

Welcome to Penny Lane! This booklet has been prepared by the staff to acquaint you with our program. Please do not hesitate to ask any questions you may have after reading through the booklet.

It is our goal to provide the highest quality day care services in a loving, safe, and stimulating environment. We are dedicated to working with and for the children.

We accept each child as an individual with distinct and different needs that must be met through a variety of methods and activities.

We hope that you and your child have an enjoyable experience during your stay here.

We are licensed by the Indiana Family and Social Services Administration. Many of the following policies are based on the regulations of this department and NAEYC - National Association for the Education of Young Children.

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**Bloomington Daycare Corporation
d/b/a Penny Lane Daycare
Bloomington, IN**

PREFACE

This information has been prepared to give parents easy references to the policies, goals, philosophies, and expectations of the day care center as a whole.

PROGRAM PHILOSOPHY AND GOALS

Penny Lane exists to provide the community with a service of a preschool and licensed child care facility combined into one. All children are accepted from age 6 weeks to age 10 and each child is given the best possible care and training that we can possibly provide. We see each child as an individual with lots of capabilities not yet explored. Penny Lane uses all the developmental areas: physical, cognitive, social-emotional and language, along with goals to help each child and family meet their needs in a natural environment that is developmentally appropriate.

As a private non profit corporation, Penny Lane must operate in a responsible manner to provide the best environment, quality care, and instructional guidance that is economically possible.

MISSION STATEMENT

Working with young children is rewarding and challenging because there are many family lifestyles to deal with. Knowing that Penny Lane Day Care can make a difference in one child's life is a great feeling of accomplishment. Our goal is to watch children grow and learn in all the developmental areas needed. We want to help give children the opportunity to succeed in life and a positive attitude in order to be prepared for the challenges that will occur in the future.

ADMISSION POLICY

Infant Program: infants must be at least six weeks old through age 1 yr. Full-time enrollment is required.

Toddler and Preschool Program: ages 1yr-3yrs, offers full-time care M-F, daily (3 days per week minimum), or 5 half-days - mornings must be picked up by noon or afternoons must be dropped off after 3pm.

School-age Program: kindergarten-age 10yrs, offers before and after school care and full-day summer care.

Immunization history and a copy of an original birth certificate must be provided upon enrollment.

All children must have a physical examination completed within 30 days of enrollment. (Children up to the age of 2 must have a physical annually.)

Infants and toddlers must have a physical and feeding plan completed by their doctor prior to the first day of attendance.

CONFIDENTIALITY POLICY

All information pertaining to admission, health, family or discharge of a child is confidential.

HOURS OF OPERATION AND HOLIDAYS

Penny Lane East: 6:30 a.m. to 6:30 p.m. Monday through Friday

Penny Lane West: 6:00 a.m. to 6:30 Monday through Friday

We are closed on the following holidays:

Memorial Day
Labor Day
Christmas Day

Fourth of July
Thanksgiving Day
New Year's Day

The current weekly fee will apply during the weeks containing these holidays. If a holiday lands on a weekend, the centers will close for the day recognized by the federal government.

Penny Lane may, on occasion, be forced to close due to inclement weather. This decision is made by the Administrative Director and the Program Director. Please refrain from calling the Center if at all possible. We will contact the local radio and TV stations to make this announcement.

You should tune in to: Spirit 95.1 FM, WBWB-96.7 FM, WGCT 105.1 FM and Fox 59, WRTV 6, WISH 8.

FEES

The current fee schedule is posted on the PARENT BULLETIN BOARD. If you have any question regarding the fees charged, please contact the bookkeeper. Should you dispute any amount of fees charged and no solution can be worked out with the bookkeeper, a written appeal should be filed with the Administrative Director, who will also make the final decision. Please read the financial agreement thoroughly to be sure you understand the Center's policy regarding illness, vacation, and late charges.

Registration Fee: A \$25 nonrefundable registration fee is charged to each family upon enrollment.

Illness: If your child is absent for more than 2 consecutive weeks, WITH A DOCTOR'S STATEMENT, we will waive the fees.

Personal Days: Penny Lane allows the equivalent of 2 weeks' registered enrollment time for each year. This is time that you DO NOT have to pay for. After all allowable personal time is used, upon written request, we will temporarily withdraw your child if he/she is absent for more than 2 consecutive weeks. When returning from a temporary withdrawal, you will be assessed a new registration fee.

Late fees: If you pay on a weekly basis, fees are due on Monday, and a late charge of \$15 will be assessed if paid after Tuesday. If you pay on a monthly basis, fees are due on the first day of the month and a late charge of \$25 will be assessed after the fifth.

Delinquent accounts: Should fee payments become two weeks in arrears the center reserves the right to dis-enroll a child until past due amounts are paid. A new registration fee will be due upon re-enrollment. Parents are responsible for any fees required for any legal action.

Field trip fee: There will be a field trip fee assessed for summer school-age care. This fee will be added to your account at the start of summer care. Check with the director for the current fee.

From time to time, it is necessary to revise our fee schedule. You will be notified by newsletter when changes occur and a new fee schedule will be posted prior to the change.

TIME OF ARRIVAL

Please be familiar with our daily schedule and plan your child's arrival time accordingly. Your child should be here no later than 9:15 a.m. for breakfast and by 11:00 a.m. to be served lunch. All children must arrive no later than 11:00 a.m. Upon arrival, you should clock your child(ren) in at the front desk and then assist them with getting coats, blankets, extra clothing, etc. to their cubbies. Indiana State Board of Health does NOT allow diaper bags in the center.

PICKING UP THE CHILDREN

Children in the daycare program should be clocked out by their parents before leaving the Center for the day.

"PICK UP CARDS" are available in the office. These cards should be filled out and signed by the parents and distributed to those individuals authorized to pick up the child(ren). All individuals picking up your child(ren) need to be placed on the pick-up information. Driver's licenses will be checked for all new individuals picking up children. If an unscheduled pick up person is needed, be sure to give access/PIN to them.

Unless we have a copy of a written court order, we cannot deny any custodial parent access to their child. If there is question of custodial rights, please be sure that the court order is very specific.

Please be aware of the Center's hours of operation. We ask that parents pick up their children before closing time. If a parent is delayed due to an emergency, please call the Center and inform the staff person that you will be late.

If a child is picked up after the end of morning session (noon, if part-time mornings) or after closing hours, a late fee will be charged. **There is a \$7.50 fee per child for each 15-minute interval past noon or 6:30 p.m. that a child is left at the center. After 5 late pickups, the charge will be \$5.00 per minute.**

While we understand that emergencies do arise, we request that parents keep in mind the Center's closing time. Our staff is hired until that hour and continued tardiness of a parent for picking up their child will necessitate in dis-enrollment of that child.

RELEASE OF CHILD TO INTOXICATED OR IMPAIRED PERSON

If an authorized person that the staff suspects is intoxicated or impaired insists on removing a child from the center, the staff will immediately report the incident to the local police agency.

ATTENDANCE AND ABSENTEEISM

In order for us to meet Indiana Family and Social Services Administration (FSSA) regulations for teacher/child ratios, we require parents to fill out schedule forms for the attendance of their children. They are available in each room and in the office. Parents are to fill in and return these forms by the Thursday morning prior to the week they are scheduling. This also enables us to plan for meals. You must complete a new form each week unless you have a set schedule. If that is the case, you may indicate by writing "fixed" on the schedule form and complete a new one ONLY if your schedule would ever change. We will also need a new form filled out for the weeks of Thanksgiving and Christmas.

If your child will not be attending on a scheduled day, please call the Center. This courtesy aids the cook in planning meals and the staff in planning daily activities.

If your child is absent from the Center for more than 2 consecutive weeks without calling, it will be assumed that you have withdrawn your child, and your slot will be given to someone else. The fees for these 2 weeks will be charged to your account.

If your family is a recipient of CCDF funding and your child(ren) is absent for 10 consecutive calendar days without contact with the Center, you may lose your childcare subsidy.

CUBBIES

Each child is assigned their own cubbie for storing personal items such as coats, blankets, art projects, etc.

Please check your child's cubbie each day for artwork, soiled clothing, and notes from teachers or Penny Lane news.

BEDDING

Blankets are permitted and must be provided by the parents. Your child may keep his/her blanket in his/her assigned cubbie and it should be taken home each week and laundered.

SIDS POLICY

- Infants are placed on their backs to sleep unless otherwise ordered by a physician's statement.
- No soft items allowed in cribs (i.e. pillows, stuffed animals, bumper pads)
- If blanket is needed, infant will be placed at foot of crib with a thin blanket tucked around crib mattress reaching only as far as infants chest.
- Infant's head remains uncovered.
- Strings of any kind, such as to attach pacifiers, are not allowed in cribs.

CLOTHING

Please dress your child in clothing that is comfortable, easy to manage (buttons in front, elastic waistbands, etc.) and washable. Please remember that we paint, glue, and play outside. Since outside play is a part of our daily program, it is important that your child have appropriate outdoor wear.

Each child should have an extra set of clothing available everyday. Some parents like to leave a set in the child's cubbie and others prefer to bring a bag each day. The choice is yours, but please be sure everything is marked with either your child's name or initials.

The Center sometimes has extra clothing available in case your child would need an extra change. If your child does borrow clothing from Penny Lane, please launder it and return it as soon as possible.

DIAPERING/POTTY TRAINING

The Center provides diapers. If you would like your child to wear a certain brand or type of diapers, you may bring in an unopened package. This is the same for baby wipes. The center uses washcloths that get washed and bleached each night. You may bring in unopened packages of diaper wipes.

Generally, we set the age of 3 years as the goal for being potty trained. We are more than happy to help parents work with their child to reach this milestone. You may provide 'pull-up' type disposable training pants in un-opened packages, or cloth training pants and plenty of changes of clothing. When you are ready to start potty training your child, talk with your child's teacher.

ITEMS FROM HOME

Some teachers plan a "show and tell" or "sharing" day. Children may bring toys or items of interest on that day only. We encourage parents to remember that these items are sometimes shared with the group and may get misplaced or broken. Toy guns and other items of this nature ARE NOT PERMITTED. Children should leave gum, candy, and money at home.

CURRICULUM

Penny Lane is a culturally diverse program that implements a curriculum that is unbiased and developmentally appropriate. All classroom supplies and materials are selected by staff and meet specific NAEYC guidelines and criteria. Our goal is to encourage learning in an enriched and stimulating environment that builds self-esteem, positive self-identity and the importance of valuing differences.

We use a published curriculum which supports children's learning through their everyday play and exploring experiences. This curriculum model promotes hands-on learning which is child-centered and the teacher will facilitate those teachable moments.

Creative Curriculum- We believe that curriculum models should be designed as frameworks that guide teacher involvement. In these frameworks are unique organizing tools that promote informed decision-making by teachers. The frameworks presented in all of our books help teachers:

- Meet children's social, emotional, physical, cognitive, and language development needs
- Become good observers of children
- Assess children's needs, interests, and abilities in order to plan appropriately
- Use a wide range of teaching strategies that call for different levels of teacher involvement
- Create classroom communities where children learn to work together and solve problems
- Establish the structure that has to be in place for teachers to teach and children to learn
- Plan meaningful learning experiences for children that build on children's interests and knowledge
- Integrate the learning of appropriate skills, concepts, and knowledge in literacy, math, science, social studies, the arts, and technology

Our curriculum model is practical, logical, and meaningful to teachers. The books translate theory into daily practice by presenting material with structure that makes sense.

TRANSITION/ INCLUSION

Our program is organized and staffed to minimize the number of transitions a child experiences during each day and throughout the year. From time to time, however, it may be necessary to move children to correct child/staff ratios due to missing staff or unexpected parent scheduling changes.

Each child will remain in their individual aged classroom until at least their next birthday. We are an inclusive child care facility which means that they are kept in their age group regardless of developmental age, unless we have a written doctor statement including why and when the child can move up. Within a month of a child moving up, we will begin transitioning them into the new classroom. When possible, we try to move children in peer groupings to enhance continuity of care, which means we may wait to move up children until others have reached the needed age for the group to move.

OUTSIDE PLAY

Please keep in mind that regulations require that children be taken outdoors daily (weather permitting). Therefore, if you wish your child to remain indoors following an illness, we must have a statement from your child's physician.

SUNSCREEN POLICY

If a parent feels their child needs sunscreen while at the center:

- Parents are to provide; UVB and UVA protection of SPF 15 or higher is recommended.
- Sunscreen bottles will be labeled with child's name and kept out of reach of children
- A new bottle should be furnished each year
- Parents will need to sign a permission slip before sunscreen can be used
- Staff will apply as needed

FOOD

The Center will meet the child's nutritional needs for the part of the day which s/he spends in our care by providing a light breakfast, a well-balanced lunch, and nutritious snacks. Other than the infant room, **NO OTHER FOOD IS ALLOWED IN THE CENTER.** If you wish, a commercially prepared treat may be provided for a special occasion such as your child's birthday.

Penny Lane is more than happy to work with families with children who require special diets for medical or religious reasons. Special diets/allergies for medical reasons require a doctor note with what to exclude or include. Other special diet requests will require a written explanation from parents.

If food is brought from home for your individual child, it should meet USDA's CACFP guidelines. We may need to supplement food if necessary to meet these requirements. All items should be labeled with child's name and date. A 'Safe Transportation of Food Responsibility' form is also required.

Each case is handled on an individual basis. Parents of infants must provide pre-mixed, ready-to-serve formula or breast milk and baby food. If an infant has a medical reason to use powder formula that is mixed at the Center, a doctor statement is required listing the medical reason - parent's request is not sufficient. This is a State regulation. If breast milk is used, A "Breast Milk Procedure" form is required. Parents may also choose to supply pre-made, labeled bottles. Penny Lane will provide disposable bottles, infant cereal, infant juice, and any table food needed.

PARENT-TEACHER COMMUNICATION

We are in the very fortunate position of having daily or very frequent contact with each other. If you have any questions, concerns, problems, or praise, please let us know. We are anxious to talk. Good communication is necessary for success. We will also offer parent/teacher conferences mid-fall and late spring. You will receive information about and discuss teacher assessments of your child at this time.

PARENT RESOURCES

There are plenty of resources available for parents to use. These are located by the front door. Pamphlets and brochures are yours to take. The books and videos are part of a check-out system. They will have to be signed out by the parent. Each item is allowed to be checked-out for a week. If an extension is needed, you simply re-check it out. Check with teachers or administrative staff if other resources are necessary.

PROCEDURE FOR REFERRALS AND RESOURCES

We use community-based programs when referring families that need help for their child. These local programs include; First Steps, Department of Speech Sciences at Indiana University, MCCSC (Monroe County Community School Corporation), DFC(Department of Family and Children), and the Indiana Family Help Line. The lead teacher will use children's records: assessments, evaluations, progress reports, and anecdotal records. This information will be used and gone over between the lead teacher and director. Conferences will be planned accordingly for families to discuss the situation and figure out the best solution for the child. Written permission will be obtained from parents before making referrals except in an emergency situation. See the following more extensive list of resources.

PARENT BULLETIN BOARD

The Parent Bulletin Board is an important communication center. It is used to display our license, operating procedures, child/staff ratios, fee schedule, newspaper and magazine articles, messages, and other information directed to the parents.

PARENT VOLUNTEERS

Parents are welcome at the center anytime. Parents or volunteers are able to come and spend time with children of any age group. Volunteers\therapists should call to plan a day and time to come and notify us of cancellations. Any volunteers have to follow these rules while at the center:

- Not be counted in child/staff ratios
- Do not solve conflict situations
- Will not converse about children and parents

Please feel free to ask questions and make suggestions. We welcome your special talents, cultural lessons, or any other hidden expertise you may have.

PARENT ENTRY REPORT FOR INFANTS

This form is the communication sheet between the parents and the infant caretakers, providing each other with information pertaining to eating, sleeping, diaper changes, etc. This form **MUST** be completed by the parent each morning when dropping your infant off. You are provided with the original copy of the form at the end of your child's day.

DAILY INFORMATION SHEETS

Each teacher provides parents with a daily written report to give miscellaneous information, including whether or not your child has eaten well and napped. These are found in your child(ren)'s classroom.

REST PERIODS

We are required by FSSA regulations to provide a rest time for the children. Please help encourage rest time as it is as necessary as food and fresh air for their growing minds and bodies. For our toddler thru preschool programs nap is from 12:30 p.m. to 3:00 p.m. Alternative activities will be provided for those who cannot sleep, after they have had a resting period, as long as it is not disruptive to the other sleeping children.

FIELD TRIPS

Field trips and nature walks are considered an important part of the educational program and will be taken periodically to nearby places. The Center will provide the same adequate responsible adult supervision for these excursions as is provided while children are in attendance at the Center. We will ask that you sign a permission slip for each field trip.

CHILD CARE TAX DEDUCTION

By request, we will prepare a statement of the amount paid to Penny Lane for childcare fees.

FINANCIAL ASSISTANCE

Penny Lane receives funding through the Child Care Development Fund to help provide day care for low income families. Since this funding is provided through an annual contract and eligibility requirements change, you should check with the director to see if you might qualify. Funding is limited and is on a first-come, first-serve basis.

CLIENT FILES

Files with the children's records are accessible to all staff members on a "need to know" basis. Information from these files will not be given to anyone else without parental permission. Clients may have access to any information in their file.

Title XX files will be accessible only to the director and other designated staff members acting in the director's absence. Files will be available to other parties on a "need to know" basis. Clients may have access to any information in their file.

CLIENT EVALUATIONS

Clients are given forms annually to evaluate our Center. We will strive to resolve any valid criticism.

COMPLAINTS

Any problem may be taken first to the child's teacher. If a resolution is not reached you may then register the complaint with the Center's head director. If the head teacher is unable to help you reach a satisfactory conclusion the complaint should be presented, handwritten, to the administrative director.

WITHDRAWALS

Parents may withdraw a child from the program at any time. A **2-WEEK'S NOTICE** is required. If you fail to give a notice, 2-week's charges will be added to your account. Withdrawal and subsequent re-enrollment will entail a new registration fee plus any unpaid balance.

PHOTOGRAPHS AND PUBLICITY

Occasionally photographs are taken of children participating in our programs; these may appear in newspapers, magazines, brochures or other publicity materials. Your permission for photographs of your child to be used without compensation is part of your enrollment unless we have a form on file stating otherwise.

ACTIVITIES NOT ALLOWED ON CENTER GROUNDS

Penny Lane does not allow the use of tobacco, alcohol, or drugs on Center grounds. We ask that you do not throw cigarette butts in the parking lot. We do not want the children to be able to gain access to these materials.

CHILD ABUSE AND NEGLECT

The State of Indiana requires that all members of day care institutions be on the lookout for, and report to the State, any and all cases of abuse to a child. We are, therefore, obligated to report to the State any suspected cases of abuse and/or neglect.

DISCIPLINE POLICY

At Penny Lane we are striving to build a safe and understanding environment. Our teachers will help the children to become problem solvers, at the best possible level that they can. Positive discipline is the form of discipline used by our teachers. Forms of this will include verbal praise, smiles, and positive attention for appropriate behavior. There are times when a child may need to be dealt with in an alternative manner. Teachers will redirect a child to another center or to another toy if necessary. If a child is being destructive or hurtful, s/he may need to be removed from the group and possibly from the classroom. In some situations a teacher may have to restrain the child by holding him/her to protect him/herself and the other children in the room. Time-out is only used for those three years old and older. One minute per age of the child is an acceptable amount.

BEHAVIOR MANAGEMENT POLICY

A child whose behavior creates a safety issue, at risk of harming themselves, others, or school property will not be accommodated. If a child is exhibiting behavior problems in our program the following steps will be implemented:

- The problem will be discussed with the child
- The use of time out will be implemented
- The parents will be notified of the problem
- A discipline slip will be sent home to be signed by the parent
- The parent will be called in for a behavior conference. A behavior contract may be implemented
- The child may be suspended
- The parents will be asked to withdraw the child

BEHAVIOR MANAGEMENT-REASON FOR SUSPENSION

- Physical assaults on staff members or on other children. Parents will be called when a fight occurs. Children will be sent home immediately and suspended for the next day.
- Continued use of foul, disrespectful, or abusive language
- Disregard for authority, not listening or following directions
- Need for physical restraint
- Ongoing bullying

BEHAVIOR MANAGEMENT/ DISMISSAL

It is a privilege to participate in Penny Lane programs, not a right. There will be rules and consequences. Penny Lane rules for playground areas and building use apply to all children enrolled. It is our goal to create a safe, successful environment for all children. We make every effort to problem solve and help children succeed in a group setting. However, on occasion, alternate care may be necessary for a particular child. If a child is unable to function successfully in our program, an alternate care situation is recommended. We reserve the right to dismiss any child when staff determines that the program cannot meet their needs.

BITING POLICY

First we immediately comfort the child who has been bitten, and quickly clean the wounded area and apply ice.

Then we segregate the child who has bitten and quickly explain to them why biting is not acceptable.

Each biting incident will be documented and both parents will be informed.

If biting persists we will do our best to work with the families, however, in extreme situations we may ask that parents withdraw the child until the biting subsides.

MEDICAL EMERGENCIES

Minor injuries: All staff members are trained in basic first aid, Universal Precautions, and CPR. In the event of scratches, bumps, etc., staff will administer first aid. All injuries and first aid administration will be written down on Minor Injury Reports posted throughout the building.

Major injuries: In the event of a major medical emergency or accident, we shall contact the parents and the doctor to advise them of the incident. If it is impossible to reach either and should emergency treatment be required, transportation will be arranged to take the child to our consulting physician or Bloomington Hospital. Your authorization for the Center to contact your child's physician and to take whatever emergency medical measures are deemed necessary as part of your parental release. Please keep in mind that to provide the best care possible, it is imperative that the Center know how to locate you EVERY DAY!

Our Consulting physician is Dr. Schechter

MEDICINES

Please take prescription medicine to be administered to your child directly to the staff person in charge. S/he will store it in the appropriate place. The parent should fill out the necessary information on the medication chart EACH DAY the medication needs to be given. For prescription medicines the bottle must show: CHILD'S NAME, PRESCRIPTION NUMBER, NAME OF DOCTOR, and HOW MANY TIMES A DAY TO BE GIVEN. If this information is not provided with the medication, it cannot be administered. Non-prescription medication may only be given with a written order from your child's physician. This form is provided in your enrollment packet.

MEDICAL AND ILLNESS

State regulations require us to maintain a medical record on each child and for the child to have a physical examination within 30 days after enrollment.

Children under the age of 2 must have a physical annually. If your child has had a physical within 3 months prior to his/her enrollment, a copy of this exam will suffice for your child's records. It is also necessary for us to keep current records of your child's immunizations. You must provide his/her shot record BY THE DAY ENROLLMENT BEGINS, and after any updated immunizations are given. If immunizations or physical are overdue, we will need evidence of an appointment before child can begin day care or remain enrolled.

PROTOCOL FOR ILL CHILDREN

1. The child who is ill cannot remain at Penny Lane according to Indiana State Board of Health guidelines.
2. The parent will be contacted to pick up the child if any of the following symptoms (on following pages) are present as determined by the Director, Assistant Director, or Supervisor in charge.
3. The child will be immediately removed from contact with other children when an illness is identified.
4. Parents are expected to pick the child up within a reasonable amount of time after being notified of child's illness. We MUST have emergency contact numbers available AT ALL TIMES.
5. In some circumstances, a physician's statement will be required for the child to be readmitted to Penny Lane. ie. as deemed necessary by State Board of Health or contagious, recurring medical condition.

For the protection of all children, your child should be kept at home (WE CANNOT ACCEPT HIM/HER AT THE CENTER) if s/he shows any of the following symptoms:

- a temperature**
- diarrhea**
- vomiting**
- a rash**
- nasal discharge**
- discharge from the eyes or ears**
- presence of one or more nits and/or head lice**

Parents should exercise every caution and keep their child home should other unusual symptoms occur. Day care staff will screen children as they arrive and follow guidelines supplied by Center for Disease Control (CDC).

If your child has been exposed to a contagious disease s/he should be kept at home and THE FACT OF HIS/HER CONDITION SHOULD BE REPORTED TO THE CENTER. (Strep throat, viral infected ears and/or glands, measles, mumps, chicken pox, scarlet fever, etc. are among those conditions categorized as "highly contagious"). If you are uncertain as to whether your child is contagious you may contact the Center or your physician. If your child is placed on antibiotics, s/he MUST BE ON THEM FOR 24 HOURS BEFORE RETURNING TO DAY CARE.

If your child becomes ill during the day, s/he will be placed in the isolation area (usually the office) and you will be contacted to pick him/her up. Please keep in mind that children are taken out daily (weather permitting). We require a doctor's statement for your child to remain indoors after returning from an illness.

PENNY LANE MEDICATION ADMINISTRATION Policy Statement

1. Medication administration requires a doctor's order.
2. Medication will be administered by trained designated personnel.
3. Infants and children will receive their prescribed medication using the following check system:
 - a. correct child
 - b. correct medication
 - c. correct dosage
 - d. correct time
 - e. correct route of administration

Objective

1. Infant/child will be medicated properly to insure continuity of care between child's home and day care.
2. To help insure that the children recovers from illness as quickly as possible (thus decreasing the risk of prolonged or recurring illness).
3. To help insure that the children on daily or long-term medication maintain constant serum levels of the drug.

Preparation and Training

1. Director of day care will designate person(s) to administer medications.
2. Designated person(s) will be taught the above check system to use prior to dispensing drugs.
3. Person dispensing medication should avoid interruptions while pouring and/or administering medications.

Implementation

1. Parents will write child's name, medication, time, etc. on medicine sign-in sheet. (Medication must be in original labeled container. There must also be a doctor's order that accompanies medication.)
2. Medicines will be kept in a locked box in First Aid cabinet in the teacher's lounge.
3. Supervisor or designated personnel will check medicine sheet every a.m. and plan for daily medication administration.
4. Supervisor or designated personnel will take medication to child. The child will be identified by calling out child's name, and/or clarifying I.D. with child's teacher. *If unsure about identity, clarify before administering medication.

DOCUMENTATION

Medication administration and signature of person dispensing drug will be documented on medication sheet.

ADDITIONAL INFORMATION

*If there is any question about medicine administration, identity of child, dosage or type of medicine to be given, resolve questions prior to dispensing drug by contacting parent or child's physician.

HEAD LICE POLICY

Head lice continues to be a common problem whenever children are together. Having head lice is in no way a reflection on cleanliness or economic conditions. When a case is discovered in the Center, we will do our best to eliminate any chance of them spreading to other children. Parents also need to be alert and advise the Center should their child be exposed or actually have head lice.

Teachers are on constant alert for various illnesses or health conditions of all children. Should a child frequently scratch his head, the child is discreetly taken to the office for examinations for head lice. The person completing the examination should use protective gloves for this purpose. During the exam, the child is reassured that they have done nothing wrong. Should head lice or one or more nits be found on a child, they shall remain isolated in the office. Parents will be called and pick up should be completed as quickly as possible.

The day care will notify parents in the classroom of a confirmed case of lice and take all steps necessary to eliminate the infestation of other children. All children and staff in the child's classroom shall be examined. Should more than one case be found, all children and staff in the center shall be examined.

Effective elimination of sources of infestation is both costly and time consuming. Attached are instruction supplied by the Monroe County Health Department to help eliminate the live louse and nits.

Should a child be sent home with lice, they will **NOT BE PERMITTED TO ATTEND** until presence of **ALL** nits and /or lice are eliminated. Staff must check a child's hair **UPON** arrival to determine that there are no nits/lice present before they are permitted to remain at the center for the day.

Occasionally, a second re-infestation may occur within 2 to 3 weeks. Again, staff would determine the elimination of nits/lice for the child to re-enter day care.

Should there be a third occurrence within a short period of time, it will be necessary for the child to be withdrawn for a period of three weeks and the family must provide a statement from Public Health Nursing or their physician indicating that the child has been treated and is **FREE** of lice and nits.

While this is not a pleasant topic, it is extremely important that the day care and parents maintain open communication. If you know that your child has been exposed to head lice, please advise the Center. Through this communication, we can possibly prevent a major epidemic infestation.

PEDICULOSIS HUMANUS CAPITIS--THE HEAD LOUSE

Anyone can get head lice. It is not an indication of a “dirty” person. Lice are about the size of tiny ants, wingless, grayish-white in color. They live on human blood and lay oval, whitish eggs (nits) which are attached to the shafts of the hair. The first sign of lice is usually intense itching. Bite marks often appear with accompanying skin irritation and possible infection resulting from repeated scratching.

Although lice cannot hop or jump they are transmitted by direct contact with hats, brushes, combs, pillows, sheets, chairs, sofas, rugs, car seats, and personal touch, among other environmental items. Lice can live for 30-35 days. Their eggs (nits) will hatch in 7-10 days. Within 15 days the eggs will become an adult. Lice can live from 5-7 days off the body and their nits can exist for 36 hours off the body. Lice can be transmitted to pets but will need to return to their human host to feed.

If one suspects that one may have head lice infestation, it is necessary to have the individual and all members of the family or group consult a physician to confirm the diagnosis and treatment. The physician will usually prescribe a hair rinse treatment of KWELL. Once the prescription is prescribed be certain to follow directions on the label. One cannot purchase KWELL without a physician’s prescription. Other “cures” should not be used without your physician’s knowledge.

In a school or other social situations all children in the group should be checked for louse infestation.

Preventative measures which include:

- 1) Avoid physical contact with infected individual and their belongings and clothing.
- 2) Launder clothing with a hot water temperature of 140 degrees for 20 minutes or dry clean to destroy lice and nits.
- 3) Inspect scalp hair and clothing to detect cases early.
- 4) Disinfect all articles touched by an infected person.

With the cooperation and vigilance of all residents we can help control the head louse in our community.

Respectfully,
THE MONROE COUNTY HEALTH DEPARTMENT

We have received and read a copy of the Penny Lane Parent Handbook and accept the terms therein.

(Signature of Parents)

(Date)

Please sign and we will provide a copy for your records.

VALUES AND BELIEFS FOR PARENTS

Values are enduring beliefs-ideas that we cherish and regard highly. Values influence the decisions we make and the course of action we follow. Some values we prize more deeply than others; they become standards by which we live. The purpose of this assessment is to help you assess the values and beliefs that guide your parenting attitudes and behaviors and to help us better align our care of your individual child.

Complete the following sentences:

I think children are generally

When children are unhappy, it is usually because

I get angry when children

The most important thing a teacher can do is

The most important thing a parent can do is

Children should not

All children are

I wish teachers would

When teachers

I feel
