

"the Kiddie
Kompany"

day care center



"Established in 1979"



The Kiddie Kompany Day Care Center Incorporated
2507 Hungary Road
Henrico, VA 23228

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For More Information, Visit our Website at kiddiekompany.com

Email - kiddieko@msn.com

Paula J. Propst, B A

**Owner, Program Director &
Tenured Teacher**

Mission:

Since our beginning in 1979, we have worked to achieve the highest form of excellence in which a child care center may operate. We strive for the atmosphere to reflect quality care, safety, concern and a loving environment for each child. Our goal for each child is to provide programming in our daily activities to enhance learning and to help a child develop with the most success he or she may achieve. In our center we work to provide help and support for every family as well.

Enrollment & Parent Information

Enrollment at the Kiddie Kompany is on a first come, first serve basis. We do not discriminate on any basis of race, religion, disability or the gender of a child. Anyone who would like to enroll is welcome by meeting the tuition and registration requirements required by the Virginia Dept. of Social Services. Children are required to have a medical form with shots record and the results of the physical exam signed by a physician. Children must accompany parents for a pre-enrollment visit prior to admission. Children ages two through twelve (or the end of fifth grade) are accepted. Enrollment is limited to the space availability at the time of the inquiry and being able to meet the safety needs of the child at the time of the inquiry.

Proof of Identity

A parent is required to provide proof of identity to enroll a child at KK. The type of documents that will be acceptable are a certified copy of a birth certificate, birth registration card, notification of birth from a physician, hospital, or mid-wife record, passport, copy of child's birth from adoption or placement agency. Children that are already enrolled in public school are not required to have a director view their birth certificate.

Non-Custodial Parent Information

Section 22.1-4.3 of the Code of Virginia states that unless a court order has been issued to the contrary, the non-custodial parent of a student enrolled in a day care center must be included, "upon such request of such non-custodial parent" as an emergency contact for events occurring during the day care activities. (06/05)

Hours of Operation

6:45 a.m. to 6:00 p.m. Monday through Friday

Holiday Closures

The days listed below are holidays our center is closed. Please plan ahead to avoid inconvenience in your schedule. There are no reductions or changes in tuition for holiday closures or parent vacation schedules:

Memorial Day
July 4th- Independence Day (or a corresponding or additional day)
Labor Day
Thanksgiving Day and Thanksgiving Friday

Christmas Eve (or a corresponding day)
Christmas Day (or corresponding day)
New Year's Eve (Sometimes Early Closure)
New Year's Day (or a corresponding day)

Announcement of other days closed, changes or exceptions in our schedule will be made with plenty of notice if it becomes necessary to change our schedule.

Weather Emergencies or Early Closures:

1. Parents are asked to continually keep all phone, cell phone, email info, or any other contact information up to date at all times. In unexpected emergencies, we must have up to date information in order to reach out to parents.
2. It is rare that KK closes for snow or other conditions, usually only when the power or water is out. (ie: a hurricane / thunderstorm) We have our own snow removal equipment which enables us to be open at all times.
3. We put any unusual messages on the KK phone answering machine immediately. We do not publish or announce any closure information on TV or Radio. If you need to call us and cannot get through leave a message and we will return your call timely.
4. In the event of any emergency including (fire, disaster, tornado, etc) the parent will be notified ASAP after attention is given to the safety of our children in care. For further emergency protocols, see our Emergency Disaster Plan.

Late Pick-up

If you pick your child up after 6:05 - you will be charged a fee of \$ 2.00 per minute unless you have an emergency, accident, or similar personal crisis. Most of our staff are here very long hours and we all want to go home at 6:00 p.m. Continual non-compliance of this policy will result in disenrollment. Licensing regulations state that if a parent or emergency contact cannot be reached by 7:00 p.m. that we must call Henrico County Police for the child to be picked up.

Arrival / Departure / Absentee Policies

Parents must escort their children into and out of the building each day. This time is the parent's opportunity to let us know any important information regarding their child. Children arriving late will join their group's activities in progress (or if there is a field trip), another group's activities. Any special conditions, departure times, or medication should be communicated at this time. If your child needs to be dressed to go somewhere after daycare, please let us know so that we might have your child clean & ready. (If a child needs to have special clothes, please bring them.)

Schoolager absence - If your child will not be at school for pickup, WE MUST KNOW BY 1:00 P.M. EACH DAY

Parents are responsible for the safety of their child while in our parking lot at all times. **RADAR ALERT – Right on Hungary Road in front of KK – Henrico Co. Police run radar almost daily, please drive 35 MPH at all times. The speed limit in our parking lot is 5 mph. PARENTS ARE REMINDED TO NEVER DRIVE UNDER THE INFLUENCE !!**

Curriculum & Learning Program Information

1. Scheduling is an important aspect of our day. Learning for young children comes naturally as we practice the same routines each day. When we wash hands, take turns, work in centers, eat lunch or snack, run and play outside, or do a puzzle, young children learn each day to use language in appropriate ways, to wash their hands, to share and follow directions. As we go through each day's schedule, learning occurs all day every day.
2. Unit Topics - Our instructional units are themes for activities of interest to the children. Unit topics last from one to two weeks and we practice all of the basic concepts through the instructional units. Topics such as seasons, holidays, dinosaurs, space, friendship, community helpers, insects, sea life, or transportation are some of the units we utilize. Basic concepts such as counting, colors, shapes, beginning math concepts, letters, sounds etc. are visited and revisited throughout each learning unit. We plan our programming to allow all children at every level of learning to be challenged.
3. Arts & Crafts - The joy of experiencing art is the main reason to provide art experiences. Children love to express themselves with hands on painting, playdoh, coloring, etc. Tactile experiences such as rolling playdoh or painting with shaving cream are fun and helpful in developing fine motor coordination. We also reinforce the basic concepts in our art centers to have lots of fun with these child directed activities.
4. Music - We sing at circle, play musical instruments, enjoy movement time, even fall to sleep to the gentle sounds of classical music. Music is in our center every day. It is the language of happy children.
5. Center Time - Each day the children have choices of what center "play" activity they want to choose. Centers are available for children to work in groups of 2 to 5 children in cooperative play. Our activities in centers range from blocks, housekeeping, art centers, music and movement, table activities, manipulatives such as stringing beads, cars & mats, etc. This is an important time to expand and develop skills in language, sharing, listening and following 2 or 3 step directions, and working in a group cooperatively. " Fun " is mostly how the children think about centers.
6. Outside Time - The Kiddie Kompany places great emphasis and importance on outside play and learning times of our daily schedule. Running and playing outdoors is essential for good health and happy children. This type of activity and exercise is an essential stress reliever for the children. During the warmer weather we especially enjoy the lengthened days, water fun, picnics, and popsicles outside. Unless there is a medical reason, all child- will be taken outside for lots of outside time.

Daily Preschooler Sample Schedule

6:45 am	Opening
6:45 - 8:45 am	Receiving Children - Cursory Health Observations - Free Play - Cubbie Toys
8:45 - 9:00 am	Clean Up Time - Washing Hands
9:00 - 9:15 am	Morning Snack
9:15 - 9:45 am	Circle Time, Calendar, Stories, Nursery Rhymes
9:45 - 10:15 am	Unit Time - Art - Music - Special Activities
10:15 - 11:30 am	Morning Outside Time (Weather Permitting)
11:30 am	Come Inside and Wash Up for Lunch
11:30 - 11:40 am	Transitional Activity During Wait Time- Getting Ready for Lunch
11:45 am - 12:10 pm	Lunch
12:10 - 12:30 pm	Potty Time, Getting Ready for Nap
12:30 - 2:30 pm	Naptime (Soft music time)
2:30 - 3:00 pm	Getting up - Combing Hair - Using Potty - Diapering Children in the small bldg. have more time built in for diapering, potty, etc.
3:00 - 3:30 pm	Afternoon Snack and Circle time
3:30 - 4:45 pm	Outside Time
4:45 - 5:30 pm	Getting Cleaned Up - Activity Time - Free Play Cubbie Toys
5:30 - 6:00 pm	Book Time
6:00 p.m.	Closing Time - Parents are reminded that unless there is an urgent situation or emergency that after 6 pm late charges apply.

Kindergarten and School-Ager School Time Schedule

2:15 to 2:30 pm	Arrival From Each Individual School
2:30 to 3:00 pm	Free Play Outside and Snack
3:00 to 4:00 pm	Homework for those who have it - When a child has completed all written homework (Children receive supervision, assistance and a tutorial setting for written homework) , they are able to go outside or have other activities
4:00 to 5:00 pm	Outside Activities or Indoor Activities or Free Play
5:00 to 5:30 pm	Transition Time - Dismissal - Clean Up
5:00 to 6:00 pm	Clean Up - Quiet Book Time - Dismissal
6:00 pm	Closing Time - Parents are reminded that unless there is urgent situation or emergency, that after 6 pm late charges apply.

All Children's Personal Articles and Clothing Guidelines

Clothing - All ages of children are asked to keep an extra set of clothing at KK in the child's cubbie. It is very helpful for all the children in care to have extra clothes in the event there is a spill at lunch or a child gets dirty on the playground. (This includes the school-agers.)

KK Clothes - If your child wears KK extras home, please promptly wash and return them.

Labeling - All items coming into the center which includes coats, jackets, hats, clothing toys, books, etc. need to be labeled. We have had dozens of coats or outfits that are exactly the same.

Cubbies - All children have labeled individual cubbies. We keep blankets, sheets, clothing, combs &/or brushes or toys in the child's cubbie.

Seasonal Items - In the winter, we need knit hats and mittens. In the summer, we need a bathing suit and towel - all labeled please.

Any personal items with lotion, sunblock, hair detangler, or insect repellent need to labeled and replaced when needed.

Children Requiring Diapering/Pullups/Toilet Training

Diapers - All diapers need to be disposable, unless there is a medical reason for cloth ones. We suggest that parents bring quantities that will last more than a week. We label the diapers with the child's name and date on the package.

Diapering Wipes - Please bring in labeled containers of wipes for your child. KK uses non-alcohol, hypo-allergic wipes when others are not available.

Diaper Ointments or Creams - When a child needs (Over The Counter) OTC diaper products or prescription ointments or creams, we will need the parent to complete a form giving our staff permission and direction to apply these products at diapering times. All prescription products must have the original pharmacy label with the child's name on the container. All other OTC products must have the child's name on them.

Toilet Training - When a parent feels their child / (children) is ready for toilet training please let us know. This process should begin at home and we will continue the process here at the center. We have the children on an every twenty minute / thirty minute potty schedule. As we work with the child and keep them on a consistent schedule, training becomes easier. We like to begin this process in Pull-Ups, as this makes the process more sanitary and easier for the child to learn to pull them up and down. Also during the toileting process, we may need lots of extra clothes. You will be notified if your child(dren) is low on diapers, pullups, or clothes. If your child borrows KK extra diapers, or pullups, please replace them ASAP.

Insect Repellent and Sunblock - During the warmer months, spring into late fall, the center requires that all children use sunscreen and insect repellent. (Neither of these products are ever applied to the face.) Both of the above products are necessary for children to play outside or play in the pool a parent signature for sunscreen and insect spray is required. The staff will log application times and any adverse reactions for the record. The parents are encouraged to read the label of all OTC products and understand the dangers, if listed, that could be hurtful to your child. All products, lotions, OTC medications, or prescription medications are used in accordance to the pharmacy directions, or the manufacturers labeling, or physician's directions. Any questions regarding the use of any medications or products on your child should be directed to your child's physician. All specific allergic reactions or conditions regarding your child(ren), must be communicated to center staff or in writing. ** (See sample forms in the back of parent handbook.)

What Do Kindergartners and School-Agers Need ?

Lunches - All school-agers and kindergartners need a bag lunch and drink any day, including summer days, that they are at KK all day long. We encourage nutritional foods for lunches as we supervise lunch time and require that children eat dessert or snack foods last. We have found that this food policy works the best for our school age children. Please send only disposable bags and drink containers. We cannot heat microwave foods. All lunches are kept refrigerated and/or in coolers if we are on a field trip.

Cubbie clothes, including hats & mittens, or bathing suits and towels are needed for the older children. Items we need for the cubbie include: change of clothes, comb or brush, lotion, hair detangler & toys.

Sunscreen Products - During the summer, sunscreen and insect repellent are treated as an OTC medication and requires a permission slip for our staff to apply it daily. Any and all containers of product brought into the center for use on the children must have their name and original label. These products will be kept in location that is inaccessible to children under nine years old for staff to apply. Any skin or medical reactions to the products will be reported to the parent. ******(See sample forms in the back of this parent handbook.)

School-ager Supplies - During the school year, kindergartners and school-agers need notebook paper, pencils, handwriting paper, tissues, and bookbags large enough to hold folders and notebooks without bending them. The KK homework policy is that all written homework be done at KK.

General Information

Policy Changes - Should any procedural change arise including but not limited to a safety protocol or changes in licensing standards, all parents will receive ample notice for planning purposes.

Communication is very important at KK! When you see your child's teacher in the morning or evening, please let the staff person know if there are any issues, concerns, or problems that need to be communicated. (ie: a doctor's appointment, a birthday party, etc.) We want parents to let us know immediately when there is any issue no matter how small to resolve.

To make communication a more positive experience please note the following:

Take the time to let us know if you have any problems or concerns regarding any area of your child's care.

During a conference, please turn your cell phone off.

Remember, if you do not communicate an issue, we will not know you are concerned. We want all parents to

be happy 😊 with all aspects of your child's care.

Newsletters are printed monthly to let you know events, learning units and other information.

Parent Contact Numbers - It is the parents' responsibility to notify KK of any changes in cell numbers, home or work numbers, emergency contacts or people that can pick up your child.

Cubbie Toys - Children are allowed to bring toys from home on a daily basis. We love to have the children bring books, babies, cars, games, etc. for sharing. Toys need to fit into the cubbie unless the classroom teacher gives permission otherwise. The following types of items are not allowed: toy guns or weapons, make-up, perfume, liquid soap, money, etc.

From time to time, toy makers come out with undesirable toys that have negative effects for play or encourage inappropriate play or violence. KK reserves the right to disallow any type of toy that causes problems or trouble. Please label all toys !!!

Parental Contract Agreement Between Kiddie Ko. DCC, Inc. & Parents

The Parent Agrees to:

Pay an annual enrollment fee at the time of a child's entrance and on May 1st of each year there after. The enrollment fee is in the amount of \$ _____. This fee covers our accident insurance and laundry fees for each child. Should this fee be paid in advance prior to enrollment and the parent changes their plans, the enrollment fee is not refundable. Enrollment fee for the summer only is \$ _____ and due on June 1st.

Pay an advance tuition of \$ _____. The tuition is due on Friday mornings for the next week's care. There is no deduction for any absence (including sickness, vacation or holidays). Payments are due on Friday, however, if not paid by the end of business on Monday evening, there will be a \$ 5.00 a day late charge each day until the tuition is brought up to date. Receipts for checks or cash tuition payments can be provided at a parent's request.

_____ Parent Initials & date KK accepts cash, check, money orders, or credit / debit cards for tuition payments.

(** Over the course of years since 1979, we have a philosophy of helping parents, however in that time, some folks have failed to adhere to tuition policies and caused our center to incur difficulty collecting tuition. Some of the changes in our payment policies reflect those parent actions and their failures to comply with agreements made.)

When a parent signs this parent contract agreement he/she agrees to the following: If tuition is not paid according to the terms above, or any negotiations in writing with Ms. Paula, or in terms negotiated by the center's attorney, then the parent understands that collections and any legal fees, court costs, law suit costs, or cost of judgements will be charged back to the parent.

_____ Parent Initials & date

When a parent pays Kiddie Kompany with a check and it is returned due to insufficient funds, it is the parent's responsibility to resolve this matter ASAP. Our bank will automatically try to collect the check and charge the parents' account a \$50.00 check fee. To avoid additional fees being charged back, please address the issue quickly. After two return checks, we reserve the right to require the parent to pay with cash or money orders. Should any collection costs or legal action become necessary to collect funds from unpaid returned checks, it will be the parent's responsibility to pay all fees necessary to recover tuition for this reason.

_____ Parent Initials & date

Should a parent have questions regarding any tuition matter, we are more than happy to answer or discuss a parent's problems. Any special situations will be put in writing. If a parent has any questions regarding any aspect of our operations, it is the responsibility of the parent to inquire.

All cash tuition payments are welcome. Please use one of the envelopes provided at the tuition payment area to label your payment, amount and date. Receipts are given for all cash payments.

All parents are required to give two weeks written notice prior to withdrawal. If the two week notice is not given, the parent will owe the two weeks tuition on the child's last day. Failure to pay these fees will result in collection or legal action.

_____ Parent Initials & date

Dis-enrollment Policies - The Kiddie Kompany reserves the right to dis-enroll any family we deem necessary. Examples: Noncompliance with parent contract agreement, failure to provide medical information or shots record, failure to obtain medical attention for a child, failure to provide information regarding a child's place or date of birth, or non-payment of tuition or returned check fees. Kiddie Kompany reserves the right to dis-enroll any child and will give notice as follows:

1 week notice – non-payment of tuition or behavior

2 week notice – other reasons

Daily Dismissal Time - It is the KK policy that if a parent or designated pickup person comes in the center and is obviously intoxicated or under the influence, etc.....we will take action such as calling an alternative pickup person, or the police if necessary. Should any adult behavior be inappropriate with the child or staff, we will address this problem. Calling the police IS an option.

Parents are required to keep all enrollment information up to date and once annually complete an enrollment form to keep and maintain all enrollment information in a current status. This includes changes in work or home phone numbers or addresses. This could also include a daily phone number for a meeting or seminar, changes in parental status or custody, changes in any cell number, changes in who a child can be released to at pickup time, changes in allergies or sensitivities to food, or changes in a child's physician. Failure to comply with this policy is a serious situation-this is a safety issue!!!

Medical Emergency Plan of Action - In case of injury, accident or illness, I authorize the Kiddie Kompany represented by the director or designee, to follow the steps below to handle a situation concerning my child:

The 1st Priority is to Assist and Address Any Situation to Comfort or Give First Aid to the Child

- A. Call the parents or guardian next
- B. Call the child's physician or an ambulance
- C. Call the emergency contact person listed on the child's enrollment form
- D. Complete an accident report form - see sample at the back of this book

*If for any social custom or religious reason, a parent does not want their child to have medical treatment, the parent must have this request on file in writing prior to the child's first day of care.

_____ Parent Initials & date

For total and complete protocols in the event of an emergency, please see the "Emergency Fire or Disaster Evacuation Plan and Procedures" .

Medication Policies for Prescription Medication, Over the Counter (OTC) Medications or Products Including Diaper Ointments, Sunscreen, and Insect Repellent or Inhaler Medication w/Nebulizer or Epi-Pens for Allergic Reactions.

Effective June 1, 2007, the State of Virginia changed many of the laws regulating the administering of medication in a child-care program. We have five or six staff in attendance daily now certified to administer medication under the new laws.

- A. "All medications" even those previously covered as emergency medications and given with prior parent authorization (ie: Tylenol and/or benadryl) must have a new 6/1/07 medication consent form completed before any medication can be given. This is a new regulation and is changed from last year's policy.
- B. We cannot give any medications, apply sunblock, insect repellent, or any OTC products without the proper forms completed by the parent.
- C. This includes the following:
 - Any oral medications
 - Any inhaled medications such as nebulizer treatments or inhalers
 - Any topical creams, diaper ointments
 - Any eye drops, ear drops or ointments
 - Any epi pen shots that must be given
 - Sunblock or insect repellent spray
- D. If you absolutely need us to give medications, you must take the time to complete the forms or we will NOT be able to give the medications.
- E. The medication must have the child's name, medication name and dosage, time(s) to be given daily and the manufacturer's general instructions for the usage of the medication. or specific instructions for a child (if different) by the child's doctor.

F. Prescription medications must be in the original container, bottle or box with the pharmacy label. The label must have the child's name, medication name, date, dosage and time(s) to be given. All pharmacy prescription label directions must be followed as directed by the physician. Package inserts to communicate side effects must be included with the medication for prescriptions.

G. Children requiring nebulizers or Epi-pens must have an authorization from the child's doctor. All inhaler medication shall be brought in the original pharmacy container. All long term or ongoing medications shall have a doctor's authorization on file. Doctor authorizations will now 12 months and then must be replaced by a new one.

H. Parents shall retrieve medications from the center as soon as appropriate for the situation. Should they fail to retrieve medication, after appropriate notice, the medications will be discarded.

I. Parents are responsible to notify the center should any health conditions change with a child in care.

J. Prior to coming into the center, parents are responsible for notifying staff daily whether or not a dose of medicine was given.

Sickness Policies - Should a child have a fever of over 100, diarrhea, vomiting, an unidentified rash, or any contagious conditions such as a strep infection, head lice, the flu, etc - the following guidelines apply:

- Children shall be picked up immediately within 30 minutes, if the center staff calls the parent. If a parent cannot come, it is up to the parent to get the child picked up by an emergency contact person or parent designee.
- If a child has any of the conditions stated above, the night before the morning of our regular day care schedule, the child shall be kept home. This is not a choice it is a health department policy.
- Should any child or person in a child's home come in contact with any contagious condition, this must be reported to the center immediately. An information sheet is contained in the back of this book that describes many contagious conditions. Please do not dose a child with ibuprophen or tylenol and send them with the knowledge that the child had a fever prior to giving the medication.
- Parents will be notified if their child comes in contact with any contagious condition while at KK.
- Flu Policy - According to State Health Dept & Henrico County Health Dept if a child tests positive for the flu, they must be out for 5 days following the test. If at the end of the five days, if a fever still exists, then the child cannot return until there is no fever for 24 hours.

Release Policies: If you would like someone other than you the parent or guardian to pick up your child, the following conditions must be met:

- You must supply in writing the name of the person, description, license number and vehicle type.
- Anyone picking a child up will be asked for identification. If verification cannot be made, the child will not be released.

All release information, custody or court documents, and emergency contact information shall be kept up to date by the parent(s) or guardian. All persons picking children up shall be responsible for the safety of the child(ren) in the parking lot once the child has been escorted out of the building by the parent.

Medical Form Information Policies:

All children enrolling in the center must have a complete immunization record and an up to date physical exam signed by the child's physician. It is the parent's responsibility to supply the center with the completed forms.

Parents having social or religious exemptions from medical procedures must have signed paper work available on the first day a child is at the center noting these exemptions.

Assessment of a Preschooler's Development: All preschoolers in care shall have an update on their developmental growth and progress. Parents shall have an informal report regarding this assessment. Areas that are addressed are physical development, social and emotional development, cognitive growth and behavior as required by the licensing standards.

Transportation Policies - Children four years old and above will be transported in an approved child safety seat for field trips or school runs. All laws regarding child restraint devices are followed. Children under the age of five will not routinely go on field trips, unless special provisions are made with the parent.

- Van riders shall be seat-belted in or in a car seat with seat belts.
- Children will listen and follow directions while riding in the vans.
- There will be no screaming or loud noises while riding in the van.
- There will be no eating, chewing gum, or drinking drinks on the van.
- Children will be instructed to remain seated in seat belts until the van is stopped.
- There will be no throwing objects on the vans or any hands or feet out the windows.
- Any child continually breaking the rules will be verbally prompted. Should we continue to experience problems with any child, a parent conference will be scheduled to discuss the inappropriate behavior on the vans.

Food and Nutritional Policies - We serve morning snack, lunch, and afternoon snack.

- Our monthly menus are posted in each classroom for parent viewing. The food we serve is nutritionally balanced. See appendixes in the back of this book.
- Parents are allowed to bring a breakfast in for their child and we suggest an nutritional food selection for your child.
- All uneaten foods must be discarded after the child finishes the meal.
- Parents are encouraged to bring cakes, cookies or treats for parties or treat days.
- Foods for special occasions are typically served as a dessert after lunch and should be appropriately packaged with cleanliness in mind. All children in the classroom are to have an equal portion. All left over foods are discarded.
- Children requiring special foods or diets are to have their foods brought into the center by the parent. This includes snacks, lunch, and foods for special activities.

Kindergartners and School-agers:

- Lunches must be brought to KK any day that the K's or School-agers are here all day.
- Drinks are refrigerated along with any foods requiring refrigeration.
- Lunches should be able to last four to five hours in the air conditioning.
- ALL CONTAINERS NEED TO BE DISPOSABLE !!! We do not have space for lunch bags that are insulated, tupper-ware containers, etc.
- Please do not send foods that need cooking in the microwave.
- Any child forgetting a lunch shall be provided a lunch.
- Staff encourages children to eat the nutritional foods first and desserts last.
- Any uneaten foods are discarded.
- Lunches brought from home are encouraged to be nutritionally sound.
- Drinks brought from home are encouraged to be water or milk.
- According to the latest information regarding children's nutritional standards, water is the best drink.
- Repeat - We want BAGGED LUNCHES WITH ALL DISPOSABLES CONTAINERS !
- We want nutritional foods and preferably water, milk or sports drinks.

Child Abuse Policies - As per Code of Virginia S 63.2-1509:

At KK all staff are trained of the law requiring any person working with children to report suspected child abuse or neglect. We work hard at our center to make sure all children are treated with respect and to work with parents closely to support children and their needs.

Discipline Policies and Philosophy

The health and safety of the children in care form the foundation of our discipline philosophy and plan of action.

As we serve the many families at KK each day, each and every parent brings an independent way of thinking into the center as they bring in their child. Each family has their own ideas as to parenting and appropriate and inappropriate behaviors whether it is in the home or at school. Cultural and religious thinking also comes from each of these homes daily. Our staff is sensitive to the variety of families we serve as we go forward each day. We use developmentally appropriate programming, predictable routines, positive modeling for language, manners and behavior. We also use a variety of transitional activities to adjust and calm chaos. Our daily goals build developing minds as we work each year to provide happy and safe days for our children with positive opportunities for learning, growing, playing and thinking.

Plan of Action - When a child begins to become out of control, we utilize a change called cool down or the thinking chair. This gives the child an opportunity to think, have a change of environment and to calm down. The thinking time can be sitting with a staff, in a chair or on the carpet. Time out on the outside is in a sitting position on a bench or in the shade. We use other interventions to work through issues with sharing, using movement and music and getting lots of exercise. Our age group begins at age two and extends through the end of fifth grade. At each different age of development different types of interventions are appropriate. We have small activity boxes to give the child an activity to refocus on while in the thinking mode.

Preschoolers - This group needs lots of opportunities for movement, individual choices, duplicates of similar toys or materials, Scheduling that enhances their attentional abilities, several story times, activities that promote working cooperatively, lots of outside play, with art and music each day.

Kindergarteners - This group although in school are emotionally young. They need lots of activities that support success, beginning reading activities, art, movement and music with lots of outside time each day. These children have lots of staff tutorial support for homework each day during school time.

School-agers - This group is the most capable and can be the most challenging. We provide lots of time for outside games and fun, art, reading, music and movement, and free-play with cubbie toys. During the school year, written homework is a main focus with support and guidance from the staff. "Achieving the best grades" and supporting "a good work ethic" are two areas that we have found that produce successful students.

Problematic Behavior and Ongoing Issues with children:

- No profane language, continual emotional tantrums, or physical abuse from a child on another child or staff will be allowed.
- Consistent lack of listening and following directions, or belligerent attitudes from a child will not be tolerated.
- Lying, stealing, name calling or other negative behaviors will not be tolerated.

Ms. Paula will not ignore or fail to address these types of issues. Continual problems with a child, can result in a parent conference, a parent required to pick up their child, or disenrollment. Often when we have issues with a child, we recommend that a child be seen by the physician for immediate referral to support better outcomes as we look to the future. In our 40 year history, Ms. Paula has heard every excuse, seen all types of behavior, and has gained a keen sense of what is needed next.

Interventions Not Allowed:

- We use no physical form of punishment.
- Behavioral incidents are not ignored : we will deal with issues promptly, including parent notification.
- Children will not be shaken, or handled roughly.
- Staff will never make negative or belittling remarks or be verbally abusive.
- Staff will not use food in any re-directive way.
- While in time out a child will not be in an uncomfortable position.

Consequences:

Should a parent fail to respond to requests for help with any of these types of problems, the action the center will take is disenrollment with one week notice. Here at KK we have a long proven record of working with the most challenging children with very good results. For this to happen, parents must be involved and on board with a plan to work through any issue. As always with any policy at KK, if you have questions, please ask, 266-9126.

Lost or Missing Child Procedure Training

- All licensed centers are required to train staff in the unlikely event that a child may become lost.
- Since 1979, KK has never misplaced nor lost any children at any time.
- Our staff has been trained to know our head counts all throughout the day and maintain the safety of the children in care.
- According to state safety regulations, should any child go missing, first the police would be called, then the parent. At KK we will continue our record of an active focus on safety and head-counts each day. We count and count and re-count.

The Conclusion of the Parental Agreement Contract

This agreement includes the parents' receipt of all enrollment materials, including this document in its entirety, and including the Kiddie Kompany Emergency Preparedness Plan, copies of samples of all permission slips, medical forms, enrollment forms, etc.

This agreement contract provides for the protection of the parents as well as the center. We encourage all parents to read and understand all information and ask questions.

Financial Position: The Kiddie Kompany DCC, Inc. bases its ability to provide for the children and staff salary on our tuition. We have no provision to reduce expenses due to absentee losses, so when you read and sign this agreement contract, it is your legal guarantee that you will pay tuition and abide by all of the contents of this agreement contract.

Parent Signature

Date

The Kiddie Kompany DCC, Inc. Pool Rules

1. Children in the small building have water play and swimming three times a week in the KK pool. The small children work in the very shallow end of the pool.
2. Permission slips for all water activities are signed by parents prior to participation in the activity.
3. Children in the big building have swim lessons and water play on their designated swim days. Unless there is a medical reason, all children are encouraged to participate.
4. When any group is in the pool, all safety rules are followed – all staff in the water with the children.

Rules

- No running in pool area
- No spitting, splashing or dunking others
- No glass in pool area
- No chewing gum in pool
- No hanging on the ropes

- No jumping in unless supervised by a teacher
- Stop and listen if whistle blows
- Enter the pool on the ladder or stairs only

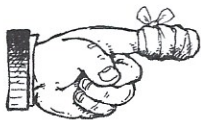
Consequences for NOT following the rules – will be sitting out for a short time or all day.

_____ Parent Initials & Date

Back Section of Kiddie Kompany Parental Handbook

Appendix Contains:

- A. Appendices List
- B. Sample Accident Form
- C. Licensing Information Page
- D. Sample Swim & Field Trip Permission Slip
- E. Sample OTC Skin Products Permission Slip
- F. Sample Medication Permission Form
- G. - J Communicable Disease Chart
- K. Photo of Pool Activity



THE KIDDIE KOMPANY



Parent Signature _____ Date: _____

The signature above signifies that I have reviewed this report and agree with its contents. I understand that I may inquire or address questions or concerns to Miss Paula regarding this incident.

ACCIDENT / INCIDENT NOTIFICATION FORM

Parent Name: _____ Date: _____

Child's Name: _____ Your child received the injury described below at _____ a.m. p.m. at Kiddie Kompany. Description of what happened.

Treatment Administered: _____

Witnessed by: _____

Treatment Administered by: _____

Parents were notified _____ At Pick-Up Time in Person _____ By Phone During the Day
_____ In Person the Next Day _____ By Phone At Night



After a review of this accident / incident, we have determined that the following steps could possibly prevent this from happening again:

We have determined after a review of this situation that it was a situation that could not have been anticipated and, therefore, not preventable.

If you wish to question me further regarding this matter, please call (804) 266-9126 or schedule a conference at any time.

Paula J. Propst, Director _____ Date _____

Staff Signature _____ Date _____

B



LICENSING INFORMATION FOR PARENTS ABOUT CHILD DAY PROGRAMS

The Commonwealth of Virginia helps assure parents that child day programs that assume responsibility for the supervision, protection and well being of a child for any part of a 24-hour day are safe. Title 63.1, Chapter 10 of the Code of Virginia gives the Department of Social Services authority to license these programs. While there are some legislative exemptions to licensure, licensed programs include child day centers, family day homes, child day center systems and family day systems. The state may also voluntarily register family day homes not required to be licensed.

Standards for licensed child day centers address certain health precautions, adequate play space, a ratio of children per staff member, equipment, program and record keeping. Criminal record checks and specific qualifications for staff and most volunteers working directly with children are also required. Standards require the facility to meet applicable fire, health and building codes.

Compliance with standards is determined by announced and unannounced visits to the program by licensing staff within the Department of Social Services. In addition, parents or other individuals may register a complaint about a program that will be investigated if it violates a standard.

Three types of licenses may be issued to programs. Conditional licenses may be issued to a new program to allow up to six months for the program to demonstrate compliance with the standards. A regular license is issued when the program substantially meets the standards for licensure. A provisional license, which cannot exceed six months, is issued when the program is temporarily unable to comply with standards. Operating without a license when required constitutes a misdemeanor which, upon conviction, can be punishable by a fine of up to \$100.00 or imprisonment of up to 12 months or both for each day's violation.

If you would like additional information about the licensing of child day programs or would like to register a complaint, please contact:

Central Regional Office
1604 Santa Rosa Road, Suite 130
Richmond, VA 23229-5008
(804) 662-9743

You may also contact THE VIRGINIA DEPARTMENT OF SOCIAL SERVICES (VDSS) –
<http://www.dss.virginia.gov>

- Click on "Child Care" and related links for information about:
 - Licensed Child Care Facilities Search (by name, county/city, zip code and type of facility). Includes links to asbestos inspections, considerations for operating a licensed child care facility, family day home FAQ's, and licensing

Swim Permission Slip

My child _____ has my permission to swim and participate in the pool activities, water adjustment and swim lessons. I understand that all activities are well supervised and handled with safety every day. I understand that swim fees include lessons and swim activities for the whole summer.

My child's current swim level and abilities are:

Starting from last summer at Kiddie Ko.'s Swim Program

Parent Signature

Date

Field Trip and Activity Permission Slip

My child _____ has my permission to go on field trips and activities planned and publicized in the newsletter. I understand that transportation will be on KK vans. I understand that some activities require fees paid in cash.

Parent Signature

Date

Kiddie Kompany DCC., Inc. - Medication Authorization Form
For Prescription and Non-prescription Medications
VDSS Division of Licensing Programs New Form – KK Revised 7/1/2017



INSTRUCTIONS:

- **Section A** must be completed by the parent/guardian for **ALL** medication authorizations.
- **Section A and Section B** must be completed for any **long-term medication authorizations** (those lasting longer than 10 working days).

Section A: To be completed by parent/guardian

Medication authorization for: _____
(Child's name)

The Kiddie Kompany **MAT** Certified Staff have my permission to administer the following medication:

Medication name: _____

Dosage and times to be administered: _____

Special instructions (if any): _____

This authorization is effective from: _____ until: _____
(Start date) (End date)

Parent's or Guardian's Signature: _____ Date: _____

Section B: to be completed by child's physician

I, _____ certify that it is medically necessary for the medication(s) listed
(Name of Physician)

below to be administered to: _____ for a duration that exceeds 10 work days.
(Child's name)

Medication(s): _____

Dosage and Times to be administered: _____

Special instructions (if any): _____

This authorization is effective from: _____ until: _____
(Start date) (End date)

Physician's Signature: _____ Date: _____



VIRGINIA DEPARTMENT OF
SOCIAL SERVICES

**Authorization Form for
Non-prescription Over-the-Counter Skin Products
Licensed Child Day Centers
VDSS Division of Licensing Programs Model Form**

INSTRUCTIONS:

This form must be completed by the parent/guardian to authorize the use of:

- Sunscreen
- Diaper ointment or cream
- Insect repellent

The Kiddie Kompany Staff has my permission to apply the non-prescription

over-the-counter (OTC) skin product listed below to my child, _____
(Child's name)

Product Name: _____

Known Adverse Reactions (if any): _____

- All OTC products must:
 - Be in the original container and, if provided by the parent, labeled with the child's name
 - Be used according to manufacturer's recommendation and instructions for application
 - Not be used beyond the expiration date of the product
- Sunscreen:
 - Must have a minimum sunburn protection factor (SPF) of 15
 - Shall be inaccessible to children under 5 yrs. & children in therapeutic or special needs programs
 - Children nine yrs. and older may self administer sunscreen if supervised
- Diaper ointment/cream and Insect repellents:
 - Shall be kept inaccessible to children
 - Record of use shall be kept that includes child's name, date, frequency of application, and any adverse reactions

This authorization is effective from: _____ until: _____
(Start date) (End date)

Parent's Signature: _____ Date: _____

Communicable Disease Reference Chart for School Personnel

DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Chickenpox* (Varicella)	10-21 days, usually 14-16 days. (Incubation period in persons who receive VarIZIG or IGIV extends through day 28.)	By direct contact with vesicular fluid or by airborne spread from respiratory tract secretions. Infectious from 2 days before rash onset until all lesions are crusted over and no new lesions appear within a 24-hour period (average is 4-7 days).	Sudden onset with slight fever and itchy eruptions which become vesicular (small blisters) within a few hours. Lesions commonly occur in successive crops, with several stages of maturity present at the same time. Communicable for as long as 5 days (usually 1-2 days) before eruption of vesicles and until all lesions are crusted (usually 5 days). Communicability may be prolonged in immunocompromised people.	CASE: Exclude from school for at least 5 days after eruptions first appear or until vesicles become dry. Avoid exposure to women in early pregnancy who have not had chickenpox and/or varicella vaccine. CONTACTS: Check vaccination status of contacts and recommend vaccination if needed. On appearance of symptoms, exclude from school.
Conjunctivitis, Acute Bacterial (Pink Eye)	Varies depending on causative agent.	By contact with discharges from the conjunctivae or contaminated articles.	Pink or red eyeball with swelling of the eyelids and eye discharge. Eyelids may be matted shut after sleep. May involve one or both eyes.	CASE: Exclude from school while symptomatic or until 24 hours of antibiotic treatment has been completed. CONTACTS: School exclusion not indicated.
Diarrheal Diseases* (Campylobacteriosis, <i>E. coli</i> O157:H7, Giardiasis, Salmonellosis, Shigellosis, etc.)	Campylobacteriosis: 1-10 days, usually 2-5 days. <i>E. coli</i> O157:H7: 1-8 days, average 3-5 days. Giardiasis: 3-25 days, usually 7-10 days. Salmonellosis: 6-72 hours, usually 12-36 hours. Shigellosis: 12-96 hours, usually 1-3 days.	By the fecal-oral route through direct contact or by ingestion of contaminated food or water.	Ranges from sudden onset of fever, abdominal pain, diarrhea, nausea, and sometimes vomiting in salmonellosis, to cramps and bloody stools in severe cases of shigellosis and <i>E. coli</i> O157:H7. Dangerous dehydration may occur in younger children. In giardiasis, persons may be asymptomatic or have decreased appetite and weight loss.	CASE: Exclude from school until cessation of acute diarrhea. Stress importance of proper handwashing. CONTACTS: School exclusion and stool cultures not indicated in absence of symptoms. Consult with your local health department for advice during suspected school outbreaks.
Fifth Disease (Erythema Infectiosum)	From 4-21 days.	Primarily through contact with respiratory secretions.	Rash characterized by a vivid reddening of the skin, especially of the face, which fades and recurs; classically, described as a "slapped face appearance." Mild symptoms of fever, body aches, and headache may occur 7-10 days before rash.	CASE: Exclusion from school not indicated. CONTACTS: School exclusion not indicated. Pregnant women and immunocompromised persons should seek medical advice.
Hepatitis A *	From 15-50 days, average 28-30 days.	By the fecal-oral route through direct contact or ingestion of contaminated food or water.	Fever, loss of appetite, nausea, abdominal discomfort and weakness followed by jaundice. Many unrecognized mild cases without jaundice occur, especially in children. Communicability greatest from 7 days before to several days after onset of jaundice.	CASE: Follow advice of child's physician and/or your local health department. CONTACTS: School exclusion not indicated. Stress importance of proper handwashing.

NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN - A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2008) published by the American Public Health Association and the *2009 Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.

* Officially reportable in Virginia to the local health department. All outbreaks and unusual occurrences of disease are also reportable.

DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Hepatitis B*	From 45-160 days, average 90 days.	By direct contact with infected blood or body fluids. Transmission occurs when the hepatitis B virus enters the body through broken skin or mucous membranes.	Only a small proportion of acute infections have clinical symptoms. Symptoms are similar to those of hepatitis A.	CASE: Follow advice of child's physician and/or your local health department. CONTACTS: School exclusion not indicated.
HIV infection* and AIDS*	Variable	By direct contact with infected blood or body fluids. Transmission occurs when the human immunodeficiency virus enters the body through broken skin or mucous membranes.	A broad range of disease manifestations affecting multiple organ systems. Many children remain asymptomatic.	CASE: Follow advice of child's physician and/or your local health department. CONTACTS: School exclusion not indicated.
Influenza	Usually 1-4 days	Person to person by respiratory droplets created by coughing or sneezing.	Sudden onset of fever, chills, headache, malaise, and nonproductive cough. Subsequently, respiratory tract signs including sore throat, nasal congestion, rhinitis, and cough become more prominent.	CASE: Exclude from school until at least 24 hours following resolution of fever. CONTACTS: School exclusion not indicated. Seasonal influenza vaccination encouraged to reduce spread of influenza.
Measles* (Rubella, Red Measles)	From 7-21 days, (usually 8-12 days from exposure to onset of symptoms).	Airborne by droplet spread or direct contact with nasal or throat secretions of an infected person.	Prodrome characterized by fever followed by reddened eyes, runny nose, and cough. Dusky-red blotchy rash appears on day 3 or 4 and lasts 4 to 7 days. Communicable from 4 days before to 4 days after the appearance of the rash.	CASE: Exclude from school until at least 4 days after appearance of the rash. Check immunization records of all students. Discuss with your local health department. CONTACTS: Exclude from school immediately on signs of prodrome. Unimmunized students may need to be excluded from school. Follow recommendations of your local health department.
Meningitis, Bacterial (<i>H. influenzae</i> *, Meningococcal*, Pneumococcal)	<i>H. influenzae</i> : 2-4 days Meningococcal: 2-10 days, usually 3-4 days. Pneumococcal: 1-4 days	By direct contact or droplet spread of nasopharyngeal secretions of an infected person.	Sudden onset of fever, headache, nausea, stiff neck and photophobia. Rash may occur in cases of meningococcal disease.	CASE: Exclude from school during acute illness. Non-communicable after 24-48 hours of appropriate drug therapy. CONTACTS: School exclusion not indicated. Discuss with your local health department to determine if close contacts need prophylactic treatment for <i>H. influenzae</i> or meningococcal meningitis.
Mumps*	From 12-25 days, usually 16-18 days.	By droplet spread or by direct contact with the saliva of an infected person.	Fever with swelling and tenderness of one or both parotid glands located below and in front of the ears. Unrecognized mild cases without swelling may occur. Communicable from 3 days before swelling until 5 days after.	CASE: Exclude from school for 5 days after the onset of parotid gland swelling. CONTACTS: School exclusion not indicated.

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NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN - A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2008) published by the American Public Health Association and the 2009 *Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.
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DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Norovirus	From 12-48 hours	Primarily by the fecal-oral route through direct contact or ingestion of contaminated food. Transmission is also possible through contact with surfaces contaminated by, or direct contact with, the vomit of an infected person.	Sudden onset of vomiting and/or diarrhea, abdominal cramps, and nausea.	<p>CASE: Exclude from school until 24 hours after symptoms resolve. Stress importance of proper handwashing as virus is shed in stool for weeks after symptoms resolve.</p> <p>CONTACTS: School exclusion not indicated.</p>
Pediculosis (Head Lice)	Eggs hatch in 7-12 days and reach maturity 9-12 days later.	By direct contact with an infested person or their personal belongings such as combs, brushes, and hats.	Severe itching and scratching, often with secondary infection. Eggs of head lice (nits) attach to hairs as small, round, gray lumps.	<p>CASE: Notify parents; inform that child has lice and should be treated. School exclusion is not indicated.</p> <p>CONTACTS: Inspect head for evidence of infestation. Refer for treatment if infested.</p>
Pertussis*	From 4-21 days, usually 9-10 days.	By direct contact with respiratory secretions of an infected person by the airborne route.	The initial stage begins with upper respiratory symptoms and increasingly irritating cough. The paroxysmal stage usually follows within 1 to 2 weeks, and lasts 1 to 2 months. Paroxysmal stage is characterized by repeated episodes of violent cough broken by a high-pitched inspiratory whoop and vomiting. Older children may not have whoop. Convalescence may require many weeks.	<p>CASE: Exclude from school until a physician advises return (usually 5 days after initiation of appropriate antibiotic therapy). Discuss with your local health department.</p> <p>CONTACTS: Exclude on first indication of symptoms.</p>
Ringworm of the Body (Tinea Corporis)	Unknown.	By contact with lesions of an infected person, animals or fomites.	Circular well-demarcated lesion that can involve face, trunk, or limbs. Itching is common.	<p>CASE: Exclusion from school not indicated as long as lesions are covered or child is receiving treatment.</p> <p>CONTACTS: School exclusion is not indicated.</p>
Rubella* (German Measles)	From 12 to 23 days, usually 14 to 17 days.	By direct contact or droplet spread of nasopharyngeal secretions of an infected person.	Mild symptoms; slight fever, rash of variable character lasting about 3 days; enlarged head and neck lymph glands common. Joint pain may occur, especially in older children and adults. Communicable for 7 days before onset of rash and at least 7 days thereafter.	<p>CASE: Exclude from school for 7 days after onset of rash. Avoid exposure to women in early pregnancy. Check immunization records of all students. Discuss with your local health department.</p> <p>CONTACTS: Discuss with your local health department; unimmunized contacts may need to be excluded. Those who are pregnant and not immunized should be urged to seek medical advice.</p>

NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN - A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2008) published by the American Public Health Association and the *2009 Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.

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DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Scabies	Persons without previous exposure: 4 to 6 weeks. Previously infested and sensitized: 1-4 days after re-exposure.	By direct skin-to-skin contact.	Begins as itchy raised areas around finger webs, wrists, elbows, armpits, belt-line, and/or genitalia. Extensive scratching often results in secondary infection.	CASE: Exclude from school until 24 hours of appropriate treatment has been completed. CONTACTS: Inspect for evidence of infestation and refer for treatment if necessary. School exclusion is not indicated in the absence of infestation.
Streptococcal Diseases (Including Impetigo, Scarlet Fever, and "Strep" throat)	Variable, often 2-5 days, may be longer.	By direct contact with infected persons and carriers or by contact with their respiratory droplets.	<p>Impetigo: Multiple skin lesions usually of exposed area (e.g., elbows, legs, and knees), but may involve any area. Lesions vary in size and shape, and begin as blisters, which rapidly mature into brown crusts on a reddened base. Healing from center outward produces circular areas, which may resemble ringworm.</p> <p>Scarlet Fever: Fever, sore throat, exudative tonsillitis or pharyngitis. Sandpaper-like rash appears most often on neck, chest, and skin folds of arms, elbows, groin, and inner aspect of thighs.</p> <p>"Strep" throat: Sudden onset of fever, sore throat, exudative tonsillitis or pharyngitis, and enlarged lymph nodes. Symptoms may be absent in some cases.</p>	<p>CASE: Exclude from school until lesions are healed or until 24 hours of antibiotic treatment has been completed.</p> <p>CONTACTS: Exclusion from school not indicated. Observe carefully for symptoms.</p> <p>CASE: Exclude from school during acute illness. Non-communicable after 24 hours of appropriate drug therapy.</p> <p>CONTACTS: Exclude on first indication of symptoms. Culturing of school contacts and treatment of carriers not usually indicated.</p> <p>CASE: Exclude from school until 24 hours of antibiotic treatment has been completed.</p> <p>CONTACTS: Exclusion from school not indicated. Observe carefully for symptoms.</p>



NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN - A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2009) published by the American Public Health Association and the 2009 *Report of the Committee on Infectious Diseases* (The Red Book) published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.

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Kiddie Kompany Pool

NO Rough Play
or Salshing 4ft

