

TAYLORMADE LEARNING CENTER



501 S Bay St. Amite, LA 70422

(985) 284-7003

**Parent Handbook
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Welcome to Taylor-made Learning Center

Thank you for choosing Taylor-made Learning Center. We know that children are very special and it is important that they have a very positive early childcare experience. We have taken every measure to ensure that your child’s safety and education are at the highest-level possible.

Studies show that children who experience high-quality, stable childcare demonstrate better language and math skills, are more able to form secure attachments with adults and other children and develop better cognitive and social skills.

According to former First Lady Laura Bush at the White House Summit on Early Childhood Cognitive Development, *“The ages between birth and age five are the foundation upon which successful lives are built.”*

We look forward to having an influence on your child’s educational and social development.

Sincerely,

Tracy L. Taylor
Derrick L. Taylor

Taylor-made Learning Center Goals, Objectives, and Benefits

Taylor-made Learning Center will provide high quality educational and recreational programs for children and youth. Teams of caring, knowledgeable professionals will plan developmentally appropriate programs that are responsive to the unique needs, abilities, and interests of children. The staff will foster a sense of independence, trust, and responsibility within each child through understanding and respectful interactions. Likewise, through positive relationships, our programs respect and support the ideas, cultures, and values of families in their task of nurturing children and youth. We will be advocates for children, families and the child and youth professionals within our programs and surrounding communities.

Taylor-made Learning Center offers developmentally appropriate activities for each age group from four weeks to twelve years of age, which promotes cognitive, social, emotional, and physical development. Our program will create a safe and healthy place that is warm and happy for children and youth to learn and grow. As we bridge the gap from home to school, we guide towards a positive self-image while building social skills in a group setting. At least one staff member will be present in each classroom at all times to ensure child-staff ratio. Video monitors will be placed in each classroom to assist with monitoring the children but will never replace a staff member. Sensory, gross, fine motor, perceptual, language, pre-reading, math and social skills will be introduced through materials and activities, which are both child centered and teacher guided. Work is based on creative curriculum emphasizing the process rather than the product. This fosters a sense of accomplishment and self-pride. A daily schedule of activities will be posted in each classroom.

Based on the theory children learn best through play, classroom routines will encourage active involvement, meaningful experimentation, and reinforcement through repetition. Schedules are designed to balance structure and free choice, as well as active, quiet, whole group and individual time. Field trips will be planned on a regular basis for broadening the educational experiences of the child. Written permission is required for each trip. Children who miss or are not allowed to participate in a scheduled field trip will be placed with children in a classroom nearest to the child's age until his/her class returns.

Realizing that children grow on unpredictable stages, we treat each child as an individual working from the level each child has attained and moving forward a step at a time. We encourage a love for learning by allowing children to experience at their own stage of development, and by helping children to feel successful without pressure. We value the role of parents as partners. We acknowledge communication between staff and parents is important. When parents volunteer and participate in classroom activities, children are able to see parents as concerned members of the program's environment. This provides parents with opportunities to view the child, teachers, and the total center environment.

Mission

Education is key—this is what we believe in at Taylormade Learning Center. We are a locally owned daycare/learning center in Amite City, LA, and it is our goal to help children develop their social and listening skills while making sure to sharpen their learning abilities as well. Our team is skilled, knowledgeable, and experienced in the field of child development. All members of our staff have their CDAs, are working on their CDAs, or have a bachelor's or master's degree. Rest assured that with us, your little ones are in safe, highly qualified hands.

Keys to Our Success

- Maintaining a reputable and untarnished reputation in the community
- Quality care
- Competitive pricing
- Flexible hours
- Focus on developing social skill
- Fostering positive self-concept
- Encourage children and youth to think, learn, reason, question and experiment
- Enhance physical development and skills through a variety of gross and fine motor activities
- Encourage creative expression and appreciation for the arts
- Respect cultural diversity of staff and children through cultural awareness in all aspects
- Encourage and model sound health, safety and nutritional practices in all facets of the program
- Encourage language and pre-reading skills through developmentally age appropriate activities
- Reinforce family values and emphasize the unique value of each child by providing appropriate guidance, promoting positive attitudes.
- Foster resilient, self-sufficient families enhance community awareness by providing services, which reduce work-life conflict
- Promote language and literacy development
- Develop self-discipline and the ability to seek out and complete self-selected task

Hours of Operation

Normal operating hours are:

Monday through Friday 6:00AM – 6:00 PM
501 S Bay St. Amite, LA, 70422



Taylormade Learning Center may open by request for special events during hours the program is normally closed. Specifically our Graduation Program which will be held in the Month of July!

General Policies



Admissions/Enrollment Procedures Policy:

Proper identification must be presented at the time of enrollment (or any other time deemed necessary by management).

Parents must fill out a Registration/Medical Information Card and present immunization records before care may begin.

Parents must provide a local number where they can be reached and two local numbers of a family member or friend that can be reached in case of an emergency. Out of town telephone numbers will not be accepted.

When registering child/ren for the programs, parents will receive a copy of the center's Parent Handbook. Parents shall initial on the admission card that the handbook was received. Any Program staff can answer questions concerning the handbook.

Withdrawal Procedures Policy:

Two weeks written notice is required if a child is to be withdrawn from any Programs.

The parent or guardian must fill out the Program's notice of withdrawal for two weeks prior to date of withdrawal.

Failure to provide two weeks written notice for withdrawal from any program will make the parent financially responsible for the two weeks. Failure to clear outstanding balance may result in collection procedures. The names of parents owing fees will be turned in to the accounting department and financial responsibility must be cleared up before withdrawal from the program.

Inclusion

Early Childhood Education Center believes that children of all ability levels are entitled to the same opportunities for participation, acceptance and belonging in child care. We will make every reasonable accommodation to encourage full and active participation of all children in our program based on his/her individual capabilities and needs.

Sign In/Out Procedures Policy:

Check-In and Pick-Up

- Families will be met at the Door (South Bay St.) where a staff member will greet the child (ren). Parents and other family members will not be allowed inside the child care facility. Prior to parents leaving the site, a trained staff member will have the right to take the temperature of the child(ren), and ask parents to confirm that their child has not been on fever-reducing medication in the last 24 hours and does not have shortness of breath or a cough.
- Children and staff will be required to wash their hands immediately upon entering the building, and hourly throughout the day. When children are received for drop-off, they will be escorted into the nearest hand-washing sink where their hands will be washed prior to being brought to their classroom/child care area.
- Upon arrival to pick up your child, a staff member will bring your child out to you. Doing so will limit direct contact and help us to maintain social distancing. All children must be signed in and out of the center on the child care application (Procare) or (Brightwheel). If this is unavailable then children must be signed out at the front desk daily.

Parents or guardians must check their children in or out of the center, unless otherwise designated in writing with the Permission to pick up/admit child form.

All children must be signed in and out by an adult. Siblings over 16 years of age may sign a child out. When signing the child out in the classroom the person picking the child up must fill in time of arrival or departure and use his/her full signature on the Procare application or at the front desk. Families may be asked to provide Identification for other members who are not on the child's Emergency cards. Parents are required to keep their children with them at all times after signing them out for safety purposes.

Release of Children Policy:

No child will be released from Taylormade Learning Center to anyone other than a parent/guardian, without advanced written authorization.

Persons designated to pick up/admit children must show proper identification when picking up/admitting a child. The Center reserves the right to check the ID of any individual not readily known to us. This procedure is for the protection of the child.

Disputes over authority to remove a child or children of divorced or legally separated parents shall be referred to the child protection agency. The child/ren will not be released until the parent or guardian, who has registered the child at the Center and the Child Protection Office have been notified. In cases of legal custody, the center shall be furnished with a copy of the legal document confirming the fact.

Authorized & Unauthorized Pick-up

Your child will only be released to you or those persons you have listed as Emergency and Release Contacts. If you want a person who is not identified as an Emergency and Release Contact to pick-up your child, you must notify us in advance, in writing. Your child will not be released without prior written authorization. The person picking up your child will be required to show a picture ID as verification. Please notify your pick-up person of our policy.

If a child has not been picked up after closing and we have not heard from you, attempts will be made to contact you, and the contacts listed as Emergency and Release Contacts. Provisions will be made for someone to stay with your child as long as possible, but if after 2 hours we have not been able to reach you or a person listed as an Emergency and Release Contact, we will call the local child protective services agency.

Right to Refuse Child Release

We may refuse to release children if we have reasonable cause to suspect that any person picking up a child is under the influence of drugs or alcohol, or is physically or emotionally impaired in any way that may endanger the child. To protect your child, we may request that another adult listed as an Emergency and Release Contact pick-up the child or we may call the police to prevent potential harm to your child. Reoccurring situations may result in the release of your child from the program.

Cell Phone Usage

The times you spend dropping off and picking up your child are the primary windows of time we have to communicate with you about your child. In order to make the best use of these opportunities, as well as to be attentive to your child and other children, we ask that you NOT use your cell phone at any time while visiting the center.

Confidentiality

Unless we receive your written consent, information regarding your child will not be released with the exception of that required by our regulatory and partnering agencies. All records concerning children at our program are confidential.

Learning Environment

We provide a rich learning environment with curricula that are developmentally appropriate to the specific ages in each classroom. We have a flexible day routine that allows children to advance at their own pace. We strongly believe that learning happens through play. Learning and exploring are hands-on and are facilitated through interest areas. Our program is designed to enhance children's development in the following areas: creativity, self-expression, decision-making, problem-solving, responsibility, independence, and reasoning. We encourage openness to that which is different from us, and the ability to work and play with others.

Copies of daily schedules are posted in each classroom.

Outings & Field Trips (Preschool children only)

Weather permitting; we conduct supervised walking trips around the neighborhood. Children are accounted for at all times. A permission statement for participation in walking trips is included in the enrollment package.

From time to time, there will be supervised field trips, and we encourage you to join your child on the trip.

Permission Slips for each trip must be signed by the child's family.

For field trips, please dress your child appropriately for the season. Walking shoes are a must. Sandals and flip-flops are not appropriate for walking and make it difficult for your child.

The safety of children and staff will be guarded in all activities of child care programs. Proper restraint systems (seat belts) and the correct use of them are critically important during travel to/from the child care program as well as during field trips.

Transition

Your child's transition in child care should be a positive and exciting learning adventure. We will work with you and your child to ensure the smoothest possible transition occurs as new routines and new people are introduced.

Transition from home to center: Prior to your child's first day, you will have an opportunity to tour the center, meet with your child's peers and teachers, and communicate any anticipated concerns. At this time please share the best communication methods that the teacher may use to reach you.

Transition between learning programs: Children are transitioned to the next program based on age, developmental readiness, state licensing requirements, and space availability. During the transition, current and future teachers will meet with you to propose a plan to introduce your child into the new program.

Transition to elementary school: Transition activities such as a field trip to a local elementary school, creating a mural of special friends and special times at our center will be part of your child's education at our center. We will provide you with information on local schools, what to expect, and ideas on how to talk to your child about going to elementary school.

Programs, Movies, & Video Games (Preschool Only)

Our normal daily routine does not include television watching, but from time-to-time, we may record a television show without advertisements as a teaching aid and discussion stimulator. Television consumption will not be longer than [30] minutes and the program will be screened prior to showing. Programs will consist of non-violent and high-quality educational material. Our focus is to provide your child a positive experience with increased understanding of the world.

Electronic Devices/Computer Practices Policy

Electronic Media are limited to 20 minutes or less per day per preschool and school age students only. Internet sites and software are pre-screened to contain non-violence and high-quality educational content.

Multiculturalism

Multiculturalism is vital for all children because it sets social goals and promotes respect for all people and the environment we inhabit. We utilize books, music, games, and a wide range of activities as aids to teach our children respect for our world and the diversity of life upon it.

Celebrations

Our holiday policy encourages an enhanced understanding of and respect for different cultures and beliefs of children, families, staff and community.

Rest Time

TaylorMade Learning Center daily program includes a scheduled rest/nap time.

A 2' thick mat will be provided by TaylorMade Learning Center. All mats will be covered with a sheet and each parent will have to provide a top blanket for covering.

The supervised rest/nap time will be 2 to 2 ½ hours.

After lunch, all children less than [6] years of age participate in a quiet rest time. Children are not required to sleep and may be given quiet activities.

Infants sleep according to their own schedule and are put to sleep on their Toilet Training

The most important factor in making the toilet learning experience successful and as low-stress as possible is a family/teacher partnership that supports the child. Research indicates that children cannot successfully learn how to use the toilet until they are physically, psychologically, and emotionally ready. Many pediatricians say that most children under 24 months of age are not physically capable of regulating bladder and bowel muscles. Most positive toilet training occurs only after children show signs of physical control or awareness of their bodily functions and when they demonstrate an interest or curiosity in the process. We are committed to working with you to make sure that toilet learning is carried out in a manner that is consistent with your child's physical and emotional abilities and your family's concerns.

GUIDANCE

General Procedure

Thoughtful direction and planning ahead are used to prevent problems and encourage appropriate behavior.

Communicating consistent, clear rules and involving children in problem solving help children develop their ability to become self-disciplined. We encourage children to be fair, to be respectful of other people, of property, and to learn to understand the results of their actions.

Behavior Management Policy:

Children are guided to treat each other and adults with self-control and kindness. When a child becomes physically aggressive, we intervene immediately to protect all of the children.

Our usual approach to helping children with challenging behaviors is to show them how to solve problems using appropriate interactions. When discipline is necessary, it is clear, consistent and understandable to the child.

Physical Restraint

Physical restraint is not used or permitted for discipline. There are rare instances when we need to ensure a child's safety or that of others and we may restrain a child by gently holding her or him only for as long as is necessary for control of the situation.

Notification of Behavioral Issues to Families

If a child's behavior/circumstance is of concern, communication will begin with the parents as the first step to understanding the child's individual needs and challenges. We will work together to evaluate these needs in the context of our program.

On rare occasions, a child's behavior may warrant the need to find a more suitable setting for care. Examples of such instances include:

- A child appears to be a danger to others.
- Continued care could be harmful to, or not in the best interest of the child as determined by a medical, psychological, or social service personnel.
- Undue burden on our resources and finances for the child's accommodations for success and participation.

TUITION AND FEES

Payment is always due in advance on the first day of the month with no deduction for any absences, holidays, or closures due to inclement weather, power outages, or other situations beyond our control. Payment is due as outlined in the Enrollment Agreement.

Late Pick-up Fees

Late pick-up is not a normal program option and will only be considered an exceptional occurrence. Late fees of [\$5 for the first 5 minutes after 6:00 PM] and \$5 dollars for every 5th minute thereafter per child will be assessed beginning at [6:00] PM and will be due upon arrival.

Special Activity Fees

From time-to-time there will be additional fees associated with special activities or field trips. These fees are due prior to the event, activity or trip.

Late Payment Charges

Late payments can pose serious problems for our programs. Therefore we have put procedures in place to reduce their impact.

If payment is not received on the day that it is due, a late fee of [\$25] will be added after 9:30 am on the next business day from the due date that it is late. If your account has not been paid in full within [5] business days, your child may be discharged from the program.

If payment is more than [30] business days past due, we may attempt to recover payment in small claims court and/or your account may be sent to a 3rd party collections agency. You will be responsible for all expenses associated with these actions including all court and attorney fees.

Rejected Transaction Charges will incur a fee of \$25.00

Rejected ACH (automatic debits) or credit card transactions will be charged a fee up to the maximum amount allowed by law. This charge may be collected electronically. Two or more returned checks or rejected transactions will result in your account being placed on “cash only” status.

Additional Fees Credits

- Vacation - to retain your child's spot during vacation, [50%] of your regular tuition is due. Vacation days can be used if written notice is given in advance for the days the child will not be in attendance. Tuition must be paid prior to going on vacation. These fees are non-refundable if you choose not to return.
- Withdrawals - if a child is suddenly withdrawn from the program without a [2] week written notice of withdrawal, a [2] week tuition fee may be applied. Families who withdraw and later re-enroll will be charged a re-enrollment fee.

Credits & No Credits

- Credit will be given for Excused Absences - if your child is hospitalized, absent due to a contagious disease, or absent at the request of the child's doctor, the absence is considered excused. A written doctor's note is required to receive a credit.
- Credit will [not] be given for Sick Days – there are [no] credits for sick days. Sick days are considered in determining tuition and are [not] refundable.
- Credit will [not] be given for Inclement Weather - if we do not open due to inclement weather on a day that your child is scheduled to attend, your account will [not] be credited for that day.

ATTENDANCE & WITHDRAWAL Absence

If your child is going to be absent, please call us at the above phone number. If your child arrives after [9AM], your child is considered late and will not be allowed to enter the building unless a doctor's note is presented. NO EXCEPTIONS! We will be concerned about your child if we do not hear from you.

Ten Hour Rule

Unless your work schedule permits that your child is in our care more than ten hours per day your account will be charged rate of \$50.00 per week which is considered before care from 6:30 AM to 8:00 AM and aftercare, 4:00 P.M to 5:30 PM or extended hours will incur an additional fee.

Vacation

Vacation days only apply if your child is normally scheduled to attend on those days. Each child is given [5] vacation days each calendar year.

Transfer of Records

Whether transitioning to the next program setting or to a new classroom, your child's records will be transferred internally.

If your child is transitioning to a new school, a written request from you with instructions to where the records should be sent is required.

Closing Due to Extreme Weather

Should severe weather or other conditions (i.e., snow, storms, floods, tornadoes, hurricanes, earthquakes, blizzards, loss of power, loss of water) prevent us from opening on time or at all, notification to the families will be announced on [click to enter radio station, television station] .

If it becomes necessary to close early, we will contact you or your emergency contacts as soon as possible. Your child's early pick-up is your responsibility to arrange.

PERSONAL BELONGINGS

What to Bring

- Infants: enough clean bottles for a day's use, at least 6 diapers per day, and at least 2 changes of clothes per day.
- Toddlers: enough clean bottles for a day's use (if applicable), six diapers and at least two changes of clothes per day.
- Older Toddlers: at least two changes of clothes or more per day if going through the toilet training program.
- Preschoolers: at least one change of clothes, socks and shoes.
- Kindergarteners: at least one change of clothes, socks and shoes.
- After School Care Children: books for homework.

Please label all items brought from home with your child's name (i.e., clothes, bottles, diapers, pacifiers, crib sheet, blanket, etc.) to prevent items from becoming misplaced or lost. We are not responsible for lost or damaged items.

Cubbies

Upon enrollment each child will be assigned a "cubby." Cubbies are labeled with your child's name and photo. Cubbies will be cleaned and sanitized on a daily basis all items will be send home daily.

Lost & Found

You can check with your child's teacher for lost items and bring found items to the Lost-and-found Box located at the front counter. Please note that we are not responsible for lost personal property.

Toys from Home

We request that you do not allow your child to bring toys from home into the center unless they are part of a show-and-tell activity.

NUTRITION

Foods Brought from Home

[A] We request that you do not bring food from home into our center.

[B] Food brought from home is permitted under the following conditions:

- Perishable food to be shared with other children must be store-bought and in its original package.
- Foods should be labeled with the child's name, date, and type of food.

- Children will not be allowed to share food provided by the child's family unless the food is intended for sharing with all of the children.
- Leftover food will be discarded except for foods that do not require refrigeration and/or come in a commercially-wrapped package that was never opened.

Good Lunch Box Suggestions for a Balanced, Nutritional Lunch.

½ turkey sandwich

Celery sticks

Raisins

Milk/water

Chicken strips

Roll

Orange wedges

Broccoli

Milk/water

Peanut butter on graham crackers

Apple slices

Carrot sticks

Milk/water

Yogurt

Crackers

Sugar snap peas

100% juice

Food Prepared for or at the Center

Food prepared for or at the center will be properly planned, prepared and portioned according to the Child and Adult Care Food Program (<http://www.cnp.usda.gov/cnd/care/>) and the state requirements for food service.

Food Allergies

If your child has a food allergy, you must notify us in writing so that we can make appropriate substitutions. The written notification should list appropriate food substitutions and must be updated at least annually.

Food allergies can be life threatening and each child with a food allergy should have an action plan for emergency care completed by the family physician.

Meal Time

At meal time the dining table is set with real plates and flatware, and the food is placed in small bowls from which the children can help themselves. Everyone sits at the same table. Children are encouraged to serve themselves from food passed around each table. Good table manners are modeled and encouraged. Weekly menus are posted for viewing by parents/caregivers.

A caregiver who is trained in first-aid for choking is present at all meals.

Infant Feedings

Infant feedings follow these procedures:

- Bottle-fed infants are fed while being held or sitting up.
- Infants are fed “on demand” to the extent possible (at least every 4 hours and usually not more than hourly).
- Breastfeeding is supported by providing a place for nursing mothers to feed their babies. Expressed breast milk may be brought from home if frozen or kept cold during transit. Fresh breast milk must be used within 48 hours. Previously frozen, thawed breast milk must be used within 24 hours. Bottles must be clearly labeled with the child’s name and the date the milk was expressed. Frozen breast milk must be dated and may be kept in the freezer for up to 3 months.
- Formula must be brought to the premises in a factory-sealed container in a ready-to-feed strength or powder or concentrate. Formula will be diluted at the child care site according to the instructions provided by the manufacturer or from the child’s health provider, using water from a source approved by the local health department. Formula brought from home must be labeled with the child’s name.
- Solid foods will only be introduced after a consultation with the child’s family.

Toddler Feedings

- Children are encouraged to self-feed to the extent that they have the skills. Children are encouraged, but not forced to eat a variety of foods.
- Round, firm foods that pose a choking hazard for children less than 4 years of age are not permitted. These foods include: hot dogs, whole grapes, peanuts, popcorn, thickly spread peanut butter and hard candy.

Health Requirements Policy (Child):

At the time of registration, the parent/guardian will fill out a program Registration/Medical Information Card, which lists all immunizations and special health problems. Parents will be required to initial card stating that their children are in good health unless special health problems are otherwise noted.

HEALTH Immunizations

Immunizations are required according to the current schedule recommended by the U.S. Public Health Services and the American Academy of Pediatrics, www.aap.org. Every [January], we check with the public health department or the American Academy of Pediatrics for updates of the recommended immunization schedule. Our state regulations regarding attendance of children who are not immunized due to religious or medical reasons are followed. Unimmunized children are excluded during outbreaks of vaccine preventable illness as directed by the state health department.

Physicals

Routine physicals are required according to the current recommendations of the American Academy of Pediatrics, www.aap.org. A copy of your child’s physical should be received before but must be received no later than 6 weeks after your child begins the program. Families are responsible for assuring that their child’s physicals are kept up-to-date and that a copy of the results of the child’s health assessment is given to the program.

Illness

We understand that it is difficult for a family member to leave or miss work, but to protect other children, you may not bring a sick child to the center. The center has the right to refuse a child who appears ill. You will be called and asked to retrieve your child if your child exhibits any of the following symptoms. This is not an all-inclusive list. We will try to keep your child comfortable but he/she will be excluded from all activities until you arrive. Parents are responsible for ensuring that their child will be picked up within one hour of contact, in the event of illness or emergency.

- Illness that prevents your child from participating in activities.
- Illness that results in greater need for care than we can provide.
- Fever (above 100°F under the arm, above 101°F in the mouth, above 102°F in the ear) accompanied by other symptoms.
- Diarrhea – stools with blood or mucus, and/or uncontrolled, unformed stools that cannot be contained in a diaper/underwear or toilet.
- Vomiting – green or bloody, and/or 2 or more times during the previous 24 hours.
- Mouth sores caused by drooling.
- Rash with fever, unless a physician has determined it is not a communicable disease.
- Pink or red conjunctiva with white or yellow eye discharge, until on antibiotics for 24 hours.
- Impetigo, until 24 hours after treatment.
- Strep throat, until 24 hours after treatment.
- Head lice, until treatment and all nits are removed.
- Scabies, until 24 hours after treatment.
- Chickenpox, until all lesions have dried and crusted.
- Pertussis (Whooping Cough), until 5 days of antibiotics.
- Hepatitis A virus, until one week after immune globulin has been administered.

Children who have been ill may return when:

- They are free of fever, vomiting and diarrhea for 24 hours.
- They have been treated with an antibiotic for 24 hours.
- They are able to participate comfortably in all usual activities.
- They are free of open, oozing skin conditions and drooling (not related to teething) unless; The child's physician signs a note stating that the child's condition is not contagious, and; The involved areas can be covered by a bandage without seepage or drainage through the bandage.
- If a child had a reportable communicable disease, a physician's note stating that the child is no longer contagious and may return to our care is required.

Allergy Prevention

Families are expected to notify us regarding children's food and environmental allergies. Families of children with diagnosed allergies are required to provide us a letter detailing the child's symptoms, reactions, treatments and care. A list of the children's allergies will be posted in the main area and kitchen. We are trained to familiarize ourselves and consult the list to avoid the potential of exposing children to substances to which they have known allergies.

Medications

All medications should be handed to a staff member with specific instructions for administration. Medications should never be left in the child's cubby or with the child to administer on their own. Our staff will ensure that the medication is recorded along with the directions and proceed to dispense the medication as directed.

- Prescription medications require a note signed by the family and a written order from the child's physician. The label on the medication meets this requirement. The medication must include your child's name, dosage, current date, frequency, and the name and phone number of the physician. All medications must be in the original container (you may request pharmacies to fill your prescription in two labeled bottles). Please specify the dosage and time(s) to be administered for each medication.
- Non-prescription medications require a note signed by the [insert family and/or physician]. Non-prescription medication should not be administered for more than a 3-day period unless a written order by the physician is received.
- Non-prescription topical ointments (e.g., diaper cream) require a note signed by the physician, specifying frequency and dosage to be administered.
- You may send sunscreen and insect repellent

Communicable Diseases

When an enrolled child or an employee of the center has a (suspected) reportable disease, it is our legal responsibility to notify the local Board of Health or Department of Public Health. We will take care to notify families about exposure so children can receive preventive treatments. Included among the reportable illnesses are the following:

- Bacterial Meningitis
- Botulism
- Chicken Pox
- Diphtheria
- Hemophilus Influenza (invasive)
- Measles (including suspect)
- Meningococcal Infection (invasive)
- Poliomyelitis (including suspect)
- Rabies (human only)
- Rubella Congenital and Non-congenital (including suspect)
- Tetanus (including suspect)
- H1N1 Virus
- Any cluster/outbreak of illness

SAFETY Clothing

Please dress your child in practical clothing that allows for freedom of movement and is appropriate for the weather. Your child will be involved in a variety of activities including: painting, outdoor play, sand, weather, and other sensory activities. Our playground is used as an extension of the center, and daily programs are conducted outside whenever weather permits.

One particular aspect of concern is the risk associated with children's clothing that may become entangled with climbing or sliding equipment that could lead to choking or other serious harm. All drawstrings from children's clothes should be removed as a precaution.

Sandals and flip-flops are not appropriate for center play and make it difficult for your child to participate in some activities.

Extreme Weather and Outdoor Play

Outdoor play will not occur if the outside temperature is greater than [99] °F or less than [37] °F degrees. Additionally, outdoor play will be canceled if the air quality rating is [50] or below.

Communal Water-Play

Communal, unsupervised water play is prohibited. Supervised children are permitted to engage in water-play. Precautions are taken to ensure that communal water-play does not spread communicable infectious disease. There will be no water play for children 2 and under due to Louisiana State Law Regulations.

Injuries

Safety is a major concern in child care and so daily safety inspections are completed inside and outside the center area in order to prevent injuries. First aid will be administered by a trained caregiver in the event that your child sustains a minor injury (e.g., scraped knee). You will receive an incident report outlining the incident and course of action taken. If the injury produces any type of swelling or needs medical attention, you will be contacted immediately. Each classroom is equipped with a first aid kit meeting the state regulations.

In the event of a serious medical emergency, the child will be taken to the hospital immediately by ambulance, while we will try to contact you or an emergency contact.

Biting

Biting is a normal stage of development that is common among infants and toddlers – and sometimes even among preschoolers. It is something that most young children will try at least once.

When biting happens, our response will be to care for and help the child who was bitten and to help the biter learn a more appropriate behavior. Our focus will not be on punishment for biting, but on effective behaviors that address the specific reason for biting.

Notes will be written to the family of the child who was bitten and the biter's family. We will work together with the families of each to keep them informed and to develop strategies for change.

Respectful Behavior

All children and families will be treated with respect and dignity. In return, we expect the same from all of our families. We will not tolerate hostile or aggressive behavior. If this occurs, we reserve the right to ask you to control your behavior or to remove your children from our care.

Sleep Practices

All infants are placed on their backs for sleeping. Written authorization from a physician is required for any other sleeping position. Written authorization from a physician is required for a child to sleep in a car seat or other similar device and shall include the amount of time that the child is allowed to remain in said device.

Care of Children

Pacifiers attached to strings or ribbons shall not be placed around the neck or attached to the clothing of a child.

Smoking

The poisons in secondhand smoke are especially harmful to infants and young children's developing bodies, therefore the indoor and outdoor center environment and vehicles used by the center are non-smoking areas at all times. The use of tobacco in any form is prohibited on the center's premises.

Prohibited Substances

The use of alcohol or illegal drugs is prohibited on the center's premises. Possession of illegal substances or unauthorized potentially toxic substances is prohibited.

Any adult who appears to be inebriated, intoxicated, or otherwise under the influence of mind-altering or polluting substances is required to leave the premises immediately.

Dangerous Weapons

A dangerous weapon is a gun, knife, razor, or any other object, which by the manner it is used or intended to be used, is capable of inflicting bodily harm. Families, children, staff or guests (other than law enforcement officers) possessing a dangerous weapon will not be permitted onto the premises.

In cases that clearly involve a gun, or any other weapon on our premises, the police will be called and the individual(s) involved will be immediately removed from the premises. This policy applies to visible or concealed weapons.

Child Custody

Without a court document, both parents/guardians have equal rights to custody. We are legally bound to respect the wishes of the parent/guardian with legal custody based on a certified copy of the most recent court order, active restraining order, or court-ordered visitation schedule. We will not accept the responsibility of deciding which parent/guardian has legal custody where there is no court documentation.

Suspected Child Abuse and Neglect

We are required by law to report all observations of suspected child abuse or neglect cases to the Louisiana Child Protection Statewide Hotline 1-855-4LA-KIDS (1-855-452-5437); if we have reasonable cause to believe or suspect a child is suffering from abuse or neglect or is in danger of abuse or neglect, no matter where the abuse might have occurred. The child protective service agency will determine appropriate action and may conduct an investigation. It then becomes the role of the agency to determine if the report is substantiated and to work with the family to ensure the child's needs are met. Our center will cooperate fully with any investigation and will maintain confidentiality concerning any report of child abuse or neglect.

Parent Involvement Board:



The program recognizes that parents have primary responsibility for the health, safety, and well-being of their children. In an effort to facilitate a parent, the program has established a Parent Involvement Board composed of parents of children enrolled in Taylormade Learning Center.

Meetings shall be open to all parents.

The Parent Involvement Board shall act only in an advisory capacity and shall not engage in the management and operation of Taylormade Learning Center. A function of the board is to provide recommendations for improving services.

Parent Involvement Board meeting shall be held quarterly.

Parental Involvement Policy:

Taylormade Learning Center shall have a parent participation program. The parent participation program shall have a plan that encourages parent participation in their child/ren's classroom.

The plan shall include but is not limited:

- Parent participation policy
- Goals and objectives
- Parent education, including ages and stages of children's development and parenting skills
- Parent communication with staff (e.g., conferences, newsletters, handbooks and community daily interaction)
- Parents will be given a resource guide at the time of enrollment.

Parents and other interested persons shall be encouraged to participate in these programs; however, participation is strictly voluntary and shall not be required as a condition of enrollment.

Parental Access Policy:

Taylormade Learning Center has an "open door policy." Parents are invited to the center anytime during normal operating hours as long as their child is enrolled.

Communication with Parents:

Staff is advised to keep communication with parents limited to progress reports and answering simple questions from parents. All communication should have a positive tone. If a staff member feels the need to say something negative about a child's behavior, they are not allowed to say it directly to the parents. It is the Director's job to confer with parents on a negative or unacceptable behavior. You must report any concerns of negative behavior to the Director, who will in turn discuss any concerns with the parent and report the outcome of the meeting to you.

EMERGENCIES Lost or Missing Child

In the unlikely event that a child becomes lost or separated from a group, all available staff will search for the child. If the child is not located within [10] minutes, the family and the police will be notified.

Fire Safety

Our center is fully equipped with fire safety items including alarms, lights and rolling cribs etc. Our fire evacuation plan is reviewed with the children and staff on a monthly basis.

Emergency Transportation

In the event your child needs to be transported due to a medical emergency, if no other authorized person can be contacted and the need for transportation is essential, an ambulance will be called for transportation. A proper escort will accompany and remain with the child until a family member or emergency contact arrives.

CENTER POLICIES

Our center policies not included in this handbook are reviewed [quarterly] and updated as needed. They are available for review upon request to the center director.

Non-Discrimination Policy:

In accordance with Federal law and U.S. Department of Agriculture policy, Taylormade Learning Center does not discriminate against any person(s) on the basis of race, color, creed, national origin, sex, handicap, ancestry or whether a child is being breastfed. Any person(s) alleging discrimination has a right to file a complaint within 180 days of the alleged discriminatory action. To file a complaint of discrimination, write immediately to:

USDA

Director, Office of Civil Rights
1400 Independence Avenue, S.W.
Washington, D.C. 20250-9410
Or call (800) 795-3272 or 720-6382 (TTY)

The complaint should contain the name, address, and telephone number of person filing complaint, the specific location and name of the entity for whom complaint is against, the nature of the incident or action that led the complainant to feel discrimination was a factor, the basis on which the complainant feels discrimination exists, and the date, names, titles, and business addresses of persons who may have knowledge of the discriminatory action.

Disclosure of Information Policy/Complaint Procedure:

Taylor-made Learning Center is licensed by the Department of Education as a “Type 3” center. The center strives at all times to uphold the highest standards as a quality early childhood program in and above accordance with licensing requirements.

As a licensed center we encourage parents to contact the Department of Education with any compliments, recommendations, questions, concerns, complaints, etc. This may be done by contacting:

Department of Education
Licensing Section
P.O. Box 4249
Baton Rouge, LA 70821-3078
(225) 342-9905
(225) 342-2498-fax

The complaint may be made by telephone or in writing should you have unresolved, significant licensing complaints.

*NOTE: This handbook is not all-inclusive, but merely a representative of what is expected.

LOUISIANA DEPARTMENT OF HEALTH, OFFICE OF PUBLIC HEALTH CHILD CARE GUIDELINES

A Message to Child Care Providers:

COVID-19 is mostly [spread through close contact and inhalation of respiratory droplets](#) released when people talk, sing, breathe, sneeze, or cough. Although less common, it is possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own eyes, nose, or mouth. To slow the spread of COVID-19 in your community and facility, your child care program should fully implement and adhere to multiple [prevention strategies](#). Most early childhood programs serve children in an age group that is not yet eligible for vaccination. Therefore, this guidance emphasizes using multiple COVID-19 prevention strategies together to protect children and adults in early childhood programs. **First and foremost, it is very important that everyone who is eligible are encouraged to get [vaccinated](#) and receive boosters.** Requirements within these guidelines are underlined and must be followed.

The LDOE has also provided suggestions, examples of checklists, options, etc. in the appendices to assist child care programs in adhering to the guidelines and to improve upon their health and safety during this public health emergency.

- ❑ NOTE: These guidelines may change depending on the [Centers for Disease Control](#) (CDC) and Office of Public Health updates.

CHECKLIST FOR OPEN CHILD CARE FACILITIES

- ❑ Staff must take [everyday precautions](#) to prevent the spread of COVID-19 such as: wear a mask (strongly recommended for facilities in a parish with a High [COVID-19 Community Level](#)), avoid close contact, avoid crowds and poorly ventilated areas, wash hands often, cover coughs and sneezes, clean and disinfect highly touched surfaces daily and monitor your health.
- ❑ Require sick children and staff to stay home. [See Appendix 1.](#)
- ❑ Plan isolation steps if a child becomes sick followed by cleaning and disinfecting processes. [See Appendix 2.](#)
- ❑ Ensure adequate ventilation. [See Appendix 3.](#)
- ❑ Mask requirements and recommendations. [See Appendix 4.](#)
- ❑ Implement social distancing strategies. [See Appendix 5.](#)
- ❑ Parent drop-off and pick-up processes and potential parent tours. [See Appendix 6.](#)
- ❑ Maintain cleaning and disinfecting efforts. [See Appendix 7.](#)
- ❑ Ensure [proper diapering techniques](#) are followed.
- ❑ Ensure proper washing, feeding, and holding of children. [See Appendix 8.](#)
- ❑ Ensure healthy hand hygiene. [See Appendix 9.](#)
- ❑ Ensure healthy food preparation and meal service. [See Appendix 10.](#)
- ❑ Address vulnerable/high risk groups. [See Appendix 11.](#)
- ❑ Report [outbreaks](#) of COVID-19 identified in children or staff to the appropriate [Regional OPH](#) and facilities.
- ❑ Comply with public health investigations.

Appendix 1: REQUIRE SICK CHILDREN AND STAFF TO STAY HOME

Persons who have a fever of 100.4°F or above, or other signs of illness must not be admitted to the facility.

- Communicate to parents the importance of keeping children home when they are sick, steps being taken to ensure the health and safety of their children, etc. See this [sample letter](#) to families. The letter to families should outline all health and safety precautions taken by your facility. Another sample can be found from [Child Care Aware of America](#).
- Include asking the parent/guardian to confirm that the child has not been on fever reducing medication in the last 24 hours and does not have a sore throat, new uncontrolled cough that causes difficulty breathing (or change to usual cough if child with chronic allergic/asthmatic cough), diarrhea, vomiting, stomachache, or new onset of severe headache, especially with a fever. Make a visual inspection of the child for signs of illness which could include flushed cheeks, rapid breathing or difficulty breathing, fatigue, rash (other than diaper rash) or extreme/unusual fussiness.
- Communicate to staff the importance of being vigilant for [symptoms](#) and staying in touch with management if or when they start to feel sick.
- Follow procedures to ensure children and staff who come to the child care provider sick or become sick while at your location are placed in isolation and sent home as soon as possible.
- All symptomatic children and staff should seek testing for COVID-19, regardless of vaccination status.
- Educate yourself, staff and parents on [Multisystem Inflammatory Syndrome in Children \(MIS-C\)](#).
 - Children, adolescents, or young adults who develop certain symptoms after having COVID-19 might have MIS-C. They should see a doctor if they had COVID-19, or have been in close contact with someone who had COVID-19, within the past 6 weeks and now have the following.
 - Ongoing fever AND one of the following:
 - Stomach pain, diarrhea, vomiting, skin rash, blood shot eyes, dizziness or lightheadedness

Appendix 2: PLAN ISOLATION STEPS IF A CHILD BECOMES SICK FOLLOWED BY CLEANING AND DISINFECTING PROCESSES

There must be an isolation plan, including a cleaning and disinfecting process, for children who become sick.

- Have an isolation room or area (such as a cot in a corner of the classroom) that can be used to isolate a sick child.
- Follow CDC guidance on how to [disinfect your building](#) if someone is sick.
- If a sick child has been isolated in your facility, clean and [disinfect](#) surfaces in your isolation room or area after the sick child has gone home.
- COVID-19 Cases
 - Follow CDC guidance for [isolation](#).
 - Individuals who are unable to mask through day 10 should isolate at home for a full 10 days. They may return early if they meet the criteria for “Removing Your Mask” in the isolation guidance.
- COVID-19 Exposures
 - Anyone with a known or suspected [exposure to COVID-19](#) should wear a well-fitting mask or respirator around others for 10 days from their last exposure, regardless of vaccination status or history of prior

infection. They should also get tested at least 5 full days after their last exposure, even if they don't develop symptoms.

- For students who are unable to mask, ECE programs should consider other prevention strategies – such as encouraging vaccination for those who are eligible, improving ventilation, increasing physical distancing between students, and testing.

Appendix 3: ENSURE ADEQUATE VENTILATION

Adequate ventilation should be ensured.

- Consider how you can bring in as much fresh air into your child care center as possible. Bringing fresh, outdoor air into your center helps keep virus particles from concentrating inside.
 - Bring in as much outdoor air as possible.
 - Ensure heating, ventilations, and air conditioning (HVAC) settings are maximizing ventilation
 - Filter and/or clean the air in your facility
 - Use exhaust fans in restrooms and kitchen
 - Open windows in transportation vehicles, when it is safe to do so
- Consider having activities, classes, or lunches outdoors when circumstances allow.

Appendix 4: MASK REQUIREMENTS AND RECOMMENDATIONS

Masking is not required statewide; however, facilities can choose to require masking for staff, families, and visitors.

Universal indoor masking is recommended for any child care site in a parish with a High [COVID-19 Community Level](#).

COVID-19 Community Levels should be checked weekly to evaluate the need for masking in your site.

- While outdoors, individuals do not need to mask.
- It is strongly recommended that any child over two years of age wear a mask.
- Transportation:
 - Buses and vans operated by public or private early childhood providers are no longer included in the federal mask requirement for transit. Early childhood providers should use COVID-19 [Community Levels](#) to determine their policy for wearing masks on buses or vans, but can continue to require universal masking regardless of Community Level.

Appendix 5: IMPLEMENT SOCIAL DISTANCING STRATEGIES

Distancing strategies should be implemented when COVID-19 Community Level is High or when there is an [outbreak](#).

- Ensure that children's naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Place children head to toe in order to further reduce the potential for viral spread. Masks should not be worn while sleeping.
- Cohorting can be used to limit the number of people who come in contact with each other.
 - Maintain static groups as much as possible to prevent quarantining additional children and staff.
 - If possible, child care classes should include the same group each day, and the same child care teacher should remain with the same group each day.

- If cafeterias or communal dining halls will be used, ensure separate “classrooms” or cohorts remain 6 feet apart while eating. Consider staggering when classrooms eat, so children can maintain their small groups.
- Consider staggering playground times for groups of children.
- Alter or halt daily group activities that may promote transmission. It is recommended that field trips and special events be halted during times of High COVID-19 Community Level.
 - Field trips are allowed but should be held outside, whenever possible. Programs can consider altering or halting field trips when COVID-19 Community Level is High.
 - Special events, performances, or holiday events (such as, but not limited to, PreK Graduation, magic shows, Zoo to You, or Soccer Shots) are allowed but should be held outside, whenever possible. Programs can consider altering or halting special events when COVID-19 Community Level is High.

Appendix 6: ADJUST PARENT DROP-OFF AND PICK-UP PROCESSES

Parent drop-off and pick-up processes may be adjusted.

Parents must be allowed in the building for full access to their children, to meet the teacher, etc. **It is strongly recommended that the parent wear a mask while inside the facility when the parish [COVID-19 Community Level](#) is High.**

A provider can have a parent drop-off and pick-up process at curbside to limit direct contact between parents and staff members. See the procedures below to screen children before the parent leaves the facility.

- Child drop off and pick up can be done curbside or in a room or foyer that does not allow the parent inside the center or does not lead the parent through the center. The parent is encouraged to wear a mask if they enter the room or foyer. Have child care providers come outside the facility to pick up the children as they arrive. The plan for curbside drop off and pick up should limit direct contact between parents and staff members and adhere to social distancing recommendations. Allow center staff to sign in and out children.
- May consider staggering arrival and drop off times for parents.

Hand hygiene stations can be set up at the entrance of the facility, so that children can clean their hands before they enter. If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol and supervise its use. Keep hand sanitizer out of the reach of children before and after use.

ADJUST POTENTIAL PARENT TOURS

Tours for potential new parents or family members can occur physically during the day. Consider implementing the following precautions:

- Only parents or family members from one household are allowed into the building at a time.
- All visiting parents or family members should wear a mask when the parish COVID-19 [Community Level](#) is high and socially distance.
- The parents or family members should not enter a classroom or area where children are present. If children are outside, the parents can enter the empty classroom for a tour.

Consider offering tours virtually or before and after center operations.

Appendix 7: MAINTAIN CLEANING AND DISINFECTING EFFORTS

- At least once a day, clean surfaces, bathrooms, and objects that are frequently touched, such as doorknobs, light switches, classroom sink handles, countertops, toilet training potties, etc.
 - In most situations, regular cleaning (at least once a day) is enough to sufficiently remove viruses that may be on surfaces. However, if certain conditions apply, you may choose to clean more frequently AND disinfect surfaces and objects if certain condition apply which may include:
 - High transmission of COVID-19 in your community.
 - The space is occupied by people at [increased risk for severe illness from COVID-19](#).
- Schedule and follow additional procedures for cleaning and disinfecting including cleaning and sanitizing toys and bedding. All cleaning materials must be kept secure and out of reach of children.
- Do not share toys with other groups of infants or toddlers, unless they are washed and sanitized before being moved from one group to another.
- Clean and sanitize toys.
 - Reduce the number of toys in classrooms.
 - Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves.
 - Children’s books, like other paper-based materials, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- Clean and disinfect bedding.
 - Keep each child’s bedding separate, and consider storing in individually labeled bins, cubbies or bags.
 - Cots and mats should be labeled for each child.
 - Bedding that touches a child’s skin should be cleaned at a minimum of weekly or before use by another child.

Appendix 8: ENSURE PROPER WASHING, FEEDING AND HOLDING OF CHILDREN

Proper washing, feeding and holding of children must be ensured.

- It is important to comfort crying, sad, and/or anxious children and they often need to be held. When washing, feeding, or holding children, teachers can protect themselves by washing their hands frequently.
- Teachers should wash their hands, neck and anywhere touched by a child’s secretions.
- Teachers should change the child’s clothes if secretions are on the child’s clothes.
- Infants, toddlers, and their teachers should have multiple changes of clothes on hand in the child care center.

Appendix 9: ENSURE HEALTHY HAND HYGIENE

- All children and staff should wash their hand with soap and water at the following times:
 - Arrival and exit of the facility and after breaks
 - Before and after preparing food or drinks
 - Before and after eating or handling food, or feeding children
 - Before and after handling infant bottles
 - Before and after administering medication or medical ointment
 - Before and after diapering
 - After using the toilet or helping a child use the bathroom
 - After coming in contact with bodily fluid
 - After handling animals or cleaning up animal waste
 - After playing outdoors or in sand
- After handling garbage, [wash hands](#) with soap and water for at least 20 seconds or use hand sanitizers with at least 60% alcohol before and after:
 - Touching your eyes, nose, or mouth
 - Touching your mask
 - Touching an item or surface that is frequently touched by other people such as door handles
- Supervise children when they use hand sanitizer to prevent ingestion.
- Assist children with handwashing, including infants who cannot wash hands alone. After assisting children with handwashing, staff should also wash their hands.

Appendix 10: ENSURE HEALTHY FOOD PREPARATION AND MEAL SERVICE

Healthy food preparation and meal service must be ensured.

- If feasible, remove or limit additional staff coming into classrooms during mealtimes.
- During outbreaks or High COVID-19 Community Level, as feasible, have children and staff eat meals outdoors or in well ventilated classrooms or while maintaining distance as much as possible.
- If meals are typically served family-style, plate each child's meal to serve it so that multiple children are not using the same serving utensils.
- Food preparation should not be done by the same staff who diaper children.
- Sinks used for food preparation should not be used for any other purposes.
- Teachers must ensure children wash hands prior to and immediately after eating.
- Teachers must wash their hands before preparing food and after helping children to eat.

Appendix 11: ADDRESS VULNERABLE AND HIGH RISK GROUPS

Vulnerable and high risk groups must be addressed.

- Based on current information, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19. To protect those at higher risk, it's important that everyone practices healthy hygiene behaviors. It is important to encourage vaccination among all eligible groups, especially those at high risk for severe illness.
- COVID-19 usually cause mild symptoms in children. However, a small but growing percentage of children have been reported to have more severe illness. See Appendix 1 for information on MIS-C. If you have children with underlying health conditions, talk to their parents about their risk for COVID-19. Follow children's care plans for underlying health conditions.
- If you have children with disabilities, talk to their parents about how their children can continue to receive the services they need.
- Employers should also understand the potential mental health strains for workers during the COVID-19 pandemic. Early childhood program administrators should educate workers on mental health awareness and share available mental health and counseling services. Employers should provide a supportive work environment for workers [coping with job stress and building resilience](#), and [managing workplace fatigue](#).

Family Handbook and Community Resource Information Acknowledgement

Please sign this acknowledgement, detach it from the handbook, and resource information return it to the center prior to enrollment.

This handbook may be updated from time-to-time, and notice will be provided as updates are implemented.

Thank you for your acknowledging the policies and procedures we have established for the safety and welfare of all children in our care. We look forward to getting to know you and your family.

I have received the Early Childhood Education Center Family Handbook, and I have reviewed the family handbook with a member of the Early Childhood Education Center staff. It is my responsibility to understand and familiarize myself the Family Handbook and to ask center management for clarification of any policy, procedure or information contained in the Early Childhood Education Center Family Handbook that I do not understand.

Recipient Signature _____ Date_____

Center Staff Signature_____ Date_____

Taylormade Learning Center**** **Parental Agreements**

Taylor**made Learning Center** agrees to provide quality childcare for _____ (Child's Name).

1. My child will not be allowed to leave Taylor**made Learning Center** without being escorted by the parents, person authorized by parents or facility personnel.
2. I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g. telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans and immunizations.
3. Taylor**made Learning Center** agrees to keep me informed of any incidents, including illness, injuries, adverse reactions to medications, exposure to communicable diseases, which include my child.
4. Taylor**made Learning Center** agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water related activities occurring in water that is more than two feet deep.
5. I received a copy of the parent handbook and agree to abide by the policies and procedures of the Taylor**made Learning Center**.

Signature of Parent/Guardian

Date

Signature

Taylor**made Learning Center** Administration

Date