



**CHILDREN AT RECTORY (CARe)**  
**HANDBOOK**  
**2017-2018**

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## **MISSION STATEMENT AND RECTORY CREED:**

Rectory School's mission is to provide students, from early childhood through middle school, with an enriched and supportive academic, social, and ethical community that addresses individual learning styles, aptitudes and needs, while promoting personal self-worth and accountability. The school community lives the Rectory School Creed:

Responsibility, Respect, Honesty, and Compassion.

## **THE CHILDREN AT RECTORY PHILOSOPHY:**

We feel strongly that an excellent early education experience consistently and conscientiously provides opportunities for social, emotional, cognitive, and physical development. Human beings are social by nature, and we believe that CARE, can be an outstanding educational experience for children, parents, and our staff.

We are committed to the idea that children thrive on a certain amount of structure and rhythm that they can anticipate, and feel more secure. At the same time, we recognize that variety and spontaneity are the spices of life.

We understand that children's needs change as they grow from infants to toddlers to preschoolers, and that their interactions with their teachers - and with one another - differ qualitatively at each stage. We believe that children are individuals and that our responses to them must not be reflexive or prescribed, but must be tailored to a child's own temperament.

To these ends, we have planned a program which exercises a child's body, mind, and spirit; which balances structured interaction with free play; and which is based on the principles of developmentally appropriate practice for children at each stage from birth through six years. Most importantly, our limited enrollment and low child - teacher ratio ensures that we can offer each child individual attention throughout the day.

## **NAEYC ACCREDITATION:**

The Children At Rectory Program is accredited by the National Association for the Education of Young Children (NAEYC) We are proud to be the only educational program in Pomfret and one of ten center-based programs in the Northeast Corner to hold this title. As advocates for the education and development of young children we strive to exceed the high quality that NAEYC demands. It is our pleasure to teach, guide, and nurture your children during their first years of school.

**We welcome your family into ours!**



## **OUR GOALS:**

TO ESTABLISH A MODEL, EARLY EDUCATIONAL PROGRAM WHICH ALLOWS US:

### (SOCIALLY)

- \* To build trust through positive interactions with peers and caregivers;
- \* To support the development of communication skills;
- \* To promote the development of social skills and self-control;
- \* To encourage conflict resolution, turn-taking, cooperative and negotiative behaviors.

### (EMOTIONALLY)

- \* To nurture self-esteem and a sense of independence;
- \* To develop an awareness of the needs of others as well as a sense of responsibility towards others;
- \* To celebrate and respect each child's unique individuality;
- \* To support and celebrate family life.

### (COGNITIVELY)

- \* To encourage joyful play, exploration and learning;
- \* To stimulate a child's creativity at all times.

### (PHYSICALLY)

- \* To provide the safest environment in which to play;
- \* To adopt policies of conscientious hygiene and nutrition which ensure good health; and
- \* To promote physical development.

## **ADMISSIONS:**

**The Children At Rectory program (CARE) is open to all children regardless of race, religion, or national origin and is licensed by the State of Connecticut Department of Public Health.** The CARE Program serves children ages six weeks to five years. We have one infant/toddler classroom that serves children 6 weeks to 3 years and one preschool classroom that serves children from 3 years to 5 years. We were established to support the needs of the Rectory School faculty, staff, and families with older siblings (grades K - 9) enrolled. They are given first priority in reserving CARE Program spaces. When available, additional spaces are filled by members of the community. These spaces are filled on a first-come, first-serve basis with the following factors taken into account:

1. Currently enrolled children and families are given priority over new families.
2. 5 Day per week (full time) slots are given priority over requests for 2, 3, or 4-day slots.

## **APPLICATION FEE:**

If you are a new enrolling family, a \$50.00 non-refundable application fee must be given with a contract upon a child's initial enrollment to the CARE Program.

## **ENROLLMENT FORMS:**

Upon enrollment all health, safety, and general information forms must be submitted to the Director. This information will be kept confidential except to those who serve your children (teaching staff) unless a consent form is signed by a parent/guardian. The following forms are required to be in each child's file: Authorized Escort, Emergency Contact, Health Assessment (physical/immunizations), Media Release, Child and Parent Information Form, Sunscreen Permission, and when applicable an Individualized Plan for Care.

## **HOURS/DAYS OF OPERATION:**

Monday through Friday, 7:30 AM to 5:00 PM. A calendar is given to each family upon enrollment and is also located on the Rectory School website at: [www.rectoryschool.org](http://www.rectoryschool.org).

## **CONTRACTS:**

Contracts are made on a school year basis and must be filled out before your child is enrolled in the program. We are committed to accommodating families, and we will try to fit your schedule needs into our schedule as much as possible.

We also recognize that occasionally, you may need additional hours or even additional days to attend meetings, conferences, etc. We will make every effort to accommodate you, provided that

1. Additional hours beyond contracted hours are requested in advance (24-hours notice is required, but ample notice is advised).
2. Your child's attendance does not cause Children At Rectory to exceed the legal capacity of children in the center at any given time.

Additional hours will be charged at the same rate as contracted hours. Careful selection of contracted hours is essential. Please know that parents will be charged for contracted hours regardless of child's absence due to illness, "days off," etc.

## **BILLING:**

Families will be billed on a **monthly** basis through Rectory School and are expected to pay in full by the 15th of each month. Bills will include the fixed rate for contracted hours, additional hours provided in that time period, and late fees.

**SCHOOL YEAR CONTRACT:** Children At Rectory is in session for 41 weeks. Each family that enrolls during that time is given one week of vacation time upon enrollment. Therefore, monthly tuition is figured on a 40-week basis and is divided over a 10-month period (September - June). Families are responsible to pay the monthly contracted fee plus any additional fee for care provided. A \$10.00 "Late Pay" fee will be added weekly to any account past 7 days past due. Any family who has an account that is past due may be asked to keep their child home until payment is made. A \$25.00 fee will be charged for checks returned by the bank. If the bank returns two checks unpaid, all future payments must be made in the form of a money

order.

**SUMMER CONTRACT:** Children At Rectory has a 9-week summer session. Summer contracts are based on an 8-week schedule, as families will not be charged for July 4 and the week of CARE Summer Shutdown in August. Families are responsible to pay the monthly contracted fee plus any additional fee for care provided. A \$10.00 “Late Pay” fee will be added weekly to any account past 7 days past due. Any family who has an account that is past due may be asked to keep their child home until payment is made. A \$25.00 fee will be charged for checks returned by the bank. If the bank returns two checks unpaid, all future payments must be made in the form of a money order.

### **TUITION:**

Fees will not be charged for days on which the program is closed for holidays, vacations, or shutdowns. Fees are still charged if the program closes due to snow, for professional days, and for our class preparation day. Families are responsible to pay their monthly tuition whether or not their child is absent during that period of time.

Please be advised in the unfortunate circumstances that your account is in arrears, we will have to ask you to remove your child until payment (or some arrangements for payment) is made. Such arrangements should be made with the Director of CARE as well as the Rectory School Business Office.

### **WITHDRAWAL POLICY:**

Please notify the CARE Program, in writing, two weeks prior to enrollment changes. If a two-week written notice is not given, you will be required to pay the tuition for the remainder of the two weeks.

### **VACATION/ HOLIDAYS:**

Families will not be charged for one contracted week worth of tuition as a vacation for your child. No fees will be charged for days on which CARE is closed for holidays, vacations, or shutdowns.

### **INCLEMENT WEATHER:**

Rectory School Administration decides whether school will be closed or delayed due to inclement weather. These decisions are made independent of area school systems. **All delays or closings will be announced by 6:00 AM with information posted at the following locations:**

- . On the Homepage of the School website.
- . On the School’s Inclement Weather line (860-963-7145).
- . On NBC news (television and web [www.nbcconnecticut.com](http://www.nbcconnecticut.com)). On a delayed opening morning all divisions - CARE, Elementary, and the Middle School - will begin to accept students at 10:00 AM. This extra time in the morning will make the roads safer for our teachers, families, and staff and will allow some helpful time for snow removal and sidewalk preparation on campus. In the event of an early closing, parents will be notified via email or phone call. In all instances, Rectory will endeavor to be open as long as conditions are safe. Parents should always make the decision most appropriate to their situation and always err on the side of caution.

## **ARRIVAL AND DEPARTURE:**

Parents are requested to call whenever their child will not be in attendance. Please sign your child in and out of the program each day. Parents are advised to check their child's cubby and the parent mail boxes each day for items to go home, information sheets, daily contact sheets, etc. We encourage you to share information about changes in your child's life that may affect their behavior at CARE: a late night out, a stressful weekend, houseguests, etc. The more we know about your child, the more we can accommodate his/her needs. We ask all families to please arrive by 9:00 AM to ensure your child has time to adjust to the transition prior to starting our daily activities.

## **EARLY ARRIVAL & LATE PICK-UP:**

Our teachers work hard to provide families with the highest quality of care possible between the hours of 7:30 AM and 5:00 PM. Families arriving earlier than 7:30 AM must wait outside until CARE is officially opened. **A late fee of \$10.00 for EVERY FIVE minutes or fraction thereof will be assessed for any child picked up after 5:00 PM.** When a parent arrives after 5:00PM to pick up their child, we will ask a CARE teacher to record the time on the sign-in sheet. Also, signatures of the parent and a CARE teacher should be recorded in order to verify the actual time.

## **PICK-UP TIME:**

Just as with your arrival, young children need an opportunity to adjust to change. Please allow children time to recover from a long nap, finish a puzzle or painting, etc. Children may delight in a "debriefing:" time to show you a drawing they made, story they read, etc. Always inform a teacher when you are leaving and remember to sign out on the attendance sheet. Once you have arrived to pick up your child, please show courtesy to the teachers by providing supervision for your child if you plan on remaining for any period of time. As noted in the Naptime section of this Handbook, if you plan to pick up your child in the middle of the day, please try to be there either by 12:30 PM (before nap) or after 2:00 PM, so not to disrupt the rest of our nappers.

## **AUTHORIZED ESCORTS/CLOSING POLICY:**

For the safety of your child, two teachers at least eighteen years of age or older must close the CARE program daily and must remain with the children until all children have been pick up by an authorized escort. Teachers will only release your child to an authorized escort. Names of these authorized escorts may be found in each child's file on the *Authorized Escort* form. Please be sure to inform your child's teacher whenever someone other than a parent or a regular escort will be picking up your child. The *Authorized Escort* form will be included in the enrollment paperwork. Also, please ask your authorized escorts to bring a photo ID to the center, as we cannot release your child unless the ID has been checked.

CARE close at 5:00 PM, Monday through Friday. All parents that arrive later than 5:00 PM are charged according to our *Late Pickup Policy*. If a parent does not arrive or contact the program within 30 minutes after closing time, teachers must follow the *Closing Policy* below. If the child's parents are not accessible by telephone, a CARE teacher must contact one of the child's authorized escorts. The authorized escort must present a valid ID with picture to be able to pick up the child. Two teachers must remain with the child until the proper authorities have arrived and released the teachers or a parent/authorized escort has arrived to pick up the child.

Parents, please notify us if a **NON-AUTHORIZED ESCORT** (an escort that is not on your child's *Authorized Escort* form) is coming for your child. **IF WE ARE NOT NOTIFIED, THE CHILD WILL NOT BE ALLOWED TO LEAVE OUR CARE.** In this instance, please be aware that a teacher will need to call the parent for approval. If the parent is not accessible, the child cannot leave our care. If the parent is notified and gives consent, a teacher must check a photo ID and have the escort sign the child out.

### **WHEN NO CONTACT WITH ANY ESCORTS CAN BE MADE AFTER 30 MINUTES:**

1. Teachers must contact the Director of the CARE Program,
2. After consulting the Director, the State Police must be contacted
3. Troop D #: 860-779-4900- Report that a child has been left at Children At Rectory and you cannot contact any of the authorized escorts on the child's *Authorized Escort* form.

Two teachers will remain with the child until the parents have been located or an authorized escort has come for the child

## **MANDATED REPORTER:**

The State of Connecticut requires all school teaching staff to be on the lookout for, and report to the State, any and all suspected cases of child abuse. The Children At Rectory program is, therefore, obligated to report to the State any suspected cases of child abuse and/or neglect.

## **ABUSE AND NEGLECT POLICY:**

*Children At Rectory's Policy Statement:* Connecticut law is exceptionally clear with regard to child abuse. Any person paid to care for a child in any public or private facility, child day care center, group day care home, or family day care licensed by the state is mandated to report suspected child abuse or neglect to the DCF Child Abuse Hotline (800) 842-2288 or a law enforcement agency "as soon as practicable but not later than twelve hours after the mandated reporter has reasonable cause to suspect or believe that a child has been abused or neglected or placed in imminent risk of serious harm." Further, anyone who reports abuse is protected by any action that might be brought by the parents. It is helpful for the people investigating the

allegation to know your name rather than receiving an anonymous call. In all cases, the department maintains confidentiality of reporters. If the case goes to court, you might then be asked to testify.

It must be borne in mind, however, that the staff person has no right to reveal the suspected abuse to anyone other than his or his supervisors and the state. If the staff person were to reveal the suspected abuse to other individuals, then the parents would have a valid action against the individual and the School for slander or invasion of privacy.

In summary, if you suspect child abuse or neglect, share your suspicion with the Director before calling the Department of Youth Services. A hotline is staffed twenty-four hours a day, and the person taking the call will determine whether or not the case needs investigation.

*Definitions of Abuse and Neglect:* Child abuse is defined as: a child who has had physical injury(ies) inflicted upon him other than by accidental means, or has injuries which are at variance with history given of them, or is in a condition which is the result of maltreatment, such as, but not limited to, malnutrition, sexual molestation, deprivation of necessities, emotional maltreatment, or cruel punishment.

Child neglect is defined as: a child who has been abandoned, is being denied proper care and attention physically, educationally, emotionally, or morally, or is being permitted to live under conditions, circumstances, or associations injurious to his well-being.

*Reporting requirements:* To make a report:

- Inform the Director if you believe that a child at the CARE program is being or has been abused or neglected, or is in danger of being abused.
- Call the Department of Children and Families (DCF) Child Protection CARELINE at 1-800-282-2288 within 12 hours.
- Submit a written report of the suspected incident to the Director with 24 hours.
- Note: If you believe that a child is in extreme, immediate danger, you should call the police at once. Police response time is faster. DCF works closely with state and local police departments in investigating and intervening in severe physical abuse and all sexual abuse cases.
- If you report orally to the police, you must submit a written report (DCF form #136) to DCF within 12 hours of contacting the police. If you report directly to DCF, you are not required to submit a report, but you may if you wish.

Your report must include the following information, if known:

- Child's name, address, age and gender.
- Parent's (or caretaker's) name and address.
- Nature and extent of the child's injuries, maltreatment, or neglect occurred.
- Name of the person suspected of harming the child.
- Approximate date and time the injuries, maltreatment, or neglect occurred.
- Any evidence of previous injury to, maltreatment, or neglect of the child to his or her siblings.
- Any action taken to treat, shelter, or otherwise help the child.

*Administrative responsibilities:* The Children At Rectory Director will immediately notify the Headmaster of Rectory School of any incidents of suspected child abuse and/or neglect. A written report prepared by the staff member who witnessed the incident shall be submitted to the Headmaster within 24 hours.

*Internal investigation procedures including protection of children:* If a member of the CARE program is suspected of Child abuse and/or neglect, the staff member will be suspended until the Department of Children and Families complete the investigation of the incident. The suspension must be with pay, not diminish or terminate the employee's benefits, and remain in effect until the investigation is completed.

If a child enrolled in the CARE Program is suspected of causing abusive or neglectful harm to another child, a staff member will be assigned to the suspected child. The suspected child will not be left alone within the program until completion of the investigation.

Children At Rectory encourages our staff to seek out current information in the area of Child Abuse and Neglect. Our school nurse is available to discuss any questions or concerns with staff members. The following resources are available to provide our staff and families with additional support:

INFOLINE: 1-800-203-1234

This free information and referral service puts parents in touch with programs and services in their community. INFOLINE can often help in a crisis, whether it is family violence, mental health emergency, or other problem.

DEPARTMENT OF CHILDREN AND FAMILIES:

DCF provides and/or funds services for families affected by abuse/neglect such as counseling, parent education, mental health support, and substance abuse treatment. For information, call the DCF regional office in your area (look in the blue government pages or phone book) or call the Public Affairs & Information Office at (860) 638-4209.

PARENTS ANONYMOUS:

Parents Anonymous is a self-help group for parents who feel they may take their anger out on their children. Groups meet regularly to give parents support and guidance.

CHILDRENS TRUST FUND:

The Children's Trust Fund provides funding for local family support programs. To locate a program near you, call (860) 550-6473. \*

\* Information provided by the Connecticut Department of Children and Families and Connecticut Children's Trust Fund. 1996.

## **TRANSLATION SERVICES:**

Children At Rectory will make every effort to provide a translator or translation services to those families that need this service. Please don't hesitate to request these services if needed.

## **BEHAVIOR MANAGEMENT:**

The Children At Rectory teachers will assist children in becoming self-reliant, responsible individuals who assume responsibility for their choices through pro-social behavior. When situations arise in the classroom requiring behavior management, our staff will work with the children to teach fairness, kindness and respect. The children will be re-directed and asked to "use their words" to express their feelings and our staff will be available to model solutions for them. We will discuss alternatives that the children may use if the situation happens again. Teachers will aid children in talking through their feelings and will immediately intervene when safety is a concern. We do not believe in ever using disciplinary methods that ridicule, frighten, or humiliate a child. Physical punishment of any type and/or the withholding of food are prohibited.

CARe follows both the Department of Public Health Child Day Care Licensing Regulations and NAEYC Accreditation Performance Criteria. They read as follows:

**(DPH Section 19a-79-3a) Specifically prohibiting abusive, neglectful, corporal, humiliating, or frightening punishment and physical restraint, unless such restraint is necessary to protect the health and safety of the child or other people. The operator & staff will manage the child's behavior using techniques based on developmentally appropriate practice, including positive guidance, redirection, and setting clear limits that encourage children to develop self-control, self-discipline, and positive self-esteem.**

**NAEYC Criteria: Teachers never use physical punishment such as shaking or hitting and do not engage in psychological abuse or coercion. Teachers never use verbal abuse, threats, or derogatory remarks, and do not withhold or withdraw nor threaten to withhold or withdraw food as a form of discipline.**

Staff will use the following techniques:

1. Encourage children to accept and express feelings. Staff need to acknowledge all children's feelings before trying to resolve the conflict.
2. Encourage children to "use their words" to talk through situation and resolve conflict through communication.
3. Create classroom environments to be well functioning taking into account materials available and flow of children.
4. Create classroom rules that allow environment to be safe and consistent. Allow children to participate in creating classroom rules and then verbalize rules consistently to reinforce them.
5. Staff must provide continuous supervision when addressing any behavior management technique.
6. Teachers must set clear limits for the children.
7. Offer children choices where real choices exist.
8. Use redirection techniques to offer another choice when the first choice is unavailable.
9. Get down on child's level, speak directly and in short sentences to paraphrase what each child is feeling and wanting. This approach feels like a "radio announcer" by repeating what each child is

saying. This validates each child's feelings and wants and allows each child to know that they are being understood.

10. Reinforce self-managing behavior.
11. Provide positive reinforcement for requested behaviors as well as expected behaviors.
12. Supervise, Supervise, Supervise! Keep constant supervision over children providing emotional support for those who need it as well as intervening and separating children when needed.
13. Encourage children to recognize and celebrate similarities and differences between each other and themselves. Not all children handle situations the same. Allow children to be themselves, even when dealing with conflict.
14. Teachers must never take over when a child is trying to resolve a conflict with another child (unless it becomes physical). Taking over the situation with a quick judgment shows children that bullying is acceptable. **In this case the teacher is the bully** (Child's thoughts: "A person who has more power than I do can take my power away and my feelings don't matter.")
15. Remove child from situation if child becomes physical and allow child to calm down before discussing solutions to conflict.

### **TEACHER TO CHILD RATIOS:**

The Children At Rectory program maintains a low teacher-to-child ratio in accordance with our NAEYC accreditation and State of CT licensing regulations for Child Care Centers. Our infant ratio is one teacher to three children, our toddler ratio is one teacher to four children and our preschool ratio is one teacher to eight children. These low ratios facilitate teacher-child interactions throughout the day and allow for individualized attention. These ratios are maintained during all hours of operation including indoor time, outdoor time, and field trips.

The CARE program is organized to minimize the number of teacher and child transitions during the day. We hire only teachers with both experience and education who understand our mission, philosophy, and our commitment to the children's learning. Teachers work 8-hour shifts to ensure that the children have the same loving and trusting adults to share their day with them. Occasionally, children may experience substitutes, student teachers, and/or volunteers in the classroom, who would be there to support your child's primary teacher. We are committed to support the work and professional growth of our teachers by providing a comprehensive benefit package, to ensure low teacher turnover. If you have any questions regarding our hiring practices or ratios, please contact the CARE Director.

### **PARENT COMMUNICATION:**

Our teachers will be able to maintain strong lines of communication with parents through the daily contact sheet as well as through email, Kaymbu, and informal exchanges during drop-off and pick-up. Conferences may also be scheduled with the Director and/or Teachers at any time, and may be initiated by the parents or staff. Children inevitably go through periods of growth that necessitate some adjustment in our responses to - and our expectations of - them. Open lines of communication are critical for discussing mutual concerns and making changes when necessary.

## **PARENT VISITS:**

### **PARENTS ARE ENCOURAGED TO VISIT AND/OR VOLUNTEER AT CARE ANY TIME.**

We feel quite strongly that the ability to “drop in at any time” is the best part of an on-site community program, and represents child care at its finest. May we point out the following:

1. Please be prepared to participate in the program activities. You might read a story, share a musical talent, assist children with puzzles and games, or help with clean up.
2. Teachers may be able to talk briefly with you when you arrive but if you come mid-day, please understand that Program routines quickly deteriorate if a teacher's focus is on parents rather than children.
3. Please do not wake children unless you are departing. We would prefer you to pick your child up either right before nap (around 12:30 PM) or after nap (around 2:00 PM), so not to disrupt rest time if at all possible.
4. If you bring siblings with you, please supervise them.
5. Children may cry when their parents leave the program. A loving hug or kiss, reassurance of your return, and a quick exit are most effective. Teachers are always available to help children through transitions.

Most children recover rapidly when a parent leaves (sometimes more quickly than the parent!), CARE teachers will offer assistance by holding your child, waving goodbye, and engaging him/her in an activity when you leave. As children grow, their awareness of your eventual return makes these transitions easier for everyone. When you are relaxed and confident that your child will enjoy the day, the child will respond positively to the experience.

## **DAILY SCHEDULE:**

While planning is essential for quality programming, it is also necessary to be flexible. The following is an outline of a “typical” day.

### **INFANT/TODDLER:**

7:30-8:30	Arrival Time (Free Play)
8:30-10:00	Planned activities set up for children to interact with
9:15-9:30	Snack time
9:45-10:15	Diaper time and classroom clean up
10:15-11:15	Outside play (weather permitting)
11:15-11:30	Informal Circle (transition to washing hands and Lunch)
11:30-12:30	Lunch and diapering
12:30-2:00	Naptime
2:00-2:30	Clean up, diapering, washing hands
2:45-3:00	Snack time
3:00-4:30	Outside play (weather permitting)
4:30-5:00	Clean up; departure

**PRESCHOOL:**

7:30 - 9:00	Arrival; Breakfast; & Free Play
9:00 - 9:15	Morning Snack
9:15 - 9:45	Circle Time; Story & Discussion
9:45 -10:30	Project Work
10:30-10:45	Classroom clean up and bathroom time
10:45 -11:30	Outside Play
11:30 -11:45	Closing Circle
11:45-12:30	Lunch & Bathroom
12:30 – 2:00	Resting Time
2:00 - 3:00	Clean up Nap, Bathroom, Free Play
3:00 - 3:15	Afternoon Snack
3:15 - 4:30	Outside Play
4:30 - 5:00	Clean-up; Quiet Activities & Departure

**CHILDREN AT RECTORY CURRICULUM STATEMENT**

The Children At Rectory (CARE) program recognizes the importance of child development by providing a learning environment that fosters exploration and experimentation through play. We appreciate that children gain knowledge through their relationships with people and their environment, and we enhance this connection, through a nature-based curriculum. Each day, we provide our children with opportunities to explore their world through our rural, woodland setting and make connections to real life experiences. We choose to offer natural materials and a variety of outdoor experiences that foster learning through each developmental domain.

At Children At Rectory, we understand that deep learning takes time. Children need to manipulate and interact with materials in order to gain knowledge. Teachers prepare the environment for children to engage in extended experiences, and often revisit concepts to gain further knowledge each time.

Our curriculum is both planned and spontaneous, incorporating children's developmental needs, interests and culture, as well as seasonal events. The curriculum is developed through daily observations, interactions with the children, and formal and summative assessments. Adjustments are often necessary and will come through authentic means such as changing the classroom layout to better suit the needs of the children or altering the length of gatherings to have more discussion time. These adjustments allow us to adapt teaching practices, to modify curriculum, and to identify the developmental needs of the children.

Families are encouraged to participate in curriculum planning. This can be done through daily conversations with teachers, during parent/teacher conferences, volunteering, and sharing beliefs and traditions in the classrooms. We want families to become involved in their child's learning at school, and volunteering provides parents an opportunity to see the classroom in action and build relationships with teachers and other children. We have several gatherings at CARE every year and monthly Parent Committee meetings to ensure that all members of our community have a voice. Through these means, families, teachers, and our administration can collaboratively plan for program improvement.

**Infant and Toddler Curriculum:** Our infant-toddler classroom experiences are designed to support the play within the sensory-motor stage of development for children, from birth through two. The infant-toddler classroom uses the *CT Early Learning and Development Standards*, as a curriculum framework.

We believe a child's first year of life provides a foundation for all future learning. Curriculum, during this time, supports and mirrors the bond between a parent and their child. Our goal is to provide our infants with an emotional attachment to another adult in our care. We do this through the Primary Caregiving model. Primary Caregiving pairs a teacher with an infant creating a supportive, and nurturing relationship that benefits a child's physical, social, emotional, and cognitive growth. Teachers focus on learning experiences that foster this attachment such as rocking a child face to face, playing patty cake, singing songs, reading stories, and talking with an infant.

Toddlers are curious and enthusiastic learners. Teachers prepare learning experiences that foster this need for "figuring things out." As toddlers become more independent, teachers create curriculum that allows the child to extend experiences beyond the primary relationships. Toddlers have a very limited view of the world, and therefore daily learning experiences not only give them opportunities to master what is familiar but to delight their senses with new knowledge. By providing a safe environment to explore nature, children acquire knowledge through authentic experiences that match their daily lives and honor their families' culture.

Language development is essential during the early years. Teachers provide many opportunities for dialogue with peers and adults such as, singing songs, rhymes, finger plays, reading books, and storytelling throughout the day. The classroom environment is set up for group and individual play. Toddlers, who may be at different play stages, will have opportunities to play cooperatively, alongside friends, or by themselves. Most importantly, we want the children to have daily opportunities to explore, problem solve, meet, and find success within challenges, and be happy and healthy toddlers.

**Preschool Curriculum:** Our preschool classroom experiences are designed to support the play within the pre-operational stage of development for children, ages two through seven.

Children in the preschool years are creative and spirited learners. Preschoolers need a variety of activities that give them the freedom to explore and experiment in order to become resilient in their lives. Children at this age are ready for more choices, enjoy being part of daily routines, and thrive in an environment where mistakes can create innovative thinking. Our children are provided with engaging experiences that are nature based and develop in complexity as the children change and grow. The *State of Connecticut Preschool Curriculum Framework* and the *CT Early Learning and Development Standards* provide the framework in which our teachers design the curriculum. These guiding principles allow for an integrated curriculum model where activities are cross curricular to include personal/social, physical, cognitive, and creative expression. CARE teachers also plan curriculum, throughout each term, focusing on the developmental needs and interests of the children as well as embracing seasonal events such as harvest, hibernation, and gardening.

#### **Assessments:**

The Infant/Toddler and Preschool classrooms complete a variety of formal and summative assessments twice a year. For more information regarding assessments please see the *Parent Teacher Conferences; Screening and Assessments* and the *Confidentiality* policy in our Parent Handbook.

## **PARENT TEACHER CONFERENCES SCREENING & ASSESSMENTS:**

The Children At Rectory program screens all preschool-aged children enrolled within three months of their start date. The screening tool used is the Early Screening Inventory – Revised (ESI-R). The ESI-R “is a developmental screening instrument that provides a quick overview of a child’s development in three major areas: Visual-Motor/Adaptive, Language and Cognition, and Gross and Fine Motor.” Children complete the screening one-on-one with the child’s primary teacher. The information is used to structure planning and activities to suit the child’s developmental needs and interests. In addition, the screenings may be used to make referrals to appropriate professionals

Throughout the school year, three Parent/Teacher conferences bring together parents and the child’s primary teacher. We urge parents to attend these conferences to collaboratively talk about goals and recognize the children’s progress over time. Informal conferences can be scheduled at any time by contacting your child’s primary teacher.

### **FALL**

- Preschool and Infant/Toddler: Your child’s primary teacher requests a “Meet and Greet” conference with you. This meeting allows parents and teachers to get to know each other, to set goals cooperatively, and to discuss any referrals or services the child or family may need.

### **WINTER**

- Preschool: Each child’s primary teacher completes an assessment based on the *State of Connecticut Preschool Curriculum Frameworks*.
- Infant/Toddler: Each child’s primary teacher completes an assessment based on the *CT Early Learning and Development Standards*.

### **SPRING**

- Preschool and Infant/Toddler: Each child’s primary teacher completes an authentic assessment portfolio based on observations, anecdotal notes, work samples, and pictorial evidence as well as an assessment based on *the State of CT Preschool Curriculum Frameworks* (Preschool) or the *CT Early Learning and Development Standards*.

“Authentic assessment is defined as the process of observing, recording, and otherwise documenting the work that children do and how they do it as a basis for educational decisions that affect those children.” (NAEYC) Authentic assessment provides teachers with real performance-based information that is both relevant to the child and creates purposeful learning opportunities. The children will be assessed in their classroom environment, often without them even knowing it is happening. Through these observations and documentation, teachers will record and evaluate each child’s developmental progress and learning to set further goals for the year.

We encourage parent involvement with this process. Please share any and all ideas you may have concerning curriculum, your child’s interests, developmental needs, and our assessments. We encourage all families to share their ideas, traditions, beliefs, and values in the CARE classrooms.

## **CONFIDENTIALITY:**

The Children At Rectory program understands the importance of keeping your child's information confidential. All personal information including health records, assessments, screenings, and family forms will be kept confidential, in a file located in the Director's office. Information will not be shared outside the center without a consent form signed by the parent. Only the classroom staff and program director will have access to the child's portfolio materials, screenings, checklist assessments, and health and file information. Upon a signed consent form, we will release information to therapists, specialists, school systems, or other childcare centers. Parents and guardians have the right to view a child's file at any time. Please ask the program Director if you would like to see your child's file.

## **NAPTIME:**

For our youngest children, we have tried to construct a schedule that staggers nap and both quiet time and outdoor playtime to help those who need to sleep. Occasionally, a child will need to nap while children are engaged nearby in active play. Please be assured that over time, infants and toddlers adjust to the noise level in the group care and sleep through periods of play. Parents are encouraged to avoid the practice of tiptoeing around at home, as it makes the atmosphere of school more difficult to adjust to. Infants and young toddlers can nap in port-a-cribs; older toddlers and preschoolers can nap on cots. We ask parents to provide a sheet (sheet only for infants), small travel pillows, and special blankets. All bedding items must be labeled and will be sent home each Friday to be laundered.

## **PRIMARY CAREGIVING MODEL FOR INFANTS AND TODDLERS**

The Children At Rectory Program uses the Primary Caregiving Model in the infant/toddler classroom. To give parents an overview, this model is used to create trust and a bond between teachers and children. Children naturally form attachments to caring adults. We use that bond to create a loving, trusting, nurturing environment for each child. Often you will see as your children grow they use you as a security device. First they begin life needing you completely to meet their needs. This stage is where trust and bonding begin. As time goes on they may look to you when frightened, hurt, or even just unsure of a new experience. This bond and security that has been created is what allows children to feel safe about exploration.

While we can never replace the love and trust that a parent gives, we try to model that relationship here at school. Each teacher is a primary teacher for a certain number of children. We start by observing the personalities and play of each child. As time goes by, children tend to gravitate towards teachers that they feel a connection to. That connection is then used to help your child know that he/she is secure and loved. Your child's primary teacher may change over time, as children tend to change their needs over time. Your child might need a teacher who is cuddlier and quiet to meet his/her needs. Over time your child may need a teacher who is active and structured. While the CARE teachers try not to change primaries often, if a child seems attached to a new teacher for an extended period of time, they may switch primaries.

Primary teachers are then responsible for diapering, feeding, creating curriculum, assessments, and daily sheets for each of their primaries. The consistency in routine that a primary offers just furthers the growing attachment between teacher and child. Parents then know who to ask for when calling the center to check on their child, and can feel secure that their child's needs are being met every moment of every day.

We are proud that our teacher to child ratio is small. This allows each teacher to get to know each child. Of course, other caregivers are going to help out with meeting the needs of the children, but it is good to know that both parents and children can count on a primary teacher. This model is proven to build positive self-esteem, trust, and security. We have seen amazing results in our children who grow to feel confident in the world around them and move on to preschool with both feet forward. If you have any questions concerning the Primary Caregiving Model or would like to read more about it, please feel free to contact us at any time.

### **DAILY CONTACT SHEETS:**

Every infant/toddler parent has the opportunity to receive information about their child's daily activities through the use of a "daily contact sheet." The daily contact sheets are completed electronically via iPads in the classroom and emailed to parents directly at the end of the day. Please provide a reliable email address in which to receive your daily sheet. As children grow older and their daily habits become more predictable, parents may opt to forego the contact sheet and rely on a verbal assessment on the child's day. During the first few weeks of care, both the teachers and the parents will undoubtedly find it very useful to track emerging patterns of behavior (eating, napping, toileting, etc.).

### **KAYMBU:**

Children At Rectory uses an electronic observation tool called Kaymbu. Through this tool, teachers can collect evidence of child participation, take notes about children's use of materials, note strengths and challenges, and tag the State of CT standard in which the evidence provides feedback. Parents email information is linked into this tool as well. Parents should expect weekly reports emailed from Kaymbu with your child's pictures and corresponding notes. Please inform the Director if any problems occur with your Kaymbu emails, such as not receiving weekly emails, receiving another child's pictures, or any other problems that may pop up. Kaymbu is not only a tool to help increase parent knowledge and communication in the classroom but is used as an observation tool for teacher's assessments.

### **TOILET TRAINING:**

Our teachers will work with our parents to determine an appropriate time to begin the toilet training process. Look for these signs that your child is becoming ready for toilet training:

1. Often stays dry for several hours.
2. Has fully mastered walking.
3. Is able to sit down and get up with ease.
4. Is able to communicate by sign, sound, or word, the need to use the toilet.
5. Appears to be aware of wetting or soiling diapers and might even indicate that his/her diaper needs changing.
6. Is in a cooperative period. (Children between two and four years of age alternate between periods of negativism and cooperation. It makes sense to wait and start toilet training when your child is most agreeable.)
7. Parents should consider their own schedules as well in determining the best time to begin toilet training. Vacations (extended periods of time together) may offer good opportunities, whereas periods of high stress (due to illness, job changes, etc.) in a household may make the process more difficult.

The CARE teachers are experienced in toilet training and will tailor each experience to the needs of your child. If your child needs privacy, help wiping, or help getting on or off the toilet, please let your teachers know so they can best serve the needs of your child. CARE Staff will only begin toilet training children with the consent and full support of parents. Toilet training needs to be a cooperative event and children should be following thru at home as well as at school.

### **TOILET TRAINING POLICY:**

The CARE teachers, with the support of parents, will allow a child to visit the toilet every hour or as needed. The child will be able to sit and try with a teacher's supervision. Each child will wash his/her hands after each visit to the toilet. Potty chairs can be provided for a child if needed. Strict sanitation policies on potty chairs are always followed.

If a child tries to train for one week with no success, with consistent accidents, no verbalization that child has to go, and is not showing the above signs of being ready, then we will delay toilet training for one month and then try again. If within that month, the child shows signs of being ready we will pick up again where we left off. Our teachers want each child to feel ready and comfortable with the toilet training process.

### **DISPOSABLE TRAINING PANTS POLICY:**

Children At Rectory supports appropriate developmental toilet training practices. Therefore, "disposable training pants" or "pull-ups" will not be allowed when children are attending our program. We ask that parents provide their children with disposable diapers, cloth diapers with rubber pants, or cloth training pants, which all support the natural toilet training process. We feel strongly that the marketing of "disposable training pants" is very confusing and misleading to young children. The Children At Rectory teachers would be happy to serve as a resource for parents to provide developmental information and appropriate articles and materials pertaining to positive developmental practices concerning this issue.

## **BITING:**

Unfortunately biting, hitting, grabbing, shoving, and pinching are fairly typical behaviors for toddlers. These behaviors can be exasperating for parents, teachers, and the children. However, it is our responsibility to guide children through these issues in a positive and supportive way.

Biting occasionally happens in childcare settings in which infants and toddlers are enrolled. It is common developmental behavior for children between 12-36 months of age. Some children never bite, but some do it frequently for a period of time.

### **Reasons Why Toddlers Bite**

- *Expression and Communication:* Toddlers are still at the stage of acquiring language skills. Even a child with good language skills may still not know how, why, or when to communicate.
- *Emotional Release:* Toddlers have not learned how to identify or label such feelings as fear, anxiety, frustration, anger, jealousy, and rejection. They are often emotionally volatile as witnessed by temper tantrums.
- *Initiating Social Interaction:* Not all biting is done with the intent to harm or to communicate negatively. A toddler's inexperience with social interactions and emotional expression may lead to biting as a means of saying, "Can I play?" or "I like you."
- *Sensory Exploration:* Toddlers are active learners who eagerly explore their environment with all of their five senses. Young children explore by placing items in their mouths. It is common for the "biter" to look shocked at the bitten child's behavior.
- *Teething:* As children go through the teething process, it is normal to see them mouthing toys, objects, and even people in an attempt to alleviate pain. They do not always understand that if they choose to teethe on another child, it will hurt that child.
- *Stressed Out:* Children in stress often resort to negative means of interaction. They do not have a pool of mechanisms from which to choose.
- *Protecting Their Territory:* Toddlers are extremely egocentric and do not like it when another child invades their territory. Due to the lack of language development and social finesse when another child repeatedly invades their space or takes toys from them, they may respond by biting.

## **BITING POLICY:**

- The child who bit is calmly redirected. We do this by providing alternative things to bite: Teething rings, a piece of terry cloth. The child is told, "You can bite this but I cannot let you bite people."
- Children are offered information: "Biting hurts, you cannot bite." By telling them that it hurts and allowing them to observe the bite mark, they begin to learn that biting does indeed hurt.
- The child that was injured is consoled and the bite quickly cleaned with soap and water. Ice is placed on the bite to decrease the likelihood of swelling and bruising.
- If the bite has broken the skin, the primary caregiver will contact the parent of the injured child immediately, so that a physician may be contacted.
- When appropriate, the child who bit is offered a chance to help the injured child, if the injured child is receptive to this. This technique helps the child to understand that he/she made a mistake but can also help to fix it.

- The child who has bitten is “shadowed” to help the staff understand what may be causing the child to bite and in order to prevent further incidents.
- The primary caregiver of the biter will record the incident on an accident report for the parent, teacher, and Director to sign.
- The name of the child who has bitten is not released.
- The primary caregivers will verbally share the incident with the families of both children at the end of the day.

It is important for parents and teachers to work together to develop a strategy to change this behavior. Biting can be frustrating for the parents of the bitten child and while there may be no “quick fix” for the behavior, we will make every attempt to stop the biting and to balance our commitment to the family of the biting child with that of the other families.

### **What to Do When A Child Bites**

By Laura Davis and Janis Keyser

National authors, lecturers & workshop leaders.

Biting is one of the most challenging behaviors that toddlers exhibit. Knowing some of the reasons a child bites can enable us to figure out how to help our toddlers learn more positive behaviors. Although not all toddlers bite, biting is a normal behavior for two-year-old children. At this stage in their development, children are eager to communicate, but have few words, are full of strong feelings that need to be expressed, are victims of sore gums and are curious about how their actions can make things happen in the world around them.

Furthermore, toddlers have not fully established themselves as separate beings from the people around them. They still believe that whatever the feel, other people feel, also. Because biting feels good to them, it makes sense to toddlers that it should feel good to the other person, as well.

Toddlers’ fascination with emotions lead them to research what causes certain feelings, what they look like in other people’s eyes and what makes emotions change. They need to test these things again and again to find out if it works the same way every time. “If I bite Devin and he cries, will it work the same way if I bite Olivia?”

While it is important that we acknowledge and understand the ideas children are trying to express through biting, it is equally important that we stop biting from happening. Here are some suggestions:

- **Observe to find out when biting is likely to happen.** If we watch the instances in which a child is likely to bite we can gain understanding about the causes of biting and the situations to watch for in the future. Children may bite because they are tired, because they feel crowded, because they want to say “hi” to another child, because they don’t want a toy taken away from them, because they are teething, because they are looking for a reaction from another child or an adult, or because they are having feelings they don’t know how to express.
- **Provide close supervision and prevent biting whenever possible.** If you know that your child or a child in your care might bite in certain situations, it is important to stay close enough

to that child to prevent whatever bites you can. You can gently cup your hand around a mouth that is preparing itself for a bite and say, “I won’t let you bite Ricky, biting hurts him.”

- **Support your child’s childcare program.** Often, in childcare if there is a child who is biting regularly, the program will designate a teacher to “shadow” the child, staying close enough to keep all the children safe. This can be a stretch for many, already small teaching staffs. Parents may be able to support the program by volunteering to help in the classroom or office for a time to allow a teacher to offer special attention to the biting situation. Parents and caregivers working together for a solution can provide the extra resources needed to get through this difficult, though normal, developmental behavior.
- **Offer children information.** Children don’t automatically know that biting hurts. Telling them that biting hurts, and allowing them to observe the bite mark and the crying friend will help them learn, over time, that biting is hurtful to others.
- **Provide redirection and alternatives.** Toddlers are like two-ton trucks. When they get going with an idea, it can be hard to stop them. Our best strategy is to redirect their energy. We can do this by providing alternate things to bite. “You can bite this plastic hand, but I can’t let you bite people.” “I’ll tie this piece of terry cloth to your overalls. You can bite it when you feel like biting.”

You can also provide the child with other tools to express what he is trying to say. “If you want to say, “Hi” to Jesse, you can wave your hand at him.” “If you don’t want Terry to take your truck, you can hold on tight and say, “Mine.”

- **Avoid shaming.** Often in our frustration we find ourselves shaming or blaming children who are biting. It is more helpful to children if we keep focused on the fact that they are good kids making mistakes, rather than that they are “bad” kids.
- **Offer children a chance to help.** If we send the “biting” child away from the scene of the accident without giving him a chance to help, we are missing an opportunity to teach him that when you make mistakes, you can also help to rectify them. We may be tempted to require children to say they are sorry, but more effective than a rote response, is asking children if they could do something to help Mary feel better. Children can bring ice, a cold cloth, a special blanket or a kiss to the injured spot, if the injured child is receptive.
- **Stay calm, firm and clear.** Biting can scare adults, even more than it does children. Children readily pick up on our panic, allowing situations to escalate, if adults are yelling, hurting or scaring children. Working to stay calm can help children relax enough to learn from the situation.
- **Give it time and get help if necessary.** Despite our best efforts, biting doesn’t always disappear immediately. Some children bite one or two times and never try it again. Others may bite on and off for a few months. If you feel like your child’s biting is not just developmental in nature, but is connected to some other emotional issue he is dealing with, it might be useful to get some counseling. Sometimes counseling directly with children is helpful, but often,

counseling for parents can help them work through issues and offer tools for them to help their child.

Books for Parents:

- Hewitt, Deborah. *So This is Normal Too?* Shows you how to deal with behaviors like biting, hitting, toilet training, etc.
- Madison, Linda. *Parenting with Purpose*. Easy to read, helpful guide for parents with young children. Learn to understand what to expect from your children and how to handle the various developmental stages they go through. Great down to earth advice.

## **CHALLENGING BEHAVIOR POLICY:**

The Children At Rectory program recognizes that children of all ages will exhibit challenging behaviors. Part of growing and learning is testing the boundaries, taking risks, and pushing the limits to find a path that works. Some children will exhibit these behaviors more than others. The CARE staff will support the child during this time by providing a safe, nurturing, and respectful environment. Staff will use the NAEYC Performance Criteria for Addressing Challenging Behaviors to guide them. These Criteria are as follows:

- For children with persistent, serious, challenging behavior, teachers, families and other professionals work as a team to develop and implement an individualized plan that supports the child's inclusion and success.
- Teachers observe children who have challenging behavior. They identify events, activities, interactions, and other contextual factors that predict challenging behaviors and may contribute to the child's use of challenging behaviors.
- Teachers identify the purpose of the child's behavior and how the child's needs are met through their use of challenging behavior. They then teach social, communication, and emotional regulations skills the child can use in place of challenging behaviors.
- Teachers focus on teaching the child new skills and providing supports for the child's appropriate behaviors rather than focusing solely on reducing the challenging behavior.
- Teachers use environmental modifications, activity modifications, adult or peer support, and other teaching strategies to support the child's appropriate behavior and prevent the child's use of challenging behaviors.
- Teachers respond to a child's challenging behavior in a manner that
  - provides for the safety of the child and the safety of others in the classroom
  - is calm and respectful to the child
  - provides the child with information on acceptable behavior
- Teachers actively teach children social, communication, and emotional regulation skills.

- Teachers help children manage their behavior by guiding and supporting children to
  - persist when frustrated
  - play cooperatively with other children
  - use language to communicate needs
  - learn turn taking
  - gain control of physical impulses
  - express negative emotions in ways that do not harm others or themselves
  - use problem-solving techniques
  - learn about self and others

## **RECTORY SCHOOL CAMPUS:**

Based on the belief that children enjoy and benefit from interactions with the world around them, staff will provide many opportunities for children to explore the Rectory School Campus. Children might watch a sporting event, attend a play or concert, borrow books from the library, or take a hike in the woods. The children will be able to participate and discover a variety of environments, including the gymnasium, science labs, library, and music room.

## **COMMUNITY SERVICE STUDENTS/ STUDENT TEACHERS:**

Children At Rectory will welcome a variety of “extra” hands throughout the year. A number of Rectory students (grades 5-9) or Pomfret School students (grades 9-12) may rotate through CARE each season. We also will have Quinebaug Valley Community College student teachers each semester completing a variety of Early Childhood classes. They will assist CARE teachers by interacting with children at play, or helping with routine maintenance. All visitors/students are always supervised and are never left alone with the children.

## **TOY POLICY:**

We find that the staff and children spend a substantial part of our day discussing and eliminating conflicts concerning toys brought in from home. The children often misplace their favorite toys, are sad if something is lost or broken, and feel hurt or left out if they are not included in the play. **THEREFORE, WE ASK THAT THESE SPECIAL TOYS BE LEFT AT HOME!** We appreciate your help in this matter, and we pledge to provide a fun and enriching program for your child. The children ARE allowed to bring in ONE stuffed animal from home in order to comfort them during resting time. If children do bring in toys, we will place them in the office until parents pick them up at the end of the day.

## **ORAL HEALTH POLICY:**

All children who have lunch and one or more snacks while in our care will be given the opportunity to brush their teeth. This includes full day children, half-day afternoon children, and toddlers (any child over one year of age). Parents must provide the toothbrush, labeled with the child’s name and a clean toothbrush holder. No toothpaste will be used. If any oral health questions or concerns arise please notify the Director who will direct you to our dental consultant, Valerie Alessandro.

## **MEDICAL FORMS:**

Certain medical forms must be maintained in the files at Children At Rectory to comply with state regulations. These include the “Physician’s Record of Immunization and Pre-Admission Examination” and a Health Information Sheet. In addition, an Emergency Medical Release Form is kept on file should emergency treatment become necessary. All of these forms are included in the paperwork needed for enrollment. Our Director and Nurse Consultant will be reviewing forms periodically to ensure that they are up-to-date.

In the event that your child becomes ill or sustains an injury while at school, the teachers will complete an accident or illness report. One copy will be given to the parent whereas the other will be kept in an injury/illness log onsite.

## **SICK CHILD POLICY:**

Illness is a fact of every child's life, and so it's no secret that children in school - particularly a group's youngest or newest members - seem to be sick most often. We recognize the enormous stress that comes from having to juggle work schedules and stay with a sick child, and we will do everything we can to ensure that the opportunities for disease transmission at CARE are minimized.

Parents can do their part in several ways, most importantly by recognizing the signs and symptoms of illness that warrant keeping a child at home, and supporting CARE teachers when the decision is made to send an ill child home. We cannot overemphasize the value of hand washing as an effective tool in stopping the spread of disease. Therefore, we will be washing your child's hands several times a day with an antibacterial soap. Also, parents should not add medicine to bottles or sippy cups to be given while the children are at school. We are not allowed to provide any medication while the children are in our care without a medical form signed by the child's physician and a parent's approval.

Any child who is recognized as sick according to the following list will be removed from the group and given a cot and blanket away from the other children until a parent or escort can pick up the ill child. Parents will be notified to pick up a child if the child cannot participate in the day's activities due to illness. Parents/escorts have one hour from the time of notification to pick up the ill child.

Any of these conditions would prevent your child from attending the CARE Program, or would warrant us sending your child home. \* It is our expectation that the child will remain at home until he/she has recovered sufficiently to return to full activity at the Center.

- FEVER:** Over 101. **Child may return 24 hours after temperature has returned to normal.**
- DIARRHEA:** Loose, watery stools. Watch for malaise, irritability and poor appetite. **Child may return 24 hours after last normal bowel movement.**
- VOMITING:** One time if 12 months old or older. Watch if accompanied by fever and/or lethargy. (Infants assessed differently since regurgitating and vomiting is common due to food intolerance.)
- THROAT INFECTION:** Streptococcal: Attendance is determined after throat culture results. **Child may return 24 hours after treatment.**
- CONJUNCTIVITIS:** Contagious eye infection showing redness inside eyelid (pink eye or thick discharge). **Child may return after 24 hours of treatment with "topical" antibiotic.**

- SKIN RASHES:** All contagious rashes including, impetigo, 5<sup>th</sup> disease, pinworm, and any rashes with open sores need to have treatment and a physician's note allowing child to return.
- HEAD LICE:** Return is dependent on treatment and a physician's note saying child is clear of all lice and eggs.
- CHICKEN POX:** Child may return only after new eruptions have ceased and the scabs are all scabbed over.

\*This is not meant to be a complete listing. There may be other conditions that require the CARE teachers to send your child home. **Please note that these policies are strictly enforced for the health and safety of ALL children and teachers.**

### **MEDICATION POLICY:**

The Children At Rectory program will store and administer prescribed inhalers, fever reducers, epi-pens, non-prescription topical medications and EMERGENCY oral medications (i.e. Benadryl) with parent and doctor's consent. An authorized form, which must be signed by a doctor and a parent, is available in your Family Handbook or if you contact the Director.

The form must include the following information:

- The child's first and last name, address, and birth date
- The drug name
- The prescribed dosage
- The method of administration
- The time to be administered
- The side effects
- The prescriber's name and address

All medications must be in their original container and clearly labeled with child's name and directions for use. The medication label must have the following information:

- The child's first and last name
- The date that the prescription was filled
- The name of the health care provider
- The expiration date of medicine or the period of use of the medication
- The manufacturer's instructions
- The name and strength of medication
- Instructions on how to administer and store the medication

Except for non-prescription medications and pre-filled injectables, (i.e. epi-pens) all medications will be stored in a locked container and, if directed by a manufacturer, refrigerated. Controlled medications will be double locked. Non-prescription topical medications and pre-filled commercially prepared injectable medications will be stored away from food and inaccessible to children.

## **CLOTHING:**

Because of the wide range of activities, it is recommended that children be dressed in washable, comfortable clothing. Water activities, sand play, and occasional bathroom accidents necessitate that an extra set of clothing be kept at the school. All extra clothing should be marked with the child's name. If wet or dry clothes are sent home, please return a clean set of clothes the next day. Please remember that children are taken outdoors daily (weather permitting) and should be dressed accordingly with sun protective clothing in warm weather and warm layered clothing in cold weather. ALL CLOTHING SHOULD BE LABELED.

## **OUTDOOR PLAY:**

All children should come prepared for daily outdoor play. Boots, raincoats, snowsuits, sweaters, hats, jackets, and mittens, (all labeled, please) allow the CARE teachers greater flexibility in determining appropriate outside activities. Children play outside in the morning and in the afternoon as weather permits. Our fenced-in playground includes a separate space for our infants & toddlers with a sandbox and their own climbing gazebo. Our preschool play area includes open space for physical games, a climber with a bridge and slides, a large sandbox, a garden, and water access. Ride-on toys are available for older children who wish to ride on the adjacent outdoor basketball court. Infants/Toddlers also have the option of going on walks around campus via backpack and strollers.

## **HEALTH POLICY PROTECTION FROM SUN, COLD, AND INSECTS**

Children At Rectory provides outdoor play every day. Due to this we are very conscious of protecting the children from sun injury, excess cold, and insect-borne disease. CARE will take every precaution to ensure the children are safe. The children will be able to play in the shade when out on the playgrounds and from May 1-October 30 will apply sunscreen both in the morning and afternoon. CARE will provide sunscreen that is SPF 30 or higher. If parents want to provide insect repellent for their children (over two months) we will store it in our cabinet labeled with the child's name. Children (over two months) can only have insect repellent applied once a day. Children should be provided with weather appropriate clothing and will not be allowed to go outdoors for an extended time (a walk to the gymnasium is acceptable) during cold months without a hat, mittens, a warm coat, and warm shoes (boots or other). Children At Rectory will have spare clothing in case a child is missing any of these items or the child's clothing becomes wet. Children are not to go outside when the temperature is below 32 degrees and has a wind chill advisory.

## **ORANGE & BLACK DAY:**

Orange and Black Day is named for Rectory School's colors—orange and black—and is an annual day when students celebrate our community with games in lieu of classes. The order of the colors in the name of this day is determined by the previous year's team winner, so if the Black team won last year, then the day would be called Black and Orange Day and vice versa. K-9 students come to school as usual and participate in indoor and outdoor Olympic-type events such as sledding, ice skating, basketball, puzzle making, block building and scavenger hunts. Our CARE children will participate in appropriate events, and cheer on their friends in grades K-9.

Each student in the school is assigned to either the Orange team or the Black team. All members of a family are on the same team, so if your child is on the Orange team and has an older sibling at Rectory, the sibling will be on the Orange team. On this day, all students on the Black Team wear black play clothes, and all students on the Orange Team wear orange play clothes. The colorful attire can be humorous. (Parental assistance with this can be helpful.) Students will spend part of the day outside, so warm clothing is important.

## **PET POLICY:**

Children At Rectory may provide a healthy, friendly pet for the children. It will be the responsibility of the CARE teachers to feed and water the pet, and keep the environment well cleaned.

- \* The children may assist staff members when caring for the pet. Children will be taught to handle the pet with respect and care.
- \* Staff will assume total responsibility for keeping cages clean. The cage should be thoroughly cleaned and sanitized every Monday morning and, when necessary, at various additional times during the week.
- \* The animal shall be immediately removed from the classroom if any signs of illness occur.
- \* Each time a teacher or child handles the pet, their hands should immediately be washed using antibacterial soap and water.
- \* When a child handles the pet outside of its cage, a teacher will always be in constant supervision of the animal.
- \* If a child is ever injured by a Children At Rectory pet, or by any animal on the Rectory School Campus, the staff member who witnessed the injury will document the injury. This documentation will be sent to the parent, and the Rectory School campus Nurse.

## **FIELD TRIP POLICY AND PROCEDURES**

Field trips can be an educational and fun way to bring concrete experiences to young children. Safety on a field trip needs to be the number one concern. Please be advised of the following:

- All children must have the following in order to attend the trip:
  - A signed permission slip
  - Medical Emergency information
  - Car Seat or Booster seat

- All children must be assigned to a designated teacher who will have a list of the children they are responsible for.
- Head counts must be taken frequently and whenever the group moves from one area to another.
- If a teacher (with a group of children) breaks away from the larger group, he/she must be carrying a cell phone on them for emergencies.
- Please be aware of where the first aid kit or first aid center is at the destination.
- Children with disabilities will have access to all field trips via Rectory School buses. Children with medical disabilities must be assigned to the Head Teacher for monitoring and if needed administration of medication.

### **SNACKS:**

Our classrooms will provide a nutritious daily snack for your child. Examples of snacks include fruit, cheese, crackers, rice, and vegetables. CARE will only serve water to the children during school hours.

### **FOOD PHILOSOPHY:**

We believe that each child should be allowed the opportunity to be exposed to a variety of food choices. Snacks and mealtime should be a pleasant social experience in which each child can eat at a leisurely pace. To support conversational skill, teachers will sit at the tables with the children at mealtimes and snack time and engage the children in meaningful conversation. No child will be denied a meal for any other reason than written medical direction or forced to eat against his/her will.

We promote children to make their own healthy choices and encourage nutritional awareness when parents are preparing lunches. We will place your child/children's food choices on the table in front of them. Teachers will not withhold any choices that are packed in your child's lunch. Please only include items you would want them to eat. Please be aware that for children younger than four, the following foods are a choking hazard; hot dogs (whole or sliced into rounds), whole grapes, nuts, popcorn, raw peas, hard pretzels, spoonful's of peanut butter, chunks or whole raw carrots, and meat that is larger than can be swallowed whole. We encourage parents not to pack these options, or to cut pieces to non-chokable sizes. Any unfinished portions of lunch are returned in the child's lunchbox. This enables parents to monitor appetite level, likes, and dislikes. Unless pre-approved by a teacher, **we will not serve candy or soda at the Children At Rectory program.**

The CARE program will provide a nutritious morning and afternoon snack for your child; we ask that you provide lunch, complete with one beverage, if your child will be here at lunchtime. A refrigerator will be available to store foods for your child.

Children are fed according to their individual needs. Infants are held and/or rocked for bottle feedings. Please send in as many individual bottles of formula or breast milk as your child will need in his/her time with us. All bottles and food containers must be labeled with your child's name on it. All foods should be cut into non-chokable pieces and ready to serve. Examples: apples and oranges (peeled and or sliced), hard-boiled eggs (peeled), packaged sandwiches or foods need to be pre-assembled. We have a microwave in the center so lunches that need to be heated are allowed, providing that they are in a microwavable container and just need to be reheated, (no frozen dinners). Please do not mix cold items in containers with food that needs to be heated.

**STATEMENT OF UNDERSTANDING:**

The teachers at the CARE Program will work very hard to provide a positive experience for every child. We will do everything we can to meet the varied needs of the children enrolled. There may be times, however, when we will not be able to meet the needs of a child and/or family. In such a case, after exploring the resources available to us, we may determine that our center is not the best place for a child. We will then work with the family to find childcare arrangements that are better suited to the child and family.

## PRESCHOOL PARENT CHECKLIST

- \_\_\_\_\_ A complete set of clothing that is weather appropriate including socks and multiple sets of underwear and pants/shorts in case of accident.
- \_\_\_\_\_ Blanket, small travel pillow (if needed), crib sheet for cot, and stuffed animal friend
- \_\_\_\_\_ Lunch box or bag (clearly labeled) with pre-cut **ready to serve food**. We have a microwave to heat lunches; please make sure the food is in a microwavable dish. No frozen dinners please. Please include a sippy cup, juice box, or water bottle with a drink for lunchtime. Please be sure the cup/sports bottle you provide is leak proof. We provide utensils and napkins.  
(We will provide a nutritious morning and afternoon snack)
- \_\_\_\_\_ Diapers and wipes (if necessary)

Please be sure to mark all items clearly with child's name. Use a permanent marker, and re-do as necessary. Don't forget jackets and boots!

Any soiled clothing will be bagged up and sent home at the end of the day.

Lunches will be refrigerated. Please label the lunch box/bag. Preschool children clean up and throw away all opened food. We ask the children to repack anything that is unopened to give parents an idea of what was eaten.

Parents need to check cubbies to know if clothing, diapers, or blankets need to be taken home or be replenished. Please check on a daily basis. Thank You!

## INFANT/TODDLER PARENT CHECKLIST

Depending on the age of your child and the length of time that she/he will be in the program daily/weekly, you will need to supply some or all of the following items:

- \_\_\_\_\_ Formula, breast milk, milk, or juice in individual **plastic** bottles or sippy cups. Please supply a bottle for **each** feeding. Caps and bottles must be clearly labeled with your child's name. Breast milk may be stored in the freezer with date expressed and expiration date.
  
- \_\_\_\_\_ Food (lunch) that is pre-cut and ready to serve. If food must be warmed, please put it in microwavable containers. Please bring food in a lunch box or bag, which is labeled with your child's name. Include in box/bag (as needed): bib, sippy cup, bowls, and utensils. (We will provide a nutritious morning and afternoon snack.)  
**All children under 12 months of age must be provided meals and snack food by the parents.**
  
- \_\_\_\_\_ Disposable diapers and wipes. In order for staff to use diaper ointment, your child's pediatrician needs to sign a Medical Permission slip. This can be found on our website [www.rectoryschool.org](http://www.rectoryschool.org) under School Programs. Non-prescription ointment can be signed for up to 6 months. Prescription ointment needs to have specific dates and times for application.
  
- \_\_\_\_\_ Crib sheet for cot or portable crib sheet for play-yards/pack-n-plays, blankets, etc. for napping.
  
- \_\_\_\_\_ A complete set of clothing, including socks and undershirts.

Please be sure to mark all items clearly with child's name. Use a permanent marker, and re-do as necessary. Don't forget jackets and boots

Any soiled clothing will be sent home at the end of the day. Utensils, cups, and bottles will be rinsed before they are put back in the lunch box/bag, and should be given a sanitizing wash at home.

Lunches will be refrigerated. **Please be sure to label the lunch box/bag.**

Parents will be notified when items (diapers, wipes) run out. We will try to give parents advance notice on the Kaymbu Daily Contact Sheet that is emailed to you nightly. It would be enormously helpful if parents would check supplies as well. Thank you!