

UNIVERSITY OF NEVADA, RENO
CHILD & FAMILY RESEARCH CENTER

Parent Handbook

May 2016

Sarah Fleischmann Building

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Reno, NV 89557
Phone 775-784-6762
Fax 775-784-4241

William Raggio Building

WRB Room 2028
Reno, NV 89557
775-784-4533 (K)
775-784-4534 (Pre-K)

Comstock Center

2420 Comstock Drive
Reno, NV 89512
775-784-8026

Nelson Center

401 West 2nd Street
Reno, NV 89503
775-327-5100

Sage Street Center

870 Sage Street
Reno, NV 89512
775-333-5127

NEIS EHS Center

2667 Enterprise Rd.
Reno, NV 89512
775-348-9585

Employer Identification Number: 88-6000024

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CFRC Overview

Creating connections with
Families through
Relationships, respect and
Continuity

Purpose and Philosophy

The fundamental purpose of the University of Nevada, Reno Child and Family Research Center (CFRC) is to provide a learning laboratory that supports the education and training of students in the Department of Human Development and Family Studies and other units on campus. The CFRC is a research site for investigations that focus on particular aspects of infancy, toddlerhood, preschool or family development. The CFRC serves the early childhood community as a model for early care and education best practice in northern Nevada.

Vision

It is the vision of the Child and Family Research Center that all children and families in our community have access to high quality early childhood services.

Mission

It is the mission of the Child and Family Research Center, both in partnership with others and through direct services to provide education and training of university students, facilitate research and offer high quality, comprehensive early childhood services and support to our community. The center will be recognized as a model for excellent programs and practices that result in success for children, families and staff.

Goals

Goals for Children

- To develop positive and nurturing relationships with adults and peers;
- To develop a sense of trust and security;
- To identify and solve problems;
- To express thoughts and feelings;
- To think critically;
- To respect the feelings and rights of others;
- To use creativity and imagination;
- To work independently and with others; and
- To develop literacy, numeracy, reasoning, and decision-making skills to form a foundation for school success.

Goals for Parents

- To feel good about their role as parents and about their children;
- To gain insight into the behavior of young children in general and their child in particular; and

- To provide an atmosphere of caring, acceptance, and support so parents and the program work as partners in the children's education.

Goals for University Students

- To gain practical experience, as well as professional skills for working with young children and their families;
- To learn about developmentally appropriate practice in group settings for children; and
- To become more familiar with tools, procedures, and purposes of observation and assessment.

Goals for the Community

- To provide an environment for academic learning, observation, and developmental research.

Programs

Infant/Toddler Program

Infant/toddler care is provided at the Sarah Fleischmann Building, the Comstock, Sage Street, NEIS and Nelson sites. The infant/toddler program emphasizes the importance of positive relationships in the development of very young children. The bonds children establish during the first years of life provide the basis for all learning. Group care that supports the child's attachment to a special caregiver and groups of children over time promotes the child's healthy growth and development. Primary caregivers are consistent, following a group of children from birth to age three. This continuity helps very young children develop a sense of security in their world.

Parents are viewed as the primary source of affection and care, while caregivers also provide a warm nurturing environment that promotes individual development.

Routines for eating, sleeping, and activity are the foundation of the daily curriculum for children under the age of three. These routine tasks are important opportunities to help children learn about their world and to regulate their own behaviors. The routines also provide opportunities for caregivers to build close relationships with each child and are viewed as vital learning experiences. Routines are carried out in a way that respects each child's developmental level as well as the diversity of the child and his family.

Preschool Programs

Preschool programs are offered at the Sarah Fleischmann Building and WRB sites. Preschool curriculum encourages children to be actively involved in the learning process. Children's emerging interests are incorporated into daily activities with planned and spontaneous opportunities for learning. Teachers plan activities for children to:

- Manipulate a wide variety of materials;
- Play alone and with others in sensory, constructive; movement, creative and symbolic activities;
- Develop concepts about themselves and their world;
- Be physically active; and

- Express their ideas in words, art, and music.

As children develop greater understanding and skills, teachers increase the complexity and challenge of activities.

Children are encouraged to learn appropriate interactions with others and to develop a positive self-concept, intellectual curiosity, and enthusiasm for learning.

Each child is allowed to develop his/her own degree of independence through choices in the environment. Offering a child a choice provides the child with a sense of control over his/her environment. This enables the teacher to act as a guide for learning.

Field trips may occasionally be a part of our experiential learning. Please check parent bulletin boards and newsletters to keep informed of dates and times of field trips. Parents are encouraged to participate in field trips.

Children less than 60 pounds are required to ride in car seats when being transported to and from field trips. Parents will be asked to bring in car seats on field trip days.

Integrated Preschool Classrooms

In conjunction with the Washoe County School District (WCSD), children between three and five-years-old who have special needs are integrated in the three and four-year-old classrooms at the Sarah Fleischmann Building.

WCSD provides an Early Childhood Special Education teacher and two classroom aides who work directly with the children.

This inclusive program enriches the preschool experience for all the children involved. Children have opportunities to see and accept individual differences in others. It also benefits practicum students in special education, child development and early childhood education.

WCSD also provides transportation and related services as appropriate for children enrolled in this program.

Mixed-Age Preschool Classroom

A mixed-age preschool program for three, four and five-year-olds is offered at the WRB site.

Mixed age grouping places children who are at least a year apart in age in the same classroom. Mixed-age grouping resembles family and neighborhood groupings, which throughout human history have informally provided much of children's socialization and education.

Many young children now spend relatively little time in either large family or neighborhood settings and consequently have limited experience with the kind of learning made possible by inter-age contact. Research indicates that social development can be enhanced by experiences available in mixed-age grouping. Leadership and pro-social behaviors have been observed to increase and intellectual development stimulated in mixed-age groups.

The mixed-age preschool program offers the same program of activities and support of self-concept as the regular preschool program. It also serves as a model for the community and enriches the preschool experience for the child.

Kindergarten/First Grade Program

The WRB site offers a full day kindergarten and first grade program, licensed by the state of Nevada. Kindergarten is for children who are five-years-old by September 30. Children must attend full days in order to receive a kindergarten completion certificate (required for first grade entry in Nevada).

Children in first grade must be six years old by September 30th.

The kindergarten and first grade curriculum is designed to meet the Washoe County standards in language arts, mathematics, and science.

CFRC Staff

All CFRC Staff and volunteers working over 15 hours per week are required to pass a background check, complete the CFRC orientation, and submit proof of a negative test for tuberculosis prior to employment. All staff are also required to meet the Nevada State Child Care Licensing training requirements within 90 days which include but are not limited to: CPR and First Aid, Child Abuse and Neglect, Signs and Symptoms of Illness, SIDS Prevention, Guidance and Discipline, and Wellness. For a complete list of required training, please consult your child's teacher or the site supervisor.

The CFRC provides training to staff during *Professional Development Days*. There are six days scheduled throughout the year. The centers are closed so all staff can attend. For a list of closure days, please check the website or consult with your child's teacher. Reminders will be posted prior to closures

Hours of Operation

All CFRC sites are open Monday through Friday from 7:30 am to 5:30 pm. Parents are welcome to visit or observe anytime during regular business hours.

Holidays and Center Closures

CFRC sites are closed on all federal and state holidays per the University calendar. These are paid holidays (i.e., there is no reduction in fees due to closure). When the holiday falls on a Saturday, the preceding Friday is the observed legal holiday. If the holiday falls on a Sunday, the following Monday is the observed legal holiday.

January 1	New Year's Day
Third Monday in January	Martin Luther King, Jr. Day
Third Monday in February	President's Day
Last Monday in May	Memorial Day
July 4	Independence Day
First Monday in September	Labor Day
Last Friday in October	Nevada Day
November 11	Veteran's Day

Fourth Thursday in November
Fourth Friday in November
December 25

Thanksgiving Day
Family Day
Christmas Day

In addition, the center is closed the week of July 4th, one week in December and for up to six professional development training days throughout the year. Notice of these closures will be posted at each site.

Child Care Licensing

All CFRC locations maintain current childcare licensing requirements. All locations (except for Sage Street) are licensed by the State of Nevada, Bureau of Services for Child Care (www.dcf.state.nv.us/DCFS_ChildCare.htm). Sage Street is licensed by Washoe County Department of Social Services (www.co.washoe.nv.us/socsv/socsv_child_childcare.html). Copies of the appropriate child care regulations are located at each site. Child care licensing reports are maintained at each site.

Accreditation

The Child and Family Research Center is accredited by the National Academy of Early Childhood Programs. The Academy is a division of the National Association for the Education of Young Children, the nation's largest organization of early childhood educators.

Quality Rating Improvement System

The Child and Family Research Center participates in the Quality Rating Improvement System (QRIS) administered by the State of Nevada. QRIS is a systemic approach to assess, improve, and communicate the level of quality in early and school-age care and education programs.

Eligibility

SFB and WRB Sites

In order to be placed on the waiting list or to enroll children at the SFB and WRB sites, parents must meet one of the following criteria:

- Be a UNR undergraduate or graduate student pursuing a degree and enrolled in at least six credits each semester;
- Be a UNR classified staff member working at least .50 F.T.E.; or
- Be a UNR faculty member (academic, administrative, or temporary) working at least .50 F.T.E.

If there are vacancies in classrooms that cannot be filled with UNR affiliated families, those enrollment opportunities may be offered to other families in the NSHE or from the larger community.

Early Head Start (Comstock, Sage Street, NEIS and Nelson)

Early Head Start eligibility rules apply. In addition to income requirements, to qualify for the center-based program parents must be working or in school and have no other caregiver in the home.

An Employment/Training Verification form must be completed four times each year in January, April, July, and October to document the working and/or school requirement is being met. Parents who no longer qualify for center-based Early Head Start services may elect to enroll in the home-based program option. Parents who do not turn in verification information upon request will be dropped from the center-based program option and offered home-based services as space allows.

Registration Fee, Tuition and Payment Policy

Families at the SFB and WRB sites will be charged an annual registration fee. This fee will be used to cover administrative and staff support expenses.

Tuition fees are based on gross family income. Families will be required to provide proof of income (last year's tax return or current payroll stub) at enrollment. Families who are unable or unwilling to provide proof of income will be charged at the highest rate.

Any change of enrollment, including termination, requires a two week written notice. Published rates are for standard schedules only; a 20% weekly surcharge will apply to nonstandard schedules. Families with two or more enrolled children will be eligible for a 10% fee reduction to the oldest child's tuition. No tuition adjustments are made for absences, regardless of the reason.

Families who are eligible (faculty and staff) will pay tuition through payroll deduction. For families not eligible for payroll deduct, payment for the upcoming month is due within 72 hours of the first business day of the month. If payment is not received, an email reminder will be sent and a \$25.00 fee assessed to the late payee's account. If full payment is not received within 5 business days of the first working day of the month, a two week notice will be issued by the Child & Family Research Center and the child care slot will be offered to the next family on the list, the past due account will be sent to collection. A \$40.00 fee will be charged for returned checks. Students whose payments fall behind will be subject to a hold placed on their student records. University services, including registration for classes, receiving transcripts or receiving financial aid may be denied until balance is paid in full. A written statement of individual account balances will be emailed to the family at the beginning of each month.

Late Policy

Parents who pick up their children after 5:30 pm will be charged \$25.00 for the first 15 minutes (until 5:45 pm). After 5:45 pm, the late fee is \$5.00 per minute.

If there has been no contact with the parent by 5:30 pm, staff will attempt to contact parents and listed emergency contacts.

If a parent or emergency contact has not responded by 6:00 pm, staff will contact Child Protective Services or Reno Police Department. Staff will remain with the child until the child leaves the center.

Custodial Parent Policy

Parents have the responsibility for authorizing who is allowed to drop off, pick up, or visit their child at the center. This information is gathered at enrollment and is used regularly by classroom staff to verify that children are only released to authorized adults. In order to maintain positive relationships with parents and to assure the safety of children and staff, center personnel will not become involved in custody disputes. Legal documentation of custodial agreements must be on file at the CFRC in order to amend any information provided at enrollment.

Research and Observation

The Center is a research and practicum site serving UNR faculty, staff, students and alumni. All research projects to be carried out in the center will be cleared first through UNR's Institutional Review Board and the center Research Committee. If your child is a potential subject to be included in a research project you will be fully informed in advance of the purpose and procedures involved in the planned study, and your written consent will be obtained before the study begins. You may choose to keep your child from participating in any study without consequences to you or your child's participation at the Center. Children also have the right of refusal.

From time to time you will encounter students observing or completing assignments at the Center (in addition to student employees working at the Center). Students in the classroom are always under the visual supervision of one of our staff members. All visitors to the Center, including observers, must check in with an office representative before being allowed access to the classrooms.

Children's Records

Licensing regulations require the following items to be completed and on file before a child can attend the CFRC:

- Application or Enrollment Form
- Certified Washoe County Health Department immunization record for child care
- Health statement with physician's signature
- Authorization for Pick-up form
- Emergency Contact form
- Consent form for emergency medical care, field trips, and research activity
- Birth certificates (K-1 Program) or Birth Confirmation (EHS program)

Well Child Physical Examinations (Early Head Start)

Early Head Start must work with parents to ensure that children are up-to-date on "well child" physical examinations in order to prevent problems and to ensure that any needed treatments are provided. The Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program of Medicaid recommends that children receive physical examinations at the ages of 1, 2, 4, 6, 9, 12, 18, 24, and 30 months and 3, 4, and 5 years. EHS will send reminders regarding these examinations and a form will be included for the medical provider to use at

the time of the examination. Health care providers may use this form or provide a copy of their own form. Parents are asked to provide results from any physical examinations to Early Head Start. Parents also are asked to complete a *Consent to Release Medical Information* form to allow EHS to obtain records directly from medical providers. Parents must inform EHS of any changes in medical provider or insurance.

Child Care Arrangements

Any arrangement for child care that does not take place at the center is strictly a private arrangement between the parents and the individual staff member. Parents and staff should understand that such arrangements are not within the course and scope of the staff member's job duties and that staff members are free to accept or reject such requests from parents.

Procedures for Complaints

CFRC staff members foster positive relationships by being proactive with parents. Families can provide constructive suggestions for quality improvement through the CFRC Parent Advisory Board, EHS Policy Council and/or individual parent conferences. The CFRC director and management staff are responsible for taking action to resolve complaints about the program.

The procedures for addressing concerns and resolving complaints are as follows:

- If a complaint or concern is related to the conduct of a specific employee that matter must first be referred to the employee's supervisor. If the direct supervisor is not available, the CFRC Director may be contacted.
- If a complaint or concern is related to program policy or procedures the matter should be directed to the CFRC Director.
- Complaints or concerns need to be made in writing and signed. Anonymous concerns or complaints will not be addressed.

The follow-up process to respond to all community inquiries is as follows:

- All inquiries will be reviewed by the CFRC management team at weekly meetings;
- A written report from the CFRC Director regarding the inquiry will be completed;

The report will be presented at the next regularly scheduled Parent Advisory Board or Policy Council meeting as appropriate, unless a special meeting is called to address the inquiry. Copies of the report will be forwarded the Dean of the College of Education.

The CFRC Director will report the management decision to all involved parties.

Civil Rights Complaints

In accordance with federal law CFRC is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. Staff members are trained in and abide by UNR affirmative action policies and procedures.

The CFRC participates in the U.S. Department of Agriculture (USDA) Child and Adult Care Food Program. The USDA and the State of Nevada respond to concerns and complaints involving all USDA programs and activities. Anyone wishing to file a complaint may do so by

writing a letter, submitting a form or providing verbal notice to the sponsor, USDA, or State of Nevada in person or by telephone.

Confidentiality

The privacy of the children and families at the CFRC is respected at all times. Children and families are not to be discussed with anyone except in supervisory situations. Family information is safeguarded while in use and filed in locked file cabinets when not in use. Family contact information is kept in a location that is accessible to staff, yet secure enough to maintain confidentiality of the information. University students may be given access to information in children's files in certain situations. Parents may have access to their own child's file at any time.

The following categories of individuals may have access to individual information about children, including screening and assessment results:

Teachers have access to children's files to:

1. Dialogue with parents about development;
2. Establish learning goals with parents;
3. Plan curriculum;
4. Develop the learning environment;
5. Determine if additional evaluation is required to any developmental areas; and
6. Adapt teaching methods.

Administrators have access to children's files to:

1. Determine program effectiveness;
2. Determine school readiness;
3. Assist teaching staff and families in accessing further evaluation services;
4. Assist staff through reflective supervision as to individual teaching methods; and
5. Reflect on how teaching impacts learning.

Students have access to children's files to:

1. Learn about development;
2. Complete assignments; and
3. Conduct research.

Program Reviewers (licensing representatives, accreditation verifiers, Head Start reviewers) have access to children's files to:

1. Verify records are current;
2. Verify presence of required documents; and
3. Ensure compliance with regulations.

The Role of Parents and Families

Communication

Communication with parents is essential to quality child care. Communication between staff and parents is carried out on a regular basis throughout the program year. Communication with parents is conducted in the parents' home language to the extent feasible. A variety of methods are utilized to share information with families including but not limited to:

- Daily activity reports for infants and toddlers (serves as a record of meals, naps, diaper changes, and other activities during the day);
- Bulletin and white boards;
- Parent files;
- Newsletters;
- Home visits;
- Parent-teacher conferences;
- Parent meetings;
- Play groups;
- Email bulletins and other correspondence
- Policy Council; and
- Parent Advisory Board.

Parent Involvement

Parent involvement at the center is an important component of the program. Parents have the right to observe in their child's classroom at any time. Parents and teachers work together as facilitators of learning and as models for children. Parents' involvement in their child's school program is crucial for the success of the program and the child.

Families are encouraged to participate in and contribute to the success of their child and the CFRC by:

1. Serving on the Parent Advisory Board or Policy Council to provide input for policies and curriculum development;
2. Donating approved materials to the school;
3. Volunteering in the classroom or the center;
 - a. Working with children
 - b. Participating in workdays - clean up, painting, and maintenance of the center
 - c. Assisting on field trips
 - d. Housekeeping - classroom and kitchen cleanup
 - e. Participation in fundraiser events
4. Working on things at home for the school - repair books, cut out for art projects, making flannel stories, sewing;
5. Completing surveys geared toward program improvement;
6. Providing information about their child(ren) informally through written and verbal communication with teachers and formally by attending parent/teacher conferences;

7. Informing staff of concerns or asking questions about child development, curriculum, classroom management, or issues concerning their individual child(ren) or family circumstances; and/or
8. Attending parent meetings and trainings.

Parents who volunteer must complete a Volunteer Time sheet to document their efforts.

Parent Advisory Board

The Parent Advisory Board consists of parent representatives from SFB and WRB classrooms. The board meets monthly to discuss policies, address concerns, help plan family events and coordinate the Teacher Appreciation luncheon. Contact the Office Manager for meeting times and locations.

Policy Council (Early Head Start)

The Policy Council (PC) is an important way for parents to become involved in the Early Head Start program. The PC is a form of shared governance through which parents can participate in policy making or other program decisions. Parent representatives are elected every fall and as vacancies occur. Elections take place at parent meetings. The Policy Council meets monthly and all parents are welcome to attend. Please contact the Enrollment and Reporting Coordinator for more information.

Special Events

The CFRC sponsors several program-wide special events throughout the year to facilitate parent and staff interaction, and to help build home and school relationships. Special events may include the Fall and Spring picnics and the Family Feast at Thanksgiving.

Celebration of Holidays

CFRC staff understands and value holidays that reflect the cultural diversity represented in the classrooms. Parents are encouraged to propose the observance of holidays that reflect their family background and values. The goals for appropriate classroom holiday observances are to validate children's experiences, make holiday activities fun and enjoyable, and promote connections among children and families. Talk with your child teacher about any planned celebrations.

Arrival and Departure

Arrival

Parents are encouraged to have children arrive at the center by 9:00 am.

Parents must:

- Accompany children into the classroom. All non-enrolled children must remain with their parent to maintain ratios and group sizes;
- Wash hands;
- Sign children in on the attendance sheet;
- Fill out the daily record for infants and toddlers;
- Make sure a teacher is aware of each child's arrival;

- Inform staff of any special information regarding the child including illness, loss of sleep, appetite, injuries, etc. that could affect a child's disposition;
- Ensure child washes hands upon entering classroom; and
- Have applied sunscreen to the child, if needed.

Siblings or other children must not be left unsupervised in vehicles.

Separation

Parents are encouraged to have a good-bye ritual that will help children learn to trust the parent will return. Staff will comfort and reassure children; encourage children to talk about feelings; play out themes of separation and reunion; and provide parents with evidence, such as photographs, that their child is being cared for and is enjoying the activities at the center. Staff are available to work with parents to plan developmentally appropriate coping strategies for use at home and at the center.

Departures and Authorization for Pick Up

Staff will only release children from the center to authorized persons whose names appear on the enrollment form, the emergency contact form, on a written note from the parent, or with direct verbal authorization from the parent. Please make sure that your emergency contact information is current.

Staff are required to request identification from any unfamiliar person before the child will be released. Anyone who does not provide identification will be turned away.

The CFRC policy of releasing children to authorized persons is applied as a daily routine, as well as during emergency or evacuation situations.

Parking

Loading zones are available for drop off and pick up only. Permits are required to use the loading zone at the SFB and WRB centers and may be obtained from the CFRC Office Manager in SFB. No permits are necessary at Nelson, Comstock, NEIS or Sage Street. Children under age 7 must never be left unattended in vehicles in the loading zones.

Attendance

Parents should notify teachers each day their child will not be at school. Regular attendance is required in EHS classrooms to maintain program eligibility. If a child attends less than 75% of open days for the program year, or if a child attends less than 50% of the time that the center is open, a plan will be developed with the family to bring attendance rate up to meet program requirements. If families continue to fall below attendance guidelines, their child will be dropped from the center-based program.

Kindergarten-First Grade Attendance

School attendance for kindergarten and first grade is essential to students' academic success and personal growth. In order to meet or exceed the state and district academic standards and develop self-discipline, responsibility and punctuality, students must regularly attend

school and participate in the daily education program. Attendance is a shared responsibility and concern for students, parents/guardians and CFRC staff.

Children must be in attendance at least ninety percent (90%) of the school days in order to earn a kindergarten or first grade completion certificate.

Absences will be excused for:

- Illness
- Doctor or dentist appointments
- Medical treatment
- Religious observances
- Bereavement
- Pre-arranged family business

Children in the Kindergarten-First grade class *must* arrive by 9:15 a.m. Like absences, tardiness may adversely affect the learning process and should be avoided. The teacher will record absences and tardiness each day. Parents will receive an attendance report each semester or more frequently should conditions warrant. Parents agree to attend conferences relating to attendance when requested by the teacher, supervisor, or CFRC Director.

Children's Clothing

Each child will have a labeled space for belongings. Parents should leave two or three extra changes of clothing for infants or toddlers. Preschoolers should have at least one change of clothing. Children's clothing will be changed if they become soiled from, playing, eating, art activities, or toileting accidents. Extra clothing should be changed seasonally, or as the child grows. All clothing must be labeled with the child's name.

Children's Personal Belongings

Things brought from home may occasionally disappear, get broken or become soiled. Parents are discouraged from bringing toys or other belongings to school. If a special toy or blanket is brought from home for nap time parents must take the item home weekly for laundering.

Early Head Start Family Services

Home Visits

Home visits are valuable in building relationships with parents and in developing a broader understanding of each child. EHS actively encourages parents to participate in two home visits each year. Home visits provide opportunities for:

- Making connections;
- Developing positive relationships;
- Identifying learning opportunities in the home environment; and
- Focusing individualized attention on family strengths, interests and goals.

Home visits are scheduled in the fall and spring. Appointments are made at times that are mutually convenient for parents and staff.

Environmental Screening Questionnaire

The Environmental Screening Questionnaire (ESQ) utilized by Early Head Start offers parents opportunities and support for growth by helping families identify their own strengths, needs

and interests in order to create realistic goals and objectives. The ESQ is completed at least twice each year and the information is used to develop the Family Partnership Agreement. Sensitivity to family privacy is important, and parents have the right to choose how much personal information is shared.

Family Partnership Agreement

As part of the ongoing partnership with families, Early Head Start offers parents opportunities to develop and implement individualized Family Partnership Agreements that describe family and school readiness goals, responsibilities, timetables, strategies to achieve the goals, and track progress toward the goals. Families who have preexisting plans with other agencies (Nevada Early Intervention Services, housing, TANF, etc.) are asked to share this information when developing the EHS Family Partnership agreement.

Family Coach

The Family Coach is available to answer questions regarding guidance and discipline or provide limited one-on-one counseling. If a family wishes to meet with the Family Coach they can ask their child's teacher or home visitor.

Community Resource Referrals

In order to support families, the Child and Family Research Center maintains a current list of community agencies that provide health, mental health, assessment, educational and crisis intervention services (food, housing, clothing, etc.). Families are encouraged to talk to their classroom teachers at any time if interested in obtaining referrals to community agencies.

Job Openings

Vacant positions are listed on the University of Nevada, Reno Human Resources web-site. Current and former Early Head Start parents receive preference for employment vacancies for which they are qualified.

Volunteering in the Center

All parents are encouraged to volunteer at the center. In addition to working directly with the children, there are many other activities available for volunteers. If you are interested in volunteering, please contact your child's teacher.

In order to maintain high standards of care:

1. All volunteers must be 14 years of age or older. Volunteers under the age of 18 must present written permission to volunteer from parent or guardian along with other volunteer requirements.
2. Volunteers must complete the NSHE Volunteer Packet.
3. Regular volunteers who are present more than 15 hours per week must get a TB test.
4. All volunteers must complete time sheets.
5. Volunteers will never be left alone with children.

Volunteers must abide by the Volunteer Code of Conduct and agree:

1. To respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion or disability;

2. To follow program confidentiality policies concerning information about children, families and other staff members. Confidentiality is mandatory. Employees and volunteers are expected to maintain a professional attitude and observe the ethics of working in a University learning environment. The privacy of the children and families is to be respected at all times. Children and families are not to be discussed with anyone except in supervisory situations;
3. That no child will be left alone or unsupervised while under a volunteer's care;
4. To use positive methods of child guidance, never engaging in corporal punishment, emotional or physical abuse, or humiliation, or employing methods of discipline that involve isolation, the use of food as punishment or reward, or the denial of basic needs.

Children with Special Needs

The IEP or IFSP Process

CFRC teachers are available to participate in the development of a child's IEP or IFSP at the request of parents. Parents of children with disabilities should be involved in the process as much as they want to be and as much as they can be. The following are some ways in which parents can become involved:

1. Before attending an IEP or IFSP meeting, make a list of things you want your child to learn. Take notes about aspects of your child's behavior that could interfere with the learning process. Describe the methods you have found to be successful in dealing with these behaviors.
2. Bring any information the school may not already have to the IEP or IFSP meeting. Examples include copies of medical records, past school records, or test or evaluation results. Remember, reports do not say all there is to say about a child. You can add real-life examples to demonstrate your child's ability in certain areas.
3. Find out what related services are being provided, and ask each professional to describe the kind of service he or she will be providing and what improvement you might expect to see as a result of these services.
4. Ask what you can do at home to support the program. Many skills your child learns at school can also be used at home. Ask to meet with the teacher when your child is learning a new skill that could be practiced at home.
5. Discuss methods for handling discipline problems that you know are effective with your child.
6. Regard your child's education as a cooperative effort. If at any point you and the school cannot reach an agreement over your child's educational and developmental needs, ask to have another meeting. This will allow time for you and the school to gather more information. If there is still a conflict over your child's program after a second meeting, ask for a state mediator or a due process hearing.

Classroom Policies & Procedures

Curriculum

The Child and Family Research Center at UNR is inspired in much of its practice by the world-renowned schools of Reggio Emilia, Italy. What distinguishes this approach is the emphasis on children's learning in the context of a project-oriented curriculum. Collaboration at multiple levels is emphasized in this unique approach to the care and education of young children.

The projects that make up the curriculum are ones that generate a sufficient amount of interest and uncertainty to provoke children's creative thinking and problem-solving and are open to different avenues of exploration. Projects begin with teachers observing and questioning children about the topic of interest. Based on children's responses, teachers introduce materials, questions, and opportunities that provoke children to further explore the topic. While some of these teacher provocations are anticipated, projects often move in unanticipated directions as a result of problems children identify. Thus, curriculum planning and implementation revolve around open-ended and often long-term projects that are based on the reciprocal nature of teacher-directed and child-initiated activity.

As children proceed in an investigation, generating and testing their hypotheses, they are encouraged to depict their understanding through many symbolic languages, including drawing, sculpture, dramatic play, and writing. They work together on the resolution of problems that arise toward the collective aim of better understanding the topic. The Reggio Emilia approach is well grounded in contemporary research and theory, which results in developmentally appropriate experiences for the young children of the Child and Family Research Center.

Individual routines for eating, sleeping, arrivals, departures, and diapering are the foundation of the daily curriculum for children under the age of three. These routine tasks are important opportunities to help children learn about their world and to regulate their own behavior. Feeding, diapering and napping routines along with play activities provide opportunities for teachers and parents to build close relationships with each child, enhancing self-esteem, and security. These routines are viewed as vital learning experiences. Daily activities are carried out in a way that respects each child's individual developmental level, cultural practices and interests. During routines, children feel a sense of security and learn basic developmental skills in all areas of their development, including cognitive, language, social, emotional, gross and fine motor and adaptive self-help skills. Care and interactions that are sensitive to each child's temperament and are consistent with their needs and interests characterize the program.

Children of all ages have daily opportunities for outdoor play when weather, air quality, and environmental safety conditions do not pose a health risk.

Staffing, Ratios, and Group Size

CFRC Teachers are state classified Child Care Workers. Additional classroom support is provided by paid university student workers. (Student workers can be identified by their red aprons.) Teachers and student workers must meet all child care licensing regulations regarding background checks and ongoing training. All staff are required to be trained in

CPR and first aid, in addition to child development and early education. In addition to these staff, students completing an internship, enrolled in practicum courses or other courses requiring a volunteer component may be present in the classroom. Volunteers and students not employed by the center are never left alone with children.

Three concepts are utilized in determining staffing patterns in the center:

- Primary care giving
- Small groups
- Continuity of care

Child-to-staff ratios are 4:1 for infants and Early Head Start classrooms; 5:1 for toddlers; 6:1 for two-year-olds, 9:1 for preschoolers; and 11:1 for Kindergarten. Ratios are maintained inside as well as outside.

CFRC classroom group sizes are 8-10 for infants and toddlers; 12 for two-year-olds, 18 for preschoolers; and 22 for kindergarten. EHS group size is never more than 8 children.

It is important to understand that student workers often replace the classified child care workers when they are on sick or annual leave. Please introduce yourself and your child to an unfamiliar student worker who may be substituting in the classroom.

Children visiting with their parents are the responsibility of their parents. Visiting parents must remain with their children in order to maintain appropriate group sizes and ratios.

Continuity of Care and Primary Caregiving

Continuity of care is the practice of keeping children with the same teachers for more than one year. The Child and Family Research Center utilizes a continuity of care model for all children. Infants and toddlers remain with the same teachers for up to three years and preschool age children remain with the same teacher for two years. Continuity of care promotes trusting relationships between children and their teachers. Most children and teachers move to new classrooms each year which provides consistency for the children while at the same time providing new and stimulating environments that promote learning. In addition to continuity of care, the CFRC also practices primary caregiving in infant/toddler classrooms. Primary caregiving is the concept of assigning a small group of children to one teacher to form long lasting relationships with parents and children as well as conducting screens, assessments, parent/teacher conferences and EHS home visits.

Guidance and Discipline

Positive and guiding communication is the primary method of helping children develop a sense of independence, confidence and competence in their own abilities to get along with peers and adults. The behaviors of children shall be addressed with positive reinforcement for appropriate behavior, redirection, modifying classroom environment and/or daily schedule, providing a supervised quiet time for the child to gain control and/or reminders of classroom rules. Classroom staff shall observe all children and document these observations to help ascertain any patterns or precipitating factors of problem behaviors. Teachers will never use shaming, the withholding of food, or physical punishment of any kind to discipline children.

Addressing Challenging Behaviors

When a child exhibits a problem behavior on a continual basis that is not resolved through appropriate behavior management strategies, the teachers will meet with supervisors and/or the center director to document the problem behavior and ask for further guidance.

If the behavior problem is still not resolved, the teacher will request a meeting with the child's parents to discuss the problem behavior. The center staff and parents will collaborate on the development of strategies to resolve the problem behavior. During this process, the teacher will keep the center director and child's parents informed of progress in resolving the behavior problem. Teachers will provide information to the parents in written form with copies kept in the child's file. If a child's behavior results in an injury to another child or staff member, the child's parents will be notified as soon as possible and written documentation of the incident will be provided to the parents and placed in the child's file.

If the center staff feel they need further assistance in resolving the behavior problem, the program may, with parental permission request the assistance of an outside consultant. If the center staff feel the problem may be a result of a special need, the program may, with parental permission refer the child for evaluation. If parental permission is refused and the problem behavior continues, the continued enrollment of the child will be reconsidered as described below.

If the results of an outside evaluation suggest the need for accommodations for special needs, the program will provide these or other appropriate accommodations as long as they are not an undue hardship to the program as outlined in the Americans with Disabilities Act (ADA).

If all of the above steps fail to resolve the behavior problem, the program may ask the parents to obtain care for the child at another center. The program will provide the parents with four weeks' notice, except where such notice is not reasonable because of safety concerns, and will try to assist parents in obtaining alternative care.

Written documentation of all of the above steps will be provided to the parents and placed in the child's file.

Outdoor Play

Children of all ages will have daily opportunities for outdoor play (when weather, air quality and environmental safety conditions do not pose a health risk.) Outdoor play for infants may include riding in a carriage or stroller; however, infants shall be offered opportunities for gross motor play outdoors, as well. Parents are responsible for providing appropriate clothing for each season. When outdoor opportunities for large motor activities are not possible because of conditions, teachers will provide similar activities inside.

Children who are well enough to be at school are considered well enough to participate in outdoor activities, unless a child has a chronic medical condition that might preclude participation. (For example, a child with asthma may not be allowed outside when the air quality would affect their health.)

Napping

A safe, restful environment for napping is provided by using individual cots or cribs, dimming lights and playing soft music. All children are encouraged to rest even though some may not sleep. Children are allowed to comfort themselves with finger, thumb, pacifier, or a special soft toy or blanket. If parents provide a child's special blanket for use at naptime, the parent is responsible for laundering that item regularly. Blankets or toys with sentimental value are discouraged, for occasionally items are lost or damaged. Children are not allowed to nap with a bottle, as this practice can contribute to ear infections and dental problems. Parents of preschool children are required to purchase a licensing approved nap mat.

When possible, staff will try to put infants and toddlers down for naps following the napping procedures used at home. Toddlers generally nap between 12:30 and 3:30, but individual schedules vary. Arrivals during naptime are very disruptive to the children, may make your child's transition to the classroom more difficult and should be avoided if at all possible.

Classroom Meetings

Each classroom or pod (two classrooms with the same age cohort) are required to have a meeting for parents once in the fall semester and once in the spring semester. The purpose of classroom meetings is to provide parents with information about child development issues, address parent concerns, have guest speakers to address topics of interest (nutrition, health, literacy), and discuss classroom schedules and curriculum. Parents will be notified by the classroom teachers of the date, time and location of the classroom meetings.

Animals in the Classroom

Animals may be kept in the classroom to provide children learning opportunities.

1. All pets shall be cared for as recommended by the regulatory health agency (Nevada State Health).
2. If a child with known allergies to animals is enrolled, animals may not be kept in the same classroom as the child.

Reptiles, cats, dogs, ferrets, turtles, birds of the parrot family are not allowed as pets in any classroom. These types of animals may visit for brief periods of time as part of the curriculum and will be closely supervised. Visiting animals must be current on all appropriate immunizations.

Wild, dangerous or exotic animals are not allowed in any CFRC classroom.

Field Trips

Daily outings, such as walks in the community are a routine part of the curriculum. Teachers will post notes to parents at appropriate locations any time the children are not in the classroom or on their regular assigned playground.

Parents sign a consent for field trips with their annual enrollment packet.

1. All transportation provided will include use of age-appropriate seat restraints;
2. Drivers must have valid drivers' licenses in their possession; and
3. Staff members may not provide transportation for children in their personal vehicles.

Infant Classroom Health & Safety Practices

Shoes

When entering the infant rooms, adults are asked to remove or cover their street shoes. Removing shoes decreases the amount of dirt and debris that is tracked in and helps prevent injury should an adult step on a child's fingers or toes.

Bathing

Children are not routinely bathed at the center; however children who have been involved in extremely messy play or who have soiled themselves outside the diaper area may be bathed. A mild liquid soap formulated for babies will be used unless parents have instructed staff otherwise. Soiled clothing will be wrapped in a plastic bag and placed in the child's cubby for laundering at home.

Reducing the risk of SIDS: Safe Sleep Policies

In order to reduce the risk of Sudden Infant Death Syndrome, the Child and Family Research Center has adopted the following policies as recommended by Healthy Child Care America:

1. All healthy babies will be placed on their backs to sleep. Babies will always be placed on their back to sleep, but when they are able to turn over; they will be allowed to sleep in their preferred position.
2. A doctor's note will be required if babies need to sleep in a position other than their backs.
3. Babies will be placed to sleep on safety approved cribs and firm mattresses.
4. Cribs will be free of toys, stuffed animals, blankets, and extra bedding.
5. When babies are put to sleep, a sleep sack may be used to improve baby's comfort.
6. One baby will be placed to sleep per crib at any one time.
7. The room will be kept at a temperature comfortable for a lightly clothed adult.
8. Staff will visually check on sleeping babies often.
9. Smoking will not be allowed around babies as smoking in a room where babies' sleep is linked to an increased risk of SIDS.
10. Supervised tummy time will be given to awake babies to help strengthen muscles.

Toilet Learning

A child will show readiness for independent toileting in three ways: physical, cognitive, and emotional. A **physically** ready child is able to stay dry for two or more hours during the day, wake up dry from naps, and may wake up dry in the morning. **Cognitive** readiness is shown when children want to watch people using the toilet, want to flush the toilet and ask questions about it. The signs of **emotional** readiness include asking to be changed when wet, pretending to use the toilet, and asking to use it. The presence of all three readiness signals indicates the most opportune time for learning toilet independence. This critical period usually emerges between ages two and four.

When the signs are all present, staff will make it convenient for the child to use the toilet and provide help as needed. Potty chairs are not used in the center. Parents will be asked to support toilet learning by dressing the child in loose fitting clothing that the child and teacher can easily remove. Use of diapers and pull-ups is not recommended during this time. Teachers are available and helpful but do not hover or push children to toilet independently. Teachers will not force a child to remain on the toilet or punish a child for wetting or soiling clothing.

Transitions

The Child and Family Research Center staff understands that transitions can be difficult for young children. Therefore, transitions are carefully planned for children and families.

Groups moving from one classroom to another at the SFB and WRB sites generally transition in the summer. A parent meeting is held in the spring to provide information, answer questions and address concerns about transitions.

Early Head Start Transitions

Early Head Start serves children to age three. A Transition Plan form is completed when children are 30 months old. Children may remain in EHS following their third birthday for additional months until a transition can be made into Head Start or another program.

Children who are eligible to receive Early Childhood Special Education Services from the school district are expected to transition to those services when eligible at age three. Special arrangements may be made for children to attend Child Find and Early Head Start concurrently with the approval of enrollment staff and site supervisor.

Children in two-year-old classrooms transition out by the end of the program year (July 31). Remaining children will move to their new classrooms during the first week of August when the new program year starts.

Screening

The screening process identifies children who may need to be referred for more formal assessments in vision, hearing, mental health services, special education, or other related services. Screening information along with assessment information and family and staff concerns are utilized to determine referrals for further evaluation. The Ages and Stages Questionnaires (ASQ and ASQ-SE) are used to screen all children. Parents are asked to complete ASQs at regular intervals.

Assessment

Assessment information is used to identify children's interests and needs, describe children's developmental progress and learning, improve curriculum, adapt teaching practices and the environment, plan program improvement, and communicate with families. The Teaching Strategies Gold (TSG) tool is a comprehensive assessment/evaluation system for children birth through kindergarten. The TSG assessment is conducted in the natural setting of the classroom as part of the daily routines.

Administrators utilize assessment data to:

- Determine program effectiveness;
- Determine school readiness;
- Assist teaching staff and families in accessing further evaluative services;
- Assist staff through reflective supervision as to individual teaching methods; and
- Reflect on how teaching impacts learning.

Assessment results are shared formally with families through parent/teacher conferences that occur 3 times each year. The teachers and parents will develop individualized goals for children based on assessment results and parent input. These goals will guide the curriculum that is developed for each child. Conferences can be scheduled at other times during the year at the request of either the family or staff. Conferences are scheduled at a time mutually convenient to family and staff.

Families are provided with information about the choice, use, scoring and interpretation of screening and assessment methods through parent representatives from the Parent Advisory Board and Policy Council. For additional information about screening and assessment instruments parents may contact their child's teacher(s).

Family involvement in the planning and implementation of child assessment is critical to the success of the process. Families are encouraged to participate in and contribute to the success of their child and the CFRC by:

- Joining the Parent Advisory Board and/or Policy Council;
- Volunteering in the classroom;
- Completing surveys geared toward program improvement;
- Providing information about their child(ren) informally through written and verbal communication with teachers and formally by attending parent/teacher conferences;
- Informing staff of concerns or asking questions about child development, curriculum, classroom management, or issues concerning their individual child(ren) or family circumstances; and/or
- Attending parent meetings.

Referrals

Parents who have concerns about a child's development may meet with the teacher, supervisor or disabilities coordinator. Screening or assessment results may raise concerns about a child's development and indicate that your child may need further evaluation. If there is a need for further evaluation, program staff will meet with parents to discuss possible referrals to Nevada Early Intervention Services (birth to 3), Child Find (3 to 5-year olds), or other services as appropriate.

Health, Safety & Nutrition

Hand Washing

Hand washing is the most effective way to reduce disease and the spread of germs; and the importance of frequent hand washing by adults and children cannot be over emphasized.

Children's hygiene habits will be encouraged and guided by teachers while at the center. Children's hands and faces will be washed as needed.

Parents and children are required to wash their hands when arriving in the classroom. Hand washing procedures are posted in each classroom.

Cleaning and Sanitizing

Staff protect themselves and the children by conducting good cleaning and sanitizing procedures on a routine basis. These procedures of infection control are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection. Household chlorine bleach mixed with water according to the health department recommendations is the sanitation agent used in all CFRC classrooms to help reduce disease and the spread of germs.

Immunizations

State law requires that children must be up-to-date on immunizations in order to attend child care. Should a child become past due for immunizations, the child will be excluded from care until proof of immunizations has been provided to the CFRC.

1. If immunizations are not given because of parents' religious beliefs, a waiver signed by the parent shall be on file.
2. If vaccine preventable disease to which children are susceptible occurs in a facility, unimmunized children shall be excluded for the duration of the exposure or until the age-appropriate immunizations have been completed.

Inclusion and Exclusion of Sick Children

Short-term exclusion of children with many mild infectious diseases is likely to have only a minor impact on the incidence of infection among other children in the group. Caregivers and parents may have different opinions on how a child's illness impacts other children in the center. The CFRC determines exclusion based on the needs and behavior of the ill child and the ability of the staff to meet those needs without compromising the care of the other children in the group.

Children without fever who have mild symptoms associated with the common cold, sore throat, croup, bronchitis, rhinitis (runny nose), or otitis media (ear infection) shall not be denied admission to child care, sent home from child care, or separated from other children in the center. There is no evidence that the incidence of most acute diseases of the respiratory tract can be reduced among children in child care by any intervention other than routine sanitation and hygiene.

If a child becomes ill at school, parents will be required to pick up their child within one hour of notification. CFRC staff may ask parents to consult with the child's health care provider and bring a note from the health care provider upon return to care. CFRC staff will exclude a child or send the child home as soon as possible if one or more of the following conditions exist:

- The child's illness prevents the child from participating comfortably in routine activities.
- The illness results in a greater need for care than the staff can provide without compromising the needs or health and safety of the other children in the group.
- Fever, accompanied by behavior changes or other signs or symptoms of illness, until medical professional evaluation finds the child able to be included at the center;

A child with symptoms and signs of possible severe illness will be provided care separately from the other children until the parent arrives to take the child home.

Medication Administration

Should a child require medication (either prescribed or over the counter), parents should check with the child's physician to see if a dosing schedule can be arranged that does not involve the hours that the child is in the center. Over the counter (OTC) medications include topical creams, lotions, sprays, ointments, decongestants, fever reducers, cough syrup, and diaper ointment. If medication must be administered during the day parents may come to administer the medication.

If any prescription or oral over-the counter medication is administered at school, the following forms must be on file:

- a. A current prescription specifying medications and dosages (the label on a prescription medication *is* the prescription) or a note from the doctor for OTC medications. The doctor decides the length of time for which the OTC authorization is valid. A new authorization is not required each time an OTC medication is given.
- b. A Form for Administering Medication with written information completed by the parent. The parent will complete the Form for Administering Medication each time the child needs medication dispensed while at school. The parent will clearly write the hours and dosage of all medications.

Topical OTC creams or ointments that do not need a prescription may be administered with parent permission and a current Form for Administering Medication with written information completed by the parent.

Parents are responsible for providing all prescription and OTC medications.

Teachers administering medication will record administration information (time, dosage, etc.), and any changes in a child's behavior on the form. Teachers administering medication are trained by the Health Consultant.

Sunscreen

Children need to be protected from the sun by using a sunscreen with UVB and UVA ray protection of SPF-15 or higher.

Parents will:

- Apply sunscreen every morning, prior to arriving at school,

- Label any hats or other sun protective clothing provided for use at the center,
- Complete a *Sunscreen Permission* slip allowing staff to apply sunscreen, and
- Provide sunscreen for staff to apply to their child while at school. In the event the sunscreen is not provided, staff will use center sunscreen for the day and will request that parents provide sunscreen.

Staff will make every effort to protect children from sunburn by:

- Using hats and other protective clothing as provided by parents, especially between the hours of 10:00 am and 2:00 p.m., and
- Using sunscreen as directed; i.e., if the manufacturer's instructions state that the product is for children 6 months and older, staff will not apply the product on a five-month-old, even with parent permission.

In the event of an allergic reaction (rash, etc.) staff will discontinue the use of sunscreen and notify the parent. A prescription from a health care provider will be required to continue the use of sunscreen at this point.

Health Consultant

A Health Consultant is available to guide policy and answer health related questions. The Health Consultant does not provide direct medical care, but can act as a resource for obtaining information about particular medical conditions or answer questions about common childhood ailments. Parents who wish to speak to the Health Consultant contact their child's teacher.

Child Abuse Reporting

All center employees are mandated reporters and are required by law to report suspected child abuse or neglect to an agency that provides child protective services (CPS) or to a law enforcement agency.

Tobacco, Alcohol and Drugs

Smoking is not allowed in or near any CFRC building, in any CFRC vehicle, or within sight of the children at any of the sites. The use of tobacco, drugs or alcohol is prohibited at all CFRC sites.

Child Nutrition

Mealtime Supervision and Socialization

Group meals are not just times for children to eat but also important social events. Young children are in the process of developing lifelong attitudes toward food and the experience of eating. Children feel competent when they are allowed to decide what, when and how much to eat. In a relaxed setting they form positive attitudes and learn vital skills.

A variety of food is served which broadens each child's food experiences and each child is encouraged but not forced to eat or taste food. Teachers do not hold back treats as a reward for eating certain food groups; food is not used as a punishment or reward. All food will be offered to children at the same time.

Children and teachers eat meals and snack family style, except for infants and very young children who require that an adult feed them. Toddlers are encouraged to hold and drink from a cup, to use a spoon, and to use their fingers for self-feeding. Sufficient time is allowed for each child to eat, with extra assistance and time provided for slow eaters to ensure an enjoyable experience. Children are seated while they are eating or drinking.

Mealtimes with children are not a time to worry about mess. Exploring food is often as important as eating. Children should be encouraged to use utensils, and utensils are offered when developmentally appropriate.

Medically based diets or other dietary requirements are accommodated.

Meals and Snacks

The CFRC follows meal pattern guidelines from the USDA Child and Adult Care Food Program (CACFP) when creating menus for meals provide by the program. CFRC provides snacks at the SFB and the WRB sites and breakfast, lunch and snacks at EHS sites. Menus are posted for parents at each center.

CFRC serves organic milk. Whole milk is provided until age two, after which low fat (1%) milk is served. Drinking water is readily available and offered to the children throughout the day.

All classrooms are nut free zones. Parents should check all food labels for peanuts and tree nuts before sending foods to school.

Food Allergies

Each child with any allergy or medical condition shall have:

- a. Written instructions regarding the child's allergic condition and steps that need to be taken to avoid that food or substance;
- b. Written description of specific symptoms that would indicate an allergic reaction; and
- c. A detailed treatment plan to be implemented in the event of an allergic reaction, including the names, doses, and methods of administration of any medications.

With parent's permission, children's food allergies are posted prominently in the classroom and/or wherever food is served.

Staff will notify the parent of any suspected allergic reactions, the ingestion of the problem food, or contact with the problem food, even if a reaction did not occur.

All classrooms are nut free zones. Parents should check all food labels for peanuts and tree nuts before sending foods to school.

Infant-Toddler Nutrition

CFRC staff feed infants on demand, and toddlers are moving toward regular meal times unless the parent and the child's health care provider give written instructions otherwise. Demand feeding meets the infant's nutritional and emotional needs and provides an immediate response to the

infant, which helps ensure trust and feelings of security. Information regarding a child's feeding is recorded on the Daily Activity Report.

Breast Fed Children

The CFRC encourages and supports breastfeeding. Mothers who breast feed are encouraged to come and breastfeed in the child's classroom at any time during the day. If expressed breast milk is provided for staff to feed to the baby, the following procedures should be followed:

1. The breast milk must be stored in ready-to-feed sanitary containers and must be labeled with the infant's name and date.
2. Breast milk should be placed in the refrigerator or freezer immediately upon arrival.
3. Refrigerated breast milk must be used within 48 hours.
4. Frozen breast milk must be used within 3 months.
5. Expressed breast milk must be discarded if it has been unrefrigerated for an hour or more; or if it is in a bottle that has been fed over a period that exceeds an hour from the beginning of the feeding.
6. Frozen breast milk should be thawed in the refrigerator or under cold running water.

Bottle Feeding

Bottles must be labeled with the child's name and date prepared. Children will be held when being bottle fed.

Infant Formula (Nelson, NEIS, & Sage Street Centers)

Early Head Start will provide formula for children until one year of age or as requested by a health care provider. A form must be completed requesting the type of formula used at home.

Preparing and Feeding Solid Foods to Infants & Toddlers

If parents provide baby food, each container of food must be labeled with the name of the child to whom it belongs.

When children are ready for chopped foods, these foods must be cut into small pieces no larger than $\frac{1}{4}$ inch cubes or thin slices. For toddlers foods must be cut up into small pieces no larger than $\frac{1}{2}$ inch cubes.

Progression of Food Experiences

To avoid problems of food sensitivity in very young children, parents will be asked provide a list of foods that have already been introduced to the child before staff serve these foods to the child in the center. Parents and staff should discuss new foods prior to their introduction at the center. Parents should discuss religious and cultural food preferences with teachers.

Food from home

Lunch boxes and containers with food provided from home must be labeled with the child's name. Lunches will be served in the containers provided by the parent. Food left in lunch boxes not picked up at the end of the day will be discarded. All classrooms are nut free

zones. Parents should check all food labels for peanuts and tree nuts before sending foods to school.

Round, hard, small, thick and sticky, smooth, or slippery foods implicated in choking incidents in children under age four. Examples of these foods are hot dogs (whole or sliced into rounds), raw carrot rounds, whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, marshmallows, and chunks of meat larger than can be swallowed whole. These foods should be avoided when preparing children's lunches.

It is recommended that foods brought from home for sharing among children are either whole fruits or commercially prepared packaged foods in factory sealed containers.

Nutrition Consultant

Nutrition needs of infants and toddlers change frequently. The Nutrition Consultant reviews all EHS nutrition assessments and is available to any parent with questions or concerns about a child's nutrition. Your child's teacher can give you the nutrition consultant's contact information.

School Closing and/or Community Emergencies

In cases of severe weather the center will close only when authorized by the president of the University. Local radio and television stations will be notified and the center voice mail will have the current update.

Each classroom has a copy of the *CFRC Disaster Plan and Emergency Procedure Manual*. This document outlines detailed plans for keeping children safe during a variety of possible emergency situations. Emergency procedures and evacuation routes are posted at each site. Teachers and children participate in monthly fire and quarterly disaster drills. If, for any reason, the center must close or be evacuated, parents will be informed as soon as possible. Evacuation locations will be posted at each site. Local media may also be contacted.

Injuries and Accidents

Minor Injuries and Accidents

In case of minor injury staff will perform routine hygienic measures, such as washing wounds and applying bandages. An *Accident Report Form* will be used to document minor injuries. Parents will be asked to sign the form and be given a copy.

Medical Emergencies

In case of a medical emergency:

- First aid will be administered (all staff are trained in First Aid and CPR);
- 911 will be called if necessary;
- The parent or emergency contact person will be notified as soon as practical;
- If the child must be transported before the parent arrives, a staff member will accompany the child;
- All actions in the emergency response will be documented on the *Accident Report Form*.

Parents are responsible for all costs incurred for treatment of an injury or illness occurring at the center. The center has insurance that can be utilized to cover expenses not covered by the parent's policy.

Allergies and Chronic Medical Conditions

Each child with an allergy or medical condition shall have:

- Written instructions regarding the child's allergic condition and steps that need to be taken to avoid that food or substance;
- Written descriptions of specific symptoms that would indicate an allergic reaction;
- A detailed treatment plan to be implemented in the event of any allergic reactions, including the names, doses, methods of administration of any medications.

Treatment plans are kept in individual classroom files as well as on the Allergy/Medical clipboard located in each classroom. Staff will bring treatment plans and any required medications on field trips or walks.

Pedestrian Safety

In order to remain safe when walking with children, always walk on the sidewalk. If there is no sidewalk, walk in the road facing traffic in order to see any car that might go out of control. Dress to be seen. Brightly colored clothes make it easier to spot pedestrians during daylight hours. At night, shoes, cap or jackets must have special reflective material to reflect headlights coming toward a pedestrian.

Cross only at corners or marked crosswalks; step at a curb or edge of the road; look left, then right, then left again before stepping into the street. If a car is coming, wait until it goes by, then look left, right and left again until there are not oncoming cars. If a car is parked, ensure there is no driver in the car; go to the edge of the car, look left, right, and left again until there are no oncoming cars. Keep looking for cars while crossing the street. Walk; do not run when crossing streets.

Children under age five should always be accompanied by an adult when crossing streets. Hold a child's hand when near and in traffic. Explain steps for crossing the street to help them understand the process. Help children choose safe places to play away from cars and driveways. Ensure that children get in and out of cars on the curb side. Insist children wear properly adjusted child restraints or seatbelts when in the car.

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