**Parent Handbook Example**

**Policy was written and developed based off of Montana State Child Care Licensing Regulations. These regulations are referred to throughout the handbook. These can be noted by a number, topic and regulation. A full version of the Montana State child care licensing can be found at:** [**https://dphhs.mt.gov/qad/licensure/childcarelicensing**](https://dphhs.mt.gov/qad/licensure/childcarelicensing)

**Enrollment**

The intake process involves a visit to the child care program by the parent(s) and child to determine appropriate placement. Required forms are to be filled out and submitted PRIOR to attendance. These forms include a signed contract, emergency contact from, media release, non-ingestible medication permission form (OTC), and a copy of the child’s current immunization records. Children that attend our program must be immunized as stated by The Montana Public Health and Human Services under section 37.95.140 in Licensure of Daycare Facilities.Children will be placed in groups according to age. Age appropriate activities are planned for each group. Child to staff ratio are:

\*8:1 for two and three-year old’s

\*10:1 for four and five-year old’s

Children must be of the next age range by September 10th to be considered for the next age class. Children will spend the entire school year with their fall enrollment class. Please see transition plan for more details.

**Withdrawal**

If circumstances such as moving, change of employment, etc., make it necessary for you to withdraw your child from the child care program, a 2-week written notice is required. This will give the child care facility an opportunity to gather your child’s belongings and avoid any confusion in billing. Tuition will be expected to be paid through the end of the month. Enrollment deposits are non-refundable fees.

**Immunizations**

All students enrolled must be immunized in accordance with the Department of Health and Human Services Department of Montana prior to attendance.

***37.95.140***

***IMMUNIZATION***

***(1) Before a child may attend a Montana day care facility, that facility must be provided with the documentation required by (5) that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, varicella, hepatitis B, pneumococcal, and Haemophilus influenza type B, unless the child qualifies for conditional attendance in accordance with (7):***

**Payment**

Parents will be asked to fill out a contract with a set schedule. Children will need to be enrolled for three, four, or five days per week during the school year. In addition, there is an enrollment registration fee due at the time of enrollment. This is a non-refundable fee. The enrollment registration fee is $XXX. Tuition can be paid via cash, check, or automatic withdrawal. Payments are due on the 5th of the month. Rates are as follows:

\*3 days of attendance per week $XXX per month

\*4 days of attendance per week $XXX per month

\*5 days of attendance per week $XXX per month

It should be understood that the contract is for a slot for childcare; therefore, absences are included in the monthly payment and no credit will be given for vacations or absences. Additional days of care may be purchased for $XX per day if attendance allows. Payment for the additional day is due the day of service (subject to change). Payment rates are re-assessed every January and rate changes are implemented in August for the coming school year.

**Late Fee**

The child care program closes promptly at 5:30 pm. Please plan on picking up your child in a timely manner. A late charge of $XX will be assessed for every minute after 5:30pm. More than 3 late fees may result in a $XX penalty fee on top of these fees.

**Payment Delinquency and Collection**

A payment due is delinquent when it is more than sixty (60) calendar days behind its payment schedule. The following steps will be taken in dealing with delinquencies:

The responsible person(s) for payments shall be contacted via telephone and e-mail notifying them of the delinquency. If, after five (5) calendar days there is no response from the responsible person(s) the child care facility will turn the delinquent account over to a third-party agency for collection. Once an account is 60 days past due services may be terminated.

We do accept the Best Beginnings Scholarship. If a family is receiving this assistance, they are responsible for the remaining balance that is not covered by the scholarship, as well as, their monthly co-pay (payment delinquency and collection still apply).

**Discipline and Guidance Principles**

Relationships are the most important component to any learning. When children are securely attached, and feel like they are heard, appreciated and understood, they thrive. In order to address these underlying principles, teachers use a certain set of skills, strategies, and techniques that are based in the latest research into child brain development.

Within our Program you will see and hear the following strategies:

LEVELING is literally the process of getting down to the child’s level.

ACKNOWLEDGING feelings helps the child to learn to identify what feelings are—the first step to learning how to control them and to begin to experience empathy for others. “You look very happy about that!”

BOUNDARIES are the process of setting clear limits for the child. Limits and boundaries increase feelings of safety. Boundaries are positively stated and expressed as clear rules such as “Hands are not for hitting.”

CHOICES offer the child the opportunity to practice problem solving and to feel empowered. Choices also give children acceptable alternatives to undesirable behavior. “You may choose to sit on the rug or you may choose to sit on the bean bag. Which do you choose?”

DISCUSSION helps further explore the dynamics of a situation, once a calmer emotional state has been achieved. It gives the child an opportunity to begin to process what happened. Discussions can occur during classroom meetings or with children individually. “I know it makes you feel really sad when she doesn’t want to play with you.”

ENCOURAGEMENT Once the child has made a choice, acknowledging that choice encourages the skills to be used again. Encouragement leads to repetition and practice, and confidence which lead to self-regulation. “You know just what you want to do!”

*Conflict Resolution Policy (for children)*

Teaching staff will assist children in resolving conflicts by helping them identify feelings, describe problems, and try alternative solutions. The guidance philosophy, policies, and techniques of the child care facility are consistent with the Montana licensing standards. Physical hitting or hurting of a child by another child is not permitted. Sitting a child in a corner is not permitted. Time out is not the preferred method of child guidance at our facility. Instead, redirection and setting limits is mandated to prevent and discourage such behavior.

**37.95.606 DISCIPLINE (1) Caregivers shall use appropriate forms of discipline. Physical punishment, including spanking or other forms of corporal punishment, is strictly prohibited in day care facilities. Discipline shall include positive guidance, redirection and the setting of clear limits that foster the child's ability to become self-disciplined. (2) Any punishment or discipline which is humiliating, shaming, frightening, or otherwise damaging is strictly prohibited. (3) Parental or guardian permission does not allow for the use of any punishments listed in (1) or (2) above. (4) The provider is responsible for ensuring that each caregiver participates in an in-service training session regarding discipline and guidance techniques appropriate for children.**

**Disciplinary Issues as a Cause for Termination of Enrollment**

We will make every effort to meet the needs of individual children and to provide a happy, safe environment for all children. When behaviors exist, which do not respond to the positive behavioral management techniques of the child care facility, the teacher will meet with the parent and together they will develop additional techniques in an effort to help the child to respond appropriately.

In the event that the teacher and the parent together are unable to resolve the inappropriate behaviors exhibited by the child, the child care facility will notify the parent that we will seek professional assistance through outside resources. This may include having a behavior specialist observe the child and develop a behavior modification program. If, after these attempts have been made to meet the child’s individual needs, the child demonstrates inability to benefit from the type of care offered, or whose presence is detrimental to the group, the child care center will notify the parent of the intent to discharge the child from the program. When it is determined that it is in the best interests of the child to terminate enrollment, the child’s and parent's’ needs shall be considered and the facility will assist the parents to plan for alternate care.

**Days and Hours**

Sunshine Child Care will be open from 7:30 am to 5:30 pm, Monday through Friday. Please be courteous and pick your child up before 5:30 pm. \*see late pickup policy below

**Yearly Calendar**

Yearly calendars are given to families prior to child enrollment. The yearly calendar is subject to change. Notifications of change will be sent to parents 30 days prior to a date change.

**Holidays**

To review the dates that the child care facility will be closed, please view our calendar. These dates are subject to change, please check each month for updates. Because our tuition is based on the whole calendar year, months with holidays are not prorated.

**Drop-in Care**

Sunshine Child Care DOES NOT have a separate drop-in program.

**Arrival and Departure**

For the child’s safety, state law requires that parents or a designated adult accompany their children into and out of the child care facility. Please sign your child in and out using the sign in/out clipboard. Please fill out time in/out along with your signature. Anyone under the age of 18 MAY NOT sign another student out. Be sure to check in with a staff member. During pickup, make sure that a staff member knows when your child is leaving. Children and parents should wash hands upon arrival into the child care facility. Parents should check their child’s “cubby” and “mailbox” for artwork, notes from the teacher, etc. No child will be allowed to leave the facility with anyone other than a parent unless the parent has notified a staff member ahead of time, or they are on the authorized pickup list. Persons picking up must be 18 or older with a valid ID.

**Communication and Conferences**

Important messages and announcements are posted in your child's classroom or relayed through email. Please check your email for weekly wrap ups from the director and teacher. Communication between parents and staff is always encouraged. There are several types of communication available. Daily oral communication with parents is encouraged. Written reports will be given upon request. All classrooms use a communication app called Brightwheel, and there is a private Facebook page. You may also call the facility at any time during our hours of 7:30 am to 5:30 pm. If the phone is busy or we are not available, please leave a message. The answering machine messages are answered as soon as possible. Email is the preferred method of communication for your child’s lead teacher. Email to the Director is always welcomed.

Twice yearly there will be parent teacher conferences held with your child’s teacher. (indicated on yearly calendar) These conferences will go over student assessments and portfolio progression. An online sign up will be sent to parents to sign up for conferences. Parents may additionally arrange a conference with the Director or staff to discuss their child’s progress, behavior, and interests at any other time. Additionally, weekly/monthly lessons will be posted for parents to view.

**Transition plan**

Children will age up to the next age group at the start of the school year at the beginning of September. Children MUST be the next age range on or before September 10th.

\*\*\* Exceptions may be considered if the student’s birthday falls a day or two after cutoff date. This will be evaluated by the director and the child previous teacher.

Although unlikely, mid-year transitions can take place. This may only come from teacher and director recommendation to move student. In the case a student is moved to a different classroom mid-year, a child care transition plan will be filled out and discussed with parent/guardian and teachers. If applicable student may visit new classroom up to five times before a full transition is completed. This is to ensure a smooth transition for student and teacher.

If a student is transitioning to kindergarten, a kindergarten screening will be completed in the spring and given and reviewed with parents during parent-teacher conferences. Students beginning kindergarten in the fall are welcome to stay for the summer program.

Classrooms

3-4 year old room (purple)

4-5 year old room (Red)

4-5 year old room (Blue)

Open house will take place the day before school starts, for a two-hour time period. Families are encouraged to visit their student’s classroom, drop off school supplies, finalize paperwork, meet the teachers, and ask questions.

**Curriculum and Assessment**

Sunshine Child Care follows a curriculum that is based off of the *Montana Early Learning Standards*. Curriculum starts at our preschool age of 3 years old, flowing up through our pre-kindergarten (Pre-K) to line up with kindergarten curriculum and standards. Our curriculum covers a wide range of social and

emotional skill development, math and science exploration of topics, as well as social studies and art experiences.

Each child will also build their individual portfolio that showcases their work and growth throughout the school year. Each portfolio includes photos of students doing activities throughout the school year, as well as, a collection of their individual work. Each portfolio also includes a formative assessment tool that each teacher uses. The focused observations help to assess the strengths and the areas of growth of the children in their classrooms. Teachers use this knowledge to direct their lessons and support the growth of each individual child.

To view the Montana Early Learning standards, which our curriculum is based from, please visit: <https://opi.mt.gov/Portals/182/Page%20Files/Early%20Childhood/Docs/14EarlyLearningStandards.pdf>

**Outdoor Play**

Children shall play outdoors daily when weather and air quality conditions do not pose a significant health risk. Weather that poses a significant health risk shall include: 1. temperatures at or below 10 degrees Fahrenheit, including wind chill, students will be outside 10 minutes or less, if at all, depending on teacher’s judgement of weather. Temperatures between 11-20 degrees Fahrenheit; children may only stay outside for a length of 15 minutes or less. 2.Temperatures 90 degrees Fahrenheit or higher students will be outside 10 minutes or less, if at all, depending on teacher’s judgement of weather. Temperatures between 80-89 degrees Fahrenheit; children may only stay outside for a length of 15 minutes or less. 3. Hazardous weather conditions such as poor air quality, hail storms, lightning storms, etc. Air quality conditions that pose a significant health risk shall be identified by announcements from local health authorities and can be found at http://svc.mt.gov/deq/todaysair/. Such air quality conditions shall require that children remain indoors. Children with respiratory health problems, such as asthma, shall not play outdoors when local health authorities announce that the air quality is approaching unhealthy levels. In the event that children are unable to engage in outdoor play, appropriate gross motor activities will be substituted inside the classroom or gymnasium.

**Field Trips and Transportation**

Field trips are an important part of our program. Parents are informed of trips in advance and are encouraged to participate. We will walk or ride the city bus. Parents must have a signed permission slip in order for the child to participate. Children under four-years-old will participate only in walking field trips at locations a reasonable distance from the facility.

***37.95.132 TRANSPORTATION***

***(5) Children under four years of age may not be transported in a vehicle which does not provide age appropriate safety restraints or in a vehicle which cannot accommodate a car seat or a booster seat in a manner that conforms with National Highway Transportation Safety Administration recommendations.***

**Emergency Transportation**

If emergency relocation of staff and children is required, normal safety rules will be followed, as much as possible, but that the highest priority is to relocate to a safe location.

\*please review relocation transportation agreement form

**Medication Administration**

***Purpose:*** *This policy has been created to encourage communication about student’s health needs between all participating parties.*

***Intent:*** *Children’s health is our upmost priority, to ensure that all students are getting the best care it is a team effort. This is why we have created our medication policy and requirements. We want to be sure that there is no confusion in the process of providing children with proper medication. The parent, student and required staff will be trained and educated on particular student’s medication needs. A recorded record will also be on file, as well as the appropriate disposal of used medication.*

*No over-the-counter medications will be given to the children. Prescription drugs are not dispensed by our staff, except in the case of life saving medications such as an Epi-pen or asthma inhaler. A sunscreen permission slip must be filled out by each parent. Please visit with the Director regarding specific allergies or needs your child may have. Other forms or instructions may need to be filled out prior to attendance.*

*Procedure and practices, including responsible person(s)*

*\*Medication Consent: responsible staff and child’s parent will sign a consent form if the use of an Epi-pen or asthma inhaler is required for student’s health and safety.*

*\*Medication will be provided by parent or guardian in the original, child-resistant container that is labeled by a pharmacist with the student’s name and the strength of the medication.*

*\*The date of prescription will be filled*

*\*The name of the health care provider will be provided*

*\*The medication expiration date will be visible*

*\*Administration, storage, and disposal instructions will also be provided and kept in students personal file.*

*\*Instructions for the use of Epi-pen or inhaler will be provided by the parent with the addition of a providers note.*

*\*a dose, time, and how medication is given will be provided and signed by all responsible parties*

*\*A health care provider must state that a certain medication may be given for a recurring problem, emergency situation, or chronic condition. The instructions should come with the child’s name. The instructions should also include potential side effects.*

*\*A child may only receive medication with the permission of the child’s parent or legal guardian.*

*Procedure for administration:*

*1. Wash hands before preparing medication*

*2. Responsible and trained teacher will follow the checklist before administration:*

*a. Right child*

*b. Right medication*

*c. Right time*

*d. Right dosage*

*e. Right documentation*

*3. Prepare medication on a clean surface away from toileting areas or other unsanitary areas.*

*4. Medication will be provided to student in a safe, comfortable environment in the center*

*5. Wash hands after administering*

*6. Child will be observed for any side effects and documentation will go in student’s medication authorization form*

*7. If a medical emergency occurs, 911 will be contacted as well as child’s parents/guardians. It will be documented in student file.*

*8. In the case of an epi-pen emergency 911 will automatically be contact for the safety of the child. Student’s parents/guardians will also be contacted.*

*In the case of an asthma inhaler or epi-pen, they are to be kept in a lock box located in the director’s office.*

*Staff documentation:*

*\*Any staff administering medication to children will be trained by parents or health care provider. Staff will keep a record of training in their staff file.*

*\*Staff giving medications will document time, date, dosage and process of medication in a file set up particularly for that child.*

*\*Staff will report and document any observed side effects on the child’s individual medication form.*

*\*If medication is not given, staff will give a written explanation of why medication was not provided to student.*

*Any medication no longer being used will be promptly given to parents/guardians to discard. The center does not discard of old medications and does not take responsibility in the disposal of old medications. A written notice will be given to parents, signed by responsible teachers, director, and parent that medication was given back to parent/guardian. A copy of the form will be kept in student file.*

*Sunscreen administration*

*Sunscreen is required for students in temperatures of 55 and above. Although sunscreen is encouraged for students all year round. During the warmest months of the year teachers will request sunscreen be brought in by parent for afternoon application. Sunscreen may also be re-applied before certain field trips for the safety of the children. Parents are responsible for sunscreen application at or before morning drop off.*

*Due to allergies, students who do not have sunscreen at school, with their name on it, will not receive afternoon application. Please provide your students teacher with individual sunscreen.*

*Teachers will apply afternoon sunscreen with permission that was granted on the Over the Counter (OTC) form signed by parents during enrollment.*

**Nutrition and Health Policy**

Sunshine Child Care participates in the Montana Office of Public Instruction (OPI) food program. Meals and snacks are planned to meet the nutritional guidelines established by the United States Department of Agriculture (USDA). If a child in our care has a severe nut allergy (or other severe food allergy), we reserve the right to restrict nuts and nut products from being brought into the program.

Children are required to wash their hands upon arrival into the classroom. The handwashing procedure is:

1. Prepare clean disposable paper towel

2. Turn on warm water

3. Moisten hands with water and apply liquid soap to hands

4. Rub hands together vigorously until soapy lather appears, continue for at least 10 seconds

5. Rinse hands under running water

6. Dry hands with disposable paper towel

7. Turn off water (with disposable paper towel)

**Nap Policy**

 Children will be put down for naps approximately between 12:00-12:15 pm. Soothing music will be played and backs will be rubbed (if the child wishes to have this done). It is an expectation that the child lays down on his/her cot and is quiet. After 30 minutes if the child is not asleep, he or she will be allowed to play quietly on his/her cot or at a table. The rest of the children may get up as they waken, or continue to sleep until 1:30 PM. All children will be awake by 2:15 PM unless there are extenuating circumstances. If a parent wishes their child not fall asleep, he/she can discuss this with the child's teacher or the director.

**Safe Sleep Policy**

All childcare providers will follow safe sleep recommendations for infants to reduce the risk of Sudden Infant Death Syndrome (SIDS), Sudden Unexpected Infant Death (SUID), and the spread of contagious diseases:

1. Infants will always be put to sleep on their backs.
2. Infants will be placed on a firm mattress, with a fitted crib sheet, in a crib that meets the Consumer Product Safety Commission safety standards.
3. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, positioning devices or extra bedding will be in the crib or draped over the side of the crib.
4. Sleeping areas will be ventilated and at a temperature that is comfortable for a lightly clothed adult. Infants will not be dressed in more than one extra layer than an adult.
5. If additional warmth is needed, a one-piece blanket sleeper or sleep sack may be used.
6. The infant’s head will remain uncovered for sleep. Bibs and hoods will be removed.
7. Sleeping infants will be actively observed by sight and sound.
8. Infants will not be allowed to sleep on a couch, chair cushion, bed, pillow, or in a car seat, swing or bouncy chair. If an infant falls asleep anyplace other than a crib, the infant will be moved to a crib right away.
9. An infant who arrives asleep in a car seat will be moved to a crib.
10. Infants will not share cribs, and cribs will be spaced 3 feet apart.
11. Infants may be offered a pacifier for sleep, if provided by the parent.
12. Pacifiers will not be attached by a string to the infant’s clothing and will not be reinserted if they fall out after the infant is asleep.
13. When able to roll back and forth from back to front, the infant will be put to sleep on his back and allowed to assume a preferred sleep position.
14. In the rare case of a medical condition requiring a sleep position other than on the back, the parent must provide a signed waiver from the infant’s physician.
15. Our child care program is a smoke-free environment.
16. Our child care program supports breastfeeding.
17. Awake infants will have supervised “Tummy Time”.
18. At 12 months of age, children will be moved to a nap mat if consent form is signed by the parent.

**Illness Policy**

A child showing signs of illness will not be allowed to attend the program. Should a child show signs of illness, the parent will be called to pick up the child. When parents cannot be reached, persons listed on the emergency contact form will be contacted. A temperature of 101 degrees F, body rashes, red eyes with discharge, vomiting or diarrhea are all considered symptoms of illness. Children need to be free of the above symptoms, fever free (without the use of fever reducing medication), and/or taking prescription antibiotics (if applicable) for at least 24 hours prior to returning to school. In the case of a rash, a Dr.’s note is required for any visible rash stating that the child is not contagious.

***37.95.139***

***(1) The parents of each child admitted to the day care facility shall provide the name of the physician or health care facility the parent wishes to have called in case of an emergency.***

***(2) If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for arranging to have the child taken home.***

***(3) The director, owner, manager, or person in charge of the day care facility must designate a staff member to check daily the health status of each child immediately upon that child's entry into the day care facility, and to exclude any child showing symptoms of illness, under the following guidelines:***

***(a) Children must be without fever of 101F or greater for 24 hours before they return to the day care facility, except that children with immunization-related fevers need not be excluded if they are able to participate in the routine of the day care facility;***

***(b) Children must be without vomiting and diarrhea for 24 hours before they return to the day care facility. Vomiting includes two or more episodes in the previous 24 hours. Diarrhea is defined as an increased number of stools, increased water in the stool, and/or decreased form to the stool that cannot be contained by a diaper or clothing;***

***(c) Children with any of the bacterial infections listed below must be treated with antibiotics for 24 hours before they return to the day care center:***

***(i) strep throat;***

***(ii) scarlet fever;***

***(iii) impetigo;***

***(iv) bacterial conjunctivitis (pinkeye); and***

***(v) skin infections such as draining burn or infected wounds or hangnails;***

***(d) Generalized rashes, including those covering multiple parts of the body, must be evaluated by a health care provider to determine their cause before the child can return to the day care facility;***

***(e) Children with chickenpox may not be admitted to the day care facility until their sores dry up, which usually takes five to seven days. Day care providers must not purposefully expose susceptible children to chickenpox, even with the permission of the susceptible child's parents;***

***(f) Children who are jaundiced must be excluded until a health care provider evaluates the cause and authorizes the child to return to the day care facility;***

***(g) Children with symptoms of severe illness, such as uncontrolled coughing, breathing difficulty or wheezing, stiff neck, irritability, poor food or fluid intake, or a seizure, must be evaluated by a health care provider before they may return to the day care facility;***

***(h) A child need not be excluded for a discharge from the nose which is not accompanied by a fever.***

***(4) If a child develops symptoms of illness while at the day care facility and after the parent or guardian has left, the day care facility must do the following:***

***(a) isolate the child immediately from other children in a room or area segregated for that purpose;***

***(b) contact and inform the parent or guardian as soon as possible about the illness and request the parent or guardian to pick up the child;***

***(c) report each case of suspected communicable disease the same day by telephone to the local health authority, or as soon as possible thereafter if no contact can be made the same day.***

***(5) When a child is absent, the day care provider shall obtain the reasons so the interest of the other children may be properly protected. If a reportable communicable disease is suspected, the provider shall inform a health officer. No child shall be readmitted after an absence until the reason for the absence is known and there is assurance that the child's return will not harm that child or the other children. Disease charts that identify the reportable diseases are available from the department.***

***(6) The day care facility may readmit a child excluded for illness whenever, in its discretion:***

***(a) the child either shows no symptoms of illness;***

***(b) the child has been free of fever, vomiting, or diarrhea for 24 hours; or***

***(c) the child has been on antibiotics for at least 24 hours for bacterial infections.***

***(7) The parent or guardian may also provide the day care facility with a signed certification of health from a licensed physician, except that the following restrictions must be followed:***

***(a) If a child is excluded for shigellosis or salmonella, the child may not be readmitted until the child has no diarrhea or fever, the child's parent or guardian produces documentation that two stools, taken at least 24 hours apart, are negative for shigellosis or salmonella, and the local health authority has given written approval for the child to be readmitted to the day care facility;***

***(b) If a child is excluded for hepatitis A virus infection, the child shall remain excluded until either one week after onset of illness or jaundice, if the symptoms are mild, or until immune globulin has been administered to appropriate children and staff in the day care facility as directed by the local health authority.***

***(8) The facility must have a plan for preventing and responding to emergencies due to food and allergic reactions.***

If there is a case of head lice found in the facility:

\* Every student and staff will be checked upon arrival every morning for at least a week for knits and lice.

\* All blankets, clothes and other cubby items must go home immediately to be washed by parents, bringing back a clean set the next day

\* Staff will take dress up clothes and other soft wearable items to be washed, as well as, cleaning all surfaces, toys and carpets

\*There will be a formal notice to all parents with a request that parents also check daily until the facility has been cleared.

\* If your child is infected, parents must pick up immediately and not returned until student and home surfaces are completely cleared. Any soft surface in your home or vehicle will need to be treated. (If you do not treat all surfaces the lice will keep coming back) Your student must be completely cleared with no signs of the bug or knit for an additional 24 hours before returning to school.

\*Upon return to school a teacher or director/other administrator must clear the child to stay. If any bugs or knits are found, your child will not be allowed to stay. All staff have been trained to look for lice.

**First Aid Emergency**

In the event of a medical emergency situation, all staff has been certified in First Aid and CPR and would administer aid to the child according to what would be appropriate. For example, 911 or Poison Control would be called. In less dire situations, our staff would try and contact one of the child’s parents/guardians first. If the parent/guardian was unavailable, the director would attempt to contact the other emergency contact people listed on the child’s emergency contact sheet. When the child suffers a bump or scrape that is not an emergency, it is our policy to send home a report describing what happened to the child, along with what care was administered. Parents must sign this report and give it back to a teacher or director, a copy can be requested and given to parent.

**Personal Items**

Each child will need at least one change of clothes in case of accidents. Tennis shoes should be worn for the playground and field trips. During the summer months, sunscreen and water bottles are required. Please make sure that all items that come into the facility are labeled with the child’s name. We ask that you send your child with appropriate outdoor clothing, especially on colder days and field trip days. Outdoor clothing should also be labeled with the child’s name. Nap items include: blanket, pillow, snuggle item, and pillowcase for all items to go into. Please label all items with your child’s name. All nap items need to be taken home weekly to be washed.

**Open Door Policy**

Parent participation is always welcome and appreciated at any time during operating hours. We encourage parents to share their culture, language, customs, or job-related skills if they wish to do so.

**Birthdays**

Birthdays will be celebrated during afternoon snack time. If you wish to send treats, please let your child's teacher know prior. Parents are always welcome to join us in the classroom for the celebration.

**Media Screen Time**

Since the American Academy of Pediatrics states that children under the age of two should not be allowed to view television, any children under 2 will not be allowed to have any media screen time. In addition, media screen time is limited for children 2 years and older to no more than 30 minutes total, once a week, with only 15 minutes at a time per day. No media screen time will be allowed during meals/snacks. All media activities will be educational and or active. The only exception to the length of media screen time will be a “movie day” (ages 3-5) with parental knowledge.

**Media Release**

A media release form is requested before the child’s start date to allow teachers to post photos on the private Facebook page and around the facility. If you have restrictions or a no media requirement, a written statement is requested to keep in the child’s file. Teachers will be notified to ensure that the child does not get public photos taken. Photos of children may still be used for private portfolio only.

**Breastfeeding**

We support and encourage the breastfeeding mother’s decision to continue to breastfeed her child. In keeping with this philosophy, our program will:

● Provide a welcoming atmosphere that encourages mothers to initiate and continue breastfeeding or express milk with a private space available.

● Store, label, and serve breast milk appropriately.

● Show sensitivity to breastfeeding mothers and their babies.

**Mandatory Reporting of Child Abuse or Neglect**

The director and any staff member of our facility who has reason to suspect that any child is or has been abused or neglected, is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect.

**Non-Discriminatory Policy**

It is the policy of Sunshine Child Care not to discriminate in program services on the basis of race, color, sex, religion, national origin, or handicapping conditions.

“In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.” To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9710 or call 202-720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

*Revised 08/01/2019*