

**ECDC Operational Policies of Christ the King**  
5502 Nashville Ave  
806-771-2077 www.ctkecdc.org  
**Revised** September 2021

*All information may be used for viewing only and not publication or personal use without written permission from the ECDC Director. All updates override any previous policy.*

***We are accredited through the  
National Association for the Education of Young Children.***



**Offered Programs:** (Age overlap allows children to move developmentally.)

**Infant Community: 6 weeks to 12 months**

**Mobile Infant Community: 8 months-18 months (mobile to walking)**

**Toddler Community: 15 months- 26 months**

**Young Children Community: 22 months to 36 months**

**Primary Turquoise Community: 30 months to 48 months**

**Primary Yellow: 36 months to 60 months.**

**(School student's Pre-K 3-5<sup>th</sup> grade  
who attend CTK School and Holiday/Summer Care)**

**ECDC Ratios**

1-4, 2-8, 3-12

Infant Community

1-4, 2-9, 3-13

Mobile Community

1-5, 2-12, 3-17

Toddler Community

1-7, 2-16, 3-22

Young Children Community

1-11, 2-23

Primary Community

1/15, 2/30

LLP I

1/18, 2/34

LLP II

Due to Co-vid 19 we do have some added measures to follow to ensure we keep our families safe.

Currently our measures are:

- We use Procare contactless sign in with a parent checklist for children health. Parents enter their temperature and their child's temperature in the checklist daily for our records.
- Please continue to check your child's temperature daily. We no longer require you to submit them. If a child has over 100.0 degrees of temperature and other signs of illness (cough, not eating, sleeping more/less, change in behavior, lethargy etc.) the child may not come to school (or may be sent home). Children MUST be out fever free for 24 hours as well as bring a release from a Medical Doctor (M.D. or D.O.) or Nurse Practitioner. They may return after 72 hours fever free without a note from a Physician (M.D. or D.O.) or Nurse Practitioner.
- Parents are not allowed into the classrooms. Parents pick up at the outside doors on the porticos for each room. Infant/Toddler and Turquoise/Yellow share the back porticos.
- With social distancing only one family may enter the entryway at a time. Please give yourselves enough time at drop off to wait when necessary.
- Children wash their hands first thing when entering the classroom.
- Staff follows the same temperature and illness policy as our children
- Increased touch point cleaning
- Vaccines are encouraged and are available for childcare workers

Currently all staff wear masks in the building. Parents are highly encouraged to also wear masks during drop off and pick up. We will continue to monitor numbers in the city of Lubbock.

As of June 7, 2021 staff and parents who have been 10 days past their last vaccination may be "mask-free". We do reserve the right to return to the mask policy while the numbers in Lubbock are high.

Following the safety measures for sick children and at-risk people are important for us all to monitor.

School aged children LLP students are not required to wear masks in LLP, unless they have had an exposure. If there is an exposure, they will follow the mask guidelines that are determined by the school (and Lubbock Health Department). We will use more outside spaces, increased cleaning, more ventilation, and small groups to combat germs. We reserve the right to ask the children to wear masks if we see an increase of COVID cases in Lubbock.

If someone who attends or works at the ECDC were to get a positive diagnosis of COVID, parents will be notified. The health department will be notified, and they will come in and evaluate the situation. We will follow all protocols given to us by the health department that will be given after they evaluate the situation. The staff guidelines if they are Positive: 10 days past a positive test, fever free for 24 hours without medication and other symptoms diminishing. Or a negative COVID-19 test to return.

**Current Health Dept guidelines as of (September 8, 2021). If the staff are masked, we will not quarantine unless *more than one* teacher or *one* or more students test positive for COVID.**

If a child receives a positive COVID diagnosis, please contact the ECDC. Please let us know the dates the child will be quarantined.

IF a parent receives a positive COVID diagnosis, please contact the ECDC. Please let us know the dates the child will be quarantined.

## **Enrollment**

### Applications:

- We have an open enrollment policy. We do reserve the right to list families on our wait list by the following priority: 1. ECDC employee 2. CTK or Church employee 3. Family member of an ECDC or LLP student. 4. Family member of the CTK Cathedral School Student. /CTK Alumni/ Christ the King Cathedral Parish member.6. Catholic 7. Check date
- Class space is limited. We have extremely limited openings for children already born. A waiting list for children by priority is used to determine placement if any openings happen.

- Tours are limited to space availability and are not happening due to COVID protocols.
- All paperwork and fees are due prior to placement. There is a \$200 “Wait List Fee” this is a non-refundable fee which will hold the date of placement for your child, or the order of placement for your child. Fees are by child and non-refundable.
- New infant enrollments for existing families have a “Wait List Fee” to identify and guarantee placement for a specific time frame. This fee is non-refundable. If your new child/ren are given a date, we will charge the “wait list fee” prior to their birth. If you decide to not enroll your new child/ren, after you have been given a date, we reserve the right to charge the fee if you withdrawal their enrollment.
- Our children move from class to class developmentally. On occasion, we may adjust our ratios up one or two children to accommodate current ECDC students who are developmentally ready to advance. This may cause a slight increase in ratios for a short period of time. Our goal is to meet children’s individual needs. Even if we adjust our ratios for an ECDC student, at no time have we ever reached state ratios. We care about each individual child and want them to have the best educational experience and can succeed at their own pace. The joy of Montessori and the goals of NAEYC allow us to be flexible and make sure each child is cared for and encouraged to be their best.

Hours, days, and months of operation:

Monday through Friday 7:30 AM to 6:00 PM. The Center runs twelve months of the year, with noted holiday’s closures.

**See website for the most up to date holiday closures at [ctkecdc.org](http://ctkecdc.org).**

- Living and Learning Program (Pre-K-5<sup>th</sup> grade) includes school days and 2:00 dismissals each month. There is an additional charge for 12:00pm dismissals and holidays. Please see the holiday schedule for more information. *Holidays for LLP are different from the ECDC and are signed up separately from LLP afternoon care. Parents are required to have the noon dismissal holiday care form to sign up for holidays. Families who do not pre-register for Holiday care will have to check availability and pay the drop- in rate.*
  - Registration for summer care is on a first come first serve basis. Space is limited.

**Tuition Payments:** Parents are responsible for tuition each month. Tuition is drafted through Procure Tuition Express for the ECDC children and LLP students. If your account does not draft, you are still responsible for tuition payments, which can be assessed a late fee.

Any additional charges accrued throughout the month such as late fees, lunch fee or drop-in (LLP only) charges will be drafted on the last day of the month. Families who have been assessed a fee will receive a statement the day prior to the draft.

Everyone's tuition will be paid through an automatic draft program. All tuition is drafted from a checking or savings account on the 5<sup>th</sup> of each month. It is required for tuition to be drafted unless paid in full. Accounts who are not set up to draft will be assessed a \$25.00 administrative fee after the first month. Tuition is figured on a flat rate per month. There will be no credit for absences. **Once tuition has been drafted it is non-refundable.** NAEYC 10.B.08i

Tuition is set for the year and divided over twelve months. We reserve the right to adjust tuition rates. We reserve the right to adjust days off annually. NAEYC renewal years every four years we will have more days out to cover teacher workdays.

### **Security:**

The ECDC has secure access. Each family will receive two scan fobs to operate the front and back door. Each fob is registered to a parent and the computer logs that enter the building daily. We ask that the fobs are not shared, if a grandparent or friend is picking up your child they MUST check in at the front desk. Fobs are the property of the ECDC and if they are lost or broken there will be \$15.00 per fob. On withdrawal, the family is required to return the fobs, or we will charge \$15.00 per fob. NAEYC 10.B.08g

Currently, due to COVID protocols parents are dropping off and picking up at the outside doors on the porticos to each classroom. There is not a time frame on how long this will continue. It will be determined by the Minimum Standards for the State of Texas and COVID numbers and vaccination numbers in the city of Lubbock.

### **Preparedness/Crisis Management:**

We have a plan which identifies how the ECDC will address, building evacuation, bomb threat, campus lock down, shelter in place, tornado, flood, assault, medical and dental emergency, communicable disease, lost or missing child and utility failure. NAEYC 10.B.08d; 10.B.08g, 10.D.08 A review copy is available at the front desk, due to the sensitivity of some procedures the copy is not to be removed from the building.

### **Electronic Surveys:**

We will send electronic surveys periodically. We will gather information from parents in all areas of the program. Results will be given to the parents upon completion. NAEYC 10.F

## **Daily Procedures: NAEYC 10.D.06**

### **Arrival and Dismissal Policy**

- ECDC Children must be walked to the classroom doors (currently outside). Children are to be clocked in and out using the Procure APP. IF you have two or more children, each child needs to be signed out and signed in when they are at their door.
- Please leave medication, changes in pick up information, monthly information sheets with your classroom teacher.
- Once the parent has picked up their child, the parent is responsible for the supervision and safety of the child.
- **Parents please take into account our teachers and allow yourself enough time to visit with the teacher, gather your items, sign out, and still being able to leave the building by 6:00 p.m.**
- **Late Fee:** Students who are not picked up by 6:01 p.m. will have a flat \$10.00 late fee. After 6:05 p.m. there will be a \$1.00 for every minute until 6:16 PM the late fee goes up to \$2.00 per minute., at 6:31 PM the late fee goes up to \$3.00 per minute. All late fees will be automatically be added to your draft agreement and will be pushed through on the last day of the month.

### **Procedures for the release of children:**

All children need to be checked in and checked out, every day. Children need to be signed in and out by parent. or designated pick up person in the classroom.

- Parents need to notify the ECDC if someone other than themselves will pick up their child. Please have them stop at the front desk or let us know prior to them picking up your child. **Please notify us with the name of all persons who will pick up your child. We will not release the child without this information.**
- Anyone picking up a student who is not their parent or designated pick up person must check in at the front desk and we must be able to contact the parents to get permission. They will be required to show proof of identification which will be copied and kept in the child's folder. Anyone we do not recognize may be asked to show proof of identification even if listed on the parent pick up release.

### **Bad Weather Policy:**

*If LISD and CTK School are delayed until 10:00 am we will open for children at 9:00 AM. We will notify parents with the Procure APP on closures and delays. If LISD is canceling afterschool events and city buildings are closing early, we **reserve the right to***

*close early to allow our families and staff to be able to reach their home safely. Late fees will be charged for children picked up after we close.*

### **Discipline and guidance practices:**

- We follow the Positive Discipline and Guidance policy in the application packet, one will stay on file and one is for the parents. NAEYC 1.B
- Parents will be notified if your child has habitual behavioral problems. Parent/teacher/administrator conferences will be scheduled to discuss serious issues.
- Every child has the right to be safe. If your child has habitual behavior problems or place's another child's safety at risk your child will be sent home. If the problem continues, he/she could be discharged.

### **Discharge Policy:**

**Christ the King ECDC/LLP Program** reserves the right to discharge any child from the school for any of the following reasons:

- Failure to observe school policies and procedures.
- Behavior which is a threat to the safety, or emotional well-being of the other children or teachers in the class, or their personal safety.
- Physical or verbal abuse of staff or children by parent or child
- Non-payment or late payment of tuition, fees and late fees
- Habitual late pickup

The expectation that all parents and students behave in ways reflective of the philosophy and ideals of the Christ the King ECDC/LLP, the Diocese of Lubbock, and the larger Catholic community. A positive and constructive working relationship between the school and a student's parents is essential to the fulfillment of the school's mission. The school reserves the right to discontinue enrollment or deny re-enroll of a student if the school reasonably concludes that the action of a parent makes such a positive and constructive relationship impossible, or otherwise seriously interferes with the school's accomplishment of its educational purposes.

Students are admitted for a one academic-year term, and the school reserves the right to suspend or dismiss at any time during the school year any student who persistently neglects work, fails to meet academic standards, exercises poor citizenship, fails to cooperate, whose parents fail to meet their financial responsibilities to the school, or whose presence in the school is judged by the school administration to be detrimental to other students or to the school's best interests.

### **Suspension of children** (children over the age of three in the ECDC and LLP programs)

Suspension is defined as a temporary dismissal of a student from school. The Montessori discipline strategies we use are redirection, independent work, separating students who

are not working together well, removing a student from the class until him/her calms down and holding the teacher's hand. Accidents do happen, and child may accidentally hurt another peer or a teacher. If a child **deliberately** hurts another child or teacher, they will be suspended for the rest of the day. The parents will be called, and the child will need to be picked up. We want our classrooms to be safe environments and we need to consider the safety of all the children in the classroom.

If we feel a child's behavior is challenging or atypical, we will start tracking their behavior using the behavior observation forms to help us identify issues.

**Expulsion of children** (children over the age of three in the ECDC and LLP programs)

Expulsion is defined as the permanent dismissal of a student from school. A child may be expelled only after documentation of incident or incidents of deliberate injury to other students or staff (suspension). We cannot put a number on suspensions to lead to expulsion because this is a serious penalty and every incident is different. We reserve the right to expel a child over the age of three who deliberately injure or tries to injure other students or teachers, therefore putting the classroom at risk. *We reserve the right to disenroll a child if it is in the best interest of the child or other children at the ECDC.* The decision to expel a child will be determined by the behavior that led to a suspension and made by the ECDC administration and the School Superintendent.

Any child who is expelled from the ECDC will not be accepted to CTK Cathedral School, or our Summer LLP Program.

**Withdrawal Policy:**

The ECDC must be notified in writing **one month** prior to withdrawing a child from any program. If one month's notice is not given the parents are financially responsible for the month of tuition following the last day of attendance. Once tuition has been paid it is nonrefundable. Tuition is drafted on the 5<sup>th</sup> of each month.

**Curriculum and Assessment: NAEYC 2.A:**

Montessori Express is our curriculum framework which identifies your child's individual lesson plans and assessments. On the Montessori RX program, you will be able to see your child's cumulative records, student activity, conference reports and pictures of your child working. You may also view videos about Montessori lessons and history.

The status of the lessons can be planned, presented, practicing, improving and mastered. First a lesson is planned, and then the teacher presents the lesson, a child works on that lesson until they have mastery. A child may have a month to several months until they master an activity. The dates are registered as presented, practicing, improving and



mastery. A child will be continually working until mastery; the dates will not be posted each time they practice. The teacher has access to how many days a child has been working on an activity. The activities go in a specific sequence and children focus on one new activity at a time. They may choose at any time to return to materials they have already mastered, this will not be logged again.

We are transitioning assessments from Teaching Strategies GOLD to Procare assessments. All assessments after May will be through Procare.

Children aged 3 and up prior to September 1<sup>st</sup> will be assessed through the TSR, Texas School Ready Assessment Program.

We assess children three times a year. Assessments are sent electronically.

NAEYC 2.A.05

### **Nap Policy:**

Nap time is an important part of a child's day. Sleep is especially important for children as it directly impacts mental and physical development as noted by the National Sleep Foundation. Children between the ages of 1-11 months require one to four 30 minutes to 2-hour naps daily. Children between the ages of 1 – 3 years need between 12-14 hours of sleep in a 24-hour period. The schedule at the ECDC is designed for children to have a consistent nap time daily. Nap time does not exceed 3 hours, unless they are an infant. Children who take a nap and wake independently have a much happier and successful afternoon.

**It is our Policy to not wake infants, toddlers or young children who are sleeping** unless they are sleeping over three hours as identified by the Minimum Standards of Texas 746.2903.

**The Infant and Mobile Infant Community** (children under 12 months) strive to follow a children's daily schedule so they will have a consistent quality of care between home and school. Although we will do our best to meet the nap schedule of infants, we will not keep a child from falling asleep after a given time. As identified by the Sleep Foundation "Sleep is essential for human development. During sleep the brain experiences intense activity, building the foundations for how we learn and grow, including the development of our behavior, [emotions](#), and [immune system](#). Poor sleep in infancy has been [linked to problems](#) with cognitive performance, social skills, obesity, and quality of life later in childhood.

Your baby will usually let us know they are ready to sleep by fussing, crying, yawning, or rubbing their eyes. We will use these cues to best meet their needs.

References on the importance of sleep are sited on page 42 of this Operational Policy.

**Toddlers-Primary:** Our priority is to meet the developmental needs of each individual child. Each child has their own sleep needs and will awaken as they get their necessary sleep. We turn the lights on after nap at 2:30 PM so children can slowly awake if they are still asleep now. Children who fall asleep and awake naturally at any time can get up and work on quiet activities such as painting, reading books or puzzles.

### **Sleeping Arrangements:**

Children under the age of one year are provided with their own crib with a firm flat mattress. The ECDC provides clean sheets weekly and sterilizes cribs weekly. Infants and Mobile infants maintain his/her own pattern of sleeping and waking periods. Children over one year are provided with a personal labeled cot. Children over 1 ½ (no longer in a crib) may bring a blanket or pillow which can fit in their cubby with a small stuffed toy if needed to give the child comfort during nap time. Children who are awake after resting or sleeping can participate in an alternative, quiet activity until nap/rest time is over for the other children. Cot will be sterilized weekly. Cots will be placed with children head to toe or have a minimum of three feet between cots. NAEYC 10.B.08j

### **Safe Sleep Policy NAEYC 5.A.12**

Infants, unless otherwise ordered by a physician, are placed on their backs to sleep on a firm surface manufactured for sale as infant sleeping equipment that meets the standards of the United States Consumer Product Safety Commission. Soft or loose bedding such as blankets, pillows, stuffed toys, toys attached to pacifiers, pacifiers on any kind of string or strap, quilts, bumper pads, and comforters **must not be used** in cribs for children younger than 12 months of age.

If an infant **arrives to the program** or falls asleep **at the program**, in equipment not specifically designed for children sleep (example: car safety seat, bouncy seat, or stroller) the infant/ child is removed and placed on sleep equipment that conforms to the requirements of this indicator.

**Children who use pacifiers need to bring one pacifier holder for “play” and one loose pacifier for nap. Children may not have a pacifier attached to a cords, string, or ribbon while in their bed.**

Please refer to safe sleep policy distributed to parents as required by law.

**We may not lay a swaddled infant down to sleep or rest on any surface at any time.** (New state standard 746.2428, June 2014) **Infants who need to be swaddled need get**

**form J-800-2710, (which we will provide) signed by the child's pediatrician for a infant-sleep exemption.**

Wedges in cribs may be used only with a doctor's authorization. 5.A.12b

**Confidentiality:**

NAEYC 10. B.08j

All information about a child's development, academic record, medical information and disciplinary issues are to be kept confidential. No staff member may discuss confidential information with any person other than a child's parent or person who is legally responsible. Staff may not discuss confidential information about a child in front of any other child's parent. Staff may not discuss confidential matters about coworkers.

**For children and families:**

We shall involve all those with relevant knowledge (including families and staff) in decisions concerning a child, as appropriate, ensuring confidentiality of sensitive information.

We shall treat child assessment information confidentiality and share this information only when there is a legitimate need for it.

Disclosure of children's records beyond family members, program personnel, and consultants having an obligation of confidentiality shall require familial consent (except in cases of abuse or neglect).

We shall maintain confidentiality and shall respect families' right to privacy, refraining from disclosure of confidential information and intrusion into family life. However, when we have reason to believe a child's welfare is at risk, it is permissible to share confidential information with agencies, as well as individuals who have legal responsibility for intervening in the child's interest.

**For Coworkers and employees:**

The administration will keep confidential any information regarding an employee's personnel file.

Employees must keep their own personal information confidential such as how much they are paid, disciplinary discussions about themselves or a coworker, disagreements and or resolutions between administration or coworkers or any personal issues.

If there are disagreements between coworkers and/or administration about a coworker's professional behavior, first let that person know of your concern in a way that shows respect for personal dignity and for the diversity to be found among staff members, and then attempt to resolve the matter collegially and in a confidential manner.

We promote safe and healthy working conditions and policies that foster mutual respect, cooperation, collaboration, competence, well-being, confidentiality and self-esteem in staff members.

We shall maintain confidentiality in dealing with issues related to employee's job performance and shall respect an employee's right to privacy regarding personal issues.

Parents may identify who on the Permission to Pick Up form can have access to a child's health information. NAEYC 5. A.01f

### **Birthday Invites Policy:**

All party invitations which are to be sent through the ECDC must include all the children in a class if any child in the class is receiving an invitation. Children do not understand why they are not invited and the envelopes on a few cubbies are very disappointing. If you are having a party that does not include all the children in a class, please ask for a mailing list at the front desk so you can send them through the postal service.

You may request email addresses of parents for e-vites. We do ask the emails addresses are not to be used to solicit business or to contact teachers.

### **Toys from home/ Show and tell:**

We request that children **do NOT bring toys** from home to the ECDC or LLP **unless it is show and tell** or a soft nap toy (nap use only). Toys from home cause disruptions in the ECDC and LLP classrooms, and can lead to disagreements between children. **STAFF WILL NOT BE RESPONSIBLE TO LOST OR BROKEN TOYS.** Show and tell is a language activity where we teach how to ask a question, rather than make a statement, and how to answer a question. You can work with your child on answering questions which build communication skills. Any toys brought from home will be placed in the cubby. We are not responsible for missing toys.

### **Weather and Outside Time:**

It is important for children to go outside each day. To determine if we will take the children to the gym or outside, we look at the following things, temperature, wind speed

and sunlight. We will take the children daily even when it is cold for a limited time if we do not have the gym. Please send your children with proper outside garments coats, hats and mittens (much easier to get on). If a child comes without a coat, we do have back up coats available. We have thermometer and anemometer (wind speed) to assess the temperature onsite. We do not go outside if or weather conditions at the ECDC are under 40 degrees, or over 95 degrees or if the sustained wind speed is over 18 miles an hour.

Infants and Mobile Infants will go out 2 times daily weather permitting.

Toddlers and Young Children will go out for 30 minutes, morning and afternoon.

Primary Turquoise, Primary Yellow will have two 45 minutes recess times. LLP will have a minimum of 45 minutes outside on days when the children are in care less than 5 hours and 90 minutes of outside time when in care over 5 hours.

Physical activities can be outside or indoor and will include but not limited to racing games, jumping and climbing on the stumps, tricycles, dance, and teacher led movement activities.

We recommend proper clothing, such as hat and closed toed shoes that are attached to the foot to allow the child to participate freely and safely in physical activities. (no flip flops or slide sandals please)

Parents are to apply sunscreen their child/children daily in the morning before bringing them to the ECDC. The ECDC will reapply sunscreen each afternoon prior to going outside.

On days of extreme weather, we will use the gym for outside time and if it is not available, have scheduled movement activities in the classrooms, such as dance, stretches, body movement, and teacher lead exercises.

Total amount of movement activities will remain the same daily whether inside or outside.

Written activity plan must: identify the age group the plan is designed for and list the dates, (daily, weekly, monthly) the plan covers:

Outline the daily routines and the specific activities for each group and the approximate time for those activities will occur.

References are on page 42 of the Operational Policy.

### **Classroom Placement:**

Children move from class to class based on development. When we feel your child has reached the developmental goals to move forward your child will begin to visit the next Community. When we feel your child is ready, we will then send a letter identifying the official “move” date. Most children visit approximately one week, if additional time is needed, we will take that into consideration. At the time of visitation, we will notify the parents to schedule a Developmental/Transitional meeting; all meetings are scheduled for

3:30 PM which is at the end of the day for our Lead Teachers. This meeting goes over the past classroom achievements, assessments and identifies goals and new challenges which will be introduced to your child at the next level. At this time, we will discuss assessment methods and goals that best meet your child's needs. NAEYC 4.E.01, 4.E.04

### **Developmental Delays:**

A very young child's development can be delayed for any number of reasons. To discuss the developmental problems that a child may be having, parents can contact Early Childhood Intervention (ECI), an interagency council within the Department of Assistive and Rehabilitative Services. ECI has been authorized to serve children, birth to age three, who have disabilities or delays. The mission of ECI is to develop and provide early childhood programs that increase the likelihood that all Texas children will develop to their highest potential. The ECI program holds the following beliefs:

- Children have a right to the services that will enable them to reach their fullest potential.
- Children are best served within the context of their families.
- Children need all possible opportunities to be integrated into community life.

To learn more about how to connect with ECI, providers can call the ECI Care Line at (800) 250-2246 or go to their web site at [www.dars.state.tx.us/ecis/index.shtml](http://www.dars.state.tx.us/ecis/index.shtml). ECI produces two manuals:

- The ECI Directory lists ECI programs by county and provides information on resources available at the state and national level.
- Making Connections is a resource that links ECI programs and school districts.

We do not have the medical backgrounds to identify developmental delays or special needs. Using our assessment program, we can identify if a child is having difficulty. We will communicate with the parents in a confidential parent meeting voicing our concerns and recommend you speak with your child's pediatrician to determine the best course of action. NAEYC 7.B 04

### **Living and Learning Program is our after school program for children who attend Christ the King Cathedral School PreK-5<sup>th</sup> grade.**

- LLP has a separate schedule. Please refer to their calendar. There may be days the ECDC is open where LLP is closed due to limited staff.
- Children in LLP must be students of CTKC.
- The LLP program has an open snack policy. Each day the children are allowed a choice of two items for snack. The LLP program provides the fruit, dairy or vegetables. For example, pretzels, graham crackers, goldfish, vanilla wafers, dry cereal etc. We provide only 100% juice and 1% milk for LLP children. **Open snack is suspended during COVID. Children are asked to provide their own individually packed snack.**
- New Minimum Standards for the state of Texas now state we cannot serve beverages, fruit punch, or sweet milk except for special occasions such as holidays or birthday celebrations. 746.3301 If sweetened drinks are sent to school we will send them back home.

- **Late Fee:** Classrooms will be combined for the last 30 minutes of the day. Students who are not picked up by 6:01 p.m. will be located in the LLP I building and will have a flat \$10.00 late fee. After 6:05 p.m. there will be a \$1.00 for every minute until 6:16 PM the late fee goes up to \$2.00 per minute., at 6:31 PM the late fee goes up to \$3.00 per minute. All late fees will be automatically be added to your draft agreement and will be pushed through on the last day of the month.
- **We do accept drop-**ins in the LLP program for CTK Cathedral School students who have turned in all of the paperwork to attend. Drop-in charges will be posted daily, and the tuition will be pushed through on the last day of the month. **Due to COVID drop ins have been suspended.**

### **Holiday Care**

- **Students bring their lunch.** New Minimum Standards for the state of Texas now state we cannot serve beverages, fruit punch, or sweet milk except for special occasions such as holidays or birthday celebrations. 746.3301 If sweetened drinks are sent to school, we will send them back home.
- Because parents are responsible for providing lunch the ECDC is not required to meet nutritional needs of your child
- **If a student does not have a lunch we will provide a lunch for them; a \$5.00 charged will be posted and the charge will be pushed through on the last day of the month.**

### **Immunizations:**

*Every student enrolled in a Catholic School in the State of Texas shall be immunized against vaccine preventable diseases cause by infectious agents in accordance with the immunization schedule adopted by the Texas Department of State Health Services. A student who fails to present the required evidence shall not be accepted for enrollment. The **only exemption** to the foregoing requirement is a medical exemption signed by a licensed physician (M.D. or D.O.) authorized to practice in the state of Texas, including the physicians license number. (p.16)*

*Childcare facilities and schools are required to have an immunization record on file for each child enrolled to ensure that each child has received age-appropriate immunizations. (p.55) Immunizations are not a conflict with the Catholic faith. Conscientious objects or waivers, which may be permissible for attendance to public schools, do not qualify as an exemption in Catholic Schools in Texas. (Atty. Gen. Op. GA-0420) (p.16).*

The ECDC follows all Texas Immunization requirements and date. All health care records must include: The child's name and birth date, the number and doses and vaccination type, the month, day, and year the child received each vaccination, and the

signature or stamp of the physician or other health care professional who administered the vaccine. NAEYC 5. A.01

It is the parent's responsibility to keep shot records current. When a child is overdue for any routine health services, parents, legal guardians, or both provide evidence of an appointment for those services before the child's entry into the program and as a condition of remaining enrolled in the program. NAEYC 5. A.01b

The ECDC does not accept the Affidavit Exemption from Immunizations for Reasons of Conscience from the State of Texas.

The student's health is primarily and ultimately the responsibility of the parents who are responsible for:

1. Providing the school with all information pertinent to the health and well-being of their child
2. Providing the school with information regarding immunizations as required by the state, local, and diocesan policy
3. Taking necessary action, including retrieval of students, when school authorities report to a parent an illness or injury which occurs during school hours; (In a life-threatening emergency, the principal or the principal's designee will take appropriate action to obtain medical assistance for the student)
4. Insuring that proper medical attention is sought for health problems that may be discovered on routine health screenings at the school

#### **Safe practices for administration of medications at school (TCCED Handbook)**

- ❑ The principal or director of a school will designate a responsible person to supervise the storing and administration of medications at school<sup>1</sup>
  - ❑ Only medication which is necessary for the child to remain in school will be given during school hours with **medication being administered at home whenever possible \*\*First dose of any new medication needs to be given at home by parent or guardian. \*\***
  - ❑ Only medication prescribed by a licensed physician, dentist, Nurse Practitioner or Physician's Assistant will be administered by authorized school personnel.
  - ❑ Authorization for dispensing medication form must be filled out and signed in the classroom binder of each medication.
  - ❑ All medication must have child's first and last name on bottle or box.
  - ❑ No stock medications will be kept in the clinic for student use
  - ❑ Signed parental or physician consent congruent with diocesan policy, for either prescription or non-prescription medication must be obtained. The consent form should contain, at the least, the following elements:
-



- Name of student
  - Name of medication
  - Dosage of medication
  - Times medication is to be given
  - Route of administration
  - Disclaimer statements:
    - Medication will be administered by non-medical personnel
    - Hold school harmless for adverse drug reactions and side effects of properly administered medication
    - Parent responsible for maintaining adequate supply of medication at the school
  - Parent/Guardian signature
- Substitution of medication from one student's supply for another, (even if it is the same medication) is never permitted
  - If school personnel have questions or concerns regarding the administration of medication to a student, or possible medication abuse, the employee should consult with the principal, the physician, and the parent. Process and outcome must be documented
  - Storage of medication will be in a locked cabinet or drawer. In the case of medication requiring refrigeration, the medication will be placed with a cold pack in the locked medicine cabinet.
  - Most medications have expiration dates and these dates need to be monitored (i.e. inhalers) Expired medications will not be administered
  - The parent is responsible to bring all medication to the classroom and give it to the teacher, and to pick up unused medicine or it will be properly destroyed. Medication is not kept from year to year.
  - Medication that is received in an unlabeled container or plastic bag will not be accepted.
  - Administration of medication will be recorded on a medication log with date, time, and initials of person giving the medication.<sup>2</sup> The student is responsible for coming to the office and asking for his/her medication. This includes both daily and PRN medications. These documents are to be kept in accordance with each individual diocesan document retention policy
  - The use of nebulizer treatments in schools, for the treatment of asthma should be done with extreme caution. Non-medical personnel should not be responsible for
-

the administration of the nebulizer treatment without careful training. The parent is ultimately responsible for the care of their asthmatic child

Once a vial of insulin (or other medication in a vial) is started (opened), date the vial and discard in 30 days

### **Doctor's notices:**

Staff administer both prescription and over-the counter medications to a child only if the child's record documents that the parent or legal guardian has given the program written permission AND the child's record includes instructions from a licensed health provider who has prescribed or recommended medication for that child. 5.A.11

- Over the counter medications require a doctor's note, unless it is a topical lotion.
- The prescription label on the medication or box or box the medication come in IS the Doctor's note, please make sure the prescription label is with the medication.
- **The initial dose of medication needs to be given at home by the parent or guardian to assure no allergic reaction.**
- We use the 5 rights to medication, in training and when distributing:
  - Right child
  - Right time
  - Right dose
  - Right medication
  - Right delivery
- Any accidents in medication will be recorded and parents and poison control (if needed) will be called.

A three times a day medication will be given once a day. (mid-day)

A four times a day medication will be given twice. (at snack times)

Two times a day or one time a day medication will not be given at school and needs to be given at home.

### **Bloodborne Pathogens:**

This school along with all other Catholic Schools across Texas is required by the Federal Occupational Safety and Health Administration (OSHA) to comply with standards for Control of Bloodborne Pathogens. Bloodborne pathogens are the organisms (germs), which spread Hepatitis B and HIV (the virus which causes AIDS) as well as many other diseases. Our employees have attended special trainings and this school is using specific techniques for reducing the risk of spreading disease caused by bloodborne pathogens, including:

- Employee/staff training in universal precautions, hand washing, sharps management, wearing personal protective equipment, regulated waste and decontamination of environmental surfaces

- Housekeeping procedures and schedules have been modified
- Specialized waste disposal practices are in use
- Employment procedures for Hepatitis B vaccination and exposure incident reporting have been established

A copy of the complete Bloodborne Pathogens Exposure Control Plan is available in the principal's office and you are welcome to review it.

**All clothing which has blood stains will be sent home in a Biohazard waste bag. This is a safety precaution, so parents and guardians can protect themselves. No bloody garments may be washed at the ECDC or LLP in the sinks or in the washing machine to reduce spread of disease.**

**Exclusion Guidelines for ECDC and LLP (COVID amendments are listed at the beginning of the Operational Policy, we will follow all COVID return requirements and symptoms exclusions until it is changed by the State of Texas)**

<b>Exclusion Guidelines</b>	<b>Return to School Guidelines</b>
Oral temperature of 100° or above	Fever free for 24 hours with a written physician release or 72 hours without.
Vomiting, nausea or severe abdominal pain	Symptom free for 24 hours
Marked drowsiness or malaise	Symptom free
Sore throat, acute cold or persistent cough	Written physician release
Red, inflamed or discharging eyes	Written physician release
Wound, skin and soft tissue infections	Exclude until drainage is contained and covered with a clean dry bandage
Swollen glands around jaws, ears or neck	Written physician release
Suspected scabies or impetigo	Written physician release
Any skin lesion in the weeping stage	Covered and diagnosed as non-infectious
<b>Earache</b>	<b>Symptom free</b>
Pediculosis	Lice and nit free
All communicable diseases	Written physician release and 24 hours fever free

The ECDC does not perform health checks on students. The ECDC reserves the right to send children home with lice or nits and ringworm.

Illness and exclusion criteria:

Your child's health is important to us! Please do not send sick children to school.

Do not send your child if:

- The illness prevents the child from participating comfortably in the ECDC activities including outdoor play
- Ancillary temperature of 100.0 degrees or greater and accompanied by behavior changes or other signs or symptoms of illness.

For the safety of all children and to help limit the spread of infection

Children will be sent home if:

- They have one episode of vomiting
- They have two episodes of diarrhea

**To return to school** children must be fever, vomit and diarrhea free for 24 hours AND have a doctor's note to return. Children returning without a doctor's note must be 72 hours fever, vomit, diarrhea without medication.

**Children may not return until they are:**

- Free of vomiting and/or diarrhea for 24 hours
- Children must be free of fever without medical aid for at least 24 hours.
- All students sent home from school need to sign the illness report at the time the child is picked up.
- **Students with a communicable infection will not be allowed to return to school without a doctor's release. This includes viruses, due to doctor's recommendations when to return to school differs by child.**

**We recommend that any time you take your child to the doctor ask for a note about when the child may return to school. Children who are showing continued signs of illness will be sent home if they come back to school without medical documentation that says they may return to school.** Communicable diseases are illnesses which are contagious and must have a doctor's note to return:

Corona Novel Virus

RSV

conjunctivitis (pink eye)

coxsackie virus disease (hand, foot and mouth disease)

chicken pox

influenza

hepatitis A or B

pertussis (whooping cough)

pneumonia

common cold if accompanied by a fever

Fifth Disease

meningococcal infections

mononucleosis  
otitis media (earache) with fever and/or other signs of illness  
pharyngitis (sore throat) with fever  
rubella  
strep throat  
scarlet fever

### **Epi Pens:**

Children with severe allergies will have an action plan and provide an epi pen if prescribed. Epi pen will be in locked medicine cabinets. If a child has a severe allergy to an outside element such as bee stings the epi pen will be carried by the teacher outside. All staff are training in the use of an epi pen. Any use of an epi pen will be followed up by a call to EMS. Used epi pens will be sent with the ambulance. Expired epi pens will be sent home.

Minimum standards for Child-care Centers (746.3601)

**Sunscreen and Insect Spray Policy: NAEYC 5.A.07** We provide sunscreen for our students and it can be applied daily after nap for the afternoon. Parents need to apply morning sunscreen prior to coming to school. Our sunscreen information is noted on our parent board on the East wall to the left of the entrance. When in the sun, they wear sun-protective clothing (parents supply), applied skin protection, or both. Applied skin protection will be either sunscreen or sun block with UVB and UV A protection of SPF 15 or higher that is applied to exposed skin (only with written parental permission to do so). We will apply sunscreen ONCE a day after nap. Parents need to apply sunscreen BEFORE arriving at school for the morning. We purchase Rocky Mountain Sunscreen for face & skin, fragrance free, oil free, papa free, peanut & coconut oil free, hypoallergenic and apply to children who have a signed permission slip on file.

**When public health authorities** recommend use of insect repellents due to a high risk of insect-borne disease, only repellents containing DEET are used, and these are applied only on children older than two months. We can only apply insect repellent ONCE a day after nap. Parents need to apply insect spray BEFORE arriving at school for the morning. Please send labeled insect spray for your child if needed and fill out Sunscreen insect spray permission slip. NAEYC 5.A.07.c

**We follow the TCCED (Texas Catholic Conference Education Department) School Health Manual, a copy is available at the front desk.**

### **Nebulizer:**

The ECDC has a nebulizer available to students who have a prescription for medications that need to be administered by breathing such as albuterol or a steroid. PLEASE send the medication, with the label or photo of the label (this is the Dr's note) and a mask, (to

keep from spreading germs). If your child needs a breathing treatment, we will contact the parents and then give them a treatment.

### **Authorization for Emergency Care:**

Each family is required to fill out the Form 2904 Authorization for Emergency Care to allow us to provide for emergency medical care at the time of an illness or accident if a parent cannot be reached. All parents need to include current information about any health insurance coverage required for treatment in an emergency.  
NAEYC 5.A.C

If a child needs emergency transport, we will call 911 for an ambulance. If a child's need is not an emergent situation but we feel they need medical attention, we will call the parent. An ECDC staff member will go with the family to ensure the child has an escort if needed. NAEYC 10. D.08c

### **Medical Emergencies Procedures:**

Any child who becomes ill in our care will be isolated, in their current classroom. A parent or other designated person will be notified to come for the child. We do not have the space to keep an ill child at school. Parents are required to pick up their child within an hour of being called.

In case of critical illness or injury requiring immediate attention of a physician, we will follow these procedures:

- Contact emergency medical services
- Give the child first aid treatment or CPR if needed
- Injury/Illness report will be completed, and a copy will be given to the parents
- Minor injuries occurring at school will be noted in writing and the parents will be notified at pick up.
- If a child receives a head injury or any injury that may require non-emergency medical attention the parents will be notified immediately.
- DFPS will be notified of any communicable diseases.

Tuberculin testing requirements: TB testing is not a requirement for the county of Lubbock.

### **Provisional enrollment**

All immunizations should be completed by the first date of attendance. The law requires that students be fully vaccinated against the specified diseases. A student may be enrolled provisionally if the student has an immunization record that indicates the student has received at least one dose of each specified age-appropriate vaccine required by this rule.

To remain enrolled, the student must complete the required subsequent doses in each vaccine series on schedule and as rapidly as is medically feasible and provide acceptable evidence of vaccination to the school.

A school administrator shall review the immunization status of a provisionally enrolled student every 30 days to ensure continued compliance in completing the required doses of vaccination. If, at the end of the 30-day period, a student has not received a subsequent dose of vaccine, the student is not in compliance and the school shall exclude the student from school attendance until the required dose is administered and proof of immunization has been provided to the school.

### **Vaccine-Preventable Diseases:**

We recommend our employees receive the Influenza vaccine yearly and the TDAP every ten years.

**The ECDC keeps electronic records to indicate if an employee receives vaccinations. Documentation may include:**

- Copy of the employee's current immunization record.
- Receipt that includes date a required immunization was received.
- Letter signed by a health care professional that lists the date an immunization was received.
- Documentation of exemption for medical reasons from a health care professional;
- Signed and dated statement from the employee for exemption based on a reason of conscience.

**Employees who do not receive vaccinations are recommended to use protective procedures include:**

- Wearing gloves when handling or cleaning body fluids, such as after wiping noses, mouths, or bottoms, and tending sores.
- Specifying that an employee with open wounds and/or any injury that inhibits hand washing, such as casts, bandages, or braces, must not prepare food or have close contact with children in care.
- Wearing masks when the employee has respiratory symptoms to reduce the spread of droplets to surrounding areas.
- Wearing masks when taking care of children with respiratory symptoms.
- Removing gloves and washing hands immediately after each task to prevent cross-contamination to other children.
- Excluding the employee from direct care when the employee has signs of illness

**The employee is responsible to receive vaccines off-site.**

- **Sunscreen and insect repellent** have a separate permission to sign to be kept on file.
  - a. Parents apply sunscreen in the morning, the ECDC or LLP will apply after nap before outside time.
  - b. We provide Rocky Mountain Sunscreen 50 SPF, information about ingredients and application is posted on the parent board.
  - c. Parents may provide an alternative if they choose to do so.
  - d. Insect repellent will be applied once a day before afternoon recess when provided by the parent. The ECDC does not provide insect spray.
- All medication will be dropped off with the classroom teacher, NO medication is allowed to be in any diaper bags or back packs of the children.
- Medications will be administered only to the child for who it is prescribed
- Medication will not be administered after expiration date
- All medication **MUST** be kept in a locked container. NAEYC 5.B.E Which means any medication that must be kept cold, must be kept cold outside of the refrigerator. We suggest a cold pack inside an insulated bag such as a lunch box/bag. No medications may be stored in the refrigerator outside of the locked cabinet.

### **Parental Notification Procedures:**

- Parents are required to keep **phone numbers and addresses current.** You may change your information by calling the front.
- Parents will be called if the child becomes ill, has not been picked up, or is missing any medical information or forms.
- Parents will receive daily reports on child's temperament, eating, sleeping and diapering schedule. (Infants, mobile infants and toddlers)
- Parents will receive calendars, notes, and schedules.
- You are welcome to call and leave a message to have the teacher call when she is available.
- Classroom extensions are
  - Infant Community 206
  - Mobile Infant Community 203
  - Toddler Community 204
  - Young Children Community (Green) 207
  - Young Children Community (Turquoise) 210
  - Primary Community 205
  - Director 202
  - LLP I (pre-k 3 building) DIRECT number 806-589-7390 or call 795-8283 (school number) ext. 229 or 214
  - John Paul (LLP II) 795-8283(school number) ext.228 or cell (806)642-8116



- LLP- WE DO NOT HAVE ACCESS TO RECORDS AT CTK. LLP records must be kept current at the ECDC.

### **Enrollment procedures, including how and when parents will be notified of policy changes.**

- Policy changes will be posted in the Operational Policy. Any changes supersede previous policy statements. Notifications are sent by email to tell parents about updates.

### **Water activities**

- We only use water tables or sprinklers for water play.

### **Animals**

- No animals may be brought to the ECDC or LLP program without permission from the Director due to children with severe allergies.

### **Parent Information**

#### **Tuition:**

Tuition is based on if a family is registered and contributing Catholic church participant's vs non-registered Catholic church participants. As with all families, they are only as good as the members that make them. Our parish families only flourish to the extent that the parishioners invest in them, both spiritually and materially. It is important to the faith communities in Lubbock for our families to be involved in their parishes and are examples of Christ. In that light, we hope you appreciate the real importance of your involvement and your parishioner status. To be considered an "**active parishioner**", you must be registered in the parish you attend, attend Mass faithfully, and support the life of the parish with your time, talent and/or treasure. To be considered an active parishioner you must have the Parishioner Verification form. This form is to be signed by the pastor of your parish and must be stamped with the parish seal. Church and Parish verification forms are sent home in the new enrollment packet.

#### **Parent communication:**

- Parents are welcome to review and discuss with the ECDC Director any questions or concerns about the policies and procedures of the center. Please discuss classroom issues with the teacher prior to bringing them to the ECDC Director.
- Developmental/Transitional meetings are offered when a child transitions from class to class to discuss accomplishments, difficulties and set strategies to meet each child's needs. 4.E. 04 (Suspended during COVID)

- Parents have access to their child's records via Montessori Express and Teaching Strategies GOLD Assessment (August 2011).
- Classrooms have phones and email available for communication.
- Parents will receive three printed report cards each year, unless out for summer then they will receive two. NAEYC 4. E.02
- All information about children and families is kept strictly confidential.

### **Home Language Survey:**

Periodically we will send an electronic Home Language Survey. New enrollments will fill out a paper survey. This survey allows us to make sure we are meeting our families' needs for communication and gaining information about each family, so we may build positive relationships between teachers and families. NAEYC 1 A.02

### **For parent's review:**

- Minimum standards are available at [www.dfps.state.tx.us](http://www.dfps.state.tx.us) or call your local Licensing office at 5121 69<sup>th</sup> Street Suite A4, Lubbock, TX 79424, or phone 806-698-1640.
- Current Licensing Inspection Reports are available to view at the ECDC and online at [www.dfps.state.tx.us](http://www.dfps.state.tx.us) through the search for day care.
- Parents may contact the local Licensing office, DFPS child abuse hotline 1800-252-5400, and DFPS website as noted above.
- TCCED School Health Manual is available to the parents at the ECDC.

### **Visitation and Tours:**

Parents may visit the ECDC at any time during the hours of operation to observe their child without having to secure prior approval. NAEYC 7.A.11 (Suspended during COVID)

- Each family will be supplied with two security cards/fobs to enter the building.
- Tours will be scheduled for new families on Tuesday and Thursday mornings.

### **Volunteering with the ECDC activities:**

NAEYC 7.A.07 We invite all parents to join us in the following Volunteer Opportunities: participating on the CTK School Board, Welcoming committee CTK/ECDC, Christmas Tree Service Project, Grandparents Day and Teacher Appreciation Committee.

### **Birthday Treats:**

Parents are welcome to provide birthday treats for the class on their child's birthday. They are welcome to stay with the class and help with the celebration. (Suspended during COVID) Several classes have children with allergies. PLEASE inform us ONE WEEK

in advance if you will bring a birthday treat so we have enough time to notify parents of children with allergies, so they may provide a non-allergy treat for their child.

**Background checks:**

All volunteers must submit to a criminal history background check and an FBI fingerprint check to be in the building working with the children. Volunteers are responsible for paying for the FBI fingerprint check. (approx. \$38.50) Volunteers are required to take the online Safe Environment program at the cost of \$7.50. Volunteers are treated like employees when it comes to paperwork or training expectations.

**Special Events:**

Grandparent’s day will be held in October each year. Grandparents and Parents will be invited to attend mass and a program at CTK and then come to the ECDC to observe their grandchild working in their classroom. We will close at noon on the special day so our little ones can enjoy the afternoon with their families. The ECDC property belongs to the church, if the church’s plans other events to take place on the property we may be required to close or close early.

**All special events are suspended due to COVID.**

**Family Services:**

Parents can call 2-1-1 for Local Community Services or go to [www.211texas.org](http://www.211texas.org) for additional information for city resources if needed.

**Emergencies:**

**LLP(After school and summer care for CTK school students)**  
**Tornado Protocol**

The LLP buildings are both portable buildings. When the students are in LLP it means the CTK school building is unoccupied. For the safety of the students when we are under a TORNADO WATCH we will now move into the CTK school building with LLP. The LLP will be located in the Pre-K rooms. The children will work and play inside the CTK building until the watch is lifted or we move into a tornado warning. We will send a text message via Remind to notify the children have been moved inside the building. If we then go under a tornado warning the students will take cover in the small girl’s bathroom on the East side of the gym.

In an event which affects the ECDC building (building flood, building damage, fire etc) the children from the ECDC will be evacuated to the CTK Cathedral School Gym.

Parents will be notified, and children will need to be signed out and picked up from the CTK gym.

### **Tornado room locations in the ECDC:**

Infants: West Adult bathroom in main hallway

Mobile Infants: East Adult bathroom in main hallway

Toddlers: Nursing Room in main hallway

Green and Boys from Yellow Community: North East Closet

Turquoise Community and Boys from Yellow Community: North West cot closet in Green Hallway.

Green Community and Girls from Yellow Community: North East cot closet in Green Hallway.

### **LLP students Tornado location in CTK Cathedral School:**

LLP I inside the small girl's bathroom located by the east side of the gym. LLP II students will be outside in the small hallway between the gym and the girl's locker room on the east side of the gym.

### **Catastrophic event**

In a *catastrophic event* which affects the CTK campus as a whole and parents are requested stay offsite so emergency personnel can work, the staging area for parents will be Holy Spirit Catholic Church.

### **Hearing and Vision Screening**

The Vision and Hearing Screening Program, Chapter 36 of the Texas Health and Safety Code, requires all children enrolled for the first time in any public, private, parochial school in Texas at or over the age of four on September 1<sup>st</sup> of each year to be screened. We have a certified screener screen all children four and over at the ECDC are screened in mid-September. You will be asked to sign the screening information to place in your child file. If a child fails the hearing or vision test, parents have 30 days to get them tested with a vision or hearing professional. You will receive a letter with necessary information to return, if necessary.

### **Gang Free Zone**

Any area within 1000 feet of a child-care center is a gang-free zone, where criminal offenses related to organized criminal activity are subject to harsher penalty.

### **Open Carry Law**

Texas law makes it clear that it is not legal for an unauthorized individual to carry a firearm into the premises of a school building. Tex. Penal Code § 46.03(a)(1). For this purpose, premises is a building or a portion of a building, and not a public or private driveway, street, sidewalk or walkway, parking lot, parking garage, or other parking area. Tex. Penal Code § 46.03(c)(1), .035(f)(3). It is not a defense to prosecution under this section that the actor was licensed to carry a handgun, and an offense under this section is a third-degree felony. Tex. Penal Code § 46.03(f)-(g).

### **The ECDC is a smoke free zone**

People must not smoke or use tobacco products at the ECDC, on the premises, or on the playground.

### **Diapers:**

*NAEYC requires for children who are unable to use the toilet consistently, the program makes sure that: Diapers do not leak, feces or urine. Cloth diapers will be sent home as a unit. Diapers cannot be rinsed or dumped. Diapers with pads may have the pad removed IF feces are not on the snaps of the diaper. If the diaper snaps have been contaminated the diaper with pad is sent home to decrease chance of contamination. NAEYC 5.A.08*

*Children who are potty training must have underwear that can contain their urine and feces. If your child's underwear is too thin to keep urine and feces from contaminating the floor and carpet. You MUST provide a waterproof cover. You will find thick potty training underwear with waterproof covers on Amazon.*

### **Meals and food service practices** NAEYC 10. B. 08i

#### **Infant Community and Mobile Infant Community:**

- Parents supply formula, baby cereal, finger foods (all dietary needs) in containers labeled with your child's name. Formula and infant foods need to come to the ECDC in factory sealed containers (e.g. ready-to-feed powder or concentrate formulas and baby food jars). *Emerging practice NAEYC*. Please label all parts of the bottle, lids, rims, and bottle to assure return to the proper child. All bottles will be warmed in a steamer. \* *As per NAEYC Health Standard 5.B.10e guidelines a microwave may not be used to heat any food for children under the age of 16 months.* \* *(by 5/01/2011) We suggest if a child eats only ½ a jar of baby food, we open the jar and feed them ½ at room temperature and you take the ½ jar home that evening and we open a new jar the next day. If we use the ½ jar the next day it will have to be served at refrigerator temperature.*
- New Minimum Standards for the state of Texas now state we may NOT serve juice to children under the age of 12 months. (746.3316) If your child

requires a special diet you must have written approval from a physician or a registered or licensed dietitian to serve a child juice under 12 months.

#### Feeding Policy NAEYC 5.A.14 for Infants and Mobile Infants

- We provide a Nursing room for mothers to breastfeed their children. Mothers are welcome to come to the ECDC at any time to feed their child. **Nursing Mothers are allowed in the building during COVID.**
- Parents are welcome to provide breast milk for their child while in our care.
- Infants are held when bottle fed until they can hold their own bottles. Bottles are never propped at any time. Children will not be given bottles in their beds.
- Mobile Infants do not carry bottles, Sippy cups, or regular cups with them while crawling or walking. (We ask parents for their help at home do not allow your child to get in the habit, we ask them to sit or place them on a wedge or boppy to take a bottle or cup.)
- On enrollment parents are required to fill out the Infant Profile. This sheet identifies children's dietary needs such as feeding schedules, types of foods eaten, temperature of foods, amount and time of day to serve. Each month the parents are asked to update, correct and initial that the dietary needs are current.
- Toddler Community:
  - Parents provide food, cereal, finger foods (all dietary needs). We provide simple to eat snacks, such as dry cereal, cookies, crackers etc. Parents may opt to send an alternative snack for their child. Please send individually served snack and place in the snack baskets. Children must be able to feed snack to themselves. Children do not use bottles for nutrition while in the classroom. Children will be introduced to cups without lids. . *As per NAEYC Health Standard 5. B.10e guidelines a microwave may not be used; all food will be heated in a steamer. Parents need to send food prepped for the steamer, please see heating food below.*
  - All food for children under three must be cut into according to the NAEYC Health standard 5. B. 14 as identified in your Community Handbook.
  - New Minimum Standards for the state of Texas now state we may NOT serve more than 4 oz. of juice to children under the age of 5 years. (746.3316) If your child requires a special diet you must have written approval from a physician or a registered or licensed dietitian to serve a child juice under 12 months.

#### Young Children Community

- Nutritious mid-morning and afternoon snacks are served to each class each day. CTK will provide daily snacks.
- Parents are responsible for sending a lunch each day that your child is in our care until 2:00. We ask you send child portions in food containers which your child can handle themselves. All lunch boxes, bags, foil pouches and

thermoses must be labeled on the outside. We do offer a refrigerator in every room for cold lunch storage.

- All food for children under three must be cut into according to the NAEYC Health standard 5. B. 14 as identified in your Community Handbook.
- Well balanced meals are an important. Diet is a major factor for your child's growth and development, as well as how they function and learn daily. Items with excessive amounts of sugar may be sent home at the discretion of the teacher.
- Mealtimes used to teach individual responsibility, to maintain the integrity of the lunch routine, please do not deliver your child's lunch during the school day.
- Please send well balanced and nutritious lunches to school with your child. A serving of milk will be provided by the school at lunch.
- Provide information on all food allergies
- Because parents are responsible from providing lunch, the ECDC is not required to meet nutritional needs of your child. Please see the USDA CACFP food guidelines available to you at the back of this handbook. NAEYC 5.A.c
- New Minimum Standards for the state of Texas now state we may NOT serve more than 4 oz of juice to children under the age of 5 years. (746.3316) If your child requires a special diet you must have written approval from a physician or a registered or licensed dietitian to serve a child juice under 12 months.
- New Minimum Standards for the state of Texas now state we cannot serve beverages, fruit punch, or sweet milk except for special occasions such as holidays or birthday celebrations. 746.3301 If sweetened drinks are sent to school we will send them back home.

### **Family Resources:**

Our staff are required to take an annual training on abuse, neglect and reporting. If you have concerns about a child regarding abuse or neglect, including the warning signs a child may be a victim of abuse or neglect and factors indicating a child is at risk for abuse or neglect you may check out the following websites.

#### Recognizing Abuse or Neglect

<https://www.dfps.state.tx.us/Training/Reporting/recognizing.asp>

#### DFPS - Report Abuse or Neglect

[https://www.dfps.state.tx.us/Contact\\_Us/report\\_abuse.asp](https://www.dfps.state.tx.us/Contact_Us/report_abuse.asp)

#### Everyone's Business - Facts About Abuse

[https://www.dfps.state.tx.us/Everyones\\_Business/Facts.asp](https://www.dfps.state.tx.us/Everyones_Business/Facts.asp)

You may also report abuse easily online through the Depart. of Family and protective Services quickly and confidentially.

If you or your family need Local Community Resources you can call 211 to get information on Social Services, Senior Services, Disability Services, Volunteer Opportunities, and City, State and Federal Agencies.

Family Resources may be found online at <https://parentingcottage.org/>.

### **Heating Food:**

We use a steamer to heat food for the children in the ECDC. It is the parent's responsibility to prepare the food to go into the steamer. Parents need to place food in a foil pouch (example available if needed). The foil pouch will be placed in the steamer and food will be heated to proper temperature. Food not placed in a foil pouch will be served cold.

Wrapping foods with cheese such as pizza in wax paper or parchment paper first, then wrapping in foil will keep the cheese from sticking. In addition, if item is breaded, or is on bread such as grill cheese or pizza, label item to have a shorter steam time.

PLEASE label your child's pouch.

### **Missing Lunch Policy:**

On occasion parents forget to pack a lunch for their child. We will provide a backup lunch for any child who forgot their lunch. We will add a \$6.00 charge for lunch to the tuition draft agreement to be pushed through the last day of the month.

### **Food Guidelines**

- All of our snacks are prepared, served and stored using USDA CACFP guidelines.
- The ECDC is not responsible to provide all daily nutritional needs.
- To help you identify Good Nutrition from the Start for Infants, Nutrition for Toddlers and Beyond, Nutrition for Pre-school and School age children, including snack and menu ideas go to [http://www.olemiss.edu/depts/nfsmi/Information/Care\\_connection\\_lessons\\_1-20.pdf](http://www.olemiss.edu/depts/nfsmi/Information/Care_connection_lessons_1-20.pdf)
- <http://www.mypyramid.gov/preschoolers/Plan/index.html> This website has the ability to target your child and their needs for meeting daily nutritional needs.
- This is a link to identify portion sizes compared to everyday items. [http://www.squaremeals.org/vgn/tda/files/2348/15465\\_A%20Serving%20of%20Fun\\_Eng.pdf](http://www.squaremeals.org/vgn/tda/files/2348/15465_A%20Serving%20of%20Fun_Eng.pdf)



The Texas Department of Agriculture (TDA) Food and Nutrition Division (FND) has issued the Texas Public School Nutrition Policy (TPSNP) to promote a healthier environment in schools. The Minimum Standards state we cannot allow children to be served any beverage with added sugars, such as carbonated beverages, fruit punch or sweetened milk except for a special occasion. We cannot serve candy in place of food or food which has a high fat content due to frying. We reserve the right to limit the child to eat the “healthy foods” sent in lunches and hold off on the unhealthier choice until the child has eaten some of the better food choices. For example, children need to eat their protein, fruits and or vegetables, before they eat cookies or chips.

### **Cutting Up your child’s food**

*For the safety of your child we need your help! Please cut your child’s food up according to our NAEYC guidelines. A lot of time is needed to prepare snack and lunch. Having to spend 3 minutes cutting up each child’s food times: for example, cutting food for 11 children ends up taking away 33 minutes from classroom time. Please make sure your child’s food is cut according to the NAEYC guidelines when you pack it for school. Your child may eat larger pieces of food at home, but please remember we are caring for a group. Children’s food needs to be safely cut into pieces if another child were to pick up a piece that has fallen to the floor and put it in their mouth.*

According to NAEYC Health Standard **5. B. 14**

- a. **Parents cut foods into pieces no larger than ¼ - inch square for infants (birth to 15 months) and ½ - inch square for toddlers (15 to 36 months) according to each child chewing and swallowing capability**
  
- b. *Staff does not offer children younger than four years these foods: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonful’s of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole.*
  - *If you send fruit (apples, oranges, bananas, etc.) please make sure it is cut into bite sizes*
  - *whole grapes must be sliced*
  - *whole hot dogs must be quartered and sliced* ⊕

*If your child loves grapes and hot dogs then please cut it according to the NAEYC standards.*

To clarify: We can only offer foods that are properly cut up: **WE CAN SERVE IF THEY ARE PROPERLY CUT** hot dogs, grapes, raw carrots or meat larger than can be swallowed whole.

Hot dogs need to be quartered and sliced

Raw carrots **MUST** be cut into wedges (lengthwise 4 times, the thickness of your child's finger)

Grapes must be sliced

Grape tomatoes must be sliced

Peanut butter needs to be spread on something, it cannot be served as a "blob" which could choke a child

We do not serve whole nuts, hard pretzels or popcorn to children under the age of four  
Any food which is a "chunk" needs to be a proper size see size guidelines above

### Nutrition

Well balanced meals are an important. Diet is a major factor for your child's growth and development, as well as how they function and learn daily. In addition, eating habits, healthful or otherwise, are established in childhood; therefore, learning about nutrition is an important part of the education of a child.

The points we focus on in part of the curriculum are objective and scientifically based:

- Certain diet elements are essential for good health, growth, and optimal function.
- Certain diet elements do not contribute to health and, in excess, can be harmful.
- We live in a society where many distortions of a normal healthy diet are considered "normal" such as:
  - Fast food
  - Large serving sizes
  - High calorie food with little or no nutritional value
  - Highly refined foods
  - Foods with high salt, sugar and fat content

The principles we strive to promote are:

- Appropriate serving sizes
- Lots of fresh fruits and vegetables
- Whole grain foods over refined foods
- Whole fruits over juices
- Importance of fiber
- A requirement for protein, whether from meat, fish, beans, or dairy

Based on this approach items with excessive amounts of sugar may be sent home at the discretion of the teacher. If there is a classroom that is "allowing" their children to not follow our food guidelines it is a staff training issue I will reinforce.

*Food is not just the essential “fuel” for our bodies to function and develop; it also, universally serves as a social function. At the ECDC we strive to promote this aspect of food by conducting snack and lunch time in a way that provides for social element and exercises of grace and courtesy:*

- *By setting the table using tablecloths or placemats, dishes, glasses and silverware, napkins etc.*
- *By setting aside a special place for a few children to have snack when they wish*
- *By teaching table manners:*
  - *Saying “please” and thank you”*
  - *Chewing with the mouth closed*
  - *Not speaking with food in the mouth*
  - *Using silverware and napkins properly*
  - *Being responsible for clearing away the dishes and trash*
  - *And making the table ready for the next person (snack)*

*We also look at lunch as a time to talk and have “table conversation”. Our staff has a one up/one down approach. In the Young Children and Primary Communities, one teacher sits at the table to help children learn how to have a conversation. She sits with a different table each day, so all children have the opportunity regularly to work on this social skill.*

*(excerpts from the Post Oak School established in 1963 Accredited AMI Montessori)*

*With our NAEYC Health Standards as well as our State Representative \*Foods of Minimal Nutritional Value\* (FMNVs) are not to be served. We like the public schools are licenses through the state of Texas and are monitored to the foods we allow children to eat or drink on our campus. We may not serve (even if brought by the parents for any meal) foods with minimal nutritional value such as: any juice which is not 100% juice, soda, sports drinks, sweetened milk etc.*

*Lunch needs to have items from the following food groups, fruit and vegetable group, dairy group, grain group, meat or meat alternative group. Sweets such as, cookies, cakes, or any other baked good with lunch as “dessert” we ask the children to eat part of the healthy food first, so they don’t fill up on sweets and skip the protein. WE CANNOT SERVE CANDY, or sweetened drinks which is not only an NAEYC standard but a Texas Minimum standard. All candy will be sent home.*

*We reserve the right to replace any non-nutritious food with a food which fall within the CACFP guidelines. For more information on ideas of food to feed your child please check out [mypyramid.gov](http://mypyramid.gov)*

**USDA CACFP Food Program Guidelines**  
**Child Care Infant Meal Pattern**

<b>Type of meal service</b>	<b>Birth through 3 months</b>	<b>4 through 7 months</b>	<b>8 through 11 months</b>
Breakfast	4–6 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup>	4–8 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup> ; and 0–3 tablespoons of infant cereal <sup>1,4</sup>	6–8 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup> ; and 2–4 tablespoons of infant cereal <sup>1</sup> ; and 1–4 tablespoons of fruit or vegetable or both.
Lunch or Supper	4–6 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup>	4–8 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup> ; and 0–3 tablespoons of infant cereal <sup>1,4</sup> ; and 0–3 tablespoons of fruit or vegetable or both <sup>4</sup>	6–8 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup> ; and 2–4 tablespoons of infant cereal <sup>1</sup> ; and/or 1–4 tablespoons of meat, fish, poultry, egg yolk, cooked dry beans or peas; or 1/2–2 ounces of cheese; or 1–4 ounces (volume) of cottage cheese; or 1–4 ounces (weight) of cheese food or cheese spread; and 1–4 tablespoons of fruit or vegetable or both.
Snack	4–6 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup>	4–6 fluid ounces of formula <sup>1</sup> or breastmilk <sup>2,3</sup>	2–4 fluid ounces of formula <sup>1</sup> , breastmilk <sup>2,3</sup> , or fruit juice <sup>5</sup> ; and 0– 1/2 slice of bread <sup>4,6</sup> or 0–2 crackers <sup>4,6</sup> .

<sup>1</sup>Infant formula and dry infant cereal must be iron-fortified.

<sup>2</sup>Breastmilk or formula, or portions of both, may be served; however, it is recommended that breastmilk be served in place of formula from birth through 11 months.

<sup>3</sup>For some breastfed infants who regularly consume less than the minimum amount of breastmilk per feeding, a serving of less than the minimum amount of breastmilk may be offered, with additional breastmilk offered if the infant is still hungry.

<sup>4</sup>A serving of this component is required only when the infant is developmentally ready to accept it.

<sup>5</sup>Fruit juice must be full-strength.

<sup>6</sup>A serving of this component must be made from whole-grain or enriched meal or flour.

(c) *Meal patterns for children age one through 12 and adult participants.* When individuals over age one participates in the Program, the total amount of food authorized in the meal patterns set forth below shall be provided in order to qualify for reimbursement.

(1) *Breakfast.* The minimum amount of food components to be served as breakfast as set forth in paragraph (a)(1) of this section are as follows:

<b>Food components</b>	<b>Age 1 and 2</b>	<b>Age 3 through 5</b>	<b>Age 6 through 12<sup>1</sup></b>	<b>Adult participants</b>
Milk, fluid	1/2 cup <sup>2</sup>	3/4 cup	1 cup	1 cup. <sup>2</sup>
Vegetables and Fruits or	1/4 cup	1/2 cup	1/2 cup	1/2 cup.
Full-strength vegetable or fruit juice or an equivalent quantity of any combination of vegetable(s), fruit(s), and juice	1/4 cup	1/2 cup	1/2 cup	1/2 cup.
<b>Bread and Bread Alternates<sup>3</sup></b>				
Bread or	1/2 slice	1/2 slice	1 slice	2 slices (servings).
Cornbread, biscuits, rolls, muffins, etc. <sup>4</sup> or	1/2 serving	1/2 serving	1 serving	2 servings.
Cold dry cereal <sup>5</sup> or	1/4 cup or 1/3 ounce	1/3 cup or 1/2 ounce	3/4 cup or 1 ounce	1 1/2 cup or 2 ounces.
Cooked cereal or	1/4 cup	1/4 cup	1/2 cup	1 cup.
Cooked pasta or noodle products or	1/4 cup	1/4 cup	1/2 cup	1 cup.
Cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate	1/4 cup	1/4 cup	1/2 cup	1 cup.

<sup>1</sup>Children ages 13 through 18 must be served minimum or larger portion sizes specified in this section for children ages 6 through 12.

<sup>2</sup>For purposes of the requirements outlined in this subsection, a cup means a standard measuring cup.

<sup>3</sup>Bread, pasta or noodle products, and cereal grains, shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc., shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

<sup>4</sup>Serving sizes and equivalents to be published in guidance materials by FNS.

<sup>5</sup>Either volume (cup) or weight (ounces) whichever is less.

(2) *Lunch*. The minimum amount of food components to be served as lunch as set forth in paragraph (a)(2) of this section are as follows:

<b>Food components</b>	<b>Age 1 and 2</b>	<b>Age 3 through 5</b>	<b>Age 6 through 12<sup>1</sup></b>	<b>Adult participants</b>
Milk, fluid	1/2 cup <sup>2</sup>	3/4 cup	1 cup	1 cup <sup>2</sup> .
Vegetables and Fruits <sup>3</sup>				
Vegetables(s) and/or fruit(s)	1/4 cup total	1/2 cup total	3/4 cup total	1 cup total.
Bread and Bread Alternates <sup>4</sup>				
Bread or	1/2 slice	1/2 slice	1 slice	2 slices (servings).
Cornbread, biscuits, rolls, muffins, etc. <sup>5</sup> or	1/2 serving	1/2 serving	1 serving	2 servings.
Cooked pasta or noodle products or	1/4 cup	1/4 cup	1/2 cup	1 cup.
Cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate	1/4 cup	1/4 cup	1/2 cup	1 cup.
Meat and Meat Alternates				
Lean meat or poultry or fish <sup>6</sup> or	1 ounce	1 1/2 ounces	2 ounces	2 ounces.
Alternate protein products <sup>7</sup> or	1 ounce	1 1/2 ounces	2 ounces	2 ounces.
Cheese or	1 ounce	1 1/2 ounces	2 ounces	2 ounces.
Egg (large) or	1/2	3/4	1	1.
Cooked dry beans or peas or	1/4 cup	3/8 cup	1/2 cup	1/2 cup.
Peanut butter or soynut butter or other nut or seed butters or	2 tablespoons	3 tablespoons	4 tablespoons	4 tablespoons.
Peanuts or soynuts or tree nuts or seeds <sup>8</sup> or	1/2 ounce <sup>9</sup> =50%	3/4 ounce <sup>9</sup> =50%	1 ounce <sup>9</sup> =50%	1 ounce <sup>9</sup> =50%.

Yogurt, plain or flavored, unsweetened or sweetened or an equivalent quantity of any combination of the above meat/meat alternates	4 ounces or 1/2 cup	6 ounces or 3/4 cup	8 ounces or 1 cup	8 ounces or 1 cup.
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<sup>1</sup>Children ages 13 through 18 must be served minimum or larger portion sizes specified in this section for children ages 6 through 12.

<sup>2</sup>For purposes of the requirements outlined in this subsection, a cup means a standard measuring cup.

<sup>3</sup>Serve 2 or more kinds of vegetable(s) and/or fruit(s). Full-strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.

<sup>4</sup>Bread, pasta or noodle products, and cereal grains, shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc., shall be made with whole grain or enriched meal or flour.

<sup>5</sup>Serving sizes and equivalents to be published in guidance materials by FNS.

<sup>6</sup>Edible portion as served.

<sup>7</sup>Must meet the requirements in appendix A of this part.

<sup>8</sup>Tree nuts and seeds that may be used as meat alternates are listed in program guidance.

<sup>9</sup>No more than 50% of the requirement shall be met with nuts or seeds. Nuts or seeds shall be combined with another meat/meat alternate to fulfill the requirement. For purpose of determining combinations, 1 ounce of nuts or seeds is equal to 1 ounce of cooked lean meat, poultry, or fish.

(3) *Supper*. The minimum amount of food components to be served as supper as set forth in paragraph (a)(3) of this section are as follows:

<b>Food components</b>	<b>Age 1 and 2</b>	<b>Age 3 through 5</b>	<b>Age 6 through 12<sup>1</sup></b>	<b>Adult participants</b>
Milk, fluid	1/2 cup <sup>2</sup>	3/4 cup <sup>2</sup>	1 cup	None.
Vegetables and Fruits <sup>3</sup>				
Vegetables(s) and/or fruit(s)	1/4cup total	1/2 cup total	3/4 cup total	1 cup total.
Bread and Bread Alternates <sup>4</sup>				
Bread or	1/2 slice	1/2 slice	1 slice	2 slices (servings). <sup>5</sup>
Cornbread, biscuits, rolls, muffins, etc. <sup>5</sup> or	1/2 serving	1/2 serving	1 serving	2 servings.

Cooked cereal grains or an equivalent quantity of any combination of bread/bread alternate	1/4 cup	1/4 cup	1/2 cup	1 cup.
Meat and Meat Alternates				
Lean meat or poultry or fish <sup>6</sup> or	1 ounce	1 1/2 ounces	2 ounces	2 ounces.
Alternate protein products <sup>7</sup> or	1 ounce	1 1/2 ounces	2 ounces	2 ounces.
Cheese or	1 ounce	1 1/2 ounces	2 ounces	2 ounces.
Egg (large) or	1/2	3/4	1	1.
Cooked dry beans or peas or	1/4 cup	3/8 cup	1/2 cup	1/2 cup.
Peanut butter or soynut butter or other nut or seed butters or	2 tablespoons	3 tablespoons	4 tablespoons	4 tablespoons.
Peanuts or soynuts or tree nuts or seeds <sup>8</sup> or	1/2 ounce <sup>9</sup> =50%	3/4 ounce <sup>9</sup> =50%	1 ounce <sup>9</sup> =50%	1 ounce <sup>9</sup> =50%.
Yogurt, plain or flavored, unsweetened or sweetened or an equivalent quantity of any combination of the above meat/meat alternates	4 ounces or 1/2 cup	6 ounces or 3/4 cup	8 ounces or 1 cup	8 ounces or 1 cup.

<sup>1</sup>Children ages 13 through 18 must be served minimum or larger portion sizes specified in this section for children ages 6 through 12.

<sup>2</sup>For purposes of the requirements outlined in this subsection, a cup means a standard measuring cup.

<sup>3</sup>Serve 2 or more kinds of vegetable(s) and/or fruit(s). Full-strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.

<sup>4</sup>Bread, pasta or noodle products, and cereal grains, shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc., shall be made with whole grain or enriched meal or flour.

<sup>5</sup>Serving sizes and equivalents to be published in guidance materials by FNS.

<sup>6</sup>Edible portion as served.

<sup>7</sup>Must meet the requirements in appendix A of this part.

<sup>8</sup>Tree nuts and seeds that may be used as meat alternates are listed in program guidance.



<sup>9</sup>No more than 50% of the requirement shall be met with nuts or seeds. Nuts or seeds shall be combined with another meat/meat alternate to fulfill the requirement. For purpose of determining combinations, 1 ounce of nuts or seeds is equal to 1 ounce of cooked lean meat, poultry, or fish.

(4) *Snack*. The minimum amounts of food components to be served as snack as set forth in paragraph (a)(4) of this section are as follow. Select two of the following four components. (For children, juice may not be served when milk is served as the only other component.)

<b>Food components</b>	<b>Age 1 and 2</b>	<b>Age 3 through 5</b>	<b>Age 6 through 12<sup>1</sup></b>	<b>Adult participants<sup>1</sup></b>
<b>MILK</b>				
Milk, fluid	1/2 cup <sup>2</sup>	1/2 cup	1 cup	1 cup.
<b>VEGETABLES AND FRUIT</b>				
Vegetable(s) and/or fruit(s) or	1/2 cup	1/2 cup	3/4 cup	1/2 cup.
Full-strength vegetable or fruit juice or an equivalent quantity of any combination of vegetable(s), fruit(s), and juice	1/2 cup	1/2 cup	3/4 cup	1/2 cup.
<b>BREAD AND BREAD ALTERNATES<sup>3</sup></b>				
Bread or	1/2 slice	1/2 slice	1 slice	1 slice (serving).
Cornbread, biscuits, rolls, muffins, etc. <sup>4</sup> or	1/2 serving	1/2 serving	1 serving	1 serving.
Cold dry cereal <sup>5</sup>	1/4 cup or	1/3 cup or	3/4 cup or	3/4 cup or.
	1/3 ounce	1/2 ounce	1 ounce	1 ounce.
Cooked pasta or noodle products or	1/4 cup	1/4 cup	1/2 cup	1/2 cup.
Cooked cereal or grains or an equivalent quantity of any combination of bread/bread alternates	1/4 cup	1/4 cup	1/2 cup	1/2 cup.
<b>MEAT AND MEAT ALTERNATES</b>				
Lean meat or poultry or fish <sup>6</sup> or	1/2 ounce	1/2 ounce	1 ounce	1 ounce.
Alternate protein products <sup>7</sup> or	1/2 ounce	1/2 ounce	1 ounce	1 ounce.
Cheese or	1/2 ounce	1/2 ounce	1 ounce	1 ounce.
Egg (large) <sup>8</sup> or	1/2 egg	1/2 egg	1/2 egg	1/2 egg.

Cooked dry beans or peas or	1/8 cup	1/8 cup	1/4 cup	1/4 cup.
Peanut butter or soynut butter or other nut or seed butters or	1 tablespoon	1 tablespoon	2 tablespoons	2 tablespoons.
Peanuts or soynuts or tree nuts or seeds <sup>9</sup> or	1/2 ounce	1/2 ounce	1 ounce	1 ounce.
Yogurt, plain or flavored, unsweetened or sweetened, or an equivalent quantity of any combination of meat/meat alternates	2 ounces or 1/4 cup	2 ounces or 1/4 cup	4 ounces or 1/2 cup	4 ounces or 1/2 cup.

<sup>1</sup>Children ages 13 through 18 must be served minimum or larger portion sizes specified in this section for children ages 6 through 12.

<sup>2</sup>For purposes of the requirements outlined in this subsection, a cup means a standard measuring cup.

<sup>3</sup>Bread, pasta or noodle products, and cereal grains shall be whole-grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole-grain or enriched meal or flour; cereal shall be whole-grain or enriched or fortified.

<sup>4</sup>Serving size and equivalents to be published in guidance materials by FNS.

<sup>5</sup>Either volume (cup) or weight (ounce), whichever is less.

<sup>6</sup>Edible portion as served.

<sup>7</sup>Must meet the requirements in Appendix A of this part.

<sup>8</sup>One-half egg meets the required minimum amount (one ounce or less) of meat alternate.

<sup>9</sup>Tree nuts and seeds that may be used as meat alternates are listed in program guidance.

**Sleep References:**

In 2016, the National Sleep Foundation issued recommended sleep durations for newborns (14–17 hours), infants (12–15 hours), toddlers (11–14 hours), and preschoolers (10–13 hours), which include both daytime and nighttime sleep (2,3). Getting sufficient sleep helps prevent pediatric obesity. In meta-analyses, short sleep duration before 5 years of age is associated with 30% to 90% increased odds of overweight/ obesity at later ages (4,5). To prevent early childhood obesity, the Institute of Medicine recommends that

childcare providers be required to adopt practices that promote age-appropriate sleep duration and that staff be trained to counsel parents about recommended sleep durations (6). Behavioral sleep problems (i.e., difficulty getting to/falling asleep) at 18 months of age are associated with a 60% to 80% increased risk of emotional and behavioral problems at 5 years of age (7). Irregular bedtimes throughout early childhood are associated with reduced reading, math, and spatial ability scores (8). Sleep-disordered breathing (e.g., snoring, apnea) in early childhood is associated with a 60% to 80% increase in social and emotional difficulties at 7 years of age (9). **COMMENTS** In the young infant, favorable conditions for sleep and rest include being dry, well fed, and comfortable. Infants may need 1 or 2 (or sometimes more) naps during the time they are in childcare. Different practices, such as rocking, holding a child while swaying, singing, reading, or patting an arm or back, could be used to calm the child. Lighting does not need to be turned off during nap time.

1. National Sleep Foundation. How much sleep do we really need? <https://sleepfoundation.org/how-sleep-works/how-much-sleep-do-we-really-need>. Accessed November 14, 2017 2. Paruthi S, Brooks LJ, D'Ambrosio C, et al. Consensus statement of the American Academy of Sleep Medicine on the recommended amount of sleep for healthy children: methodology and discussion. *J Clin Sleep Med*. 2016;12(11):1549–1561 3. Fatima Y, Doi SA, Mamun AA. Longitudinal impact of sleep on overweight and obesity in children and adolescents: a systematic review and biasadjusted meta-analysis. *Obes Rev*. 2015;16(2):137–149 4. Li L, Zhang S, Huang Y, Chen K. Sleep duration and obesity in children: a systematic review and meta-analysis of prospective cohort studies. *J Paediatr Child Health*. 2017;53(4):378–385 5. Institute of Medicine. *Early Childhood Obesity Prevention Policies: Goals, Recommendations, and Potential Actions*. Washington, DC: Institute of Medicine; 2011. [http://www.nationalacademies.org/hmd/~media/Files/ Report%20Files/2011/Early-Childhood-Obesity-Prevention-Policies/Young%20Child%20Obesity%202011%20Recommendations.pdf](http://www.nationalacademies.org/hmd/~media/Files/Report%20Files/2011/Early-Childhood-Obesity-Prevention-Policies/Young%20Child%20Obesity%202011%20Recommendations.pdf). Published June 2011. Accessed November 14, 2017 6. Sivertsen B, Harvey AG, Reichborn-Kjennerud T, Torgersen L, Ystrom E, Hysing M. Later emotional and behavioral problems associated with sleep problems in toddlers: a longitudinal study. *JAMA Pediatr*. 2015;169(6):575–582 7. Kelly, Y; Kelly, J; Sacker, A; (2013) Time for bed: associations with cognitive performance in 7-year-old children: a longitudinal population-based study. *Journal of Epidemiology and Community Health* , 67 (11) pp. 926-931. 8. Bonuck K, Freeman K, Chervin RD, Xu L. Sleep-disordered breathing in a population-based cohort: behavioral outcomes at 4 and 7 years. *Pediatrics*. 2

### **Outside Play**

**Active Opportunities for Physical Activity** The facility should promote all children's active play every day. Children should have ample opportunity to do moderate to vigorous activities, such as running, climbing, dancing, skipping, and jumping, to the extent of their abilities. All children, birth to 6 years of age, should participate daily in:

- a. Two to 3 occasions of active play outdoors, weather permitting (see Standard 3.1.3.2: Playing Outdoors for appropriate weather conditions)

- b. Two or more structured or caregiver/teacher/adult-led activities or games that promote movement over the course of the day—indoor or outdoor
- c. Continuous opportunities to develop and practice age-appropriate gross motor and movement skills The total time allotted for outdoor play and moderate to vigorous indoor or outdoor physical activity can be adjusted for the age group and weather conditions.
- b. Outdoor play
  - a. Infants (birth–12 months of age) should be taken outside 2 to 3 times per day, as tolerated. There is no recommended duration of infants’ outdoor play.
  - b. Toddlers (12–35 months) and preschoolers (3–6 years) should be allowed 60 to 90 total minutes of outdoor play (1). These outdoor times can be curtailed somewhat during adverse weather conditions in which children may still play safely outdoors for shorter periods, but the time of indoor activity should increase so the total amount of exercise remains the same. Total time allotted for moderate to vigorous activities:
  - a. Toddlers should be allowed 60 to 90 minutes per 8-hour day for moderate to vigorous physical activity, including running.
  - b. Preschoolers should be allowed 90 to 120 minutes per 8-hour day for moderate to vigorous physical activity, including running (1,2).

This guidance comes from “Caring for Our Children” National Health and Safety Performance Standards Guidelines for early Care and Education Programs page 97-98. RATIONALE Time spent outdoors has been found to be a strong, consistent predictor of children’s physical activity (8). Children can accumulate opportunities for activity over the course of several shorter segments of at least 10 minutes each (9). Free play, active play, and outdoor play are essential components of young children’s development (10). Children learn through play, developing gross motor, socioemotional, and cognitive skills. During outdoor play, children learn about their environment, science, and nature (10). Infants’ and young children’s participation in physical activity is critical to their overall health, development of motor skills, social skills, and maintenance of healthy weight (11). Daily physical activity promotes young children’s gross motor development and provides numerous health benefits, including improved fitness and cardiovascular health, healthy bone development, improved sleep, and improved mood and sense of well-being (12). Toddlers and preschoolers generally accumulate moderate to vigorous physical activity over the course of the day in very short bursts (15–30 seconds) (5). Children may be able to learn better during or immediately after these types of short bursts of physical activity, due to improved attention and focus (13). 98 Caring for Our Children: National Health and Safety Performance Standards Tummy time prepares infants to be able to slide on their bellies and crawl. As infants grow older and stronger, they will need more time on their tummies to build their own strength (3). Childhood obesity prevalence, for children 2 to 5 years old, has steadily decreased from 13.9% in 2004 to 9.4% in 2014 (14). Incorporating government food programs, physical activities, and wellness education into childcare centers has been associated with these decreases

(15). Establishing communication between caregivers/teachers and parents/guardians helps facilitate integration of classroom physical activities into the home, making it more likely that children will stay active outside of childcare hours (16). Very young children and those not yet able to walk, are entirely dependent on their caregivers/teachers for opportunities to be active (17). Especially for children in full-time care and for children who don't have access to safe playgrounds, the early care and education facility may provide the child's only daily opportunity for active play. Physical activity habits learned early in life may track into adolescence and adulthood, supporting the importance for children to learn lifelong healthy physical activity habits while in the early care and education program (18).

Additional Resources Choosy Kids (<https://choosykids.com>) EatPlayGrow Early Childhood Health Curriculum, Children's Museum of Manhattan ([www.eatplaygrow.org](http://www.eatplaygrow.org)) Head Start Early Childhood Learning & Knowledge Center, US Department of Health and Human Services, Administration for Children & Families (<https://eclkc.ohs.acf.hhs.gov/physical-health/article/little-voices-healthy-choices>) Healthy Kids, Healthy Future; The Nemours Foundation (<https://healthykidshealthyfuture.org>) Nutrition and Physical Activity Self-Assessment for Child Care, Center for Health Promotion and Disease Prevention, University of North Carolina (<http://healthyapple.orewehealthy.com/documents/>

[PhysicalActivityStaffHandouts\\_NAPSACC.pdf](http://openphysed.org)) Online Physical Education Network (<http://openphysed.org>) Spark ([www.sparkpe.org](http://www.sparkpe.org)) TYPE OF FACILITY Center, Large Family Child Care Home, Small Family Child Care Home RELATED STANDARDS 2.1.1.2 Health, Nutrition, Physical Activity, and Safety Awareness 3.1.3.2 Playing Outdoors 3.1.3.4 Caregivers'/Teachers' Encouragement of Physical Activity 5.3.1.10 Restrictive Infant Equipment Requirements 9.2.3.1 Policies and Practices that Promote Physical Activity Appendix S: Physical Activity: How Much Is Needed? References

1. Henderson KE, Grode GM, O'Connell ML, Schwartz MB. Environmental factors associated with physical activity in childcare centers. *Int J Behav Nutr Phys Act.* 2015;12:43
2. Vanderloo LM, Martyniuk OJ, Tucker P. Physical and sedentary activity levels among preschoolers in home-based childcare: a systematic review. *J Phys Act Health.* 2015;12(6):879–889
3. American Academy of Pediatrics. Back to sleep, tummy to play. *HealthyChildren.org* Web site. <https://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/Back-to-Sleep-Tummy-to-Play.aspx>. Updated January 20, 2017. Accessed January 11, 2018
4. Zachry AH. Tummy time activities. *American Academy of Pediatrics HealthyChildren.org* Web site. <https://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/The-Importance-of-Tummy-Time.aspx>. Updated November 21, 2015. Accessed January 11, 2018
5. US Department of Agriculture, US Department of Health and Human Services. Provide opportunities for active play every day. Nutrition and wellness tips for young children: provider handbook for the Child and Adult Care Food Program. [https://fns-prod.azureedge.net/sites/default/files/opportunities\\_play.pdf](https://fns-prod.azureedge.net/sites/default/files/opportunities_play.pdf). Published June 2013. Accessed January 11, 2018

6. Centers for Disease Control and Prevention and SHAPE America-Society of Health and Physical Educators. Physical activity during school: Providing recess to all students. 2017. [https://www.cdc.gov/healthyschools/physicalactivity/pdf/Recess\\_All\\_Students.pdf](https://www.cdc.gov/healthyschools/physicalactivity/pdf/Recess_All_Students.pdf). Accessed January 11, 2018
7. Moir C, Meredith-Jones K, Taylor BJ, et al. Early intervention to encourage physical activity in infants and toddlers: a randomized controlled trial. *Med Sci Sports Exerc.* 2016;48(12):2446–2453 8. V
8. Vanderloo LM, Martyniuk OJ, Tucker P. Physical and sedentary activity levels among preschoolers in home-based childcare: a systematic review. *J Phys Act Health.* 2015;12(6):879–889 9. Hnatiuk JA, Salmon J, Hinkley T, Okely AD, Trost S. A review of preschool children’s physical activity and sedentary time using objective measures. *Am J Prev Med.* 2014;47(4):487–497
10. Bento G, Dias G. The importance of outdoor play for young children’s healthy development. *Porto Biomed J.* 2017;2(5):157–160
11. Jayasuriya A, Williams M, Edwards T, Tandon P. Parents’ perceptions of preschool activities: exploring outdoor play. *Early Educ Dev.* 2016;27(7):1004–1017
12. Timmons BW, Leblanc AG, Carson V, et al. Systematic review of physical activity and health in the early years (aged 0-4 years). *Appl Physiol Nutr Metab.* 2012;37(4):773–792
13. Donnelly JE, Hillman CH, Castelli D, et al. Physical activity, fitness, cognitive function, and academic achievement in children: a systematic review. *Med Sci Sports Exerc.* 2016;48(6):1197–1222
14. Centers for Disease Control and Prevention. Overweight & obesity. Childhood obesity facts. Prevalence of childhood obesity in the United States, 2011-2014. <https://www.cdc.gov/obesity/data/childhood.html>. Updated April 10, 2017. Accessed January 11, 2018
15. Ogden CL, Carroll MD, Lawman HG, et al. Trends in obesity prevalence among children and adolescents in the United States, 1988-1994 through 2013-2014. *JAMA.* 2016;315(21):2292–2299
16. Taverno Ross S, Dowda M, Saunders R, Pate R. Double dose: the cumulative effect of TV viewing at home and in preschool on children’s activity patterns and weight status. *Pediatr Exerc Sci.* 2013;25(2):262–272
17. Society of Health and Physical Educators. Active Start: A Statement of Physical Activity Guidelines for Children From Birth to Age 5. 2nd ed. Reston, VA: SHAPE America; 2009. <https://www.shapeamerica.org/standards/guidelines/activestart.aspx>. Accessed January 11, 2018 18.
18. Simmonds M, Llewellyn A, Owen CG, Woolacott N. Predicting adult obesity from childhood obesity