**Family**

 **Handbook**

<http://www.uww.edu/childenscenter>

University of Wisconsin-Whitewater

Division of Student Affairs

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*Dear Families,*

*Welcome to the University of Wisconsin Whitewater Children’s Center!! Our center was established in 1973 with a specific commitment to providing high quality care at a reasonable cost to student families. Additionally, childcare is provided as space allows to staff, faculty, and community families. Every attempt is made to meet the ever-changing needs of the families that our center serves.*

*Our Children’s Center mission is not only to provide early care and education for children and support for their families but also to serve as a model early childhood program for campus. We are part of the Division of Student Affairs and collaborate in many ways with the College of Education and Professional Studies, as well as other academic departments on campus. These collaborative partnerships allow our center to operate with current best practices in early childhood education. It also allows us to be an active vital part of the UWW community.*

*In addition, our program is also a community collaborative member with the Whitewater Unified School District acting as a Four-Year-Old Kindergarten (4K) site for the district since 2007.*

*We believe that the child’s family members are their first teachers and in order for our program to be successful, the school and family should work together as a team. If you ever have an idea, question, comment, complaint, concern, or compliment I strongly encourage you to contact me.*

*I hope that this handbook is of assistance to you when questions arise about our program. If the answers you seek cannot be found here, please do not hesitate to ask any questions of the Lead Teachers or myself. If there is something in our handbook you would like to discuss further, please do not hesitate to bring it to my attention immediately.*

*Our commitment to serving your family and child is one that is strongly felt at the center. We hope that throughout the year, we will be able to meet those needs and build many lasting relationships.*

*We look forward to working with your family and thank you for sharing your child with us!*

*Warmly,*

*Chelsea Newman*

*Director*

*Roseman 1006*

*262-472-1767*

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**STARTING THE SCHOOL YEAR**

**Checklist for the first day of school**

*Please label these items with child’s first and last name (or initials)*

* + Three full sets of clothing changes
	+ Outdoor Gear appropriate for the weather
	+ Rain Boots
	+ Diapers or Pull-ups as needed for children still using them

(average 5-7 diaper changes a day per child) – most people bring in a case at a time and we will let you know when the supply is running low and needs to be restocked

* + Family picture (printed or emailed to the teacher)
	+ Bike helmet (for Mallards, Owls, and Cranes)
	+ Fitted sheet (crib size) – **optional:** blanket, pillow and lovey for cot during rest time (for children 12 months or older)
	+ Water bottle that can be securely closed
	+ Optional Items: lotion, creams, or lip balm as needed

*Additional Items for Infants ONLY:*

* + 1-2 sleep sacks
	+ 3-4 bottles
	+ Pacifier (if you child uses one at home)
	+ Formula / Breast milk as needed (CC provides Enfamil formula, as well as infant cereal and purees)
	+ Diaper Cream

*Shared Items:*

The following items are shared amongst the classrooms (no need to label):

* + 4 containers Disinfecting wipes (choose unscented if available)
	+ 4 packages of unscented diaper wipes (even if your child is not wearing diapers anymore since these are used for wiping hands while out on hikes/walks/at the park, etc.)

*WISH LIST (Optional)*

These items are things that we use frequently for projects. It is not required to bring each of these, but we appreciate any donations from this list:

* Salt Vinegar
	+ Food Coloring Flour
	+ Cornstarch
	+ Dry erase or vis-à-vis markers with eraser
	+ Shaving cream
	+ Plastic shopping bags

**All Forms Are Completed:**

* Enrollment form (must be completed at least 24hrs before enrollment is verified)
* Income Verification Form (a new form must be completed by the first day of each school year)
* Immunization Form (must be completed by the first day of school and please keep us up to date throughout the year)
* Health History Form (must be completed by the first day of school)
* Detailed Parent/Guardian Schedule (must be completed by the first day of school each semester)
* Ages and Stages Questionnaire (at initial enrollment and again every Fall)
* Intake Form *(For children under twenty-four months of age, you are required by licensing to complete this form and meet with your child’s teacher every three months.)*

**Intake Meeting/Pre-Conference Meeting for Infants and Toddlers**

Prior to your child’s first day, their classroom teacher will contact you to schedule an Intake Meeting or Pre-Conference. This meeting and the Intake Form are required by Wisconsin Childcare Licensing regulations for children twenty-four months and under, but we like to meet with all of our families prior to their child’s first day with us. This can be done in person or over the phone. We encourage families to come up with a list of questions prior to the meeting. You will receive an Intake Questionnaire and an Ages and Stages Questionnaire prior to the meeting to complete and bring with your family to the meeting.

**Helping Children Feel Comfortable at the Children’s Center**

Families are encouraged to bring children to the Children’s Center before the first day of enrollment, especially if the child has difficulty separating. However, a parent or guardian must stay with the child at all times and the center does not accept responsibility for the care of the child until the day of enrollment. In other words, the parent/guardian cannot leave the child in the classroom to put money in the parking meters, use the bathroom, or make a phone call etc. The teacher works with the child and family to help them feel comfortable in their classroom. Some children only need one visit to feel safe, whereas other children may need multiple visits. Each fall we have an open house to meet the staff, drop off supplies, and see the center before the first day of attendance.

**How to Say Goodbye**

If your child is having trouble separating from you, we suggest that you calmly reassure him/her that you will return. It is sometimes helpful to give a period that a child can understand (i.e. “I will pick you up…while you are outside, right after lunch, during free choice.” Etc.) After letting your child know that you will return (although it may be difficult) we suggest that you say goodbye and leave. We ask that you notify a teacher in that classroom when you are ready to leave so they know it is okay to take your child from you. This teacher will comfort your child and reassure them that you will return.

When good-byes become very long it usually turns into a power struggle and a very stressful situation for the child, family member, and other children in the classroom. Please feel free to call or stop in at the office throughout the day to see how things are going. A parent coming into the classroom and then leaving again, can be to too confusing to a young child, especially before they have become comfortable in this new setting. If you have any questions or concerns about how to make separating from your child be less stressful, please stop in and talk to one of the lead teachers or the director.

**Open Door Policy**

The Children’s Center has an open-door policy for families to visit and or observe at any time during the center’s hours of operation, **unless access is prohibited or restricted by court order**. Families are welcome and encouraged to come into the center and visit at any time. Family members are welcome to participate in our program in several ways. We enjoy having family members join us for lunch, snack, special days, and field trips. Family members are encouraged to share a hobby or interest with our children and an invitation always stands for you to come in and read a book. In addition, the center welcomes family members to help in the classroom for special projects or regularly scheduled activity times arranged with the teacher.

**Center Information**

**Phone Numbers and Location**

The Children’s Center is located in Roseman Hall on the First Floor. Roseman Hall is located between Winther and Upham Halls off Starin Road between Prairie and Prince Streets. The main office is in Room 1006.

**Parking for drop-off and pick-up**

The Children’s Center has four reserved stalls in the Winther/Heide Parking lot (#14). The stalls are in the corner closest to the Heide building. These stalls are **only for picking up and dropping off children and cars are ticketed after fifteen minutes.** Permits can be picked up in the office. Please do not use these stalls at any other time. In the event these stalls are full you may park in any space in Parking Lot #14 (between Winther/Upham), so long as it is not designated for Handicap Parking or marked with RESERVED signage. Parking Service patrols the Center’s parking spots and will ticket those who abuse these policies.

**Main Office: Director: Fax Number:**

**(262) 472-1768 (262) 472-1767 (262) 472-1267**

*Because of staff absences and/or emergencies, there are times when no one can answer the phone; however, the centers’ phone lines all have voicemail. Messages are retrieved from the office voicemail periodically throughout the day.*

**The mailing address of the Children’s Center is:**

**UW-Whitewater’s Children’s Center**

**Roseman Bldg. 1006**

**800 West Main St.**

**Whitewater, WI 53190**

**Tax Information**

The Children’s Center will prepare and end of the year statement of payment on letterhead.

THE TAX ID# FOR THE CHILDREN’S CENTER IS: 39-1805963

Please keep this number for your tax records.

**Hours of Operation**

The Children’s Center offers early care and education programs for children ages from 12 months to 6 years from **7:30am to 5:30pm Monday through Friday.** We are licensed through Department of Children and Families Office of Early Care and Education for 90 Children from 12 months to 12 years of age.

**AGES AND GROUP SIZES/ENROLLMENT OPTIONS**

**Infants / Hummingbird Room** (12 weeks and up) Eight Children. One Teachers to Three Children Ratio

**Toddlers / Robin Room** (12 months and up) Eight children. One Teacher to Three Children Ratio

**Young Preschoolers / Mallard Room** (24 months and up) Twelve Children. One Teacher to Four Children Ratio

**Preschoolers / Owl Room** (30 months and up) Sixteen Children. One Teacher to Six Children Ratio

**4K / Crane Room** (48 months and up) Twenty Children. One Teacher to Eight Children Ratio

**Drop in site** (24 months and up) Eight – Fifteen Children. Ratio; depending on age of students

**UWW Children’s Center Teacher to Child Ratios (based on NAEYC Criterion 10.B.12)**

Because we are an accredited center, we meet the NAEYC standards at all times. When calculating ratios, we do not count university students who are observing, student teaching, or volunteering.

**What Are Ratios?**

The chart below shows the ratio standards set forth by the State of Wisconsin and the Children’s Center Ratios. The Children’s Center teachers to child ratios that meet or exceed the NAEYC standards (see above).

**Wisconsin Department of Children and Families Health & Social Table 46.05 D**

(State Regulations)

|  |  |  |
| --- | --- | --- |
| **Ages of Children** | **Teacher to Child Ratio** | **Maximum Group Size** |
| **12 weeks – 24 months** | **1 teacher to 4 children** | **8** |
| **24 – 36 months** | **1 teacher to 6 children** | **12** |
| **30 – 36 months** | **1 teacher to 8 children** | **16** |
| **36 – 48 months** | **1 teacher to 10 children** | **20** |
| **4 – 5 years** | **1 teacher to 13 children** | **24** |

**State of Wisconsin License**

The Children’s Center Family Handbook, outlining all Center philosophies, policies, and procedures and Wisconsin Administrative Code, HFS 46 – Licensing Rules for Group Day care Centers are available in the office, on our web page at [www.uww/childrenscenter](http://www.uww/childrenscenter) or on the DCF website <http://dcf.wi.gov/childcare/licensed/pdf/dcf_p_205.pdf> for your review. Our state license, Youngstar, and NAEYC accreditation information, and the record of our last licensing visit are posted in the Children Center office.

**What is a NAEYC Accredited Center?**

The Children’s Center is a state licensed program that is also accredited by the National Association for the Education of Young Children. Accreditation is a voluntary process, which is designed to assist childcare centers in offering high quality care to the children and families they serve. The standards of accreditation are national standards that exceed the licensing rules and regulations put forward by the State of Wisconsin. National Association for the Education of Young Children (NAEYC) has the highest standards for the early childhood education programs and the UW-Whitewater is currently the only NAEYC accredited center in Whitewater. The Children Center has been NAEYC accredited since 1990. Centers are required to go through this process every 5 years to maintain accreditation. There are 420+ criterions that the Center will be evaluated on 10 different components.

1. Relationships
2. Curriculum
3. Teaching
4. Assessment of Child Progress
5. Health
6. Teachers
7. Families
8. Community Relationships
9. Physical Environment
10. Leadership and Management

**Young Star**

The Department of Children and Families uses a Quality Rating Indicator System in our state called Young Star. Child Care centers are ranked on a scale of two to five stars based on their quality. The Children’s Center is a Five Star Young Star center because of our accreditation with NAEYC. For more information on Young Star, please visit:

[www.dcf.wisconsin.gov/youngstar/](http://www.dcf.wisconsin.gov/youngstar/)

**The Program**

**The Curriculum and Philosophy of the Children’s Center**

The Children’s Center believes children learn through paly. Our emergent curriculum is child-initiated. The topics we study are focused on the children’s interests and what is meaningful to our children and families. Activities are planned and aligned with the Wisconsin Model Early Learning Standards (WMELS). These Early Learning Standards align with the Wisconsin Common Core Academic Standards for Kindergarten through Twelfth grade in our state. Our curriculum and assessment at the Children’s Center are also in alignment with the WMELS Guiding Principles.

Those principles are:

1. All children are capable and competent.
2. Early relationships matter.
3. A child’s early learning and development is multidimensional.
4. Expectations for children must be guided by knowledge of child growth and development.
5. Children are individuals who develop at various rates.
6. Children are members of cultural groups that share developmental patterns.
7. Children exhibit a range of skills and competencies within any domain of development.
8. Children learn through play and the active exploration of their environment.
9. Parents are children’s primary and most important caregivers and educators.

For more information on the Wisconsin Model Early Learning Standards, please visit:

<http://www.collaboratingpartners.org/wmels-about.php>

We believe the children’s families are their first teacher and that children learn best when the learning is meaningful to their everyday world and based on what they are interested in doing. We also believe that they community provides us with resources not otherwise available to a standalone early learning facility. By involving our campus and community in our learning process, we believe the children will have a better understanding of their community and the community will have a greater investment in our work.

It is our belief that our brains retain knowledge and learn best when the content is meaningful to us and we have a relationship with our teacher and the subject. An inspiration for our teaching approach comes from the infant toddler schools in Reggio Emilia, Italy. In the next few pages, you will find an article about those schools and their philosophy. While we are not in Italy, and may not be able to implement this entire concept at the Children’s Center, there are many aspects of this approach that resonate with our staff and families.

**Introduction to the Fundamental Values of the Education of Young Children in Reggio Emilia \*\* @ Lella Gandini (revision October 2008)**

Young children, their care and their education have long been a public concern at various levels of Italian society. What families have obtained was not easy to achieve; it came from a great deal of effort and political involvement. Workers, educators, and especially women were active and effective advocates of the legislation that established public preschools in 1968 and infant-toddler centers in 1971. The results of the effort by all these determined people are publicly funded municipal as well as national programs for young children that combine the concept of social services with education. Both education and care are considered necessary to provide high quality, full-day experiences for young children.

In Italy now, preschools, whether municipal, national or private, serve about 95% of the children between three and six. Infant-toddler programs have developed much less in quantity but the quality of these services in those municipalities that have invested seriously in them has been generally outstanding.

What, then, is so special about Reggio Emilia, a city of 160,000 inhabitants in northern Italy?

First, the city-run educational system for young children originated there in schools started by parents; literally, groups of parents built them with their own hands at the end of World War II. The first school was built with proceeds from the sale of a tank, some trucks, and a few horses left behind by the retreating German army. Such participation by parents has all along remained an essential part of the way of working on education in that city.

Secondly, right from the start Loris Malaguzzi, then a young teacher, guided and directed the energies of those parents, later preparing teachers and becoming an educational leader not just in his hometown but also on the national scene.

Thirdly, the tradition of cooperative work is firmly rooted in the Emilia Romagna region and is based on a sense of community and of solidarity. Through a strong sense of solidarity, people there are accustomed to construct and maintain the connections with the community. They typically respond to immediate, usually material needs, by forming cooperatives. Yet the spirit of cooperation that they engendered in such endeavors tends to transcend those needs to leave enduring marks upon the culture of their region.

What are the distinguishing features of the education of young children with regard to theory and practice that have made the Reggio Emilia approach so notable?

An examination of the features of this philosophy soon reveals that the educators have been serious readers of John Dewey, Jean Piaget, Lev Vygostky, David Hawkins, Jerome Bruner, Howard Gardner and other renowned scientists and philosophers. In fact, Reggio Emilia educators have continued to keep abreast of the latest research in child development and education in other countries. At the same time, though, they continue to formulate new interpretations and new hypotheses and ideas about learning and teaching through their daily observations and practice of learning along with the children.

**The image of the child.** All children have preparedness, potential, curiosity; they have interest in relationship, in constructing their own learning, and in negotiating with everything, the environment brings to them. Children should be considered as active citizens with rights, as contributing members, with their families, of their local community.

**Children with special rights.** (Rather than using the term special needs) have precedence in becoming part of an infant/toddler center or a preschool.

**Children’s relationships and interactions within a system.** Education has to focus on each child, not considered in isolation, but seen in relation with the family, with other children, with the teachers, with the environment of the school, with the community, and with the wider society. Each school is viewed as a system in which all these relationships, which are all interconnected and reciprocal, are activated and supported.

**The role of parents.** (Families) Parents are an essential component of the program; a competent and active part of their children’s learning experience. They are not considered consumers but co-responsible partners. Their right to participation is expected and supported; it takes many forms, and can help ensure the welfare of all children in the program.

**The role of space: amiable schools.** The infant-toddler centers and preschools convey many messages, of which the most immediate is: this is a place where adults thought about the quality and the instructive power of space. The layout of physical space fosters encounters, communication, and relationships. Children learn a great deal in exchanges and negotiations with their peers; therefore, teachers organize space that support the engagement of small groups.

**Teachers and children as partners in learning.** A strong image of the child has to correspond to a strong image of the teacher. Teachers are not considered protective baby-sitters, teaching basic skills to children but rather they are seen as learners along with the children. They are supported, valued for their experience and their ideas, and seen as researchers. Cooperation at all levels in the schools is the powerful mode of working that makes possible the achievement of the complex goals that Reggio educators have set for themselves.

**Not a pre-set curriculum but a process of inviting and sustaining learning.** Once teachers have prepared an environment rich in materials and possibilities, they observe and listen to the children in order to know how to proceed with their work. Teachers use the understanding they gain thereby to act as a resource for them. They ask questions and thus discover the children’s ideas, hypotheses, and theories. They see learning not as a linear process but as a spiral progression and consider themselves partners in this process of learning. After observing children in action, they compare, discuss, and interpret together with other teachers their observations, recorded in different ways, to leave traces of what has been observed. They use their interpretations and discussions to make choices that they share with the children.

**The power of documentation.** Transcriptions of children’s remarks and discussions, photographs of their activity, and representations of their thinking and learning are traces that are carefully studied. These documents have several functions. The most important among them is to be tools for making hypotheses (to project) about the direction in which the work and experiences with the children will go. Once these documents are organized and displayed they help to make parents aware of their children’s experience and maintain their involvement. They make it possible for teachers to understand the children better and to evaluate the teachers’ own work, thus promoting their professional growth; they make children aware that their effort is valued; and furthermore, they create an archive that traces the history of the school.

**Projects.** Projects provide the narrative and structure to the children and teachers’ learning experiences. They are based on the strong conviction that learning by doing is of great importance and to discuss in groups and to revisit ideas and experiences is essential to gain better understanding and to learn. Projects may start from a chance event, either an idea or a problem posed by one or more children, or an experience initiated directly by teachers. They can last from a few days to several months.

*\*\* Earlier versions of this article appeared in L. Gandini (1993), fundamentals of the Reggio Emilia Approach to Early Childhood, Young Children, 49 (1), 4-8, and L. Gandini (1997), The Story and Foundations of the Reggio Emilia Approach in Teaching and Learning: Collaborative Exploration of the Reggio Emilia Approach, edited by V.R. Fu, A.J. Stremmel and L. T. Hill. (Upper Saddle River, New Jersey. Merrill/Prentice Hall)*

Within this philosophy, are the Project Approach (Lilian Katz & Slyvia Chard) and Documentation Panels. Teachers will decide on topics or “Projects” of study by observing the children’s play; listening to the families’ feedback on their children and seeing what is going on in the community around them. Each Project begins with a question or inquiry and be followed by investigation using all of our learning domains and then culminating activity. Projects will last as long as the children hold interest and the teachers can extend invitations and provocations to learning about the topic to the children. Teachers are challenged with documenting the ongoing learning within their classrooms by creating at least one Documentation Panel per month. This panel will not only have samples and photographs of the children’s work; it will also explain what the children are learning through the process. In other words, “Make the Learning Visible!”

**Assessment of Children**

What is assessment and why do it? When we assess children, it simply means that we take a good, solid look at and gather information about what your child is doing and how he/she is progressing in relation to developmental milestones and our program goals. We use a variety of tools in order to do this. We ask you many questions about your child when you first enroll in our program. You know your child best and the information that you give us is incredibly helpful as we start to become acquainted with your child. While your child is involved in ordinary, everyday work and play in our center, we collect evidence. Evidence may be art or writing sample; notes of words or conversations your child has said; photographs; voice samples, or observations of your child at work and play. The information we gather has developmental and educational significance. This evidence is collected continually so that we can compare what we have seen or recorded today with what we have seen in the past. This allows us to gain a good understanding of your child and to look for growth over time.

Why do it? Assessment is really the driving force behind everything we do. It helps us, as teachers, to plan, design and establish our curriculum and environment. When the evidence shows us that our children find a certain topic appealing, we can address this by designing the curriculum and environment to meet this interest. Children learn and gain so much more when they are focused and fascinated. When we are able to integrate necessary concepts and skills into an interesting theme, we support their growth and learning. When the evidence indicates that our children may be lacking a skill that is viewed as typically developing for a particular age, we can integrate this need into the curriculum or environment. When we have a question or concern about a child’s growth and development, the evidence gathered helps us provide a focus to address concern. It is also very rewarding to share with parents our observations of their child’s growth over time.

What is your role in this? As stated previously, you know your child best. We know the developmental milestones of young children and we know your child in this setting. Building partnerships between school and families is one of the strongest foundations for success in learning for your child. The sharing of information between us - what you know and what we know – builds this strong foundation. When you enroll your child in our program, we will discuss and agree upon assessment methods that best meet you through conferences, email messages, Teaching Strategies Gold portfolio, notes, phone calls and informal conversations.

All information that is gathered concerning your child’s growth and development is kept in an area accessible only to center teaching and administrative staff. All children’s records are kept confidential. Access to this information by anyone other than a parent or guardian is done only with the parent/guardian’s written approval.

**Ages and Stages Questionnaire (ASQ)**

<http://www.brookespublishing.com/store/books/squires-asq/index.htm>

All families will receive an Ages and Stages Questionnaire upon initial enrollment and at the beginning of every new school year (typically Fall Semester). We ask families to complete this questionnaire with their child. The questionnaire helps us to know where your child is at in their development and how to plan activities based on the information you provide. If we can be of any help to you in completing the questionnaire or you have any concerns, please let the center director know as soon as possible. We are happy to provide you with any resources or literature on the process. Once we have received your completed questionnaire we will review the information and work with you to develop goals for your child for their upcoming school year.

**PALS PRE-K**

This is used with 4K students only. The Phonological Awareness Literacy Screening (PALS) provides a comprehensive assessment of young children’s knowledge of the important literacy fundamentals that are predictive of future reading success. PALS is the state-provided screening tool for Virginia’s Early Intervention Reading Initiative (EIRI) and is used by 99% of school divisions in the state on a voluntary basis.

**Family/Teacher Conferences**

If you would like a conference with your child’s lead teacher, please ask. We hold formal conferences once per semester. However, we encourage families to set up meetings with the teachers whenever there is a concern about activities in the classroom, discipline, or questions about child development etc. Director and Lead Teachers might request having a conference with families, as well. Conferences are an excellent time to work together with the teachers to offer the best possible services and support to each child and family.

We also use the Kaymbu app to report daily happenings for each individual child, family notices, events, reminders etc. are sent out through messaging on this app. Please remember to check your Kaymbu messages on a regular basis! If you do not have e-mail, please let your classroom teacher and Director know so we can provide paper copies of ongoing events and information.

**Child Assessment / Documentation**

As part of our accreditation and program planning, teachers in the classrooms use variety of methods such as observations, checklists, emergent curriculum learning stories and rating scales etc. to record and gather information on each child and the group of children that are in their care. Families fill out a family input form for the conferences. Assessment information is shared at least twice (once during each semester) a year with individual families.

Every child at the Center has a file. Teachers record and gather information (anecdotal records, photos and direct quotes) about each of the children’s interests, activities that they participate in, children that they play with and developmental abilities that are demonstrated while they are at the Center.

Teachers interact with children to assess the child’s strengths and needs. The information is gathered on a regular basis and is also discussed at the classroom staff meetings so all teachers who work in the classroom are knowledgeable about children in the room and teaching can be individualized to the child’s learning style.

As part of documentation, teachers may take photos of children during their play in order to record the child’s interests and learning and save some of the children’s art/work samples in order to demonstrate the stage of drawing that they are exhibiting at that time. Staff also record written notes and gather information about each of the child’s interests, activities that they participate, children that they play with, and developmental abilities that are demonstrated while they are at the Center. Charts documenting rest, toileting and diapering and meals are kept at school. Documentation of observations and efforts to respond to children with challenging behaviors and notes from meetings with family also kept in children’s files when it is applicable.

Individualized care plans for children with special health care needs, food allergies or special nutritional needs are also kept in child’s file when it is applicable.

All staff have access to the children’s records will not discuss or disclose any personal information regarding the children or their family unless authorized by the parent/legal guardian. All of the Children Center staff sign a confidentiality agreement before they start working with children and families.

All staff at the Children’s Center is committed to maintaining confidentiality and lending support to help families achieve their goals. Children’s records are accessible to the parents of the child upon request. The children’s records are accessible to only the director, lead teachers, program assistant, the state licensor, and NAEYC assessor.

If the program staff suspects that a child has a developmental delay or other special need, this possibility is communicated to families in a sensitive supportive and confidential manner and is provided with documentation and explanation for the concern next steps, and information about resources for assessment.

**STAFF – WHO WORKS WITH THE CHILDREN?**

The **core staff** includes the Director, Program Associate, and the Lead Teachers in each of the five classrooms. Lead Teachers are required to hold a minimum of a bachelor’s degree in Child Development, Early Childhood, Elementary and/or Special Education. The teachers expose themselves to current best practices in early childhood education through in-service training, literature, and attending conferences. Taking advantage of the graduate programs at the University is also encouraged. The lead teachers work five eight-hour shifts. Lead teachers receive a 30-minute break and 90 minutes of planning time each day. This planning and break typically happens during the children’s rest period in the afternoon. During this time, teachers complete daily reports, prepare for the day’s lessons, hold meetings with the Director and Core/Lead Staff meetings. When the lead teachers are out of the room for lunch breaks or preparation time, a student teacher or highly qualified teacher assistant will take over. When a student is put in charge, the student is experienced in early childhood education and has an excellent work history at our center.

The Children’s Center employs a number of teacher assistants. These assistants are college students with a variety of interest areas but most are majoring in education, social work, or communicative disorders. Before beginning work at the Children’s Center, all assistants have orientation training session by the director. During the training session, the following areas are covered:

* Center Policies
* Licensing Rules
* NAYEC Regulations
* Confidentiality
* Child abuse and neglect recognition and reporting
* Staff orientation, time frame and items covered
* Health observation and precautions, medication, universal precautions, infectious disease control, and communicable disease recognition.
* Recognizing Illnesses
* Center contingency plans including fire and tornado evacuation plans and the operation of fire extinguishers.
* Procedure for sharing information related to a child’s special health care needs including any physical, emotional, social or cognitive disabilities
* Information on any special needs a child enrolled in the center may have and the plan for how those needs will be met.
* Procedure to contact a parent if a child is absent from the Center without prior notification from the parent.
* Emergency training including pediatric first aid, and CPR/AED
* Working with Families diverse backgrounds
* Job Responsibilities/Duties
* Schedule of Classroom Activities
* Child management techniques used at the Center
* Knowing children’s whereabouts at all times/Global Supervision
* Hand washing Procedures
* Shaken Baby Syndrome/SIDS

Every year to two years, the Children Center’s Staff is also required to take part in recertification and review sessions of the following:

* Pediatric First Aid (every two years)
* CPR/AED (every two years)
* Blood Borne Pathogens
* Fire Safety & Fire Extinguisher Use
* Child Abuse and Neglect
* Medical Log Entry Directions
* How to administer medication
* How to use an Epi-Pen

We are pleased to have many qualified teacher assistants at our center who came from diverse backgrounds and with a variety of physical abilities. In order to ensure the safety of the children while still offering opportunities that are unique to our center, we require that children do not ride on the backs of wheelchairs. Children can sit on laps of those people in wheelchairs or sit in the chair if the person gets out. If the children want to ride, the wheelchair alone a teacher will be close by to act as a spotter. The wheelchairs are not made small enough for the children and may tip.

Because we are a center that is accredited by the National Association for the Education of Young Children and on the University Campus, we have student teachers/interns, observation students, and students working on a variety of activities with the children to meet course requirements. Other students, at times, may request the opportunity to do an activity with the students in the classroom. During these times, the lead teacher and/or student teacher/intern is present, unless specific permission is granted by parents in the form of a written release. Paid students or volunteers who are scheduled each week have nametags that have the staff member’s name on it and wear a Children’s Center staff shirt.

The Children’s Center runs a criminal background screen annually on all staff members, student teachers and volunteers using a Background Information Disclosure form and electronic fingerprinting. Families will be able to know that all persons working or volunteering with their children do not have criminal histories. All staff members, volunteers, student teachers, and interns complete a Code of Confidentiality, NAEYC Statement of Commitment, and have a physical exam (which includes a TB skin test).

Because of other obligations both on and off campus, the director and Lead Teachers may need to be absent from the center at times. If the director is absent from the center, the Program Associate carries out all of the responsibilities of the director. If one of the Lead Teachers is sick, on vacation, at a meeting etc., the Associate takes over as the lead teacher in the classroom. We try diligently never to use substitutes as lead teachers (unless we have a highly qualified teacher assistant who meets the requirements in the state of Wisconsin for a lead teacher). We feel strongly that the children should have consistent care from people they are used to seeing at the center and with whom they have built a trusting relationship.

**Observers:** As part of a university setting, students from a variety of disciplines ask to observe in our classrooms or conduct a small project, such as reading a book to a small group of children. These students are supervised by UW-Whitewater Children’s Center personnel at all times, never left alone with children and they are not counted in the ratios.

**Supervision of Children Policy**

**Teaching staff supervise infants and toddlers/twos (all children under thirty-six months) by sight and sound at all times.** Teaching staff supervise children primarily by sight and positioning themselves to see as many children as possible. Teachers need to be aware of children’s whereabouts of all children at all times. Supervision of older children by sound is permissible for short intervals, as long as the teachers check frequently on children who are out of sight (e.g. those who can use the toilet independently, who are in a library area, or who are napping). Children are never left alone. During rest time, there is a minimum of two teachers present at all times. Teachers or assistant teacher are aware of, and positioned so they can hear and see, any sleeping children for whom they are responsible, especially when they are actively engaged with children who are awake.

**Termination of Staff**

Any staff member will be immediately dismissed for including, but not limited to:

* Verbal or physical abuse of a child or another staff member. Examples of abuse that are not tolerated are hitting, shaking, pinching, screaming, threating, psychological abuse, etc.
* Any form of physical punishment, including restraining or other corporal punishment;
* Any form of emotional punishment, including embarrassment, derogatory or frightening remarks;
* Withholding food.

**Child Abuse and Neglect**

* The Director, The Program Associate, Our Early Childhood Core/Lead Teachers and Teaching Assistants are mandated by the State of Wisconsin to report any suspected or known instances of child abuse or neglect to the Department of Social Services office.
* Providers are also expected to cooperate fully to protect the health and safety of children. Children Center’s staff receives in-service in recognizing the signs of abuse and neglect, and reporting procedures annually. If you would like further information on child abuse and neglect, contact the Director of the Children’s Center.
* If the staff member is accused of abuse or neglect of a child in the program the university insurance will cover the rights of the accused staff person as well as protect the children in the program. The Children Center will follow the university policy and procedures and notify the State Licensing Department, as soon as possible but no later than next business day when: the employee has been convicted of a crime; has been or is being investigated by a government agency; has a substantiated governmental funding; or has a professional license denied, revoked, restricted or otherwise limited.

**Unresolved Concerns**

The Children’s Center prides itself on being an open environment where families and staff openly discuss concerns that arise. However, there can be times when it may be difficult to resolve a concern. Below is the chart of staff and supervisors. It is our hope that when there is a problem that the people involved directly can work it out. If that is not possible, please see the chart below to see whom to contact:

**Organizational Chart of the Children’s Center**

Student Teachers, Practicum Students, Volunteers

Teaching Associates, Teaching Assistants

Chelsea Newman (Director)

**Discipline & Guidance Policy**

Peggy Lean (Administrative Assistant)

Please follow this chart, if you need to contact someone regarding an emergency, question, concern, or if you have a concern that cannot be resolved with your direct supervisor.

The Director (Chelsea Newman) is the person legally responsible for the daily operation of the Center. If she is absent from the Center, other staff members are in charge based on seniority and position.

In the director’s absence, Peggy Lean, will be in charge of center operations. If both the director and program associate are absent, Lead teachers will be in charge in this order, Chelsea Newman, Jennalee Johnson, Ellie Bader, Jake Pierce, Haley Westhouse, and Kiley Henn. If the director and core teachers are absent, one of the core staff members will be available by phone with the program associate as the in-person representative for the Center. If the director and core staff are not available by phone, the Center must be closed.

Lead Teachers

Artanya Wesley (Vice Chancellor for Student Affairs)

Discipline comes from the root word “Disciple” which means to teach. Everything we do within our day and how we organize our classroom settings is a form of discipline. We believe a child must feel physically and emotionally safe and secure in their environment in order to learn. Many children act out in new environments or when there has been a change in their environment. Children crave clear boundaries and expectations.

It is important to maintain a safe and enriching environment for children to grow. We use methods of guidance that will not hinder the development of confidence, feelings of self-worth, and relationships between both children and teachers and among children. We want to enhance children’s values and self-control. Transition techniques are used to ensure that children are active at all times, eliminating the waiting period when switching between activities. Children will be expected to follow classroom rules, which are set by the teachers that reflect age appropriateness and opportunities to learn.

In accordance with rules for licensing centers, The Children’s Center will provide positive guidance, redirection and set clear-cut limits. We will give each child skills to develop self-control, self-esteem and respect for the rights of others. Our center uses a combination of prevention techniques, activity planning, room layout, limited choices, logical consequences, gentle reminders, and redirection to handle most discipline situations. Actions, which are humiliating or frightening to a child, are prohibited. A child will not be punished for lapses in toilet training. These actions are not to be used at the request of parents.

If it is necessary for the child to be removed from the situation completely, the child may receive time to collect her or himself and regain their composure with the support of a teacher. The child will then be reintroduced into the activity or play. This will be looked at as a positive experience, one to step back and calm down, not as a punishment.

For more information on guidance and discipline, please visit the Center for Social and Emotional foundations to Early Learning at Vanderbilt University.

<http://www.vanderbilt.edu/csefel/>

**Biting Policy**

Biting is of particular concern for families and staff working with infants, toddlers and young preschoolers. Biting, although considered a more aggressive act, is not an unusual behavior for young children; it is actually developmentally appropriate. Young children bite for different reasons such as teething, sensory exploration, autonomy and control, peer interaction, imitation, frustration, anxiety etc. It occurs most frequently when a child is tired, frustrated, or over-stimulated.

When children have particular behavior problems such as biting, our staff’s first objective is to identify the following:

* What is happening with the child exhibiting the behavior both at school and at home?
* When and where did the bite occur?
* Who was bitten?
* How was it dealt with?
* What was the child’s response to the consequence?

We than “track” this information and child (by “shadowing” them) to see if there is a pattern that helps us identify why this particular child is biting and then to develop a plan of support for this child.

The family of the child who has bitten is told about the incident, specific circumstances, and offered resources and support. Staff and parents can work together with the child to help eliminate the behavior. Should the family wish or the staff feel it is necessary, a conference can be held with the family, Lead Teacher, and the Director to share information from school and home that may be helpful in our working together to find a way to support the child. If the biting continues, the Center, along with the family’s assistance, will seek outside resources to help the child stop the behavior.

**Disruptive Behavior**

Children experience varying difficulties of different stages of their development. While this is quite typical, it is also important that problematic behaviors not be shrugged off as being “just a stage,” as this approach prolongs and reinforces behaviors that, if left unchecked, can create major difficulties for the child and the child’s behavioral difficulties become harder to manage. However, if after reasonable efforts by the teacher and family, the child’s behavior continues to be disruptive to the classroom in ways which require a disproportionate amount of one-to-one attention, parents will be counseled to find an alternative child care arrangement that may be able to better meet their child’s needs. In these situations, we need to ensure the safety of other children and teachers in the program. Communication between home and the Center is the key to the effectiveness of any discipline approach.

**Guidelines for the Dis-enrollment of Children on Behavioral Problems:**

If disrupting or atypical aggression is displayed and staff has implemented traditional methods of defusing the situations with little or no success, the family will be consulted and the behaviors will be documented for a period up to two weeks.

During the time of observation and documentation, the family will be updated on a daily basis. If the behaviors of this child result in an accident report for another child, the report will be shared with the parents of the child whose actions have caused the incident. The name of the child causing the injury will of course be withheld from the other family and will not be indicated on the accident report form. After the observation period and anecdotal documentation, the teaching staff will meet with the Children’s Center Director to determine who would be best to observe the child and consult with staff.

Teachers and the Director will meet the family to describe the proposed observations and/or consultation and to get family permission. In addition, the family will be asked to allow us to share an overview of the situation with other families whom are concerned about the behavior with respect to confidentiality, but just enough so that the other family would know that assistance is being provided and the behavior is not being ignored or condoned.

If the family does not agree to working with an outside professional, care for the child will be terminated with a one-week notice. Teachers will continue to document behavior while implementing the strategies recommended by the outside professional. Progress toward changed behavior must be noted within a month of initiating the early childhood specialist’s recommendations. At the end of this month period, a meeting will again be held between the teachers and the family. If no progress has been made the enrollment will be ended with a week notice.

Factors to be considered in this decision will include:

* Impact of problematic behavior in the classroom
* Demand on staff time
* Availability of resources to the center.
* Impact on the basic nature of the program and the finances of the center of the accommodations that would be required to meet the child’s special needs.
* Possibility of danger to the child or others in the class or the ability of staff to meet the child’s needs.
* Willingness of the family to work with the teaching staff and/or to get outside help

Significant progress must be noted for the child to continue in the program past the end of the semester. If this is not the case, the enrollment will be ended at the end of the semester. UW-Whitewater Children’s Center reserves the right to dis-enroll at any point in time, without regard to the above procedures, in a situation that is determined to be extremely detrimental to the child concerned, other children and/or staff in the program.

**Diapering, Toileting, and Clothing Changing Policies**

**Diapering**

The families of children who wear diapers are responsible for having an adequate supply of diapers and wipes at the Center. Diapers should be clearly labeled with your child’s name to avoid mix-ups. **If your child wears cloth** diapers, we ask that you send enough diaper covers and inserts so a fresh one can be used each time your child is changed, and the diaper can be changed as a single unit. The inner liner must be absorbent and be completely contained within an outer covering made of waterproof material that prevents the escape of bodily waste. Plastic pants do not meet health and safety standards for group care. Staff cannot rinse cloth diapers, as state health codes prohibit rinsing diapers in public toilets. They will be placed in a plastic bag and hung up on your child’s hook. Please take these on a daily basis.

All children are changed as needed and checked once every 2 hours. The changing area is located in the cozy area separated from the learning centers. Staff will follow the changing procedures posted in the diaper changing area (in accordance with licensing rules), and the changing table will be cleaned and sanitized after each child’s use. Soiled diapers will be put into the foot operated, lidded container next to the changing table. The container kept closed and contents are not accessible to the children.

If you want staff to apply ointment, please label the ointment with your child’s full name and fill out the authorization to administer medication form.

**Toilet Learning/Training**

Learning to use the toilet is an important self-help skill for young children. A process requires much encouragement and patience. The best possible toilet training experience for young children (and the adults helping) happens when the child shows some signs of being ready for this training. When the time comes to begin this process at home and here, please speak with your child’s teacher before you start the process. This way we can come up with the plan that works for your child and to stay consistent. A cooperative effort between home and the center is most effective. For the first couple of weeks, continue to send diapers in addition to extra underpants and clothes. Staff will wash hands before and after assisting children with toileting. Staff assist children in learning and carrying out habits of personal hygiene. Independence and the development of self-help skills are encouraged. As with diapers, rinsing soiled underwear is not possible per state health codes). They will be placed in a plastic bag and put in your child’s cubby. Please take underwear home on a daily basis. Children learning to use the toilet at the Center are taken to the bathroom more frequently. Learning to use the toilet can be a difficult time for children and is handled sensitively, with patience, praise, and positive reinforcement. Any suggestions that you can give us concerning your child’s individual needs are much appreciated.

Children are allowed to use the bathroom as needed. Children wearing diapers or pull-ups are checked/changed every two hours, or as needed, whichever period is shorter. Pull Ups and diapers that have been worn by a child cannot be put back on after one use. Please inform lead teacher of special requests in this area of development. If there are any questions about activities, please do not hesitate to ask a staff member.

**Changing Clothes**

When changing diapers, using the bathrooms, or changing soiled clothing we change children in the bathrooms. We do not separate children by gender when changing their clothing, toileting or changing diapers. During our summer programming and days over 75 degrees in Early Fall and Late Spring we may participate in Water play outside. For the safety of children, we do not allow more than one child in a bathroom at a time without an adult present. If a child is in a bathroom alone there is always an adult who can either visually or auditory supervise a child over three years of age. Under three year of age there is always an adult present in the bathroom. When changing children in and out of swim clothing, we do not separate children by gender in our toddler, young preschool, preschool, or pre-kindergarten programs.

The Center believes in developing positive attitudes about our bodies. In keeping with our educational goals for the development of positive self-concept, teachers help supply children with the correct anatomical names for all body parts. In response to children’s curiosity about their bodies, questions are answered in an age-appropriate and matter-of-fact way. In a group setting, it is important for staff to have consistent approach in this area.

**Daily Schedules (Subject to Change)**

7:30-8:45 Arrival/Free Choice/Centers

8:45-9:00 Clean-up and Prepare for Breakfast

9:00-9:25 Breakfast

9:25-9:45 Morning Meeting

9:45-10:45 Learning Centers/Diapering/Bathroom

10:45-11:00 Clean-up

11:00-11:45 Outside/Large Motor

11:45-12:00 Transition to Inside/Story before Lunch (Children will be going outside and coming inside in small groups when wearing layers of winter clothing)

12:00-12:30 Lunch

12:30-1:00 Story time/Quiet Time/Diapering/Bathroom

1:00-1:30 Everyone Rests

1:15-2:45 Sleepers Sleep/Awake Children Go Outside, Gym, or Quiet Free choice

2:45-3:00 Children who are still sleeping will be woken gradually (diapering/bathroom)

3:00-3:15 Snack

3:15-3:30 Afternoon Meeting

3:30-4:30 Small Groups/Diapering/Bathroom

4:30-5:30 Depending on Children…Large Motor/Outside/Gym

**Notification of Late Arrival/Absence**

Children need consistency in their daily schedule to feel safe and secure in their environment. We would like to encourage families to bring children at the same time each day (or as close as possible). We realize that there are appointments that will sometimes interfere with drop-off times. However, we cannot emphasize the difference in a child’s day when they are consistently brought to the center at the same time each day. We do request that families drop their child off no later than 9:00am each morning if you want your child to be served breakfast at school. **If your child will be absent or arriving later than 9:30am, we ask that families notify the classroom using the center app.** Please remember that it is the family’s responsibility to notify the Center if your child is going to be late or absent for any reason.

**Arrival and Departure from the Center**

Anyone dropping a child off at the Center must bring the child into the child’s classroom and inform the teachers of the child’s arrival. Please DO NOT leave children unattended out in the hallway. Our program day begins at 7:30am and ends at 5:30pm. We ask families to wait until there are two teachers in the classroom and until 7:30am in the morning to leave their child. We also ask families to pick their child up prior to 5:30pm.

**Late Pick-up Policy**

Per DCF licensing rules the Children’s Center operating hours are strictly 7:30am-5:30pm. Children are only allowed to be in care a maximum of 10 hours. To help us stay in compliance with this rule, families’ key cards are programmed to work on the classroom doors ONLY during these hours. Families must adhere to these hours when signing their children (including siblings in multiple classrooms) in and out of the classrooms. This also helps respect the time of our teachers who have responsibilities outside of their assigned work hours.

**Late Fees:** If a family arrives late to sign their child out, **a fee of $5.00 per minute / per child will be assessed**. This is necessary to stay within required ratios and remain in compliance with DCF licensing rules. A late notice form will be completed and fees will be added to the next billing statement. The clock in the hallway outside the office is our official time clock. If staff are unable to contact a family member within 10 minutes after the Center closes, we will contact other individuals on the emergency contact list for the child. If staff are unable to contact a family member 30 minutes after the Center closes, we will notify the Whitewater Police Department and Child Protection Services. The first occurrence of late pick-up will result in a warning with no fees assessed. On the fifth offense, the family will be asked to meet with the Director. After the seventh offense, the family will be terminated from enrollment in our program.

\*Electronic access for family cards will end promptly at 5:30pm. At this time, any children not signed out will be brought to the office with their belongings. If families need to re-enter the classroom after 5:30 late fees will apply.

**Severe Weather Closure Policy:**

The UWW Children’s Center will only close if the administrative offices on campus close due to inclement / severe weather. If UWW classes are canceled, the Center will remain open. The Center does not follow the Whitewater Unified School District for closures (we will remain open when WUSD closes). If there is a closure, families will be notified via the center app, email, and the facebook page. If the Center needs to close early due to declining weather conditions throughout the day, families will be contacted to pick-up their children. The UWW Children’s Center will make every effort to maintain operations when possible and will make the best decision on whether or not to close based on the safety of our children, families, and staff. UWW Children’s Center cannot be held responsible for acts of nature. No refunds will be given due to a closure related to severe weather or other emergencies.

**Signing-out/Authorized Pick-Up List**

**In order for a person to be placed on the Authorized Pick-Up List, the person must:**

* **Be 18 years old**
* **Have a child safety seat in the vehicle in which they are transporting the child**
* **Bring picture I.D.**

Children are never released to a parent/legal guardian or other authorized pick-up person if the staff is concerned about the safety of the child. Examples of when the child would not be released are:

* Parent/legal guardian/pick-up person appears too ill to drive.
* Parent/pick-up person has been drinking alcoholic beverages
* Parent/pick-up person appears under the influence of any types of drugs
* Parent/pick-up person does not have a car seat for the child

If any of the above situations occur, another authorized pick-up person is contacted. Although, we understand that these could be embarrassing situations, our main concern is the safety of all of the children and families at the center.

**Custody Matters**

Children of parents/legal guardians who are divorced/separated must legally be released to the non-custodial parents by Wisconsin statutes. This also includes releasing information to the non-custodial parent. The only way we cannot do so is if we have a signed court document in the child's file stating otherwise. If there are any problems or questions, please see the Director. In cases where a child has parents/legal guardians that were not married, we still ask for a copy of any custody arrangements to be kept in the child's file.

**Children with More than One Residence**

Please let us know if more than one copy of the center information (handbooks, newsletters, etc.) is needed or if information needs to be sent to more than one address. The Children's Center is happy to send multiple copies of information to all parents and/or guardians of enrolled children.

**Holidays, Birthdays, or Other Special Days**

The Children’s Center does not celebrate holidays with the children; we celebrate traditions brought to us by our currently enrolled families and on our University Campus. We invite and encourage families to come into the classroom to celebrate their family traditions and culture.

Birthdays are an important milestone in the lives of young children. Birthdays place children at the center of attention for one wonderful day each year. At the UWW Children Center, each classroom decides as a group how to celebrate birthdays through a meaningful “birthday tradition”. Teachers will share the unique tradition with families. Please honor the very special classroom experience designed by the teacher and children and leave food / treats for the celebrations at home. Enjoy what is created for your child in honor of their birthday. Please let your teachers know if you do not wish for your child’s birthday to be celebrated.

**Family Services**

The Children’s Center is a place to not only know that the children are being cared for but is also a place to meet other families, learn of upcoming University and community events, find information about parenting, relationships, child development, etc…and a place that offers support when needed. Upcoming events that may be of interest to parents are posted on the Family Information Boards in the classrooms, in the children’s cubby, through e-mail, Kaymbu, and on the Facebook page. Your classroom teacher and the Director are also here as a form of support for your family. Should you need resources on a particular topic or have child development questions, do not hesitate to let us know how we can be of assistance to help your family. Please let us know if you can help us plan family events at the Center.

**CC Private Facebook Page**

Families and staff who would like to join our private Facebook page: UW-Whitewater Children’s Center Family and Teacher Group. Here you can connect with other families and teachers. Post for care opportunities needed outside of Center hours. Learn more about topics related to child development and our philosophy.

**Smoke Free Environment**

The Roseman building and outdoor play areas are entirely smoke free. Smoking is not permitted in the presence of children.

**Family Access to Child’s Records**

All staff members at the Children’s Center are committed to maintaining confidentiality and lending support to help families achieve their goals. Children’s records are accessible to the parents of the child upon request. The children’s records ae accessible to only the director, lead teachers, program assistant, the parent/legal guardian of the child unless access denied by court order, the state licensor, and NAEYC assessor.

**Confidentiality Statement**

All staff having access to the children’s records will not discuss or disclose any personal information regarding the children or their family unless authorized by the parent/legal guardian. All of the Children Center staff sign a Code of Confidentiality agreement before they start working with children and families.

**UW-Whitewater Children’s Center Enrollment Policy**

When enrolling at the UWW Children’s Center, families will choose from three enrollment options prior to the start of the academic year to best suit their needs for care and educational programming.

**Enrollment Option 1: Semester / Interim Contract** –- This enrollment option allows for greater flexibility for families to sign-up ONLY for the sessions that they will need care. This includes separate enrollment options for the following sessions (families must fill out all paperwork for each session separately and return to the office by the due dates on the chart below):

|  |  |
| --- | --- |
| **Semester / Interim Enrollment Periods** | **Registration Form Due Date** |
| Fall 2020 | April 17, 2020 |
| Winterim 2021 | November 13, 2020 |
| Spring 2021 | November 13, 2019 |
| Spring Break Interim 2021 | February 26, 2021 |
| May Interim 2021 | April 16, 2021 |
| Summer 2021 (Session A and Session B) | April 16, 2021 |
| Fall 2022 | April 16, 2021 |

\*Note: With this option, there are no tuition credits for days that a child does not attend the center (due to illness, vacation, or center closures, because of the flexibility for choosing the enrollment periods that best fit a families’ schedule. All billing is charged by a **weekly rate** (see Tuition Rate Chart) and by the number of weeks in a semester / session.

(*Billing example: a faculty/staff family with a 3 year old in the multi-age preschool room who attends 3 days per week will be billed $136 x 16 weeks in a semester = $2176 for fall and $2176 for spring. Interim weeks would be billed at the drop-in rate of $45.00/day).*

**Enrollment Option 2: 12-Month Year-Round Contract** --This enrollment option streamlines the enrollment process by allowing families to enroll in a full year of care (September – August) with one registration form. With this contract, families will be automatically enrolled in ALL interim and summer sessions for the same weekly schedule. Families choosing this contract will be billed the number of days/week enrolled for 50 weeks (families are not billed for the week of Winter Holiday break and the week of July 4th ).

*(Billing Example: a 3 year old faculty family whose child attends 3 days per week will be billed $136 x 50 = $6800. If they use all eight Flex Days, they would receive a credit of $336).*

Families who choose the 12-month contract will earn **“Flex Days”** to receive tuition credit for days that the center is closed or days that a child does not attend the center when they are regularly scheduled**. (Note: We do NOT “swap” days for absences)**. The number of Flex Days allocated is based upon how many days per week the child is enrolled (See chart below).

|  |  |
| --- | --- |
| **Enrollment Schedule****Days per week** |  **Flex Day Credit per 12 month contract** |
| 5 days/week | 12 days |
| 4 days/week | 10 days |
| 3 days/week | 8 days |
| 2 days/week | 6 days |

Tuition credits for used flex days will be processed to each family account based upon the following guidelines:

* The center must be notified in writing by submitting the **Flex Day Request Form** to the office prior to the absence. Advanced notice is required, as other families may be looking for drop-in care and the center needs to staff appropriately and efficiently.
* In the case of an illness, the Children’s Center must be notified of absence via email or phone call before 9:00am. In the email or phone call, please indicate that you would like to use a flex day for this absence. Absences that are reported later than 9:00am will result in regular billing for this day**.**
* **Flex days must be used within the contract period and will not be accumulated or carried over to the next contract period.**
* Once the allotted flex days are used, subsequent absences are charged the standard tuition rate.
* Flex day credits will be issued upon receipt of the Flex Day Request Form.

**Enrollment Option 3: Drop in site / hourly rate** --This enrollment option is focused on providing more flexible care for student families. (undergrad = 6 credits/ CCAMPIS eligible families = 12 credits / grad students = 9 credits) Families can choose to enroll their child anytime Monday-Friday between 7:30 am – 5:30 pm, for a minimum of TWO hours.

Enrolling your child in our Drop in site will require you to sign up for care at least TEN days before care is needed, this way we can ensure we maintain ratios.

**The UW Whitewater Children’s Center has received a Child Care Means Parents In School (CCAMPIS) Grant from the US Department of Education.  If you meet the following requirements (being Pell Grant eligible, taking 12 or more credits and have a child!)  as a UW-Whitewater student please use this link to complete a survey that will allow our staff you to contact you:**[Qualtrics Survey | Qualtrics Experience Management](https://uwwhitewater.co1.qualtrics.com/jfe/form/SV_398kZTFPRXBFYc6)

**Schedule Changes (Adding or Dropping Days of Care):**

With either contract choice, all schedule changes within a contract period (one year), must be submitted using a **Schedule Change Request Form**. We will do our best to accommodate adding days to a schedule based upon current enrollment and available spots, but this is not guaranteed. If a reduction of days is requested, the drop fees will be charged – [$*30.00 per day dropped plus a two-week notice].* If child is being completely withdrawn from the program, a **Cancellation of Care Form** must be dated and submitted. Once this form is received, *$30.00 per day* **AND** *two weeks of tuition will be billed.* Upon cancellation of care, families forfeit any unused Flex Days.

**Registration Fees:**

Registration Fees will be charged annually in the fall or at the start date if enrolling mid-year.

**Discounts:**

* Five Day Full Week Enrollment for all classes, except dually enrolled 4K (both WWUSD and UWW-CC): **5%**
* Full Fall & Full Spring Semester Payment by due date: **2%**
* Multiple Sibling Discount: **10%** discount on the lower tuition(s)

**Enrollment Verification**

Enrollment is only verified after the required forms are turned in for each child **and the registration fee is paid.** These forms include the application form, the immunization form, the health history form, income verification form, signed enrollment contract. After completion of the enrollment forms, a child can begin attending the Children’s Center in forty-eight hours (a child cannot attend the center the same day that a parent/legal guardian brings in the enrollment forms). Upon enrollment, the center must also have on file a health form, immunization records and emergency contact information for each child. Registration fees cannot be added onto student bills. The registration fee is an annual fee (billed each fall semester) and is non-refundable. **If a parent/legal guardian chooses not to have their child attend the center after enrolling them, the registration fee will not be returned to the parent.**

**Drop-in Care**

Extra days can be purchased as needed and need to be purchased at least one day in advance (unless there is an emergency). These additions are scheduled on a pre-approved, prepaid basis. These additions are also required in writing. Once the request has been confirmed by the office, the family will be required to pay tuition regardless of the child’s attendance. Payment is required when the request is submitted to the office and it is nonrefundable.

**Billing of Scheduled Childcare**

For parents/legal guardians, who are students, the total bill for the entire semester is sent to the home address along with enrollment verification. Student families have a chance to review the bill and discuss any errors with the office. Once the bill is verified, the total amount is put on the student account through the Financial Services office. This is done before the beginning of the semester. Non-student families are billed in four equal installments. The first installment is due at the beginning of the semester. Payments (cash, check, or money order) should be given to the director or program associate in the office. Please do not give cash to any teachers or student employees. A receipt is made for all payments made to the Center and is given directly to the parent or put in the child’s cubby.

**Financial Assistance**

The Financial Aid Counselors at the Financial Aid Office may be of assistance to student parents/legal guardians. Be sure to take copies of childcare bills to meetings with Financial Aid Counselors, as these may be needed. Please be aware that the University has an installment plan for students. However, you must sign up for this service at the Student Billing Office in Hyer Hall.

The Children’s Center does not offer financial assistance to parents to offset the cost of childcare; however, we do participate in the Wisconsin Share Child care subsidy. Families can see this website for information about eligibility <https://dcf.wisconsin.gov/wishares>

In addition, we also work with Childcare Aware to support military families and families of veterans. See <https://www.childcareaware.org/> for additional information

**Billing Errors, Questions, or Concerns**

Although every effort is made to insure that no errors are on bills, sometimes mistakes do occur. If this happens, please bring the bill to the office at the Children’s Center to remedy the problem.

**Student Status and Change of Status from Student to Non-Student**

In order to qualify for student rates, students must be enrolled for the minimum number of credits to qualify for Financial Aid in a given semester. UW-Whitewater considers a *graduate student* to be registered on a full-time basis when the student is enrolled in at least nine (9) UW-Whitewater credits during a fall or spring term and at least five (5) UW-Whitewater credits during the summer term. *An undergraduate student* is considered full-time when he/she is enrolled in at least twelve (6) UW-Whitewater credits during a fall or spring term and at least six (6) UW-Whitewater credits during the summer term. Parents will be charged the student rate for interim sessions if they were full-time students the previous semester & enrolled the semester forthcoming. If a parent graduates or decides to reduce credits or no longer attend school, their billing status is changed from student status to non-student status. Upon graduating, the parent then becomes “community family” status and is billed at community rate.

**Termination of Enrollment:**  The UW-Whitewater Children's Center reserves the right to give written notice of cancellation of the enrollment of a child for any of the following reasons:

 1. Non-payment or excessive late payment of fees;
2. Non-compliance with the policies and procedures as outlined in the Family Handbook;
3. The child has special needs which the Center cannot meet, including disruptive behavior which requires a disproportionate amount of one-to-one attention or is putting the safety of themselves, other children, or teachers in jeopardy;
4. Physical or verbal abuse of staff or children by a child, parent, or guardian;
5. The child is not in attendance at any time during two weeks of any enrollment period and the Center is not notified that the child will not be in attendance;

7. Neglecting to fill out and return required forms promptly;
8. Excessive late pickups at the end of the day past the operating hours of 7:30-5:30.

In case of a termination, a one week written, dated notice will be given to the parent/guardian. All terminations may be appealed in writing to the Office of Student Affairs.

**Health and Safety**

The Children Center wishes to maintain a healthy and safe childcare facility. Every staff member of the Children Center is trained in recognizing childhood diseases. Symptoms of a sick child may include fever, rashes, sweating, lethargic behavior, etc. If symptoms become apparent while the child is at school, a call home is made and the child is given the opportunity to lie down in the office to be made as comfortable as possible.

**Physical Exam**

Every child who is enrolled at the Children’s Center and staff member needs to have a physical exam on file and a record of immunizations. Both of these forms can be obtained from the office. The physical exam form must be completed within ten days of enrollment. However, if a child has had a physical exam in the past six months, a doctor or a licensed health care provider can sign the form. Every child needs to have physical exam: every two years for children over twenty-four months and every six months for children under twenty-four months of age.

**Immunizations**

A parent or doctor can complete the immunization form. An Immunization form needs to be turned into the office by the first day of enrollment. Families who do not have their children immunized for personal or medical reasons still need to complete this form. There is a section that addresses personal beliefs. These requirements can be waived only if a properly signed health, religious or personal conviction waiver is filed with the school. The purpose of this form is to measure compliance with the law and will be used for that reason only. If you have questions about immunizations or how to complete this form, please speak to the Director or Program Associate.

**The following are the immunization requirements:**

**AGE/GRADE NUMBER OF DOSES**

5mos through 15mos 2D TP/DTaP/DT 2 PCV 2 Hep B 2 Hib

16mos through 23 mos. 3DTP/DTaP/DT 2 Polio 1 MMR 2 Hep B 3 Hib 3 PCV 1 MMR

2yrs through 4yrs 4DTP/DTaP/DT 3 Polio 1 MMR 3 Hep b 3 Hib 3PCV 1 Varicella\*

Kindergarten Entrance 4DTP/DTaP/DT 4 Polio 2 MMR 3 Hep 2 Varicella\*

\*Unless child has reliable history of chickenpox disease

**Dental Examinations are not required but recommended to children 3 years old and older.**

**Illness Policy**

**When to keep a child home:**

Below is a list of symptoms that indicate a health concern because of which the child is not well enough to be at the center. If a child displays any of these symptoms during the day, the parent/guardian is contacted to take the child home so as not to expose the other children to the illness. Please note this is not an all-inclusive list, just the most common illnesses.

**Fever -** Oral temperature of 100 degrees or higher. Axillary/Under Arm Temp of 99 degrees or higher.

**Respiratory Symptoms -** Difficult/rapid breathing, sever coughing, high-pitched croupy or whooping sound after coughing.

**Diarrhea or vomiting -** One or more times during the day without a medical explanation from a doctor. Observe for other symptoms like fever or abdominal pain.

**Eye/Nose Drainage -** Yellow or green thick mucus or pus drainage from nose or eyes. Constant clear drainage from the eye.

**Skin/Rash Problem -** Rashes, open sore-crusty, yellow green drainage, which cannot be covered, Lice, or Ringworm.

**Unusual Symptoms -** Eyes or skin is yellow (jaundice). Stool is gray or white, urine is dark colored (hepatitis).

**Lethargic/unable to participate in regular activities.**

**COVID –** Individuals who test positive for covid may need to quarantine – please contact the office for specifics on how long.

Children have to be symptom-free or on prescribed medication for 24 hours prior to returning to the center or have a doctor’s note permitting them to return to school prior to 24 hours, to avoid possible exposure to other children. We are required to ask for a doctor’s release in the case of certain illnesses. However, we also reserve the right to ask a family to keep a child home if we see evidence of illness symptoms that would make the child uncomfortable or be a risk to other children or staff.

In the event that a child is brought to school with any of these symptoms or we observe any of these symptoms, we are required to have the parents or someone on the child’s emergency list to come to the center and take the ill child home. Parents need to make sure that we have emergency numbers on file with the location, phone numbers of the closest office and times of classes. If a child becomes ill while at school and the parent or emergency person is contacted, that person will need to pick up the child within one hour. Please be sure that your emergency contact people are aware of this.

If a child is sick and not picked up within an hour of notifying the parents or emergency contact, there will be a fine of $10.00. This is necessary because a child who is sick requires a one to one ratio (teacher to child) during isolation. The isolation area for a child who is sick is in the director’s office. **If a parent feels that their child is too sick to go outside, then the child is too sick to be at the center.** All of the children who are at the center go outside, weather permitting. If a child has a communicable disease, it is necessary for the parent to notify the center immediately so we can communicate the information to the other families and report the illness to public health and licensing. The names of the children (and families) that have communicable disease are held confidential but it is required by licensing that other parents are aware that a child in the center has a contagious disease. Notifications will be sent out to the families by email.

**Teeth Brushing**

The children’s dental health is important to us, as well. Children who are here for a full day will be offered the ability to brush their teeth after breakfast or lunch with water. The center will supply your child with a toothbrush and a toothbrush cover, which will be disposed of every three months. The teachers help with this process and encourage it. The toothbrush is maintained in a hygienic manner in a holder labeled with their name and kept under a splash cover which is cleaned and sanitized regularly.

**Medications**

Administering medications is a very serious responsibility. Whenever possible, parents should schedule the times that their child receives medications in such a way that they, the parent(s)/legal guardian(s) are giving the medication. Only in cases where it is impossible for a parent/legal guardian to give medications because of their schedule, a core staff will administer prescription medication in its original container with the prescription label indicating the child’s first and last names and a dispenser with dosing markings provided by the parent. Medication will be administered in the office with the exception of Epi Pens or other medications required to be given immediately such as insulin. The Authorization to Administer Medication Form (found in the office) must be on file.

The Children’s Center will not administer over the counter medications such as Tylenol, Benadryl, Neosporin, Advil or Cortisone creams without a signed note from a doctor indicating the times, amounts to be administered, and how the medication is to be dispensed.

A written record, including type of medication given, dosage, time, date and the name of the person administering the medication, will be made in the center’s medical log immediately after the medication is administered. Please do not put medication in lunches or backpacks (including inhalers). The medications will be kept in locked container at the Children’s Center. Please remember to take the medication home at the end of the day; teacher would be happy to assist you getting the medication out of the locked medication box.

The Children Center Core Staff has a specific training updated annually by a health care professional on the practice of the five right practices of medication administration:

Verifying that the right child receives:

1. The right medication
2. In the right dose
3. At the right time
4. By the right method

By documenting each time medication is given to meet the NAEYC requirements to administer medication. Teaching staff who are required to administer special medical procedures have demonstrated to a health professional that they are competent in the procedures and are guided in writing about how to perform the procedure by the prescribing health care provider.

**Sunscreen, bug spray, diaper creams, and other lotions**

From April through October, the center will provide sunscreen with a minimum of SPF 30 and bug spray to children. Families are required to sign an annual release form to apply bug spray and sunscreen. Should a child need diaper cream, lip balm, or other lotions or soap applied during their enrollment; families will need to sign a separate authorization form for each item. Children can apply their own hand soap and lip balm, but only Children Center staff can apply lotions or diaper creams.

**Outdoor Play**

Getting outdoors daily is important for the physical health and development of all children. Outdoor play is provided daily (often times multiple outdoor activity times are provided throughout the daily schedule) except during inclement weather (severely stormy or severe weather. Children will not go outside during the following conditions:

 \*Thunderstorms

 \*During a heat advisory (heat index is too high)

 \*Wind chills of 20 degrees F or below for children under the age of two

 \*Wind chills of 0 degrees F or below for children over the age of two

 \*Air quality within the ‘purple’ range

We use our best judgement to shorten and limit the time outdoors when it is closer to 0 degrees, too humid, or if the air quality is in the ‘red’. All children will go out with their classroom unless we have a written note from a healthcare provider recommending a child stay indoors for health reasons.

**Water Play**

Water play is available to the children often at the Center (both indoors and outdoors). Teachers closely supervise water play, so children do not drink the water and children with sores on their hands are not permitted to participate at the water play. Children wash their hands before and after playing in water (or a sensory table). Water is changed and the water table is sanitized daily or more frequently if needed. Outdoor water play with the aqueduct and / or sprinkler may take place on days when the outdoor temperature is 70 degrees or above.

**Nap/Rest Policy**

The center has a rest policy that is the same for all classrooms with children under age five. Children are offered a 30-minute rest period. We require children to rest for at least 30 minutes if they are under 5 years of age in care for more than 4 hours in our center. It is not required that they sleep, but they do need to lie down and rest. Children who do not fall asleep after forty-five minutes are allowed to engage in quiet activities.

All children who are at the center after lunch, have a rest time or nap. Each child is required to bring a small bed sheet, blanket or sleeping bag, and a pillow. All of the bedding materials need to be labeled and are kept in a plastic rest bin at the center. The sheet and blanket need to be washed weekly (as mandated by state and NAEYC). Please take this home at the end of each week and return the following week. All children over 1 year of age use a cot that is sanitized after every use. Crib sheets are provided in the infant room and are laundered here at the center. Cribs are sanitized on a daily basis, as well.

**Safe Sleep for Infants Policy**

The UW-Whitewater Children’s Center follows safe sleep recommendations for infants to reduce the risk of Sudden Infant Death Syndrome (SIDS), Sudden Unexpected Infant Death (SUID), and the spread of contagious diseases:

1. Infants will always be put to sleep on their backs in a crib.

2. Infants will be placed on a firm mattress, with a fitted crib sheet, in a crib that meets the Consumer Product Safety Commission safety standards.

3. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, positioning devices or extra bedding will be in the crib or draped over the side of the crib.

4. Sleeping areas will be ventilated and at a temperature that is comfortable for a lightly clothed adult. Infants will not be dressed in more than one extra layer than an adult.

5. If additional warmth is needed, a one-piece blanket sleeper or sleep sack may be used.

6. The infant’s head will remain uncovered for sleep. Bibs and hoods will be removed.

7. Sleeping infants will be actively observed by sight and sound.

8. Infants will not be allowed to sleep on a couch, chair cushion, bed, pillow, or in a car seat, swing or bouncy chair. If an infant falls asleep any place other than a crib, the infant will be moved to a crib right away.

9. An infant who arrives asleep in a car seat will be moved to a crib.

10. Infants will not share cribs during the same day of care, and cribs will be spaced 3 feet apart.

11. Infants may be offered a pacifier for sleep, if provided by the parent.

12. Pacifiers will not be attached by a string to the infant’s clothing and will not be reinserted if they fall out after the infant is asleep.

13. When able to roll back and forth from back to front, the infant will be put to sleep on his back and allowed to assume a preferred sleep position.

14. In the rare case of a medical condition requiring a sleep position other than on the back, the parent must provide a signed waiver from the infant’s physician. The physician’s note for non-back sleepers must explain why the baby should not use the back-sleeping position, how the child should be placed for sleep, and a period for how long the instructions are to be followed.

15. Our childcare program is a smoke-free environment.

16. Our childcare program supports breastfeeding.

17. Awake infants will have **supervised** “Tummy Time”.

**Helmets**

We require that the children wear helmets while riding trikes, riding in wagons, and climbing on specific structures at the Children’s Center. Although the trikes do not go extremely fast, we think that it is an excellent practice for the wearing of helmets to become a habit. When the children start riding a bike, it will not seem strange to wear a helmet. It is essential that the helmets fit snugly and that only one child use each helmet. We require that each child have their own helmet supplied by the family. Please put the child’s name on the top of the helmet (on the outside).

**Minor Injuries**

If a child is injured with a scrape, small cut, or bump staff are limited to doing the following:

* Wash the injured area with soap and water and apply a bandage
* Supply ice

State Licensing will not allow antiseptics, iodine, peroxide or other bacterial medications. If a child has an injury that was not witnessed by staff member, file an Accident/Injury Report and notify the parent by attaching a copy to the child’s cubby. Staff will fill out an accident report and record the same information in the medical log. In cases of accidents where child needs to seek medical attention as a result, State Licensing require additional reports to be filed. Check with the Director of the Children’s Center for the paper forms if necessary.

Every classroom and the office are equipped with a first aid kit in a rolling backpack called the “GO” Bag. All staff members in each classroom are required to successfully complete a Pediatric First Aid and CPR course (that includes managing a blocked airway and rescue breathing for infants/children).

**Accident Policy and Procedure**

Each child must have a signed Emergency Contact (for accidents requiring emergency medical treatment) on file before the first day of attendance. Any serious or life threatening injury that requires immediate attention, and parent or guardian cannot be reached, will require the injured child to be transported by the rescue squad to the hospital noted on the emergency information card or Fort Atkinson Memorial Hospital Emergency room for treatment if a hospital is not designated.

If an accident or injury occurs, an Accident/Injury Report must be filled out with the following information:

* Date
* Time
* Child’s name
* Description of the incident
* Action taken by staff and name of the staff member reporting the injury

A parent will receive a copy of the report and a copy will remain in the children’s file.

**Severe or Life-Threatening Accident Policy and Procedure**

1. One staff member will stay with child providing them with comfort and reassurance.
2. Another staff member will dial 911
3. The parent(s) will be notified by the assisting staff member.
4. The child will be transported to the medical facility listed on the emergency information card. A staff member will accompany the child if transported and a parent has not arrived.

**Previous Injuries**

If a child comes to the Center with an injury that is either out of the ordinary or repetitive in nature, this will be documented in the medical logbook upon arrival.

**Miscellaneous Health Information**

All staff are taught the universal precautions of working with bodily fluids. Each classroom has a medical log in which we record any injuries sustained by a child while at the center and when medicine is distributed. These logs are available to parents to review entries about their child.

**Allergies & Chronic Illnesses**

In the event your child has an allergy requiring an Epi Pen or has a chronic illness (such as Diabetes or Asthma) requiring regular monitoring or treatment while the child is at school, we request that the family and the child’s doctor complete an Allergy Action Plan. The Center can provide the family with this form or use one the doctor has provided. Once this form is complete, the Director, the teacher and the child’s family will meet to discuss the details of the plan. Training will then be provided to all staff to ensure the child’s good health and safety while at school. Because of the number of student teachers and volunteers in our program, we request that this Action Plan be posted in all classrooms the child visits and the child’s photo is on this Action Plan. We require this plan to be updated at least annually and the child’s family notifies us immediately to any changes in the plan.

**Emergency Plans and Procedures**

Upon request, the Children’s Center will provide any parent/legal guardian with a copy of the Emergency Procedures Guide for the University and for the Children’s Center. This detailed plan goes over what the center will do in the case of an Evacuation, Tornado or Shelter in Place, and other emergencies that might be encountered on campus. This plan was developed with the Director, Children’s Center Staff and the UWW Police Department and is on file with the City of Whitewater. ALL staff are trained on these policies and procedures during orientation. Retraining takes place annually.

**Evacuation, Tornado, & Shelter in Place Drills**

Evacuation drills and tornado or severe weather drills are practiced monthly without prior notice to children or teaching staff. Shelter in Place Drills are held once a semester. Teachers review procedures for all drills at the beginning of each semester. A drill log is kept in the Center Office.

**Dressing for School**

Children should wear comfortable clothes that allow him or her to move freely. Our center’s motto is a messy child is a happy child! We require children to wear closed toed shoes at all times. We ask children to wear sturdy closed toe shoes that permit climbing, running and jumping. If a child wears Crocs or other water shoes, we ask that they fit well and do not easily fall off the child’s feet. **We suggest that children not dress in anything that would upset the child or family if it were stained or soiled. Playing is a child’s form of work and we want to be able to allow the children to participate in messy, fun work without worrying about their clothing.** Smocks are provided by the center but do not fully cover the child’s clothing.

We ask that each child bring at least two additional sets of labeled clothing. Please check the clothing regularly to make sure it still fits and is seasonal. For children who are beginning to use the toilet, we suggest several changes of underwear and bottoms. Whenever we need to change a child at school, please be sure to bring extra clothes for the following day. If your child goes home with borrowed school clothes, please wash and return as soon as possible.

In winter, children need items that are waterproof; boots, snowsuit or snow pants, jacket, mittens/gloves, hat, and extra socks (all labeled). **Please label your child’s clothing and belongings with the child’s name so that we can make sure your child’s items are not misplaced.**

**Hand washing procedures for staff, children, and families**

Washing hands is the single most important thing a person can do to decrease the possibility of acquiring communicable diseases. We ask all families to wash their hands when entering the room if they plan to stay longer than a normal drop off or pick up.

**Children and adults wash their hands**

* On arrival for the day.
* Before and after diapering and after using the toilet
* After handling body fluids (e.g. blowing or wiping a nose, coughing on a hand, or touching any mucus, blood or vomit)
* Before and after meals and snacks, before and after preparing or serving food, or handling any raw food that requires cooking (e.g., meat, eggs, and poultry).
* Before and after playing in water that is shared by two or more people
* Before and after handling pets and other animals or any materials such as dirt, or surfaces that might be contaminated by contact with animals.
* When moving from one group to another (e.g. visiting) that involves contact with infants and toddlers/twos and;
* At any point during the day when you cannot remember the last time you washed your hands!!!!

**Adults also wash their hands:**

* Before and after feeding a child
* Before and after administering medication
* Before and after assisting a child with toileting, and
* After handling garbage or cleaning

**Handwashing Procedures:**

* Using liquid soap and running water
* Rubbing hands vigorously for at least 10 seconds, including back of hands, wrists, between fingers, under and around any jewelry, and under fingernails; rinsing well
* Drying hands with a paper towel and avoiding touching the faucet with just-washed hands by using the paper towel to turn off water.

Staff wear vinyl exam gloves when contamination with blood occur, changing diapers and dealing with bodily fluids if possible. Staff also wear gloves when handling and preparing food for the children. After they take off gloves, they follow the proper hand washing procedures listed above at the adult bathroom sink.

**Maintaining a healthy environment**

The routine frequency of cleaning and sanitizing all surfaces in the facility is as indicated in the Classroom and Custodian’s Cleaning and Sanitation Frequency Tables. The Children’s Center uses Oxivir spray cleaner, which cleans, disinfects and sanitizes for all daily cleaning of non-pours surfaces and in the diaper changing area. When washing dishes or toys that have been mouthed, these items are soaked in bleach water for a minimum of two minutes after being cleaned in dishwashing solution and hot water. After soaking, these items are thoroughly rinsed and air-dried.

Procedures for standard precautions are used and included the following:

* Surfaces that may come in contact with potentially infectious body fluids must be disposable or made of a material that can be sanitized
* Staff use barriers and techniques that minimize contact of mucous membranes or of openings in skin with potentially infectious disease.
* When spills of body fluids occur, staff clean them up immediately with detergent followed by water rinsing.
* After cleaning, the Custodian sanitize nonporous surfaces with bleach and water solution or quaternary product
* Staff clean rugs and carpeting by blotting, spot cleaning with a detergent disinfectant and shampooing or steam cleaning
* Staff dispose of contaminated materials and diapers in a plastic bag with a secure tie that is placed in a closed container

A toy that a child has placed in his/her mouth or that is otherwise contaminated by body secretion or excretion is either to be (a) washed by and using water and detergent, then rinsed, sanitized with bleach, and air dried before it can be used by another child. The Center uses a quaternary solution called Lysol Antibacterial All Purpose Cleaner that cleans, disinfects, and sanitizes for food and diapering surfaces. Licensing requires surfaces to be sprayed and wiped twice with this solution. Staff maintains areas used by staff of children who have allergies or any other special environmental health needs according to the recommendations of health professionals.

**Nutrition and Meal Service**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and instructional participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.) should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at [http://www.ascr.usda.gov/complaint \_filling\_cust.html](http://www.ascr.usda.gov/complaint%20_filling_cust.html) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. Mail: U.S. Department of Agriculture

 Office of the Assistant Secretary for Civil Rights

 1400 Independence Avenue, SW

 Washington, D.C. 20250-9410;

1. Fax: (202) 690-7442; or
2. Email: program.intake@usda.gov

This institution is an equal opportunity provider.

**Spanish:**

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Las perons con discapacidades que necesiten medios alternativos para la communicacion de la informacion del programa (por ejemplo, sistema Braille, letras grandes, Cintas de audio, lenguje de senas Americano, etc.) deben ponerse en contacto con la agencia (estatal o local) en la que solicitaron los beneficios. Las personas sordas, con difficultades de audicion o discapacidades Del habla puden comunicarse con el USDA por medio Del Federal Relay Service [Servicio Federal de Retransmision] al (800) 877-8339. Ademas, la informacion Del programa se puede proporcionar en otros idiomas.

Para presentar una denuncia de dsicriminacion, complete el Formulario de Denuncia de Discriminacion del Programa del USDA, (AD-3027) que esta disponible en linea en: <http://www.ocio.usda.gov/sites/default/files/docs/2012/Spanish_Form_508_Complaint_6_8_12_0.pdf>. Y en cualquier ofician Del USDA, o bien escribe una carta dirigida al USDA e incluya en la carta toda la informacion solicitada en el formulario. Para solicitor una copia Del formulario de denunica, llame al (866) 632-9992. Haga llegar su formulario lleno o carta al USDA por:

1. Correo: U.S. Department of Agriculture

 Office of the Assistant Secretary for Civil Rights

 1400 Independence Avenue, SW

 Washington, D.C. 20250-9410;

1. Fax: (202) 690-7442; o
2. Correo electronico: program.intake@usda.gov

Esta institucion es un proveedor que ofrece igualdad de oportunidades.

**NUTRITION POLICY**

Our center is dedicated to supporting children’s growth and development in all possible ways. The teachers at the center DO NOT force the children to eat breakfast, snack, or lunches. The teachers model examples of healthy eating habits at the center. Children are never punished for not eating and food is never used as a form of punishment or reward. The Children Center participates and follows the USDA Child and Adult Care Food Program (CACFP) guidelines.

Liquids and foods that are hotter than 110 degrees Fahrenheit are kept out of children’s reach.

**Breakfast, Lunch, and Snacks**

Meal times are as follows: Breakfast at 8:45 am, Lunch at 11:45 pm, Snack at 2:45 pm. Staff do not offer children younger than four years any foods that are choking hazards.

Meal times are meant to be a time for tasting new and possible unfamiliar foods, nourishing our body, and socializing with friends. Throughout the year, the center provides a nutritional breakfast, lunch, and afternoon snack daily at no extra charge to parents. A typical breakfast includes milk, a grain product (toast, cereal, muffins, bagels, etc.) and a fruit (either a canned fruit, fresh fruit) and milk. Lunches must have a grain product, protein, one fruit and one vegetable, and either whole or fat free milk. Milk is served with breakfast and lunch. Each child has their own water cup or water bottle available to them and is encouraged to drink water throughout the day. Water is also offered during snacks. Snacks include, but are not limited to: crackers with different spreads, fresh fruits, fresh vegetables, bagels, macaroni and cheese, salads, muffins, breads, trail mix, cheese, applesauce, etc. and milk. Please let us know if your child has food allergies or is on a special diet. We may be able to serve alternatives that you provide under certain circumstances (please see the director). Parents are invited to join us or for breakfast, lunch, or afternoon snack

We are able to participate in the USDA food program to provide nutritious breakfast, lunch, and snack and receive some reimbursement to offset the cost of the food program. The Household size-Income Statement Form is completed by families to help us determine the amount of the reimbursements we receive from the state. This form remains confidentialand is filed with the food program information in the director’s office.

**How Food is served:**

Children are provided the meals and snacks in a family-style dining experience for a relaxed, social experience. Teachers sit and eat with children and encourage children to utilize self-help skills to gain independence, as well as encourage children to try all foods. Staff model positive mealtime manners and habits for the children. The children serve themselves and can have additional servings if there is ample food for everyone to have their first servings. Children will never be required to eat foods that they are not comfortable eating. Food is never used as a reward or punishment. The Child and Adult Food Program requires children to have the minimum serving size of each food and beverage on the menu placed in front of them at each meal time. Children are not required to eat this food and may request additional helpings of any food we have left over, regardless of whether or not they eat any of the other foods placed in front of them. Teachers and teaching assistants are all trained each semester on how to prepare and serve food.

**Food Allergies/Dietary Restrictions**

If your child has an allergy, sensitivity, or has a medical condition that requires certain food restrictions, please let us know in writing with a statement from a state licensed healthcare provider (physician, physician assistant, or nurse practitioner). This statement must include; Description of impairment (reason for the request), How to accommodate the impairment (food to be avoided, acceptable substitutions, etc.), and must be signed by the healthcare professional. Our center provides some substitute meals or drinks for children with food allergies. Special Dietary Needs / Restrictions are posted in each room so that every staff member is aware of the individual needs of the children in that classroom.

**“Special Diets”**

If you prefer that your child not eat an item on our menu due to religious or personal preference (vegan, vegetarian, gluten free, etc.), please notify the director in writing of your request. We will evaluate if the center can feasibly provide an alternative food / milk substitution. The Center cannot always accommodate substitutions for all special dietary requests. You may be asked to provide a substitution if the Center cannot do so. This information is posted in the classroom to ensure all staff members are aware of substitutions. All meals are posted in advance for review. Look for menus and any changes to be posted on the parent board located in each classroom.

**Miscellaneous Information**

**Who is in Charge at Drop-off and Pick-up Time?**

One of the most hectic times at the Center is drop-off and pick-up time. Usually it is a time when the staff and parents connect and share information about the day (this is an essential activity). It also tends to be the time, and usually the only time during the day, that many of the children behave in ways that are inappropriate for the time and place. We believe that one of the reasons this happens is because children are confused about who is in charge - their parent or the teacher? Our policy is that while the parent/legal guardian is in the classroom, they are responsible for their child and this will be verbalized to children if there appears to be confusion. For families who are new to the Center, this may seem like an odd policy to have, however, for parents who have had hectic pick-up/drop-off times this policy will probably make more sense.

**Insurance**

Parents/Legal Guardians are expected to provide ample medical coverage for accidents and injuries or be financially responsible for coverage. University liability does not include medical coverage for Children’s Center participants.

**Toys from Home**

Children’s Center has a large variety of toys and requests that children not bring toys from home, as these may be lost, broken, or cause difficulty in sharing. However, we also understand that children enjoy bringing special items. Items that we encourage children to bring include books that are culturally diverse or reflect anti-bias or social learning experiences, and naptime cuddle toys (soft toys or stuffed animals).If any problems occur in relation to a toy brought from home, the item will be placed in the child’s cubby and returned when the child is picked up. **Children’s Center is not responsible for any lost or broken toys brought from home.**

**Pets**

Due to licensing and accreditation standards, we do not keep pets at the Center. No animals are to be brought into the Center for visits unless they are service animals. If we are studying a certain animal and the opportunity arises to bring an animal to school, we will send home notices to families prior to this happening to ask your permission before allowing your child to have contact with the animal.

**Transportation**

The Children’s Center does not provide transportation for children. Children enrolled in Whitewater Unified School District 4K programming at the Children’s Center may be eligible for bus transportation to and from the Children’s Center during the school district’s program hours. Please contact Whitewater Unified School District Central Office at 262-472-8707 for more information.

**Photographs**

The only time pictures of the children will be taken is by our teaching staff. These pictures will be used to share with the families of the children.

**Media in the classroom**

The use of media, such as television, DVD’s, internet is not permitted in any way as part of the Children’s Center curriculum without prior approval of the Director.

**Yearly Program Evaluations and Surveys**

Once a year, you will have the opportunity to formally evaluate our Center. This evaluation will typically occur in April and you will receive written feedback concerning the results of the evaluation in May, unless the center is in the midst of reaccreditation. In May, we will hold a staff/family meeting to discuss the results of the evaluation and set program goals for the upcoming year. If you have concern or a compliment, you do not need to wait until April. Please feel free to state a concern at any time to our Director.

**Inside Temperature**

At the Children’s Center, the inside temperature may not be less than 67 degrees. If the inside temperature exceeds 80 degrees, or whenever children/staff uncomfortable the air conditioners will be turned on.

If the Children’s Center were to lose service of electricity, heat, or water before the center opens, parent/guardians or emergency contacts will be called as soon as the Director has knowledge, so that children are not brought to the center that day. In the event that children are at the center when building services are lost, parent/ guardian or emergency contact will be notified and children should be picked up within 1 hour.

**THANK YOU!!!!**

In closing, we want to thank each of you for sharing your children with us. We like to think that we are a fun group of people, but that in no way diminishes how serious we are about offering the highest quality of care of each child at our center. We never take for granted the special gift you share with us…. your child.

We hope that you will be pleased with the care your child receives at the center, but it is also our wish that you will let us know if you have concerns or questions. The Children’s Center is a service and we realize that we are in business only as long as we meet the needs of the families that we serve. Please let us know how we can best assist you and your family.