spot in the classroom and not be separated from the group. Teachers will calm the child, review what happened, "brainstorm" with



the child about how to handle a similar situation in the future and plan how the child will re-enter the play environment.

The following practices are **prohibited**:

Spanking or corporal punishment; cruel or severe punishment, including humiliation; verbal or physical abuse; neglect or abusive treatment; physical restraining; denial of food; force feeding; disciplining a child for soiling, wetting, or for not using the toilet; time outs are also prohibited.

Termination/Suspension

Circumstances for termination and/or suspension:

1. Non-payment of tuition or in arrears more than 30 days.
2. Failure to have up to date immunizations and/or health form, except for medical or religious exemptions.
3. Behavior that puts other children or staff at risk or which is unreasonably disruptive.
4. A change in a child's needs to the point that the program is no longer appropriate.
5. Parents or family members act in a disruptive manner regarding staff, program or other children.
6. Parents do not follow scheduled arrival and/or departure time.

Notification:

1. Scalliwags will notify the parents in writing stating the specific reasons why the child may be suspended or terminated.
2. Scalliwags will meet with the parents to discuss the problem, the possibility of termination and/or suspension and discuss the Support Plan.
3. Scalliwags will determine if the circumstances warrant a suspension or termination. There will be a written plan regarding steps necessary to avoid the suspension or termination, and the steps necessary to be reinstated after a suspension.
4. The teacher or director will write a letter of suspension or termination with referral, if appropriate and help prepare child for suspension or termination according to his/her ability to understand.

Plan to Avoid Suspension and Termination:



Scalliwags aims to support the social and emotional well-being of each child. When disruptive behaviors become prevalent within the classroom, resulting in disruptions to the classroom and safety concerns for all within the classroom, the staff is required to follow Scalliwags Support Plan. The Support Plan assists the staff in identifying the causes of problems, helps to develop an individual support plan and works with the family to assist the child in learning more positive adaptive behaviors in order to succeed within the classroom and at home. If Scalliwags has been working with the parents, the child, and the staff on addressing the needs of the child and mitigating specific behaviors, then Scalliwags expects full cooperation from the child's family both inside and outside of school to help ensure the success of the Support Plan.

Scalliwags Support Plan

1. Scalliwags will provide an opportunity to meet with parents to discuss options other than suspension or termination from the program.
2. Scalliwags will pursue and offer referrals to parents for evaluation, diagnostic or therapeutic services to assist the child and family.
3. Scalliwags will pursue options for supportive services to the program, including consultation and educator training.
4. Scalliwags will assist in developing a plan for behavioral intervention at home and in the program.

Scalliwags recognizes that some children have individual needs that require adaptations on our part for success. We will support the implementation of any accommodations that are reasonable for our school setting. However, termination will be a realistic option if we feel that through all of our efforts, we cannot support the unique needs of a child. Ultimately, it is our mission for all children to achieve their full potential.

Referral Services/Observations from Educational Specialists

Although our staff is trained in early childhood development, sometimes it is necessary to consult with other specialists about concerns we may have about a student. We are fortunate to have an excellent working relationship with the Wellesley Public School System, other surrounding towns, and early intervention.

If a teacher has concerns about one of their students physical, social, emotional, or intellectual growth and development, they should meet with their director. The director and teacher will work together to determine the best plan of action. The



teacher will begin to document the observed concerning behaviors. This must be done before a referral can be made. Once there is adequate documentation, the director will contact the parents to set up a meeting regarding the center's concerns and observations.

For children under 2 years, 9 months, referrals will be made to Early Intervention.

- Before any referral is made, parents will need to give written permission and consent. The child's record will NOT be released to anyone without consent from the parents, as this is confidential.
- Referrals, documentation/observations, and action plans will be in the child's file. If it is determined that the child doesn't need services, Scalliwags will monitor the child's progress quarterly to see if any further referrals should be made.

Phone Numbers:

Department of Children and Families - 1(800)-792-5200

Riverside Early Intervention (Needham)- 1(781)-449-1884

Wellesley Special Education- 1(781)-446-6222

Requirements for Children with Disabilities

If a child with a disability enrolls in the program, Scalliwags will meet with the parents, healthcare consultant, and, if necessary, the child's physician to create an appropriate plan for care. This plan will require that all appropriate measures be taken to ensure the necessary health requirements for this child.

Healthcare Consultant

Scalliwags Healthcare Consultant is Kristen McGourty, NP. She resides at 15 Belnap Road, Norwood, MA 02062. Her contact phone number is 339-364-0965.

Injury Prevention Plan

1. All Staff who give direct care to children are REQUIRED to be First Aid and CPR certified. Staff will be CPR certified yearly and First Aid certified every two years.
2. Daily monitoring of the classroom and playground is done by all staff. Any potential hazards that could cause injury are reported to the director. Any items that are broken will be removed and repaired or discarded.



3. An Injury/Incident Log is maintained by Scalliwags; this is kept in the office area in a three-ring binder labeled Injury/Incident Log.
4. All toxic substances, first aid supplies, medications or any other substances that could be hazardous to children are kept in a secure place, out of the children's reach.

First Aid and Emergency Procedures

1. Each classroom contains at least one First Aid Kit filled with bandages, gauze, gloves, cold packs, thermometer, tape, and CPR face shield. The First Aid Kits are always stocked and up-to-date. The First Aid Kit is always brought onto the playground and on field trips. There are three First Aid Kits in the school – in the backpack hanging by the rear exit, in the locked cabinet under the sink in the preschool room, and one in the locked cabinet under the sink in the infant/toddler room.
2. Staff will discuss minor incidents with parent at dismissal, and ask for signature on the Injury Form.
3. In the case of an injury that requires more than basic First Aid, the parent will be contacted and asked to pick up their child. An example is a cut that looks like it needs stitches. If the parents cannot be reached, then the emergency contact will be notified. Documentation of care the child received, along with a date the child may return to the program, must be provided by the parents prior to the child returning.
4. If a major emergency occurs, 911 and parents will be contacted simultaneously. If it is necessary for the child to be transported to the hospital before the parent arrives at the school, the director or a teacher will go with the child to the hospital along with the child's Scalliwags file. It is for this reason that permission forms, medical examination forms and immunization records need to be kept up-to-date in the child's file.

Allergies

Allergies will be identified by parents. An allergy list is posted in view where the children eat their snacks and lunches and in the children's file. All staff are made aware of allergies. Children are not given foods that they are allergic to, are kept from chemicals that cause allergic reactions, and from other materials to which they are allergic. Scalliwags is a **NUT FREE** center.

SIDS Reduction



Research shows that there are several ways to reduce the risk of SIDS and other sleep-related causes of infant death. At Scalliwags we will be overly diligent about following EEC guidelines to ensure your children are in a safe and approved sleeping area while in our care. We will follow ALL EEC guidelines and will check on a sleeping child every 5 minutes as per EEC

- **Always place baby on his or her back to sleep, to reduce the risk of SIDS.**
- Use a firm and flat sleep surface, such as a mattress in a safety-approved crib, covered by a fitted sheet with no other bedding or soft items in the sleep area.
- Babies must sleep on a firm Surface designed for Infants, Ideally for baby's first year, but at least for the First 6 Months.
- Children with pacifiers may be given them for sleeping. While children are sleeping, we may not use pacifier clips of any kind and we may not use pacifiers with animals attached to them.
- We will keep the room at 65-68 degrees for safe sleeping.
- We will not place any soft objects, toys, crib bumpers, or loose bedding under baby, over baby, or anywhere in baby's sleep area.

We will give your baby plenty of tummy time when he or she is awake, while one of our teachers watch over them.

Medication Administration

If your child requires medication, it must be handed directly to the director and will be labeled and stored in a secure location. Prescription and non-prescription medication may only be administered to a child with the written or electronic order of a physician and parental authorization. You may request an Authorization Form from the director if needed. If a child requires medication, we prefer that the parents administer it prior to the beginning of the school day. If that is not possible, certain designated staff members can administer the medication if the following guidelines are met:

No medication will be administered without a physician's authorization.

Please note: Scalliwags staff CAN NOT administer the **first** dose of any NEW medication to a child except under extraordinary, life-saving circumstances.



The medication (both prescription and non-prescription) must be accompanied by an Authorization for Medication Form. This authorization will be valid for no more than a year from the date it was signed.

The medication must be in its **original** container. Prescription medication must have the prescription label attached with the name of the medication, the child's name, dosage, expiration date, and the name of the physician.

No medication will be administered beyond its expiration date.

Parents are responsible for informing Scalliwags if the medication needs to be refrigerated.

ALL medication must be stored out of children's reach. Please do not put medication in your child's bag or cubby. Medication must be handed to the director with the appropriate paperwork.

Topical, non-prescription medications such as ointments or lotions do not require a physician's authorization, as long as applied in accordance with the label's instructions.

Parents will be notified in writing each time medication is administered to your child. If your child is on medication that does not require dosage at school, we ask that you still inform your child's teacher. Some medications may affect your child's behavior and general health or may require special care. For example, amoxicillin can cause an upset stomach and loose stools; bactrim or other sulfur drugs can cause children to be sensitive to the sun.

We will send home all expired medication with the parents. Parents will be responsible for disposing of completed or expired medication.

All staff will be trained in "The 5 Rights of Medication Training." Staff will be evaluated annually of the ability to administer medication and will be trained in identifying potential medication side effects.

Individual Health Care Plans

In accordance with EEC regulation 7.11 (3), every child with a diagnosed chronic condition (ex. asthma, allergies or any medical diagnosis requiring regular medication or reactive medication) must have an Individual Health Care Plan on file that includes the following: diagnosis, symptoms, medical treatment plan, potential



side effects and potential consequences to the child's health if the treatment is not administered. If your child has a chronic condition, please complete an Individual Health Care Plan for him/her. When necessary, a parent, under their physician's authorization, will provide training to necessary staff on the implementation of their child's health care plan (ex. use of inhaler, epi-pen or insulin injections).

Managing Infectious Disease/Mildly Ill Children

- Please have your child stay home if he/she has a fever or over 100.4 (under the arm) seems too ill to participate in activities or if you think he/she may spread illness to classmates. Please contact us by phone or email and let us know that he/she will be out that morning.
- If your child exhibits symptoms while at school (rash, fever, excessive coughing, vomiting, diarrhea, outbreak of contagious disease, etc.), we will have the child rest and call you immediately. If we cannot reach you, then we will contact people on your emergency contact list. Sick children must be picked up within one hour of being notified by the center.
- If you suspect that your child may have, or has been exposed to: herpes simplex (cold sores), impetigo, conjunctivitis, or head lice, we request that you DO NOT send your child to school. If your child shows symptoms or illness during class, the director or teacher will contact you to make arrangements to have your child picked up early.
- If your child has been in contact with any infectious diseases, please notify the school, so that we can warn other parents to be on the lookout for symptoms. Notification to the parents (without specific child's name) will be sent home in writing or via email.
- If your child has been sick, we ask that you honor the following timetables for his/her return to school. Your child must be **symptom-free of vomiting or diarrhea** for 24 hours and can tolerate a typical diet. Children should be **fever-free** without fever-reducing medication for 24 hours before returning to school. Ear infections, pneumonia, strep throat and conjunctivitis: your child can return to school 24 hours **after** medication has been started, as long as there is no fever.
- Children who become ill while at school will be made as comfortable as possible, and separated from the other children, until a parent or emergency contact arrives to pick up the child.



- Symptoms which require removal from the rest of the class are fever, chicken pox, lice, impetigo, measles, mumps, rubella, vomiting, skin rash, diarrhea, scabies, pertussis, conjunctivitis, strep throat, tuberculosis, ringworm, excessive coughing, discharge from eyes, pinworm, meningitis, fifth disease, sores that are oozing, and mucosal secretions that are green in color indicating infection.
- If a child has been evaluated by a medical source and is said to be of no serious health risk to others, that child shall be admitted back to school with notification by the physician, either written or verbal.

Infection Control

Handwashing is the most effective form of infection control. Frequent handwashing will reduce the likelihood of illness and spreading illness.

Staff and children will use running water with liquid soap and friction. Hands are dried with individual paper towels.

Handwashing is required by staff before all meals, preparing or serving food, after using the bathroom, before and after administering medication, after coming into contact with bodily fluids such as when wiping noses, and after performing cleaning duties including emptying trash.

In addition to wearing gloves, handwashing is required by staff after each diaper change/toilet training, after cleaning up bodily fluids such as vomit, after taking care of cuts and whenever blood is involved.

Children are required to wash hands before eating or handling food, after each diaper change/toileting, before & after water play, and after coming into contact with bodily fluids or discharges (including sneezes and coughing). All children will also be required to wash their hands AFTER eating lunch in an effort to reduce cross-contamination of food allergens. Children are also required to wash hands when they come in from outside.

The following equipment will be washed and disinfected after each use: mops used for cleaning bodily fluids and thermometers. The following will be washed at least daily: toilets, sinks, faucets, water table, water play equipment, tables, changing tables, smooth non-porous floors, and mops used for general cleaning. This will be done using CaviCide



We will also use CaviCide for sinks, faucets and toilets. It will kept out of reach of children. Gloves should be worn by personnel during cleaning. We will use Cavicide on the children's toys and surfaces they come in contact with.

Transportation/Emergency Evacuation

Scalliwags offers no transportation for your child. Care of your child is your responsibility from the time you get your child out of your vehicle until you or a teacher escorts your child into the building. Your child is also your responsibility when a teacher dismisses your child back to you. For safety reasons, no child should be left unattended in your vehicle. Please hold your child's hand in the parking lot at all times. A teacher will greet you at *the entrance* and bring the child into their classroom.

In the event of an emergency, Infants will be placed in the emergency evacuation cribs and toddlers and preschoolers will use the walking rope and evacuate the building. All classrooms will meet at the end of the parking lot away from the building, in front of the dumpster.

In the event of a major or life threatening injury, 911 will be called and the child will be transported by ambulance to the nearest hospital (NWH). Parents will be contacted immediately.

Scalliwags will only partake in walking field trips. A waiver will be signed by parents giving permission for their child to participate.

Safety Drills

Evacuation drills will be held at least once a month and will be recorded in an Evacuation Drill Log. The date, time, exit route, number of children and effectiveness of the drill will be noted. These drills will be held at different times of day and will use alternate escape routes in order to ensure readiness. A copy of each classroom's Evacuation Plan is posted by all doorways in each classroom. One teacher from each class is responsible for taking with them, the daily attendance sheet, First Aid Kit and the children's information sheets and emergency contact phone numbers.

We will also hold "shelter-in-place" practice at least once per year with each class. These practices will be done in a very calm, non threatening way just to insure the children are familiar with the procedures and the terminology we would use in case of a breach of security.



Scalliwags recognizes the importance of being prepared in case of an emergency. In addition to site-related emergencies, the school will rely on the local police department or fire department to notify us if there becomes a need to evacuate for our own safety. In the case of a true emergency requiring the evacuation of the building, the children will walk to Whole Foods across the street and parents will be contacted.

Evacuation Plan

- Scalliwags will conduct fire drills **monthly** with all children. They will take place at different times of the day and different emergency exits will be used to practice all different exit routes.
- One teacher will be responsible for documenting the drill. They will document the date, time, exit route used, the number of kids, and the effectiveness of each drill.
- **Call 911 for Emergencies**
- Follow posted Fire Drill Procedure by each Classroom Exit.
 - Teachers along with either the Director or the Owner will lead children out of classroom and out of the building without stopping for coats or any personal belongings.. Children with physical handicaps will be assisted by a previously designated staff member.
 - Teacher will take emergency cards (on a clipboard), first aid kit, and attendance record while exiting.
 - Director or center Owner will check all bathrooms for children.
 - Teachers and children will walk away from building to the designated safety area, at the far end of the parking lot **in front of the dumpster**.
 - Toddlers and preschoolers will use the walking ropes
 - Infants will be placed in the emergency crib(s) (approved by EEC)
 - Director and Lead teacher will take a headcount of all children using Name to Face.
 - One teacher will be in charge of contacting the parents using their cell phones in the event of a real fire drill/evacuation.
 - The situation will be assessed. If necessary, **the emergency contingency plan** will go into effect either with the children dismissed home or to the emergency shelter at **Whole Foods**.



General Security Measures

The following measures will be taken every day:

1. All doors will remain locked whenever children are in the building.
2. Staff will have keys to the building with them at all times.
3. Staff will keep their personal cell phones with them if possible (on silent or vibrate).
4. All cordless phones will be kept on or near their chargers so they are easy to locate in the event of an emergency.
5. Staff will only open the doors for an expected visitor or parent. A sign is posted at each entrance directing unexpected visitors to call into the school to speak with a staff member regarding the purpose of their visit.

Thank You

Thank you for taking the time to read the Parent Handbook. We know choosing a childcare center is a very difficult and personal decision, and we appreciate you becoming a part of the Scalliwags family.