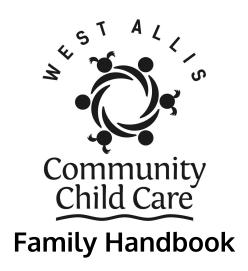
# WA Community Child Care, LLC.



com·mu·ni·ty kə 'myoōnətē/ noun

- 1. a group of people living in the same place or having a particular characteristic in common.
- 2. a feeling of fellowship with others, as a result of sharing common attitudes, interests, and goals.

# **OUR MISSION**

WA Community Child Care's mission is to maintain positive partnerships in our community. A partnership that supports the needs and goals of each enrolled family as well as the greater community.

# **OUR PHILOSOPHY**

IT IS OUR BELIEF that children thrive best in a positive, inclusive, enriched, and playful learning environment where they are encouraged and guided by passionate, kind, nurturing, and child-centered people.

IT IS OUR GOAL to partner with parents to enhance their parenting experience by providing family resources, periodic child development assessments, and a peace of mind knowing that we do our best to make the most of their child's day.

IT IS OUR COMMITMENT to provide exceptional child care, fully-develop a child's foundation for their future learning, and support the role of the parent as a child's life long primary role model.

### **ADMISSIONS**

WA Community Child Care, LLC. is a Department of Children and Families licensed child care facility. All children, without discrimination on the basis of race, religion, or handicap, are welcome at the center. Parents are required to visit the center prior to enrollment to ensure the environment is beneficial to the child's individual needs. The Center Administrative Team will give each family a tour to ensure parents/guardians are well-informed about the center's environment, policies, and procedures.

Upon choosing our center for child care, all admissions forms will be given to the parents for completion by a member of our Administrative Team or they may be downloaded from our center's website. All admissions information is printed in English. For families requiring information in an alternative language, a member of our staff that is fluent in the alternative language may assist in interpreting forms and admissions information. Should we not have a fluent staff member at the time, we request that an interpreter accompany the child's parents during the enrollment process. To further assist families using an alternative language, the State of Wisconsin offers some publications in alternative languages. Those forms will be procured whenever possible.

Prior to enrollment, the following forms must be completed within (3) days of the enrollment date: Child Enrollment, Health History and Emergency Care Plan, Child Health Report (if applicable), Immunization Record, Intake for Child Under Two, Alternate Arrival/Release (if applicable, Permission to Transport (if applicable), Food Program forms, and any other form relating to a child's individual needs. The immunization record must be completed within 30 days of enrollment. The child health report must be completed within 90 days of enrollment. All forms, reports, and child information will be held in confidence for 3 years after disenrollment, not to be shared with any other unauthorized parties.

Upon enrollment in the program, parents will be given a 2nd personal tour of the center by a member of our Administrative staff. During the tour, parents have an opportunity to meet teachers and staff, ask questions, locate your child's personal belongings cubby space, and will be given an orientation packet (outlining such items as amenities, authorized contacts, enrollment, our keyless entry system, parking, payments, center contacts, website functionality, and necessary items to bring to the center) to ensure familiarity with our center's policies and procedures.

We believe that parents shall be informed of our center's policies as well as the Department of Children and Families regulations (DCF251) for child care centers and our continued compliance of them. Therefore, all parents will receive a copy of our Parent Handbook and a summary of the licensing regulations upon registration. In addition, our Parent Handbook and State of Wisconsin child care license and compliance record (enforcement action, stipulations, conditions, exceptions or exemptions) is available in the designated parent information area at the front entrance. In this area, you will find other information such as notices, newsletters, health alerts, etc.

The needs of all children will be met within reasonable accommodations in accordance with the Americans with Disabilities Act. If a child has a Health History Form with additional identified needs, Individualized Education Program (IEP), or Individual Family Support Plan(IFSP), we will review the parameters of support. It is our goal to ensure the center's environment and policies are beneficial to the child. In cases in which we are not able to meet the child's individual needs, enrollment will not be offered. Once an enrollment has been offered, the parents and the center are given a 30-day trial period. During this period, the parents and the center are not required to give notice of disenrollment.

### **ATTENDANCE**

It is the responsibility of each parent/guardian, teacher, and administration staff to do their part to ensure our children are properly tracked during their time at the center. While children are in our care, parents

are required to check their child in/out on our Procare child management system computer located in the parent area at the front entrance. Parents/Guardians shall complete the following steps:

- Upon arrival, check their child into our Procare computer program using their unique identification code
- Escort their child to the classroom
- Announce to the teacher that their child has arrived
- Upon departure, check their child out of the Procare computer program and announce to the teacher that their child is leaving
- If their child is absent or has an alternate schedule for the day, notification must be sent to the center verbally or our preferred method of using the Procare Connect app.

Staff shall maintain the child's in/out time on their Procare Connect app (paper copy during internet outage). To ensure children's whereabouts are maintained throughout the day, teachers shall perform a child head count of children periodically and verify count every hour on the Procare software app. Additionally, a member of the administrative staff shall periodically compare Procare computer attendance with the classroom Procare Connect app to ensure attendance consistency.

The center will assume that children will arrive on their scheduled days. To ensure the safety of the children, parents are asked to notify the center with any absence by way of oral communication or written communication. Should the parent not notify the center of absence, our staff will contact you via the Procare software app or telephone call to ensure your child's safety. The communication will be made within 30 minutes after each attendance check. Each attempt will be documented whether we are successful or not in reaching you.

### **AUTHORIZED/UNAUTHORIZED CHILD PICK-UP**

All parents/guardians, and their assigned alternates with written permission, will be given a unique identification code for the door & computer check-in/out system. If someone other than the parent/guardian needs to pick up or drop off their child, the parent/guardian must notify the center administration in written form through email or the Procare Connect app prior to the individual's arrival.

Any person who wishes to pick up a child from our center shall be 18 years old and provide identification to ensure they are the authorized person. This may be done repeatedly until all staff members are familiar with the child's parents/guardians and contacts you have authorized. If the authorized person does not have a picture identification, the parent/guardian will be called to verify the individual. If the parent/guardian is not reached, the child will remain at West Allis Community Child Care until permission from the parent is obtained.

If an authorized pick-up person arrives at the center and appears to be impaired by drugs or alcohol, the staff person in-charge will attempt to keep the individual at the center, away from the children while another staff member contacts an alternate pick-up person. If the person who appears to be impaired by drugs or alcohol takes the child, the staff person in charge will contact the local Police Department and give as many details as possible regarding the situation, the person's description, the vehicle/license plate, etc.. This will be done to protect the child, the authorized pick-up person, and others from being seriously injured.

In general, parents/guardians shall have access to their child at any time during the day. If a parent or legal guardian is restricted access to their child by a court order, a copy of the court order must be on file before the center can restrict access.

#### **BITING**

Biting is a normal part of the development that many children go through. It is usually a temporary

behavior that is most common between 13-30 months of age.

The safety of the children at the center is our primary concern. The center's Biting policy addresses the actions teachers will take if a biting incident occurs.

The following steps will be taken if a biting incident occurs in the classroom:

- The biting will be interrupted with "Nice touches! Our teeth are for food."
- The bitten child will be comforted
- The bite mark will be washed with soap and water with an ice pack placed on the bite mark
- Teacher will redirect the biter from the situation
- An incident report will be completed for each child involved
- Confidentiality of all children involved will be maintained to ensure each family's privacy
- The bitten area should continue to be observed by parents/guardians and staff for signs of infection
- If a child continues to bite, we will follow the steps of continued inappropriate behavior in our Procedures Handbook
- Link for <u>Resource on Biting</u>

# CHILD ABUSE & NEGLECT PREVENTION/PROTECTION

Wisconsin State Law mandates all child care staff to report any suspected abuse and neglect of children. The staff of the center is trained to keep a log of all unusual bruises, contusions, lacerations, burns, unusual notations, and conversations with children indicating abuse/neglect received in and out of the center. The staff will then report the suspected abuse/neglect to Child Protective Services.

### CHILD GUIDANCE

Our center takes a positive approach to child guidance. Each child in our care should experience success in developing a sense of self-esteem, self-regulation, respect, and empathy for others while also learning and practicing the necessary skills to make positive and safe choices each day in each of their learning environments. We strive for classroom settings that provide children with opportunities to explore their environment within consistent age and developmentally appropriate expectations. In this atmosphere, most behavior issues are prevented.

As children develop, it is normal for them to test their limits and have big emotions. By using the following progressive guidance steps, we strive to minimize inappropriate behavior while creating a positive learning environment for all of our children.

- Expectations for Children
  - Maintain safe practices for themselves and others
  - Be responsive to guidance in in problem-solving with their teachers/peers
  - Be receptive to coaching with appropriate action steps to use in future situations
  - Engage in opportunities that promote success throughout the day
- Expectations of Teachers
  - Maintain consistent and active supervision
  - o Model, coach, and reinforce appropriate behavior and expectations
  - Be mindful of composure and personal reactions by using positive/neutral tones at all times and in all situations
  - Maintain rational detachment by realizing the negative behavior should not be taken personally
  - Allow children time to respond to the expectations
  - o Communicate discreetly one-on-one at the child's level when addressing behavior/choices
  - Become familiar with a child's special needs

- Set clear-cut, reasonable expectations for children's behavior based on their developmental levels and individual differences
- Provide interesting, challenging, and developmentally-appropriate activities throughout the day that allow children to feel successful and accomplished
- Seek mentorship from the center Education Team for strategy guidance
- Seek advice or assistance from parents/guardians on strategies that work for them
- Prohibited Forms of Behavior Management
  - Our policy does not permit actions that may be psychologically, emotionally, physically hurtful/painful, discomforting, dangerous, or potentially injurious are prohibited. Examples of prohibited actions include all of the following:
    - Spanking, hitting, pinching, shaking, slapping, twisting, throwing, or inflicting any other form of corporal punishment
    - Verbal abuse, threats, or derogatory remarks about the child or the child's family
    - Punishing a child for lapses in toilet training habits
    - Withholding or forcing meals, snacks, or naps
    - Actions that are cruel, aversive, ridiculing, embarrassing, frightening, or humiliating to the child
    - Physical restraint, binding or tying to restrict movement or enclosing in a confined space such as a closet, locked room, box, or similar cubicle
- Guidelines for Inappropriate Behavior
  - After additional positive behavior strategies have been used, we may find that persistent unsafe behavior(s) continues. This behavior may:
    - Threaten the health and safety of the child, other children, or staff
    - Require the child to need 1:1 care from a teacher/Administrator
    - Disrupt the learning environment for other children
    - Breach the rules and guidelines of our program
  - When unsafe behavior(s) are present, we may use the following progressive procedures:
    - The Teaching Team may:
      - Observe and document the child's unsafe behavior(s) and any challenges to safety and growth in this environment
      - Communicate with families asking for additional advice or assistance on strategies that work for them in a home setting
    - The Education Team may use any of the following options:
      - Notify Parents/Guardians of the observations, supports, and strategies used and ask for additional advice or assistance on strategies that work for them in a home setting
        - Resources may also be shared at this time to help guide families as they seek any additional outside support that may be available.
      - Request Parents/Guardians to pick their child up from the center for the day, within 1 hour, if the behavior is deemed unsafe.
      - Create a plan to further outline the procedural steps and collaborative goals to ensure safety and/or growth for the child and others in this learning environment and share any barriers where other outside resources and supports may be needed. The safety/support plans may be one of the following types:
        - o A Family Support Plan (children 6 weeks-2 years old)
        - A Behavior Guidance Plan (children 3-5 years old)
        - A School-Age Behavior Expectation Plan (children who are enrolled in

4K and up)

- Request an immediate conference with the Parents/Guardians to:
  - o Review a developed plan or express concerns
  - Disenroll the child from the center
- Guidelines for Immediate Disenrollment
  - The center may immediately disenroll a child for any behaviors that may cause significant risk of harm to the emotional, mental, and physical health & safety of other children and staff
  - Examples of harmful behaviors (but not limited to)
    - Unsafe behaviors which results in serious bodily injury
    - Attempted unsafe behaviors which if completed, would result in serious bodily injury
    - Setting or attempting to set fires
    - Bringing weapons to the center
    - Substantial damage to the center's property or personal property, etc.
    - Leaving the sight/sound of the teacher/classroom/center
    - Non-approved photo/video uploads to social media platforms
    - Any other reason the center deems worthy of immediate disenrollment
- Notification of disenrollment may be communicated through a verbal or written form.
  - If a parent disagrees with any disenrollment, they may appeal the decision by send a written request within 10 days
  - The center will respond to the request with a decision on the appeal within 10 days

### COMMUNICATION

Family communication is important in creating the best care and learning opportunities for your child. To support the role of parents as the child's primary role model, we strive to keep you informed in a variety of ways. They are as follows:

- In-Person
  - Daily drop-off and pick-up time are perfect opportunities to share information about your child's day and needs
- Parent Displays
  - Behavior & learning expectations
  - Classroom schedule
  - Family fun activities
  - Food service menu
  - Lesson plan
  - Parent engagement
  - Parenting/development resources
  - Special activity information
- Parent-Teacher Conferences
  - Each year, we will offer (2) opportunities for parents and teachers to review their child's progress
    - Conferences will be held in November and May
  - This will be an opportunity for teachers to discuss the child's goals/achievements and gather parent input on learning
- Procare Connect App
  - o Daily written communication will be logged electronically by teachers that highlights the

#### children's:

- Daily activity updates
- Daily needs
- Diapering & toileting updates
- Health observations
- Incident reports
- Instant messages
- Meals & feedings
- Medication disbursements
- Photos & videos
- Rest times
- Supply reminders
- Procare Connect app allows parents the ability to send electronic messages for:
  - Absences
  - Change of address/telephone
  - Changes to authorized pick-up list or emergency contacts
  - Child's daily needs
  - Confirmation acknowledging incident reports
  - Miscellaneous family needs

### **CONCEALED CARRY LAW**

According to licensing regulations DCF 251.06 (2) (c), firearms, ammunition and other potentially dangerous items may not be kept on the premises (of a child care center). For more information and frequently asked questions, please see the Department of Justice's website: <a href="https://www.doi.state.wi.us">www.doi.state.wi.us</a>.

### CONFIDENTIALITY

While enrolled at the center, your child's medical, developmental, behavioral, and information will be held in confidence being shared only with our internal staff and the Wisconsin Department of Children and Families when required. Therefore, our staff will not share this information with other families at the center or outside agencies without your written consent.

### **DISINFECTION & SANITATION**

Our center takes pride in the overall cleanliness of our facility. Each night, the center will be professionally cleaned. In addition, our staff must follow strict guidelines for sanitation in the following areas:

#### Classrooms

All tables, chairs, and surfaces will be washed daily with a fresh bleach solution. Toys will be washed in a 3-step process of soap, rinse, and bleach water. They will be washed immediately when soiled and rotated periodically throughout the month.

### Diapering

The following process will be used with each diaper change:

- Sanitize the sink with disinfectant spray
- Wash the changing surface with soap & water then disinfectant spray.
- Gather the child's diapering supplies
- Caregiver shall wash their hands and then the child's hands
- Use gloves to protect from bodily fluids and feces
- Place child on the changing surface and ensure the child is always within reach
- Wipe the child's diaper area before diapering with a disposable baby wipe

- Prepare the child's fresh diaper
- Place the soiled diapers in the foot-operated, covered garbage can
- Wash the child's hands and place the child down
- Wash changing surface with soap & water and then disinfectant spray
- Caregiver shall wash their hands
- Sanitize the sink with disinfectant spray
- Mark the diaper change on the child's Procare Connect app

### Hand washing

The first defense against communicable diseases is hand washing. Teachers shall wash their hands with soap and water upon entering the classroom, after toileting, before and after meals, and any other time they are in contact with potential germs. Children shall be taught the importance of these techniques also, as they wash their hands after toileting, before and after meals, and any other time they are in contact with potential germs.

### Universal Precautions

Universal precautions refer to the usual and ordinary steps all staff need to take in order to reduce the risk of infection of blood-borne organisms. They are universal because they refer to steps that need to be taken in all cases, not only when a staff member or child is known to be infected. Precautions are integrated into daily safety protocols.

### **EDUCATION**

Activities will be aligned with the Wisconsin Model Early Learning Standards (WMELS) (children ages 6 weeks-5K) and the School Age Curricular Framework (SACF) (School-Age) standards that will be developmentally-appropriate, play-based, exploratory, and FUN!!!

By using the Portage Guide (developmental checklist for children ages 6 weeks - 5K), the School Age Curricular Framework (SACF) (a framework for children in 1st-5th grade), the Child & Family Intake information, and developmentally appropriate practices, children will achieve goals based on their individual needs and interests. Children's milestone achievements/progression will be shared with parents/quardians during Child Conferences available 2 times per year.

### For more information on WMELS:

https://dpi.wi.gov/sites/default/files/imce/standards/New%20pdfs/dpl-wmels-5-web.pdf For more information on SACF:

https://dcf.wisconsin.gov/files/youngstar/pdf/sacfcurriculumalignment.pdf

For more information on the Portage Guide:

https://sites.google.com/cesa5.org/portageproject/products/portage-guide-3

Monthly themes will enrich the learning, and they will allow your child to experience new horizons. Our activities will include experiences that will:

- Encourage use and development of language
- Develop large and small muscle skills
- Encourage creativity and imaginative play
- Develop a positive self-image
- Provide indoor and outdoor play
- Provide active and quiet activities
- Provide group and individual activities
- Provide free-play periods
- Increase cultural awareness

Routines are an important part of our days at the center. Through consistent routines, we teach the importance of table manners, toileting, hand-washing, and self-regulation. Although infants and toddlers are encouraged to eat, sleep, and develop on their own schedules, routines will also be an important part of their days. Daily routines such as toileting and eating will be done in small groups to avoid children standing in lines for lengthy periods of time. Transition periods between activities (songs, chants, fingerplays, routine, etc.) will be expeditious with children anticipating the next activity. A complete schedule outlining our daily activities is located in each classroom.

In an effort to celebrate our diverse cultures and holidays, our center encourages children and families to discuss and share their particular culture. In addition, our teachers may share information on cultures around the world while using a broad unbiased approach.

The center may use educational videos as part of the curriculum. If a child chooses not to watch an educational video, an alternative activity will be available for him/her.

### Sample Center Daily Schedule

Center Open/Free Choice Play
Breakfast begins
Learning Centers/Small Group/Free Choice Play
Outdoor Time
Learning Centers/Small Group/Free Choice Play
Lunch
Snack
Learning Centers/Small Group/Free Choice Play
Outdoor Time
Learning Centers/Small Group/Free Choice Play
Center Close

### **ELECTRONIC DEVICES**

For the safety of our children, all cellular, photographic, and recording devices are not allowed in our center. Special notations are as follows:

- Children If devices are brought to the center they are to be stored at the front desk, and picked up at departure.
- Families Devices are prohibited for use in the classrooms or in the common areas of the center. If you are making personal phone calls they are to be done outside the center.

### **EVACUATION & EMERGENCY**

### Building

The center must provide children a safe building environment that is accessible with a controlled temperature (Between 67-90 degrees), electrical power, and running water w. may close in the event of a snow, power, weather, heating, or water emergencies. In the event that the center must close, parents/guardians will be informed of the closure via the Procare Connect app and be asked to pick up as soon as possible and within the hour.

### **Electrical Power Failure**

The following section outlines the response to a power failure.

- Access emergency lighting from your emergency supply cache (i.e.flashlights, lanterns)
- Contact the electric company @ (800-662-4797) and the building manager @ (414) 475-3626
- If the power will not returned for an hour or more the following procedures will be in response:
  - The center will need to close

- The Administrator or Director will make the decision who will make the phone calls to tell the parents/quardians
- Parents/Guardians will be directed to pick up as soon as possible for the center will be closing due to lack of power
- Classrooms will move to alternative classrooms with windows
- The Administrator, Director, or other administrative staff will keep a running record of times out for staff and children
- Once all children are all picked up- have administrative staff walk through the building checking for children

### **Evacuation**

In the event of a fire or emergency requiring evacuation, the alarm will sound automatically (fire) or a staff member will sound the alert by activating any pull station within the center. This activation will alert the City of West Allis' emergency personnel. The process from there is as follows:

- The Teacher role:
  - Gather their children, classroom backpack, and supplemental folder
  - o Complete child tracking procedures
  - Evacuate through the building's nearest and safest exit
  - Meet on the perimeter of the outside playground
- The Administrative Team role:
  - Grab a cellular device
  - Alert the local authorities
  - o Inspect the building to ensure everyone has been evacuated
  - Grab the 1st Aid kits from the front desk that contains:
    - Gloves
    - Bandages & Gauze
    - Tape
    - Scissors
    - Ice Packs
    - Tourniquets
    - Mylar Blankets
  - Once outside
    - Communicate to staff the general emergency information and the specific plan for the situation at hand
    - If the scene is deemed safe by the emergency personnel:
      - Stay on the premises
      - Return to the building when alerted
    - If the scene is deemed unsafe by the emergency personnel:
      - Notify Parents/Guardians of the situation via telephone, mass email, and Facebook page post
      - Gather children in available buses or escort them to neighboring facilities
        - Cousins Subs, Aurora Health Clinic, Burger King, Reunion Restaurant, and Summit Place will be our primary locations

### **Fire**

In the event of a fire, staff and children shall follow the evacuation procedure above. To prepare for evacuations, children and staff will practice fire drills one time per month.

#### Gas Leak

The following section outlines the response to a gas leak:

- Do not turn ON or OFF any electrical switches or sound evacuation alarms
- All occupants of the building shall evacuate per the evacuation protocols

- An Administrative Team member shall call 911 to notify of the gas leak and seek advice on the final evacuation proximity from the building
- The center should not be entered by anyone until the fire department announces it is safe to return

### Lost or Abducted Child

The following outline is response to a missing or abducted child:

- Anytime a child is unaccounted for, the staff member responsible for the child should notify a member of the Administrative Team
- The Administrative Team member will call all available personnel to search the premises
- The Administrative Team member(s) shall double-check with other staff in case the child may be at another location. (i.e. child was picked up by their parent or guardian.)
  - If the child is not located after all the potential hiding spots and immediate outdoor areas have been searched, lock down procedures will begin
  - All exits should be monitored by employees
  - o NO one should be let in or out of the center
- The Administrative Team member shall call law enforcement (i.e. 911) and provide a description of the child (i.e. what the child was wearing that day and other distinctive features.)
  - The following information should be documented:
    - Child's name, age, height, weight, date of birth, and hair color
    - Child's clothing that he/she was wearing that day, along with any other identifying features
    - The time at which the child was noticed missing
    - If the child abduction is suspected, were there any suspicious vehicles and/or persons located around the child care center? If so, describe the appearance of the person and/or vehicle.
- The Administrative Team member shall notify the child's parent(s)/guardian(s) that the child is missing from the center
- While awaiting the arrival of the law enforcement, the staff of the child care center will continue to search for the missing child the staff should look in every cabinet, closet, bubby, and other locations where a child may hide
- All staff shall remain on the premises until cleared by the authorities

### **Medical**

In the event a child should need emergency medical attention, the Administrator, Director, or other administrative staff will call 911 to escort the child to the nearest emergency medical facility. Parents/guardians will be called immediately after the child's emergent medical needs are met. The following is our procedure for calling 911:

- Stay calm and comfort the child
- Have all the correct information on hand
- Name and location of center (taped to the phone)
- Location of child
- Clear description of the injury
- Age of child and child's weight
- Do not hang up the phone unless instructed to do so
- Someone stays with the child
- Someone stays with the other children (move them away from incident area)
- If possible, someone at the entrance to direct the paramedics
- An assigned person would go with the child
- Notify the parents/guardians
- Complete accident report

### <u>Tornado</u>

In the event of a tornado, a member of the Administrative team shall use a bullhorn to announce the tornado drill activation to all classrooms. Staff shall escort children to their safe place assignments that are posted in each classroom.

- Tornado Evacuation Safe Place Assignment
  - o Infant 1 Outside classroom in the hallway
  - Infant 2 Outside classroom in the hallway
  - o Toddler 1 Outside classroom in the hallway
  - o Toddler 2 Outside classroom in the hallway
  - o Toddler 3 Outside classroom in the hallway
  - Preschool 1 Outside classroom in the hallway
  - o Preschool 2 Outside classroom in the hallway
  - o Preschool 3 Outside classroom in the hallway
  - Preschool 4 Outside classroom in the hallway
  - o Preschool 5 Outside classroom in the hallway
  - o School Age 1 Outside classroom in the hallway
  - School Age 2 Outside classroom in the hallway
  - o Resource Room Outside classroom in the hallway
  - o Offices Outside classroom in the hallway
- Once assembled in a safe place, staff shall do a verbal and visual roll-call from their Procare app or attendance sheet to ensure all children are accounted for.
- In the event we are unable to keep children in a safe building environment and the tornado has passed, a member of the Administrative Team will follow evacuation protocols above.
- To prepare for tornadoes, children and staff will practice tornado drills one time per month from April-October.

### Violent Intruder

In the event that a potentially violent or an aggressively violent intruder enters the center, the following steps shall be taken:

- The identifying staff member shall
  - o Immediately call law enforcement
  - Alert all staff via Procare Connect app that you have identified an aggressive or potentially aggressive violent intruder by noting their condition, the situation, and their location.
- Teachers shall
  - Isolate or evacuate the children away from the intruder
  - o Continue communication through the Procare Connect app of your whereabouts
- The Administrative Team shall:
  - Continue communication between law enforcement and teachers and relay plans accordingly as details emerge

### Weather

In the event of inclement weather, we will consider our building systems, staffing availability, food sources, and overall safety. If we need to cancel child care services, we will send a mass message through the Procare Connect app.

### **FIELD TRIPS**

All trips will be planned in writing (date, time, and destination) and in advance with parental consent. The trip costs are the responsibility of the parent. Children may attend trips by way of center van, private bus service, or county bus service. Prior to children attending field trips, parents will be given complete information about the trip. Parent permission and signature is required for children to attend any trips.

### **FIRST AID**

According to the State of Wisconsin licensing standards, a general first-aid "rule of thumb" is that teachers may administer soap, water, band-aid, and ice to children with minor injuries. Other forms of first-aid may only be given as a means to control a situation until the parent/guardian or emergency personnel arrives.

The parent/legal guardian will be notified immediately of any head injuries or injuries requiring professional medical attention. If the parent/legal guardian cannot be reached in the event of an emergency, we shall make all efforts to notify another emergency contact.

In a critical emergency, 9-1-1 must be called before a parent/guardian is notified. The staff will call 9-1-1 and request that children be transported to Children's Hospital of Wisconsin or the nearest medical facility as deemed by the emergency personnel.

### **GENERAL INFORMATION**

The center offers care for children ages 6 weeks - 12 years old. The center operates 12 months per year, Monday through Friday from 6:00am until 6:00pm.

### **HEALTH & SAFETY**

The center is licensed by the Wisconsin Department of Children and Families. The center will follow the health and safety standards under their regulations for preventative measures.

Any injury or evidence of changes in behavior, abusive/neglectful care, appearance, unusual bruises, contusions, lacerations, or burns received in or out of the center will be noted in a logbook and parents shall be notified. The Program Director will review the reports on a daily basis. The logbook will be reviewed and dated every 6 months to ensure compliance in our reporting standards and prevention practices.

### **HOLIDAYS**

We are closed on the following holidays: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, and Christmas Day. The center closes early on Christmas Eve. If a holiday occurs on a Saturday, the center will be closed on the Friday before in observance of the holiday. If a holiday occurs on a Sunday, the center closes on the following Monday, in observance of the holiday.

Special Notation: Tuition is still charged on holidays; however, families may use vouchers for these days.

### **ILLNESS & COMMUNICABLE DISEASE**

Our center is currently licensed to provide care for well children that are not displaying signs/symptoms of communicable disease. Therefore, we make it our first priority in safeguarding the health of all of the children in our center.

To ensure a healthy environment for all children enrolled in our program, it is our policy to temporarily exclude children from care who may be infectious or display physical signs/symptoms of illness. When the signs/symptoms have been identified by your child's teacher, the Administrative Team will confer with the teacher to make a recommendation on the child's health risk. The general guidelines for signs/symptoms are as follows:

<u>Symptom</u>	<u>Notations</u>
Cough/Congestion/Respiratory Distress	Consistent in nature

	Children shall be sent home
Diarrhea/Runny Stools	<ul> <li>Children experiencing 3 incidents of diarrhea shall be sent home</li> <li>Special exceptions may be made per Administrative discretion and Physician's written directives</li> </ul>
Fever	<ul> <li>Children experiencing fevers over 101 degrees shall be sent home</li> <li>Temperatures will be taken under the child's arm with 1 degree added to the thermometer reading</li> <li>The Administration shall verify the thermometer readings</li> </ul>
Nausea/Vomiting	Children shall be sent home
Other Symptoms:	Children shall be sent home per Administrative discretion

Once it is determined that the child should be sent home, we will notify the child's parent/guardian/emergency contact to make arrangements for the child to be <u>picked up within 1 hour</u>. The child will be separated from the other children and cared for until the parent/guardian/emergency contact's arrival.

For precaution and prevention, our general guidelines state that the child may return <u>after 24 hours and must be symptom-free</u> or <u>with a Health Care Provider's written clearance</u>. The Administrative Team may use additional discretion in determining a child's conditions for return based on the following:

- Current symptoms/exposure level of other children in care
- Level of risk assigned to properly care for the child's medical need
- State of Wisconsin Department of Children and Families licensing regulations
- CDC Guidelines

#### Communicable Disease Notations

- If the child has a reportable communicable disease, we shall notify the local public health official, the Department of Children and Families, and families/staff within the center. All notices will be available for viewing in the parent information area.
- COVID-19 Guidelines and protective measures
  - **EXPOSED TO SOMEONE WHO TESTED POSITIVE FOR COVID-19** (Regardless of personal vaccination status)

- Wearing a high-quality mask is recommended when around others for 10 days
- Testing (OTC or health care facility) is recommended when symptoms are present

### TEST POSITIVE FOR COVID-19

- Report the exposure to the center immediately, and the center will email a communicable disease letter outlining the exposure information to all families and staff
- Stay home for at least 5 days
- If you are fever-free for 24 hours, without the use of fever-reducing medication, and symptoms have improved after 5 days, you can end isolation on the 6th day
- Wearing a high-quality mask is recommended for an additional 5 days
- Upon the end of isolation, if symptoms worsen, restart isolation for an additional 5 days and repeat the process

### **INSURANCE**

The center carries a liability insurance policy, which includes general and medical liability coverage. Any injuries that occur on our premises are not considered to be the responsibility of the center, unless it is due to the center's direct negligence.

### LEAVE OF ABSENCE

Due to a variety of circumstances, families sometimes need to take time off from the center for an extended period of time. If any family needs to take a leave of absence for a period of time extending more than 2 weeks, the following will apply:

- Notice must be given in writing directed to the center Administrator outlining the dates and reason for the request for a Leave of Absence
- The acceptance of the request is at the sole discretion of the center Administrator
  - If approved, the Leave of Absence fee is immediately due and the leave will commence upon payment of the fee (see Tuition Schedule for rate)
- If the outlined Leave of Absence is longer than previously approved, it will be at the sole discretion of the center Administrator to extend duration
- The Leave of Absence fee is non-refundable

### MEDICAL CONDITIONS

Upon enrollment, parents/guardians are required to disclose any medical conditions or allergies (seasonal, environmental, food-related, etc.) their child may have, as it is important to ensure all staff and emergency personnel are familiar with each child's specific health needs. To ensure each child's specific health needs are properly communicated and available to all staff, they will be posted/available in the following areas:

- WACCC shared computer files (child's information sheet and full classroom quick-list)
- Child's individual file, the supplemental classroom binder, and in the kitchen preparation area

The center shall provide staff training in handling the special health needs of our children. Furthermore, all staff in contact with a particular child shall be familiar with the skills needed to handle specific health needs. In the event that additional training is needed to properly care for a specific health need, teachers shall make the Administrator aware of the request for additional training.

Teachers shall precisely follow each child's care plan provided by the parent. In the event that variations/additions/edits of the care plan are needed, staff will communicate with the administrative team and parent to revise the care plan.

#### **MEDICATION**

Medication may be administered to your child by our staff by completing an Authorization to Administer Medication form (located at the check-in desk). New authorization forms are additionally required in the following circumstances:

- New ingredient strength recommendations
- Change in prescription or dose
- Expiration of medication
- Expiration of previous authorization

Medication administration must meet the following criteria:

- Must be brought in the original container labeled with child's name
- Dosing information must be visible on the label
- Dosing information for over-the-counter medication (OTC) labels must include information for the child's age and weight (Physician written permission is required for children under 2 years of age that outlines exact dose based on their age/weight)
- Prescription medication must be a current prescription with child's identifying information and dosing requirements on label
- Medications that are not used for intended purposes on the medication instructions/label must be accompanied with a Physician's written permission
- Administered before expiration date
- Stored with center staff (Note: Medication may not be stored in children's personal bags/cubbies)
  - Non-refrigerated medication will be stored with the Administrative Team.
  - o Refrigerated medication will be stored in a refrigerator in a container labeled "medication".

The following are guidelines for certain types of medication:

Medication	Length of Time Form is Valid	<u>Notations</u>
OTC Medications (Acute Illness)	Label directions outlining duration of use	<ul> <li>Logbook entry required</li> <li>Examples: Tylenol, cough syrups, teething gels, nasal sprays</li> <li>Unless given physical authorization</li> </ul>
OTC Medication (Chronic Illness)	Label directions outlining length of use <u>AND</u> prescribed duration based on Physician's written permission stating a child's medical condition	<ul> <li>Logbook entry required</li> <li>Examples: Tylenol, insulin, glucagon, allergy medication</li> </ul>
Prescription Medication (Acute Illness)	Prescribed duration of use based on the Rx label	<ul> <li>Logbook entry required</li> <li>Examples: inhalers, antibiotics, antifungal creams, nebulizers, etc.</li> </ul>
Prescription Medication (Chronic Illness)	Prescribed duration of use based on the Rx label	<ul> <li>Logbook entry required</li> <li>Examples: inhalers, EpiPens, seizure medications, allergy medication, steroid creams, etc.</li> </ul>
Insect Repellant	Duration of enrollment	<ul><li>Logbook entry is not required</li><li>Administered by Teachers in the</li></ul>

		classroom
Sunscreen	Duration of enrollment	<ul> <li>Logbook entry is not required</li> <li>Administered by Teachers in the classroom during the months of April-October for all children 6+ months old</li> <li>Must be stored out of reach of children at all times</li> <li>Center will supply sunscreen that is water-resistant, at least spf 50, and paraben-free</li> <li>Parents/guardians will have the option to bring their own non-aerosol sunscreen if desired</li> <li>Exemption: medication permission slips are not required</li> <li>Permission is given on the Health History enrollment form and the center's Sunscreen Permission form</li> </ul>
Topical Ointments	Time specified on the label	<ul> <li>Logbook entry is not required</li> <li>Administered by Teachers in the classroom</li> <li>Must be stored out of reach of children at all times</li> <li>Examples: diapering lotions, salves, powders body lotion, lip balms, anti-itch creams</li> </ul>

### Definitions:

**Acute Illnesses** are illnesses with duration lasting less than 1-2 weeks. It is not a measure of the severity of the illness. Examples are listed, but not limited to the following:

- Upper respiratory infections (cold)
- Yeast Infections
- Conjunctivitis (pink eye)

**Chronic illnesses** and/or ongoing diagnoses is where the medication is prescribed for longer than 3 months. Examples are listed, but not limited to the following:

- Diabetes
- Epilepsy or seizure disorders
- Allergy- anaphylaxis or seasonal

- Otitis media (ear infection)
- Teething episode

- Asthma
- Acid reflux
- Eczema
- Neurodevelopmental Disorders
- Medical Diagnosis

# NAP/QUIET TIME

Due to the variety of sleeping needs, infants (under the age of 1) are allowed to sleep on their own schedule. Toddlers (ages 12-24 months) must also be allowed to sleep on their own schedule while trying to establish some routine along the way. Any parent/guardian request to have infants sleep on their stomach, must be submitted in writing accompanied by a physician's written approval. It will be up to the full discretion of the WACCC Administrator to determine if the physician's written approval will be accepted.

Preschool (ages 2-4 years) children will participate in quiet time. Although each child's napping routine is different, they are required to have at least 30 minutes of rest period. If a child does not sleep, they will be reminded to remember that others will be napping and quiet time activities may be done after the 30 minute rest period.

### Our procedures are as follows

- Children Under the Age of 1 Years Old (See SIDS Section for Additional Safe-Sleep Information)
  - Each child shall be given a center-supplied sheet
  - Shall sleep in a crib, placed on their backs
  - Shall use a parent/quardian-supplied sleep sack in lieu of a blanket for safe sleep
  - Use of Nuks are permitted (No attached stuffed animals allowed!)
  - If a child falls asleep in a swing, car seat, or bouncer, the child must be removed from the swing, car seat, bouncer and placed to sleep on their back in a crib
  - Each child shall sleep on a cot/crib that is 3 feet apart from other children
  - Parent/guardian-supplied shall be sent home every 5 days (or as needed) to be washed
  - o Crib sheets should be placed in the laundry bin every 5 days (or as needed) to be washed
  - o Cribs shall be sanitized with disinfectant and air-dried every 5 days (or as needed)
- Children Over the Age of 1 Years Old
  - o Parents/Guardians/guardians shall bring in a clearly-labeled, child-size blanket from home
  - o If a parent/guardian has not labeled it, staff must do so
  - Children may only use their own blanket
  - o Should a child need a blanket, they may use a center blanket
  - $\circ\quad \mbox{Should a parent/guardian forget the blanket, a reminder note shall be sent$
  - Should the blanket be persistently missing, contact the center Administrator, Director, or other administrative staff to make a reminder telephone call
  - Children may bring in a personal pillow or sleeping pal
  - o Each child shall sleep on a cot that is 3 feet apart from other children
  - $\circ\quad$  Personal blankets shall be sent home every 5 days (or as needed) to be washed
  - Center-supplied blankets should be placed in the laundry bins every 5 days (or as needed) to be washed
  - Cot sheets should be placed in the laundry bin every 5 days (or as needed) to be washed
  - Cots shall be sanitized with disinfectant and air-dried every 5 days (or as needed)
  - Cots must be covered with bed sheet whenever not in use

### **NUTRITION**

Each child shall receive consistent, daily nourishment in accordance with the CACFP Meal Pattern Guidelines outlining exact types/amounts of nutrition for children. The following are our guidelines for children's nutrition in their respective age groups:

#### Children Under 1 Years Old

- Each Infant shall receive consistent, daily nourishment in a gentle and caring environment in accordance with the CACFP Meal Pattern Guidelines
- Infants shall be fed on their own feeding patterns
- Each Infant shall receive formula and breast milk
  - Parents/quardians must supply their own formula and/or breastmilk
  - All formula and breastmilk shall be labeled with the child's name, dated, and refrigerated/frozen if needed
  - All formula must be of the commercial, iron-enriched type and will be prepared by the center staff according to the manufacturer's directions using center-supplied infant drinking water
  - Milk substitutes may only be given under the written direction of the child's physician
  - Parents/guardians must provide a daily supply of sanitized bottles (center supplies sippy cups)
  - Staff shall store and warm formula or breast milk in approved warmers only (no microwave warming allowed) via DCF licensing guidelines
  - Staff shall discard leftover milk or formula after one hour after each feeding and rinse the bottles after use
  - Staff shall hold a child whenever a bottle is given bottles may not be propped
  - Staff shall record all nutrition given to children in the center-supplied iPad app at each point of service throughout the day
- Each Infant over the age of 6 months shall receive rice cereal and baby food
  - The center provides rice cereal and Gerber baby food (sweet potatoes, carrots, green beans, peas, bananas, pear, apples)
  - Commercial baby food containers shall be covered, labeled with the child's name, dated, and refrigerated after they are opened and shall be used within 36 hours of opening
  - All food placed in a bowl and not given to children directly from commercial food container
  - Parents/Guardians who wish to supply their own baby cereal or baby food are welcome to do so
  - Staff shall hold or place a child too young to sit in a high chair in an infant seat during feeding
  - Staff shall encourage children to experiment with self-feeding with their hands and utensils scaled to the size and development of the child
  - Staff shall offer a variety of nourishing foods according to the child's developmental level and the parent/guardians requested feeding schedule
  - Staff shall sanitize highchairs with a disinfectant before and after each meal
  - Staff shall record all nutrition given to children in the center-supplied iPad app at each point of service throughout the day
- Special Notations
  - Breastfeeding parents
    - A breastfeeding mother shall be provided a place to breastfeed or express their milk
    - A refrigerator will be made available for the storage of expressed breast milk
    - Sensitivity will be shown to breastfeeding mothers and their babies
    - Staff shall be trained in handling breast milk
    - Breastfeeding employees shall be provided flexible breaks to accommodate breastfeeding or milk expression
    - Breastfeeding promotion information will be displayed
  - Meat and meat alternates

- Yogurt and whole eggs can be served for infants developmentally ready to accept them
- Yogurt must contain no more than 23 grams of sugar per 6 ounce
- Cheese food, cheese spread, and tofu cannot be served to infants
- Medical conditions and special diet
  - For children requiring a special diet, based on a medical condition, food allergy or cultural need, alternate food items must be supplied in by the parent/guardian in accordance with food guidelines and may be served upon the written consent of the parent/guardian
  - For children requiring nutrient concentrates and supplements or alternate food guideline substitutions, these items may be served only upon written instruction of a child's physician
- Juice will not be given for children under 1 years old
- Food will never be used as a reward or punishment

#### Children Over 1 Years Old

- The center will provide 2 meals (breakfast and lunch) and 1 snack daily in accordance with the CACFP Meal Pattern Guidelines
  - Breakfast, lunch and snack are prepared/provided by the Social Development Commission and delivered to our center
    - Parents/Guardians/guardians may bring meals and snacks for their child if they do not wish to receive the provided lunch: however, homemade meals and snacks are required to be nutritious and in accordance with CACFP Meal Pattern Guidelines (these nutrition requirements will be given to all families choosing this option)
      - If any of the required nutritional components are absent in the parent/guardian-supplied meals and snacks, the center will supply the necessary nutritional components
  - Toddlers (ages 12-23 months) may eat on their own feeding schedule
  - Meals are generally served at 3 hour intervals
    - See daily schedule for meal and snack times
  - Menus (and updates) are posted in your child's classroom and in the front lobby
  - Water may not replace milk (unless directed by a physician)
  - Staff shall encourage good table manners and conversation by sitting with the children during mealtimes
  - Staff shall sanitize tables and chairs with a disinfectant before and after each meal
  - Staff shall record all nutrition given to children in the center-supplied iPad app at each point of service throughout the day
- Special Notations
  - Medical conditions and special diet
    - For children requiring a special diet, based on a medical condition, food allergy or cultural need, alternate food items must be supplied in by the parent/guardian in accordance with food guidelines and may be served upon the written consent of the parent/guardian
    - For children requiring nutrient concentrates and supplements or alternate food guideline substitutions, these items may be served only upon written instruction of a child's physician
  - Staff shall offer water throughout the day, especially during physical activity and warm outdoor play days
  - Food will never be used as a reward or punishment

### **OUTDOOR PLAY**

Our center believes outdoor play is essential to the growth and development of our children. Additionally, the State of Wisconsin mandates that all children shall play outdoors except in the case of inclement weather and health reasons. Inclement weather is defined as the following:

- "Real-Feel" temperatures above 90 degrees for children under the age of 2
- "Real-Feel" temperatures above 92 degrees for children over the age of 2
- "Real-Feel" temperatures of 30 degrees Fahrenheit or below for children under age 2
- "Real-Feel" temperatures of 10 degrees Fahrenheit or below for children age 2 and above
- Heavy precipitation or severe weather event

To determine the "Real Feel" temperatures, the center will utilize the website <u>www.accuweather.com</u> for consistent advisement.

To ensure safety during our outdoor play times, we request the following:

- Be prepared with weather-appropriate clothing
  - Spring
    - Light jackets for all weather conditions under 70 degrees
    - Sunscreen available on-site at all times (for parents who do not wish to have sunscreen applied, a Health Care Provider's written clearance is required and protective garments/hats shall be provided)
  - Summer
    - Light clothing with maximum skin coverage for sun exposure
    - Swimsuits and towels to be kept on-site during the week and sent home for cleaning on the child's last scheduled day.
    - Sunscreen available on-site at all times (for parents who do not wish to have sunscreen applied, a Health Care Provider's written clearance is required and protective garments/hats shall be provided)
  - Fall
    - Heavy jackets, mittens, and hats
    - Sunscreen available on-site at all times (for parents who do not wish to have sunscreen applied, a Health Care Provider's written clearance is required and protective garments/hats shall be provided)
  - Winter
    - Heavy jackets, mittens, hats, boots, and snow pants

If a child is unable to play outdoors for health reasons, a physician's note shall be provided explaining the accommodations needed to support the medical condition. It will be at the center's discretion if the accommodations can be met.

### PARENTAL ROLES & RESPONSIBILITIES

Our open-door policy welcomes our parents to visit and observe the center during any time of the day. Parents are also welcome to provide suggestions that will enrich their child's education and development. Parents also reserve the right to view their child's entries in the medical and accident report logbooks. To further encourage parent and staff communication, teachers shall provide daily verbal or written messages.

In addition, the center will offer opportunities to connect with the center staff and other families of the center. Outreach opportunities such as: open house nights, family picnics, field trip accompaniment, and many other activities will be posted on the parent board prior to the event at various times throughout the year.

#### **PERSONNEL**

Quality staff is the key to quality care! Therefore, the staff is required to meet all educational requirements of the State of Wisconsin. They are all specifically trained in SIDS reduction, Shaken Baby Syndrome, and CPR. In addition, they must continue their education throughout the year by attending numerous workshops, classes, and conferences relating to the early childhood field. They must also pass a criminal background investigation and good health screening.

### **PETS**

Due to allergies and special health conditions, fish are the only pets allowed in our classrooms. Children will be able to view the fish, but will not be responsible for assisting in the cleaning of the tanks. Upon entry to the classroom, parents must let the teacher know if they have any special requirement that their children may not be in a classroom with fish present. The teacher will then make accommodations for the request.

### **SCHEDULING**

Our center offers a variety of schedule options for families. The enrollment options are as follows:

- Children under 2 years old must attend 5 days per week to be eligible for enrollment
- Children over 2 years old must attend at least 2 days per week to be eligible for enrollment
- Rotating days are available when schedules are received the Thursday before the week -Administrator approval is required to allow children to be on a rotating schedule
- Extra non-scheduled days may be available if approved by the Administrator the day before care is needed

Other staffing notations are as follows:

- Children may attend the center a maximum of 12 hours per day.
- Children will be assigned to regular classrooms; however, children who arrive early and remain late will be part of all-age groups to accommodate staff scheduling (During these periods, an additional adult will be available within 5 minutes of the center). State staffing ratios will still remain in effect.

# SHAKEN BABY SYNDROME (ABUSIVE HEAD TRAUMA PREVENTION)

Shaken Baby Syndrome, also known as SBS, is a serious brain injury which occurs when a frustrated caregiver shakes a child, usually to stop them from crying. It is considered a serious form of child abuse.

What are the symptoms of Shaken Baby Syndrome?

- Mild forms of irritability
- Poor feeding
- Vomiting
- Lethargy
- Breathing difficulties
- Seizures
- Coma

What is the future for a child with Shaken Baby Syndrome?

- Permanent Brain Damage
- Paralysis
- Deafness
- Learning Disabilities
- Developmental Delays
- Cerebral Palsy
- Blindness

- Seizures/Epilepsy
- Behavioral Disorders
- Coma or Death

How do we reduce the risk of Shaken Baby Syndrome at our center?

- All caregivers are trained, before they enter the classroom, in the recognition of Shaken Baby Syndrome reduction.
- All caregivers are monitored closely for developmentally-appropriate practices and child interaction
- All caregivers shall use alternate options for dealing with a crying baby

How can parents reduce the risk of Shaken Baby Syndrome at home?

- Recognize the dangers of SBS
- Consider alternative options for dealing with a crying baby
- Educate anyone who cares for your child
- Develop and share a "Baby Plan" with caregivers listing steps to take when they become frustrated when a crying infant becomes intolerable.

### SUDDEN INFANT DEATH SYNDROME

Sudden Infant Death Syndrome, also known as SIDS, is a sudden or unexplained death of a baby under the age of 1, and it is the leading cause of death in babies. Any parent/guardian request to have infants sleep on their stomach, must be submitted in writing accompanied by a physician's written approval. It will be up to the full discretion of the WACCC Administrator to determine if the physician's written approval will be accepted.

How do we reduce the risk of SIDS at our center?

- Place infants under 1 years old on their back for nap time
- Use only parent/guardian-provided sleep sack in lieu of a blanket for safe sleep
- If a child falls asleep in a swing, car seat, or bouncer, the child must be removed from the swing, car seat, bouncer and placed to sleep on their back in a crib
- Use of Nuks/pacifiers are permitted (No attached stuffed animals allowed!)
- Swaddling will not be permitted even if requested by the parent/guardian
- Assure crib sheets fit tightly and mattresses are firm
- Keep cribs clear of all pillows, toys, and stuffed animals
- Keep a clear view of cribs no obstructed views
- Maintain child/teacher ratios at all times
- Keep temperature consistent at all times
- When the child is awake, you may allow for some "Tummy Time" throughout the day to help strengthen neck and shoulder muscles
- All WACCC staff receive training Sudden Infant Death Syndrome

How can parents/guardians reduce the risk of SIDS at home?

- Never place a child on a pillow, waterbed, or other soft surface
- Keep temperature at a comfortable setting to avoid overheating
- Use a light blanket like a receiving blanket
- Pull blanket up to child's chest keep face clear of blankets
- Avoid smoking, drinking, or drug use while pregnant
- Avoid baby's exposure to secondhand smoke
- Mothers receive regular prenatal care

### **TERMINATION**

Termination of a child's enrollment will happen under the following circumstances:

- Parent/guardian- initiated termination
- Mutually-initiated termination
- Center-initiated termination
- Failure of parent to pay
- Failure to complete required forms
- Lack of cooperation by the parental/guardian
- Inappropriate behavior by the parent/guardian
- Failure of child to adjust to the center
- Inability to meet child's needs without additional staff

If a parent/guardian wishes to withdraw from the program, they must give a 2-week written notice and pay any outstanding balances. In center-initiated circumstances, immediate termination may be verbally communicated without written notice. In this case, the parent/guardian will not be charged a 2-week notice.

### **TOILET TRAINING**

State of Wisconsin licensing standards state, toilet training can begin at the age of 18 months. Toilet training will be started when both the child's parents/guardians and teachers feel it is appropriate.

Parents/Guardians and teachers are asked to discuss their thoughts regarding this process prior to starting toilet training to provide the child with consistency in this important developmental stage. It is best to continue to send diapers, in addition to extra underpants and clothing for the first couple of weeks. Staff will wash hands before and after assisting your child with toileting.

Children learning to use the toilet are taken to the bathroom more frequently to encourage consistency and learning. This can be a very stressful time for the children and is handled with sensitivity, patience and positive reinforcement. It is best for the parents/guardians and teachers to be consistent at daycare and home to create a less stressful learning environment. If you have suggestions on your child's individual needs with regard to potty training, please let your child's teachers know.

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 diaper bag or backpack. Please take this bag home on a daily basis.

### TRANSPORTATION

Transportation is available to various local schools by our center bus. Each year local West Allis/Milwaukee schools will have preference in transportation availability. Transportation to surrounding schools will be considered if times allow.

While transporting the children, the driver shall maintain the vehicle in a clean and safe manner. In addition, the driver shall use the following procedures:

- Driver shall maintain an attendance list by marking children in and out as children arrive and depart to/from the bus and to/from the center
- Driver shall perform a visual inspection by walking from the front to the back of the bus after all children have departed to look for children and belongings
- Driver shall immediately notify the Center Administrator/Director and the child's parent/guardian about any transportation absences or unusual situations
- Driver shall enlist the help of another adult whenever a child is transported who has a limited ability to respond in an emergency

The vehicle shall be inspected yearly by a certified mechanic and regularly by our drivers to ensure high

safety standards. The van shall be equipped with: children's emergency information, physician's phone numbers, parental consent for emergency medical treatment, route information, and a first-aid kit. All drivers shall be state licensed, over 21 years of age, display safe driving habits, and have at least 1 year of driving experience with a good driving record. A copy of the driver's driving record shall be kept on file with the center and obtained annually to ensure continued safe driving practices.

### **VOUCHERS**

Each child will receive day-off vouchers towards unpaid tuition each calendar year, pro-rated by their enrollment date. The day-off vouchers may be used in lieu of payment for sickness, vacations, or closed center holidays. To redeem your vouchers, simply email your request to the center at <a href="mailto:info@wacommunitychildcare.com">info@wacommunitychildcare.com</a>. Please note that vouchers may not be used towards a 2-week notice, and they must be submitted within 2 weeks of the absence. Day-off vouchers are given under the following scale:

Scheduled Days Per Week	<u>Jan</u>	<u>Feb</u>	Mar	<u>Apr</u>	May	<u>Jun</u>	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	Nov	<u>Dec</u>
1	8	7	6	5	4	3	2	1	1	0	0	0
2	9	8	7	6	5	4	3	2	1	1	0	0
3	10	9	8	7	6	5	4	3	2	1	1	0
4	11	10	9	8	7	6	5	4	3	2	1	1
5	12	11	10	9	8	7	6	5	4	3	2	1

### VIDEO RECORDING

WA Community Child Care, LLC. reserves the right to take video surveillance of any area of the premises during all times of the day. These recordings may be used in the following ways:

- To complete observations of children, parents/guardians, staff, or any other persons entering the premises
- To investigate an injury, complaint, or situation occurring in a classroom
- To create a timeline of an incident
- Any other ways we deem necessary

Recordings will only be available to members of the Administrative Team and IT Personnel. Any other viewing requests from The Wisconsin Department of Children and Families and police/legal authorities will be at the full discretion of the WA Community Child Care, LLC. ownership.

# ITEMS SUPPLIED BY THE CENTER

# Children Under 1 Years Old

- Bottled Formula Water
- Gerber Rice Cereal (under 1 years old)
- Gerber Baby Food (under 1 years old)
  - Vegetables (carrots, sweet potato, green beans, & peas)
  - Fruits (bananas, pears, and apples)
  - Meats (turkey, beef, and chicken
- Table Food (over 1 years old or with physician's permission)
- Individual Crib/Cot
- Crib/Cot Sheets (sanitized/laundered weekly)

# Children 1-4 Years Old

- All Meals & Snacks
- Individual Cot
- Cot Sheets (sanitized/laundered weekly)

# Children 5+ Years Old

All Meals & Snacks

# WA Community Child Care, LLC. Tuition Schedule Effective February 1, 2024

Scheduled # of Days	Infants & Toddlers (6 wks - 2 yrs)	Preschoolers (2yrs - 3 yrs)	Preschoolers (3 yrs - 5 yrs)	School-Agers (6 yrs - 12 yrs)	School-Agers (4K - 12 yrs) Before/After School	
		Full Day Rates	5		<1.5 hours	1.5-3.5 hours
2 Full	n/a	146	134	126	82	94
3 Full	n/a	207	189	177	111	129
4 Full	n/a	268	244	226	140	164
5 Full	365	325	295	275	165	195

<sup>\*\*\*</sup>All payments are due on Fridays prior to the week of child care services\*\*\*

Services & Offers	Discounts & Inclusions
Absence Vouchers  • Applied within 2 weeks prior/after and absence or holiday	See Day-Off Voucher Scale
Nutrition  • Meals, Snacks, and Infant Cereal/Food	Included
Referral Bonus  • Applied after the 3rd week of enrollment	Free week of tuition applied to your account!
Sibling Discount  • Applied to the oldest sibling(s)	10%
Transportation to Local Schools (4K-6 <sup>th</sup> grade)	Included
Additional Items	Fees
Collections	Attorney's Fees/Court Costs
Enrollment Termination  • 2 week written notice required	Full tuition cost for 2 weeks
<ul> <li>Extended Day</li> <li>Applicable when child attends more than 10 hours per day</li> <li>12 hours maximum per day</li> </ul>	\$10.00 per hour/child
Late Payment Fee  • Applicable when payments are not received by Monday at noon of the current week of	\$35.00 per week/child

child care services	
Late Pick-Up	\$2.00 per minute/child
Leave of Absence	\$150.00/family
NSF Check / Returned Tuition Express Payment	\$35.00
Registration (New Enrollment)	\$100.00/family (Non-Refundable)
Registration (Yearly in September)	\$75.00/family (Pro-Rated for New Enrollees)
<ul> <li>Rotating Schedules</li> <li>Rotating schedules are allowed (based on availability and prior approval) and for an additional fee. To allow for staffing, schedules are due by Thursdays at noon for the upcoming week of child care services.</li> <li>If a schedule is not received by Thursday at noon, the center will not be able to guarantee the availability of child care services for the upcoming week.</li> </ul>	\$20.00 per week/child
Summer Activity Fee	TBD Each Summer Session

- ★ Payment Options Tuition Express Automatic Deduction, Mastercard/Visa/Discover, Check, Cash, Employer -Sponsored Tuition Assistance, or State of Wisconsin My WI Child Care EBT Tuition Assistance
- ★ Tuition is to be paid in full on a weekly basis with tuition due on Fridays prior to the week of child care services.
- ★ Any family using Employer-Sponsored or My WI Child Care EBT tuition assistance, must pay tuition in full each week. In the event the available tuition assistance does not cover the week's tuition, the parent/guardian is personally responsible for the remainder of the tuition owed.
- ★ Fees will be calculated on a scheduled enrollment basis as determined by the child's schedule and retroactively after actual hours attended exceed the child's pre-scheduled times.
- ★ Parents/guardians may view their account ledger at any time by "clicking" on the "Accounting" tab on the Procare check-in/out system.
- ★ Parents/guardians may have access to their own child's records upon request.
- ★ Statements will be emailed every Thursday for the upcoming week. Parents/guardians are to contact the Office Manager for any statement questions.
- ★ Refunds will be made for any over-payments that are made within the policies of the center. All refunds will be made by business check.
- ★ Enrollment eligibility
  - Children under 2 years old must attend 5 days per week to be eligible for enrollment.
  - Children over 2 years old must attend at least 2 days per week to be eligible for enrollment.
- ★ Rates subject to change at any time.

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