

Renaissance center for culture and Education.

Renaissance la petite academy

240 Quackenbos st NE Washington DC 20011

2022691351/3014558419

Fax:2025261230

E-mail:Elisabeth.hando@gmail.com

Monday through Friday & From 6AM to 11:30 PM

PARENT'S MANUAL

We provide care and educational activities for babies, infants, toddlers, preschoolers, and after-school children.



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MY PHILOSOPHY

As a child care provider, I have a strong belief that ALL children are diverse and unique individuals who have strengths and are naturally curious. Children need to be provided with an organized, child-directed learning environment that emphasizes mutual respect, fun, discovery, literacy and addresses sensory needs. In a supportive environment, I will provide the conditions for all children to construct knowledge, focusing on the learning process rather than the end product.

Incorporate French into our students' daily lives such that it becomes their form of communication within the classroom. By consistently introducing French in a structured way we are setting the stage for the acquisition of native-like pronunciation and intonation, and advanced language proficiency.

Program Philosophy is based on principles of child development supporting the child to gain a sense of self-worth by helping them develop at their own individual pace while learning basic skills feeling confident, secure enough to explore and grow in a stimulating educational and social environment.

MISSION

Our mission at the “Renaissance la petite Academy” is to prepare young children to become the citizen of the world by creating a joyful, playful, and nurturing environment that immerses students in a second language. Our program strives to instill the disposition, knowledge, and skills required to succeed in a highly interconnected. We offer full French immersion childcare and preschool with dedicated and professional native and near-native French speaking staff. Organic meals and snacks included in tuition. Large outdoor play space. Working toward Amazing community of families, both French-speaking and not!

GOALS

- To offer early childhood care services in a way that is specifically designed by my knowledge in early childhood education, according to the family’s priorities, beliefs, and needs of the child.
- To develop a nurturing relationship with each child and their family.
- To provide play opportunities for all children who are enrolled in my program.
- To provide support and help for families as they seek out resources to meet their child’s needs.
-

To help children:

- develop effective communication skills;
- develop the ability to choose and follow through on personally meaningful experiences;
- develop large and small muscles through play-based activities;
- by demonstrating through interaction with the developmentally appropriate environment and through self-initiated and teacher-facilitated activities, increasing levels of conceptual and cognitive development;
- by demonstrating an awareness of daily routine;
- develop a level of independence in self-care skills;
- develop problem-solving strategies;

- develop aesthetic appreciation as they explore the developmentally appropriate environment around them
- Stimulate early critical thinking, a developmental benefit of language immersion
 - Build the lifelong skill of native French speaking
 - Engender respect for diverse cultural traditions
- We believe that this path promotes confidence and a love of learning, within the context of a fun, engaging, & collaborative environment.

CURRICULUM

I incorporate a preschool curriculum into our daily activities to support infants and toddlers to have a nurturing, consistent, and loving environment, and to prepare older children for school. I offer individual activities that are specifically designed to help the child grow and develop based on his/her strengths and weaknesses; addressing all areas of development.

I use *The Creative Curriculum® for Preschool* that includes new research and theories from the field of early childhood education into a practical, easy-to-understand approach to working with children and their families. It is a comprehensive curriculum with a clear organizational structure and a particular focus on interest areas.

GUIDANCE AND DISCIPLINE

I, as a child care provider, will work to create an environment that allows children to explore and be active, without requiring a lot of rules and restrictions. I will use positive guidance, redirection, and setting of clear-cut boundaries that foster the child ability to become self-disciplined. I will encourage children to respect other people, be fair, respect property, and learn to be responsible. I will share with the parents, daily progress of the day both positive and negative. At times, every child misbehaves in one way or another and I will handle each situation individually. I do not advocate “re-punishment” at home for a situation that happened hours earlier. Children respond positively if parents and providers work as a team. Parents may be asked to reinforce expectations.

In order to help protect all children in our care from physical and psychological harm, I have adopted the following guidelines:

- Educate myself as a child care provider and motivate parents about child development and encourage an appropriate understanding of toddler aggressiveness.
- Recognize that toddlers have a very short attention span.
- I will be cautious and keep a record to help determine the cause of frustration that prompts the behavior.

The following is a step plan, which is dictated by child’s behavior.

- Parent-teacher conference;
- Written plan for improving behavior;
- Temporary removal from the program (this would require payment to reserve child’s slot);
- The above plan is at the discretion of the provider and may be accelerated, if necessary.

Discipline problems are avoided whenever possible by the following techniques:

- A well-organized room;
- A well-organized routine;
- Offering a wide variety of prepared activities;
- I, as a caregiver, expect parents to cooperate and work together with me in any problem which might exist during the hours of care provided;
- Corporal punishment (hitting and spanking) is not permitted.

ENROLLMENT CONDITIONS

No child will be denied enrollment on the basis of his/her race or religion. I retain the right to deny enrollment if all our spots for a particular child's age group are filled. I do not make it a policy to deny enrollment on the basis of a child with special needs. However, if after talking with the parents of such a child we realize that I do not have the training, equipment, facilities, etc. to work with the child, we will not accept the child. This is in the best interest of the child, since my goal is to meet the needs of each child. If I am not sure whether or I can meet the needs of a special needs child, I am willing to try.

When a child with a specific need or needs related to a medical condition is enrolled, I work with the parents and the health care provider to develop a special health care plan for that child.

AGES OF CHILDREN ACCEPTED

We accept the children under **six (6) years old.**

DAYS, HOURS, AND PERIODS OF OPERATION

The Program is open **Monday-Friday. We are open from 6 AM to 6 PM, with the exception of emergency**
****Optional**

Children who remain on Extended Hour Period from 6:00PM to 11:30pm will follow the schedule below(PAGE17)

Your fee is based on the hours you contract for, not the hours that I am open. If at times you require an earlier drop off or later pick-up that what we have pre-arranged, you must schedule this in advance. An extra fee may be charged.

TYPE(S) OF SERVICES PROVIDED

We provide child care for infants, toddlers and preschoolers and school age children before and after school, during vacations and on pupil-free days.

REQUIREMENTS FOR ENROLLMENT

During the interview you received a checklist which covers the requirements for enrollment. This must be followed in order to enroll your child in my program. All paperwork must be received before your child may start.

Before your child starts the program, it is wise to make a visit with the child during my regular day care hours (mornings are best, since the children sleep in the afternoons). This way your child gets to see what happens in day care and gives him/her a chance to meet the other children and me. This visit is a good time to bring any items you need to leave here (e.g., diapers, extra clothing, etc.). I am required to have a complete change of clothes for each child. If you or your child is very uneasy about day care, at least two

visits are recommended: the first during my off hours when your child will not be overwhelmed by the other children and the noise, and will have all the toys available to him/her. During this time I will be able to give your child my undivided attention. The second visit could be during regular day care hours.

The following forms must be completed before your child starts my program:

1. Authorization for Child's Emergency Medical Treatment
2. Authorization to pick up child (Release Information)
3. Child's Annual Health Certification with physical examination (signed by a physician)
4. Child's historical information
5. Contract and Acknowledgment of Policies
6. Emergency Information
7. Field Trip Consent
8. Food Allergy / Sensibility / Food Preference Consent
9. Getting to know your Infant / Getting to know your pre-school age child
10. Immunization Record
11. Miscellaneous information form
12. Oral Health (Dental Provider) Assessment Form
13. Permission for Medication
14. Permission to Administer Non-Prescription Medication
15. Picture Consent
16. Registration fee and arrangement of payment
17. Registration Record for Child receiving care away from home

WAITING LIST

In the event that there is no space available for your child, a Waiting List form may be completed. Children will be placed in the waiting list, and as space becomes available in the age appropriate group, parents will be notified.

IMMUNIZATIONS

Before enrollment in the program, all children must be immunized, unless written opposition to this on religious or medical grounds is on file. In the event that the parent is requesting an exemption from immunization the District of Columbia Immunization Exemption form should be completed by the parent. This form will be kept in the child's file and forwarded to the District of Columbia Department of Health Immunization Program in lieu of a current vaccination report.

PAYMENT PROCEDURES

You may pay by cash or check, but checks give you a record of your payment to check with my figures at tax time. If a check is returned I will notify you and will ask for payment in cash. After the second returned check, I will accept only cash.

If you get paid every other week and it is easier to pay every two weeks, talk to me and we will work it out.

Day care fees are daily rates paid weekly, on Fridays for the following week.

You are required to pay the weekly fee whenever the center is open, if you have your child scheduled for that day, whether or not the child is in attendance. This fee ensures that the child's spot is held for him/her.

REGISTRATION FEE(Not apply for child under subsidy program)

At the time of acceptance into my facility and the signing of the contract, there will be a \$ 40 charge.

This charge will be refunded to you as credit after 60 days at my facility. If you leave before 60 days it will not be refunded.

Tuition fees are an enrollment entity and not based on the number of days attendance. **Tuition rates are on weekly basis. Payments required on Friday.** This may be paid by the month if desire. Simply multiply the number of the weeks by the fee due. More than one month at a time is not allowed.

Tuition will be considered late if not paid by noon on **Friday** and there will be a late charge of **\$ 20**

A check or money order may be used to pay tuition and made payable to:
Renaissance Center

There will be a **\$50** charge for returned checks. Checks will not be re-deposited. Payment plus the **\$ 50** fee must be paid in cash or money order.

Cash payments should be placed in an envelope with the child's name and amount enclosed. The envelope should be placed in the payment box or given directly to the provider. Parents are required to pay the same weekly fee regardless of the days missed for illness, vacations, national holidays, or weather related closures. No refunds for absence.

For each calendar year a family may take two weeks' vacation while the day care is open at a fee of **\$ 75** per week to hold your time slot. A two-week written notice of this vacation period is required. If no notice or less than two weeks notice is given, a full, weekly averaged fee will be charged. .

I HAVE A STRICT NO PAY-NO PLAY POLICY

I will give you a two-week notice of any changes in my fees or policies.

TERMINATION OF CARE

If for some reason you decide to no longer bring your child to my day care, I require a two-week written notice. This will give me time to find a child to fill your child's spot. Payment is due for the two-week notice period whether or not the child is brought to daycare. Any outstanding fees must be paid on or before the child's last day.

If your balance is more than two weeks behind, your child will not be able to continue at the program until balance is paid in full. In the event of an emergency situation, special written arrangements must be made with the provider.

If it becomes necessary for me to resort to legal action to collect fees, you, the parent, will be responsible for legal fees incurred on my part.

If I can no longer watch your child for one reason or another, I will give you a two-week notice, if possible. There might be a time when immediate termination could be warranted, and as we both understand it is not easy to find day care, it is important for policies to be understood and abided by.

Examples of why I would terminate your child's care with or without notice include (but may not be limited to):

- **We decide to move (highly unlikely)
- **Failure to complete required forms
- **Lack of parental cooperation
- **Failure of child to adjust to the center after a reasonable amount of time
- **My inability to meet the child's needs without additional staff
- **Lack of payment
- **Lack of respect for the provider or other children, by the parent or child
- **Violence upon any person or child

SUBSIDIZED CHILDCARE PROGRAM

If you belong to this program, you know that you are responsible to choose your daycare and to file all paperwork needed for approval and for continuing care.

OR

The parents are responsible to apply for the voucher at The Child Care Services Subsidy calling to Child Care Services Division located at 4001 S. Capitol Street, SW, Washington, DC 20032, (202) 727-0284 office or by fax (202) 727-9709. Office Hours are from Monday – Friday, 8:15 am – 4:45 pm.

THE HOMEFRONT'S RULES REGARDING SUBSIDIZED CHILDCARE

You are responsible for the **\$40** registration fee, which will not be refundable for this program.

CONFIDENTIALITY

The information you are providing will be maintained confidential. I will respect your privacy at any given moment. Before any information is shared with anyone outside of my facility, you as the parent/guardian, will be notified in advanced. This policy will be followed at all times, unless disclosure is necessary in an emergency situation and parents/guardians will be notified immediately.

ADMINISTRATIVE RECORDS ON OPERATIONS

I will maintain all required licenses and permits posted in a place with easy access to all parents to see (Certificate of Occupancy or Home Occupation Permit, all current fire, health and safety inspection approvals, and any variances received).

ADMINISTRATIVE RECORDS ON CHILDREN

I will maintain a record of your child's information and forms, and will retain these records for three (3) years following the termination of child's enrollment, as it is required by DCMR-29 Regulation.

DISCLOSURE OF CHILD INFORMATION

A parent/guardian shall provide a written, signed and dated consent before we may disclose individual identifiable information. The consent must specify the records that may be disclosed, the purpose of disclosure, and the identity of the party to whom disclosure may be made. **Consent must be explicitly given, implied consent is not acceptable.**

WHEN PRIOR CONSENT IS NOT REQUIRED

Prior consent to access child's records is not required when, we, as a child care provider, have a legitimate educational interest in the release of such child records.

Authorized District of Columbia officials shall have access to all records of the Program, including but not limited to: child, staff and administrative records; financial, tax and inspection records; policies and procedures; and any other information or documentation necessary to determine the Program's compliance with applicable federal and District of Columbia laws and regulations.

TRAINING AND EDUCATION LEVEL OF CAREGIVERS

All the caregivers involved in my program, including myself, shall meet or will meet all the education requirements described on DCMR-29 Regulation, Chapter 352, and Section 352.1. These education requirements will be accomplished no later than 4 (fours) year from April 2008, which is when the law will be active.

OR

All the caregivers involved in my program, including myself, meet or will meet all the education requirements described on the local Regulation, according to Title 29 DCMR Public Welfare Chapter 3:

- 322. 1: How to Reporting Unusual Incident
- 322.7: (a) Child abuse, neglect, and risk to a child's health or safety, including how to report suspected abuse, neglect, or risk to a child's health or safety;
- 352.1: (b) Have a high school diploma or a General Education Development certificate; (c) Attend an annual regulatory compliance review seminar presented by the Department of Health; (d) (9) hours of training per year; (e) Sudden Infant Death Syndrome; and (g) Certification in First Aid and CPR for children;
- 370: Handling Diapers, Training Pants and Toys" and "Hand Washing Practices"
- 371: Hand Washing Practices
- 372, 373, 374, and 375: Food, Nutrition and Feeding Requirements
- 377: Administration of Medication
- 378: Transportation Requirements (if needed)
- 379: Children with Special Needs
- 399: Definitions for the purpose of the Title 29-DCMR-Chapter 3

CRIMINAL AND BACKGROUND HISTORY CHECKS

All the caregivers involved in my program, including myself, have a criminal and background history checks, as required by the Child and Youth, safety and Health Omnibus Amendment Act of 2004, effective April 2000.

ADMINISTRATIVE RECORDS OF STAFF OF FACILITIES AND OF PERSONS RESIDING IN THE HOME FACILITIES

I maintain, in my facility, the information of every employee and person residing in my facility, as required by DCMR-29, Chapter 327, and Sections 327.1 - 327.7. The information I maintain include:

- (a) Full name, gender, social security number, date of birth and home address;
- (b) Job position (title) and job description;

- (c) Documentation and results of criminal and background history checks in accordance with this Chapter and with all other applicable federal and District of Columbia laws and rules;
- (d) A copy of employee's resume, required degrees, certificates, transcripts, and letters of reference;
- (e) Verification of the employee's orientation to his/her duties and responsibilities and to the facility's policies and procedures;
- (f) An ongoing record of continuing education;
- (g) First Aid and CPR Certification for children, as required;
- (h) Date of appointment to, or withdrawal from, any position in the facility;
- (i) Reason for withdrawal from a position;
- (j) Employee's health record; and
- (k) Employee's signature

ADMINISTRATIVE RECORDS OF SUBSTITUTE AND OF PERSONS RESIDING IN THE HOME FACILITIES

I maintain the parents informed about of every substitute and person residing in my house, as required by the local Regulation. The information that I maintain include:

- (a) Full name, gender, social security number, date of birth and home address;
- (b) Job position (title) and job description;
- (c) Documentation and results of criminal and background history checks in accordance with this Chapter and with all other applicable federal and District of Columbia laws and rules;
- (d) A copy of employee's resume, required degrees, certificates, transcripts, and letters of reference;
- (e) An ongoing record of continuing education;
- (f) First Aid and CPR Certification for children, as required;

PROCEDURES REGARDING SANITATION PRACTICES

All the staff is trained according to child care regulations and has strengthened in the area of sanitation practices addressing everything from hand washing procedures and sanitation practices for minimizing the spread of infection, to policies for administering medications and guidelines for safe sleeping.

REPORTING UNUSUAL INCIDENTS

In accordance with Section 322.1 to 322.6 of the DCMR, in case that an unusual incident (an incident that may adversely affect the health, safety or well-being of any child or children in the facility) occurs during the time that your child is in my facility I will immediately report the incident to the Office of the State Superintendent of Education, Division of Early Learning, Licensing and Compliance Unit via e-mail at ossechildcarecomplaints@dc.gov, phone at (202) 727-1839, or by fax at (202) 727-7295 within 24 hours. I will also inform parents(s)/guardian(s) of each affected child within 24 hours. I will submit a written report of the unusual incident, and fill out the **Unusual Incident Report Form** within twenty-four (24) hours of the incident. Unusual incidents include, but are not limited to, the following: Death of a person occurring within the Facility; Injury to, or illness of, any child that occurs during the hours the child is enrolled in care and that requires hospitalization or emergency medical treatment; Damage to the Facility, or to any Facility vehicle or equipment, that interferes with the capability of the Facility to protect the health, safety and well-being of the children and adults in the Facility; The presence of any individual in the Facility who has, or is suspected of having, a communicable disease that must be reported to the District of Columbia Department of Health in accordance with Title 22 of the District of Columbia

Municipal Regulations; The elopement of an enrolled child or any circumstances under which a child is deemed missing or unaccounted for; A traffic accident involving a vehicle owned, maintained, or contracted for by the Facility and in which children are being transported at the time of the accident; and; Any other occurrence at the Facility that involves a response by police, fire, ambulance, or any other emergency service. All documented incidents will be maintained and filed on site for a period of at least 3 years. Staff and parents(s)/guardian(s) of each affected child will receive a copy of the facility policies and procedures for reporting Unusual Incidents and will be asked to sign a form confirming that they have been read and understood.

REPORTING SUSPECTED CHILD ABUSE OR NEGLECT

In compliance with Section 322.4 to 322.7 of the DCMR, any staff member of my facility who knows or has reasonable cause to suspect that an enrolled child is, has been, or is in immediate danger of being an abused or neglected child will, as required by the District of Columbia Prevention of Child Abuse and Neglect Act of 1977, effective September 23, 1977 (D.C. Law 2-22, D.C. Official Code §§ 4-1321.01 et seq.), make an immediate oral report. We will call and report the suspected abuse and/or neglect to the District of Columbia Child and Family Services Administration hotline at (202) 671-SAFE (202-671-7233), by fax at (202) 727-6505, by email at cfsa@dc.gov, or in person at 400 6th Street, SW, Washington, DC 20024. We will also *report the incident to the Office of the State Superintendent of Education, Division of Early Learning, Compliance and Integrity Unit via e-mail at ossechildcarecomplaints@dc.gov, phone at (202) 727-1839, or by fax at (202) 727-7295 within 24 hours.*

Parents must have basic knowledge about this subject and understand the District of Columbia's mandated reporter requirements for all child care providers to comply with the legal requirement to protect the health, safety and well-being of all children.

We will facilitate opportunities to all our staff to attend training regarding child abuse, neglect, and risks to a child's health or safety, including how to report suspected abuse, neglect, or risks to a child's health or safety. All staff members are responsible for reporting suspected child abuse and neglect. Staff and parents will receive a copy of the facility policies and procedures for reporting alleged child abuse and neglect and will be asked to sign a form confirming that they have been read and understood. All documented incidents will be maintained and filed on site for a period of at least 3 years.

NONDISCRIMINATION AND INCLUSION FOR CHILDREN WITH SPECIAL NEEDS

My program does not discriminate on the basis of race, color, national origin, sex, or disability. My program is dedicated to supporting the goals of the Americans with Disabilities Act.

I will maintain a safe and secure environment for children to explore and achieve success through a variety of recreational activities. I believe in providing quality programs for every participant.

ACCOMMODATIONS FOR CHILDREN WITH SPECIAL NEEDS

I will make every effort to provide reasonable accommodations. These accommodations include, but are not limited to, attending trainings, use of individualized behavior support techniques, consulting with families and taking other steps to ensure a safe and enjoyable experience for all participants. Participants are encouraged to bring a companion to assist with special accommodations.

And/Or

In the event that external service providers are required to visit the **home** to assist in the care of a child I will consult with families to ensure for the adequate provision of services and to provide a continually safe and enjoyable experience for all participants.

In cases where a child needs a personal care attendant, circumstances should be discussed at length with the provider in order to determine if the level of accommodation required is reasonable for adjustment to home care. Specialized equipment for environmental adaptations should be provided by the family requesting the accommodations. A small program such as mine cannot absorb the costs of these furnishings.

The provider reserves that right to deny care to any child who requires excessive accommodation where continual disruption to the daily program of activities is likely to occur. Such cases may be evidenced after a child has been placed at the home for a trial period.

EMERGENCY PREPAREDNESS PLAN

The safety of children and personnel of my program is my highest priority. The purpose of the directive I have in my *Emergency Preparedness Plan* is to provide procedures that will be followed by me and other staff that may be present, to insure the safety of the children being cared for.

Parents will receive a copy of the *Emergency Preparedness Plan* as soon as they sign the parent's contract.

Or

In case of any emergency the parent/guardian will be called.

If we cannot reach either parent, then we will try to reach the individual listed on the child's Medical Emergency Form. The parent/guardian must complete and sign an authorization for emergency medical treatment. Of course, we hope we will never need this authorization, but we want to be sure your child receives the attention he/she needs should such an emergency arise.

If a child is injured while in our care, our first step is to administer First Aid, as necessary. In the event we cannot contact the parent/guardian or doctor designated on the application, we will see that your child receives the emergency medical treatment he/she needs from a doctor or hospital. The parent/guardian will be expected to assume the responsibility for any resulting expense.

EMERGENCY EVACUATION PLAN & FIRE DRILLS

I have prepared an Emergency Evacuation Plan that is exposed in visual areas where children and parents can see.

I conduct monthly fire drill practices with the purpose that all children learn how to evacuate in case of real situation. **Our evacuation location is at 202 Riggs Rd NE Washington dc 20011 near the bridge before fort totten metro.** I keep a record of all the fire drills executed (Fire Drill Log).

ARRIVAL AND DEPARTURE

Arrival: Program opens at 6:00 AM.

Departure: Program closes at 6:00 PM

****Optional**

Children who remain on Extended Hour Period from 6:00PM to 11:30pm will follow the schedule below(PAGE17)

It is important that children be picked up on time. If someone other than you, the parent, is going to pick up any child at the end of the day, we will require that the provider be notified in advanced with a writing consent form. A list of the names of persons that are authorized to pick up your child is kept in the child's file. Picture identification will be required before the child is released.

EARLY/LATE PICK-UP FEES (Not apply for child under subsidy program)

My time is very valuable to me, as is yours to you and I expect that you follow your schedule, if you are early or late, you will be charged a fee of: **\$10per every 15 minutes**. This charge is due promptly, at the time child is picked up.

PARENT COMMUNICATION

I welcome and encourage parents to participate in their child's daily routine and to "pop in" at any time. Please feel free to join in, play with us, observe and/or help.

I will endeavor to keep in touch with parents as often as possible. I will make every attempt to involve parents/guardians in all aspects of my program.

REQUIREMENT FOR UNLIMITED ACCESS:

District of Columbia care providers under contract with the Office of the State Superintendent of Education, Division of Early Childhood Education are required to comply with federal stipulations regarding parents and guardians right to unlimited access to their children. This policy states that parents and guardians may contact a child by visiting or calling the child at any time that the child is in care.

PROBLEMS / COMPLAINTS

I will always do MY best for all parents. I will put great effort into maintaining quality service. If the parent or guardian is not happy for any reason, or something does not work out as they expected, I ask them to bring it to my attention so that we can work it out. I will also keep an open mind and make changes to suit the parent's expectations if possible.

If there are any problems or complaints, I will appreciate it if the parents/guardian fills out the **Complaint Intake Form** that is included in your child's initial forms package.

If I do not resolve the complaint within 24 hours, parents can contact the Office of the State Superintendent of Education, Licensing and Compliance Unit, at (202) 727-1839.

ATTENDANCE

It is very important for all children to attend the program regularly at their scheduled time. If for any reason your child needs to miss a day, please call us to inform us of the absence.

BAD WEATHER

Listen to the radio, or watch the news, for weather related announcements. Based on the weather and local school closings, I will be closed on a county-wide basis. For example, if the Public School of District of Columbia is closed, I will close too. If there is a two-hour delay we will be open.

BEREAVEMENT:

In the case that a child loses a family member due to death, he/she is allowed to miss the program 3 days/weeks. Parents/guardians should call my program to inform me of the child's absence

In extreme cases of consistent absences, the following actions will be taken: after two days of absence without notice, I will make a phone call to the parent/guardian to know what is happening.

HOLIDAYS

Holidays that are paid as part of my benefit, include:

MONTH	DATE	HOLIDAY
January	1	New years day
January	3 rd Monday of the Month	Martin Luther King, Jr. Day
February	3 rd Monday of the Month	President's Day
April	16	Emancipation Day
May	28	Memorial day
July	4	Independence day
September	1	Labor day
November	11	Veteran's day
November	Last Thursday of the Month	Thanksgiving day
November	Last Friday of the Month	Day after Thanksgiving day
December	24	Christmas eve
December	25	Christmas day
December	31	New years eve

In addition, we follow the Public School or Government calendar in case of inclement weather conditions or other safety situations.

PERSONAL LEAVE

I will take 5 personal or sick days paid per year, of course sick days cannot be scheduled but I will try to give you as much notice as possible. A personal day might be taken for a class or important event that will be scheduled with a two-week notice.

If I experience an extended illness or an unforeseen situation and if my substitute is not able to replace me; and these situations cause me to close my facility, there will be no charges for those days.

You as a parents/guardian are required to find alternate care for these days.

SIGN IN / SIGN OUT

Each day upon arriving, the parent is required to sign his child in, noting the time arrived. A sign-in/out pad, pens, and a clock are all located by the door. This is to be followed by signing the child out when they leave. This gives me a written record of the child's attendance, hours, and who brought/picked up the child.

RELEASING YOUR CHILD

My normal procedure is to release the child only to the parents or someone whom the parents have designated. If someone other than the parent is to pick the child up, please notify me ahead of time. A verbal notice is fine on that day if this person is on the list of those authorized to pick up your child. If the person is not on that list, I must have a written permission to release your child.

One of the forms you are required to complete designates who may pick the child up if there is an emergency and you cannot contact me. Please make sure those listed are persons with whom you would allow your child to leave if that person showed up at my door and said, "I need to take this child with me." Those on the list should also be people I could call in the event something happened and you are not able to pick up your child.

Please inform your emergency contact that if I do not know them and the child is too young to recognize them, I will ask for identification. I do not mean to offend them, this is simply a measure taken for the child's protection.

BIRTHDAY PARTIES

As a provider I believe birthdays are very special to each child. The program will allow healthy treats and favors to be brought in for the child's special day. Balloons, hard candy, or gum is prohibited at all times. Parents should notify the provider one week in advance and provide the necessary paper products.

RESTRICTIONS THAT APPLY

Must be scheduled by the **1 days** of the month
Space limited to 5 children – first come first serve

RELIGIOUS PRACTICES

I feel that religious teaching should be left to the parents. If you have any restrictions or concerns, please feel free to address them to me.

We usually have parties at Christmas, Easter, Halloween, etc. If you do not wish to have your child participate in these, please let me know.

DAILY SCHEDULE

Babies, Infants and Toddlers will not necessarily follow a set schedule. They are not capable of sitting still for circle time, may need a morning nap, etc. This is one reason our daily schedule is not "set in stone."

Children develop differently, and activities will be done at their own pace.

We will remain flexible throughout the day and adjust as the children's needs change.

DAILY SCHEDULE

Schedule	Activities	Description
7:00 – 8:00 AM	Greeting children / parents	Welcome; Put away personal items (coats, lunch, backpacks, etc.)
8:00 – 8:30 AM	Breakfast	Wash hands; clean-up, set-up breakfast. Breakfast made available until all children finished
8:30 – 8:40 AM	Circle Time	Welcome; Talking about weather; Sing or read, etc
8:40 – 10:10 AM	Free Choice	Promoting milestone development; All areas open for free playing
10:10 – 10:40 AM	Divide Into Small Groups	Direct activities – learning activities according to curriculum plan for different ages (colors, forms, sizes, vocabulary, etc.)
10:40 – 11:30 AM	Outdoor Activities	Neighborhood walks, water play, sand box , etc.
11:30 – 12:30 PM	Lunch (before and after Lunch)	Wash hands; Clean-up, Personal hygiene (brush teeth, diapering, etc.)
12:30 – 1:00 PM	Transition to rest time	Reading story books, Restroom; Take a nap.
1:00 – 3:00 PM	Rest (Nap Time)	Supervision while sleeping; Soft music.
3:00 – 3:30 PM	Wake up / Snack time	Put cots away; Diapering/Restroom; Snack; Clean-up.
3:30 – 4:30 PM	Outdoor Activities	Outdoor Activities
4:30 – 5:30 PM	Table Games Preparation to go home	Playing in groups; Theater, puppets, games; Activities to promote and stimulate social-emotional development while waiting to go home. Diapering
5:30 – 6:00 PM	Leaving	Good bye / go home

TOLIET TRAINING

When you feel your child is ready for toilet teaching, I ask that you begin this teaching at home. I will follow through and encourage your child while in my care. Please keep in mind that the activity level here can distract your child from responding to an urge to use the potty, more so than at your home. Therefore, I will continue to use diapers or pull-ups until your child can and will announce that he/she

must use the bathroom and can control his/her bladder and bowels for a few minutes beyond that announcement. When the child has reached this point, training pants (5-ply, not plain terry cloth) with plastic pants may be used.

When accidents are only happening once every other week, 5-ply training pants will be used without plastic pants. Do not bring your child in panties or underwear until he/she has naptime and bedtime control established.

I also ask that during toilet learning, the child be dressed in "user-friendly" clothing as much as possible. The best items are shorts and pants with elastic waists, or dresses for girls. Try to avoid really tight clothing, pants with snaps and zippers, and overalls as often as you can. Your child will want to help pull pants, etc. up and down, plus, clothing with too many "gadgets" makes it harder to get the child on the potty in time.

NAP/REST/SLEEPING TIME

- I will provide a safe, warm, quiet place for your child to rest.
- Children two and older will rest on a mat or sleeping bag in a quiet room.
- Children under the age of two will always be in a crib.
- Children who wake up before the rest of the children will be guided in finding a quiet time activity to engage in, that will not disturb any sleeping children.
- *I do not wake a sleeping child during naps.*

****Optional**

Children who remain on Extended Hour Period from 6:00PM to 11:30pm will follow the schedule below. They will have a before-bed-time routine in accordance and consultation with each child's parents/guardian. Each child's age and developmental needs will be taken into account. On the first day of enrollment, I will document the routine in the child's record.

EVENING TIME SCHEDULE:

While in our care, your child will enjoy a curriculum focused on health and wellness created weekly by our Evening Care Coordinator based on your child's interests and developmental level. Our evening care schedule is as follows:

6:00PM-6:45PM – Dinner.

6:45 PM -7:00 PM – Clean Up/ Transition Activity

7:00 PM -7:15 PM – Large Group Gross Motor Activity

7:15 PM -7:45 PM – Free Choice Learning Centers

7:45 PM -8:45 PM - Homework Time for School Age Children

8:45 PM -9:00 PM –Snack time

9:00 PM -9:15 PM -Dental Hygiene i.e. proper tooth brushing techniques

9:15 PM -9:30 PM - Story Telling

9:30-11:00- Rest time period

9:30PM – 11:00 PM Provider will remain alert to check the child, take him/her to the bathroom, if needed, and stay alert waiting for parents to pick-up the child.

11:00- 11:30 a.m.- Departure / Pick-up Time

Please let the Coordinator know if your child has any allergies, is in diapers (please bring your own diapers and wipes), is potty-training, or has any other consideration we need to be aware of. Parents/guardians should provide appropriate clothing for the child to wear while sleeping.

BATH/SHOWER

Bath/shower time is part of my extend hour program routine, with a written consent from the parents:

- This routine will occur before bed time;
- For infants, 3 – 24 months, I will use a special baby tub, which will be sanitized before and after each use.
- Bath products used with each child should be provided by parents.
- For children 24 months and older, they may be expected to take care of their own bath/shower, under my help and supervision.
- I never give a child a bath unless parents request and sign the appropriate consent form.

HOMEWORK ROUTINE FOR SCHOOL-AGED CHILDREN

I will establish a homework routine, ensure that child is afforded quiet time in a specific area. I will provide assistance with child's homework, when needed. I will document the child's routine on his/her file. I will keep parents updated with child's progress.

INDOOR PLAY

Indoor play constitutes in the majority of our play time (when the entire year is averaged). I provide a variety of age-appropriate toys for your child to play with. Since the ages of the children I care for vary, all the toys I have are safe for even the youngest child. It is preferred that no toys are brought from home. I will not be responsible for toys from home that are broken or lost in my program. The responsibility remains with the child and the parents.

OUTDOOR PLAY

Please dress your child appropriately for the current weather, and in play clothes (with shoes that adequately protect the feet and are not slick-soled -- tennis shoes are a good choice). When the weather cooperates we will spend time outdoors, ranging from a walk to more outdoor activities. **Our preferred location for outdoor play will be our playground.**

FIELD TRIPS

Throughout the year, walking trips are made to special places in the neighbors of interest to the children. A notice will be sent home in advance, informing parents of the destination, time, and date. I will also include a permission slip to be signed and returned. Parents are always welcome to accompany us.

HEALTH/ILLNESS POLICIES

The Health Services guidelines will be used by the program for "exclusion for ill children" as follows: if a child becomes ill during the day, the child will be separated from the group and the parent will be called to pick the child up immediately. The parents are expected to make arrangements for their child to be

picked up within one hour maximum of being contacted. Remember, the child may not return to the program the following day and must be symptom free for at least 24 hours before returning.

I will not care for a child who is feverish. If he has thrown up or had diarrhea within the last 24 hours please keep him home. If he/she has a green discharge from his nose he/she must be on an antibiotic for 24 hours before he/she can attend my program. If your child is not feeling well, do not give him Tylenol to mask his symptoms. If your child throws up the night before and seems fine the next day, he/she is more than likely to still be contagious to the others.

You must wait 24 hours. All the children use the same toilet and washroom and they often "mouth" the same toys. They are often very affectionate with each other and it is very difficult to keep a sick child from infecting everyone else.

EXCLUDING AND RE-ADMITTING CHILDREN WHO ARE ILL

A child who exhibits one or more symptoms of illness identified in the following symptoms described shall not attend the program.

When I, as a child care provider, or my substitute observe one or more symptoms of illness, the child's parent(s) will be notified immediately. I will require that the parent(s) remove the child from the program

I will provide a comfortable place to isolate the child who becomes ill or is suspected of being ill. The child will remain within sight and hearing of a staff member.

I will carefully observe a child in isolation for the presence of, or change in, any symptoms.

I will ensure that a child who is ill or suspected of being ill does not share any personal hygiene or grooming items.

Symptoms of illness requiring exclusion from the program include, but are not limited to, the following:

- a) Diarrhea, i.e., runny, watery or bloody stools;
- b) Vomiting two (2) or more times in a twenty-four (24) hour period;
- c) Body rash with fever;
- d) Sore throat with fever or swollen glands;
- e) Eye drainage with thick mucus or pus draining from the eye;
- f) Pink eye, i.e., colored drainage, eye pain and/or redness of the eye;
- g) Yellowish skin or eyes;
- h) Fever accompanied by rash, vomiting, diarrhea, earache, irritability or confusion;
- i) Continuous irritable crying that requires more attention than the Facility can provide without compromising the health and safety of other children; or
- j) Any other symptom indicative of a reportable communicable disease, as such is defined in Chapter 2 of Title 22 of the District of Columbia Municipal Regulations or in any superseding document.

I will observe each child for the presence of symptoms that may indicate a medical problem, which problem may require exclusion from the program, isolation from other children, and/or consultation with the child's parent(s) or licensed health care practitioner. The following are examples of conditions that may indicate the existence of a medical problem:

- a) Fever;
- b) Lethargy or inability to walk;

- c) Respiratory problems, including: increased respiratory rate; retractions in the chest; excessive nasal flaring; audible persistent wheezing; persistent coughing, either productive or nonproductive; severe coughing causing redness or blueness in the face; or difficulty in breathing;
- d) Abdominal and urinary system problems including: intestinal parasites, dark urine, white spots in the stool, increased urgency or frequency of urination, or no urination for an entire day;
- e) Cardiac problems, including: choking, change in color of the skin, chest pain, or persistent sweating;
- f) Ear problems, including discharge from the ear and/or ear pain;
- g) Throat and mouth problems, including: sores on the lips or in the mouth, white patches in the mouth, throat pain, or a dental problem that needs immediate attention; and
- h) Injuries, including: persistent bleeding, oozing wounds, apparent fracture, complaint of persistent bone pain or stiffness, or difficulty with the movement of any extremity.

A child who exhibits one or more symptoms of illness identified in subsection above and who has been treated for a specific symptom by a licensed health care practitioner, may be re-admitted to the program only with a written permission, and written instructions for continuing care if needed, from that licensed health care practitioner.

If a child exhibits mild symptoms of illness and/or discomfort, I, as Child Care Provider or my substitute, in consultation with the child's parent(s), will decide whether the child should be discharged immediately or at the end of the day.

MEDICAL AND DENTAL EMERGENCY PROCEDURES

The emergency care card containing parent directions and permissions will be required for enrollment. In the event of an emergency, the parents will be notified immediately and the emergency care card instructions will be followed. As an unusual incident, any medical or dental emergency will be reported to the Office of the State Superintendent of Education, Division of Early Learning, Licensing and Compliance Unit via e-mail at ossechildcarecomplaints@dc.gov, phone at (202) 727-1839, or by fax at (202) 727-7295 within 24 hours.

I will not accept the child for care if any of the above symptoms are present or have been present within the last 24 hours. If the child shows any of the symptoms while in care, I will remove him from the group and notify the parent or authorized adult to pick up the child.

Parents have **one hour** from time of notification to pick up the child.

The child may return 24 hours after a temperature has returned to normal, after the child is no longer vomiting, or 24-48 hours (depending on the illness) after the first dose of an antibiotic. If a child receives an antibiotic for an ear infection he/she may return to my facility immediately if he/she has been free of other symptoms mentioned for at least 24 hours.

The child is welcome when he has only a mild cold (e.g. runny nose or mild cough), but is able to participate in daily activities.

MEDICATION

If your child is on medication and it needs to be administered while he/she is under my care, the medicine must be in the original container and labeled with the child's name, doctor's name, name of medication, dosage, and dosage directions. I will also have a form for you to sign, giving me permission to give the

medication to your child. Medication will be administered at the time or with the meal you specify and a written record kept.

Medicine is dispensed at the school subject to the following conditions:

- A Medicine Request Permit has to be signed by the parent authorizing us to dispense medicine.
- A doctor has prescribed the medicine for the child to whom the medication is to be given.
- The medicine is provided in its original container that clearly states the prescribed dosage.
- All medicines are kept in a secure place.
- Medicine is only dispensed by a teacher or office staff.
- Medicine may not be kept in a student's lunch box.

INJURIES AND NON MEDICAL EMERGENCIES

In accordance with Section 324.4 of the DCMR, minor cuts and abrasions suffered while at the center will receive proper care -- specifically, they will be washed with soap and warm water and properly bandaged. Treatment will be logged and I will tell you how and when the injury occurred. I am also required to log any injuries I observe on your child which have occurred outside of my care, and I am required by law to report any possible abuse situations.

If a medical emergency arises, I will try to contact the parent first, unless doing so endangers the child's life. In that case, I will take necessary steps, putting the child's safety first (calling hospital, doctor, poison control, etc.). If need be, I will take your child to the nearest hospital via ambulance, accompanied by the form **Authorization for Emergency Medical Treatment**. Then I will try to call you when we arrive. If a parent is unable to be reached, I will keep trying until he/she is available. The facility complies with the requirements for reporting of contagious diseases to the DC Department of Health. I will immediately report the incident to the Office of the State Superintendent of Education, Division of Early Learning, Compliance and Integrity Unit via e-mail at ossechildcarecomplaints@dc.gov, phone at (202) 727-1839, or by fax at (202) 727-7295 within 24 hours.

In the event of a fire, we would evacuate the house immediately and gather outside. This will be practiced monthly so the children are familiar with the procedures. All documented emergencies will be maintained and filed on site for a period of at least 3 years. Staff and parents will receive a copy of the facility policies and procedures for medical emergencies and will be asked to sign a form confirming that they have been read and understood.

ILLNESS (PROVIDER)

I ask that you have a back-up (someone you can call if I am sick or if your child is sick). If I get sick I will let you know as quickly as possible so that you can make other arrangements for your child. I try to call the night before, but sometimes that's impossible. If I wake up sick, I usually call around 6:30 a.m.

PERSONAL BELONGINGS

Parents are expected to provide the following:

Items	Infants (birth to 12 months)	Toddlers (12 to 24 months)	Toddlers (24 to 36 months)	Three to 5 years old
Plastic bottles for the day	X			
Diapers for 4 to 6 a day	X	X	X	
Wipes as needed	X	X	X	If they are still in potty training
Two changes of clothes including socks	X	X	X	X
Two changes of clothes including socks				
Bibs (several)	X			
Blankets	X			
Crib sheets	X			
Light blanket	X	X	X	X
Mobile or other especial hanger items for crib	X			
“Lovie” item if needed for sleeping		X	X	X
One box of large Ziploc bags		X	X	X
Pull ups			X	If they are still in potty training
Tooth Brush and tooth paste			X	X

PERSONAL CARE ITEMS

All items must be labeled in permanent marker. Each child will have their own cubby for items, and you will be notified when replacement items are needed.

TOYS AND MOVIES

Children are not allowed to bring toys or movies to the program except for show and tell days or as directed by the provider. No toy guns, swords, or any other toy or movie with violent connotation will be permitted at any time. Books may be brought for story time if approved by the provider. Personal belongings associated with violence such as Power Rangers, X-men, Ninja Turtles, etc. are not permitted. All personal items should have child’s name on them.

FOOD AND NUTRITION

A well balanced lunch/snack will be provided or by parents in accordance with both provider and parents.

Lunch/snack prepared by parent/guardian should be packed in a brown paper bag.

GROUP	MORNING SNACK	LUNCH	AFTERNONN SNACK	DINNER To serve family style meals,	EVENING SNACK
Infants and Crawlers	Parents				
Toddlers and Preschoolers	X	Arrangement between parents and provider	X	X	X

Breakfast is a bread product, fruit, and milk. Each snack includes food or drink from two of the mentioned groups. According posted approved daily menu.

Sweets may be included occasionally.

Please do not send snacks of candy with your child to day care unless prior approval has been given.

If your child is not here at these times, meals or snacks will not be given at unscheduled times so please be sure that they have eaten.

If your child has an allergy to a specific food, please let me know.

I never force a child to finish what is on his plate, but I do encourage each child to try one or two bites of everything. Sometimes they are surprised by what they like!

If you wish to provide snacks at your child's birthday or another time, that's great! If you let me know a day ahead of time, it helps.

SUPPLY OF PERISHABLES AND STAPLES

I will maintain one (1) emergency day supply of perishables and three (3) days of supply of staples all the times.

I will maintain the following food for one day in my program:

I will use perishable food from the refrigerator and pantry, such as milk, bread, fruits, cheese, etc. If necessary, I will begin to use non-perishable foods and staples.

Food and other items I will keep in my program for people and pets (If I have any):

- Water in clean, sealed plastic containers – store one gallon for each person and pet for each day
- Ready to eat canned meats, fruits and vegetables
- Manual can opener
- Protein and fruit bars
- Dry cereal, granola, nuts and crackers
- Dried foods such as dried fruits and dehydrated meals
- Canned juices
- Powdered milk or cans of evaporated milk
- Cans or jars of baby food and baby formula

LOST AND FOUND

All children's belongings should be labeled. We will keep a specific place for lost and found items.

TRANSPORTATION

My facility does not own, operate, maintain, or use any motor vehicles for transporting children.
I will not provide transportation.

ANIMALS / PETS

I will inform the parents if I have pet in my facility and I will keep the parents informed about the pet's health condition. I will ensure that the pet is clean, in good health and is not dangerous or aggressive. I will keep the pet out of the children's area and will not allow children to handle or touch the pet.

.....
I have read the policy/program statement and my understanding is that I will abide by the policy as stated.

Policy was given and signed on: _____

Name of Parent(s) or legal guardian: _____

Signature: _____ Date: _____

Name of the Child: _____