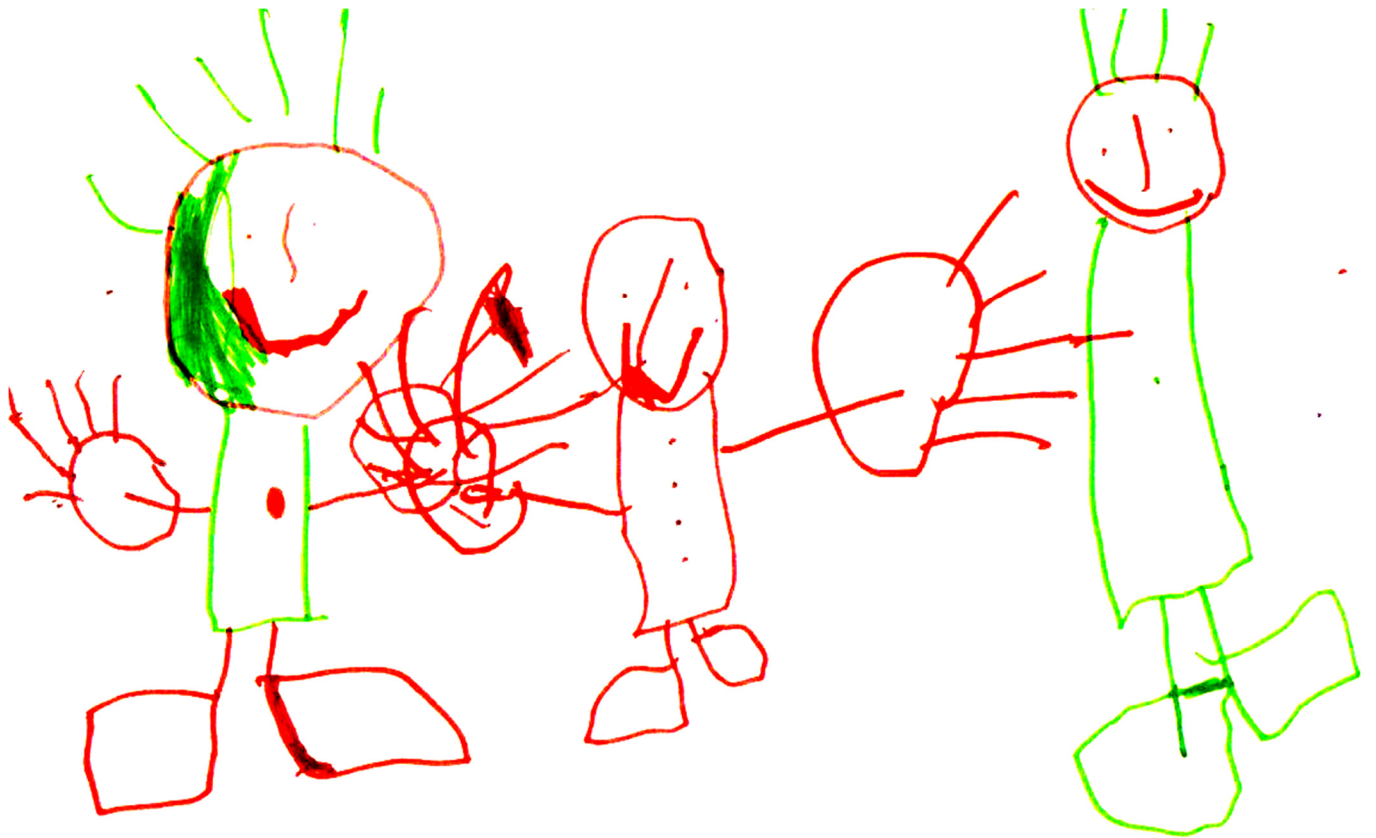




**Boston University Children's Center**  
32 Harry Agganis Way  
Boston, Massachusetts 02215  
T 617-353-3413 F 617-353-1294  
[www.bu.edu/family](http://www.bu.edu/family)

# Family Handbook







*Dear New Center Family,*

*Welcome to the Boston University Children's Center! We are happy to have your family as part of our community. Since you are new to our program, you may have many questions about the Center and our policies and procedures. This handbook is intended to be a resource for you to use when you have specific questions about Center procedures, such as what to do if your child needs to take medication while at the Center or what happens in case of an emergency at the Center. While we hope the information contained in this handbook will be useful to you, we always welcome your questions and we prefer that you talk with us directly so that we can clarify any information or procedures that you have concerns about or do not understand. The Center staff are here to support you and your family, so please do not hesitate to speak with us, ask us questions, or give us feedback about your experience at the Center.*

*Warmly,*

*The Boston University Children's Center Lead Staff*



TABLE OF CONTENTS

- 1. Philosophy and Statement of Purpose..... 4
- 2. Licensure and Accreditation..... 4
- 3. Daily Schedule..... 5
- 4. Drop-off and Pick-up..... 5
- 5. Program Calendar and Fees..... 6
- 6. What Your Child Will Need at the Center..... 7
- 7. Curriculum at the Center..... 8
- 8. Assistant Teachers at the Center..... 8
- 9. Nutrition and Food..... 9
- 10. Birthdays at the Center..... 10
- 11. Permission Notes..... 10
- 12. If Your Child Is Sick..... 13
- 13. Parent Communication and Participation..... 15
- 14. Assessments and Conferences..... 15
- 15. Community Involvement and Field Trips..... 16
- 16. Helping Children Grow at the Center..... 18
- 17. Important Policies..... 20

## PHILOSOPHY & STATEMENT OF PURPOSE

The Boston University Children's Center exists both to enrich and to enlarge a child's experience while meeting parent's needs for childcare. Parents of children at the Center are encouraged to visit as often as possible and to play an active role in their child's experience. The Center is, in a sense, an extension of the home: teachers, children, and parents work together to provide a quality early childhood educational environment and experience.

The Center recognizes a child's need to learn to respect themselves and to gain the respect of others. This is an ongoing process involving all aspects of a child's being. Children at the Center are not separated into groups by age. They progress individually, regardless of age, as they do within a family and a neighborhood, where younger and older children learn much from one another. Together they learn compassion and responsibility in a warm friendly atmosphere that builds trust.

The Center is an open, structured classroom. Children work and play at their own pace on projects that appeal to their individual interests. Various activities focused on different stages of development are provided for the children to explore and experience. Some natural age separation does occur, as children are drawn to other children and experiences appropriate to their particular skills and developmental stage.

## LICENSURE & ACCREDITATION

### Department of Early Education and Care

The Boston University Children's Center is licensed by the Massachusetts Department of Early Education and Care (EEC). Families may, at any time, contact EEC to inquire about the Children's Center's regulatory compliance history. Below is the address and phone number of our EEC regional office:

EEC – Metro Boston  
1250 Hancock Street  
Suite 120-S  
Quincy, MA 02169  
Phone: (617)472-2881

As per EEC regulations 606 CMR 7.00, all educators are mandated reporters and must report suspected cases of child abuse and/or neglect to the Department of Children and Families (DCF).

### National Association for the Education of Young Children

The Boston University Children's Center is accredited by the National Association for the Education of Young Children (NAEYC). NAEYC is a national organization that works on behalf of young children and is committed to setting standards for excellence for programs and teachers in the field of early childhood education. Accreditation is an elective self-study process that includes classroom observation, policy and procedure review, and family and staff input. Accreditation is valid for five years and an annual report is submitted to the Academy to report on any program changes and developments throughout the year.

## DAILY CLASSROOM SCHEDULE

8:00-10:15	Indoor Play
9:00-10:00	Open Snack and Toileting
9:45-10:15	Clean-up and Begin Transition Outside
10:00-11:30	Outdoor Play (Weather Permitting) and Small Group Times
11:00-11:30	Tooth Brushing and Toileting
11:30-11:45	Music Group
11:45-12:30	Lunchtime and Toileting
12:30-2:00	Nap Time
2:00-2:30	Wake-Up, Tooth Brushing and Toileting, Transition Outside
2:00-4:00	Outdoor Play (Weather Permitting) and Small Group Times
2:45-4:00	Open Snack
4:00-5:15	Indoor Play, Small Group Times, and Toileting
5:15-6:00	Afternoon Activities and Clean Up

Please note that this schedule is subject to change, particularly when there are times of poor weather. On such days, the children will stay inside longer and participate in gross motor play activities indoors.

## DROP-OFF & PICK-UP

### Drop-Off:

When you drop your child off each morning at the Center, you will sign-in with your full name and the time you dropped off on the Center's Sign-in/Sign-out Sheet. Before your child can play in an area, s/he needs to sign in and wash his/her hands. Then you will speak with the lead staff about your child's morning. This is a time to share any information that will have an impact on your child's day at the Center, such as if s/he is being picked-up early/by another person or if s/he did not sleep well the night before. The more information you share with the lead staff in the morning, the better they will be able to appropriately meet your child's needs throughout the day.

As the lead staff get to know you and your child, they will be able to anticipate your daily separation routine. Some children read a book with their parent before they say good-bye while other children choose an area where they want to play and then say good-bye. Whatever your separation routine, the lead staff will support you and your child, especially if your child is having a difficult time saying good-bye.

### Pick-up:

At pick-up, you will sign your child out on the sign-in/sign-out sheet with your full name and the time you picked your child up from the Center. The lead staff will speak with you about your child's day, including activities they may have participated in and fun anecdotes about their day. This is also a time when the lead staff will let you know if your child had any injuries during the day.

Please note, you must always speak with the lead staff at drop-off and pick-up so they can check your child in and out on the daily attendance list. This is how the lead staff keeps an accurate account of the children who are currently in attendance at the Center.

## PROGRAM CALENDAR & FEES

The Center operates on a ten-month calendar, September through June, with optional two-week summer sessions during the months of July and August. During the summer months, a child can attend none or any number of the sessions and still have a space reserved for the following Fall. The tuition from September through June is divided into ten equal monthly installments and is due on the first school day of each month. Upon acceptance to the Center, a deposit of one month's tuition is required in order to hold your child's space. This deposit payment will be applied to the last month of your child's first year at the Center. Deposit payments are non-refundable.

At the beginning of the year, parents are required to sign a contract stating the total tuition fee and specifying the monthly tuition payment. Parents who are paid on the regular weekly or monthly payroll of Boston University can have tuition payments deducted directly from their payroll checks. Arrangements must be made with the University's Payroll Office to authorize these deductions. The Director will assist you in completing and submitting the Payroll Authorization Form. For those families not using payroll deduction, checks are due on the first school day of each month. They must be made payable to Boston University and should be given to the Director. The Center provides full services each day regardless of whether the child is present or not. Therefore, no reduction in tuition can be made for absences.

The Center is open Monday through Friday, 8am to 6pm, and follows the administrative calendar for recognized holidays at Boston University, with the exception of the week before the Fall semester begins when the Center is closed to prepare for the new school year. The Center also closes if Boston University closes due to snow. However, in severe weather conditions when the University is open, staff may have difficulty arriving on time and parents must stay with their children at the Center until enough staff has arrived to care for the children.

### **Yearly Closures:** Follows Schedule of Holidays and Intercession for the University

- Labor Day
- Columbus Day
- Veterans' Day
  - The Center will be open if the University holds classes on Veteran's Day
- Thanksgiving Day
- Day after Thanksgiving
- University Intercession
  - If the university is open until 1:00pm on December 24<sup>th</sup>, the Director reserves the right to close the Center at her discretion, if it is a low enrollment day.
- Martin Luther King, Jr. Day
- Presidents' Day
- Patriots' Day
- Memorial Day
- Independence Day
- Preparation Week
  - The week before classes start in the Fall Semester. This is usually last full week of August



# WHAT YOUR CHILD WILL NEED AT THE CENTER

## Clothing:

- Weather appropriate outdoor clothing
  - In winter months, your child will need: snow pants, snow boots, mittens, a winter hat, and a winter coat. A snowsuit is also an option, in lieu of snow pants and a coat. Waterproofing your child's winter things is very helpful, as the children will be sitting and playing in snow.
  - Please label all your child's clothing.
- Multiple changes of weather appropriate indoor clothing. A bin is provided for your child in his/her cubby, where you can keep his/her extra clothing.
  - Please label all your child's clothing.
  - If your child is toilet training, we recommend more extra changes of clothing as well as an extra pair of shoes.

## Nap Time:

- Things to rest with during nap time, such as a blanket, a pillow, and a stuffed animal.
  - A new, empty pillowcase will be provided to you for use as a bag for nap things.

## Meals:

- Lunch in a clearly labeled lunch box/bag.
  - Please refer to the *Nutrition & Food* section in this handbook for information about containers and appropriate foods to send with your child for lunch.
  - All containers need to be labeled with your child's first name.

## Diapers and Toileting:

- Diapers for throughout the day or just at nap time, if your child wears diapers. The Center does not provide diapers.
  - There is space in the bathroom with your child's name and photograph where we will store your child's supply of diapers.
- Wipes, **only** if your child requires a specific kind of wipe.
  - The Center provides wipes and uses fragrance and dye-free wipes.

## Summertime

- Bathing suit
  - Please label with your child's name.
- Water shoes or sandals that can get wet.
  - These cannot be flip flops or other sandals without backs, and Crocs are not recommended unless they do not fall off of your child's feet.
  - Please label the water shoes with your child's name.
- Towel
  - Please label the towel with your child's name.
- Swim diapers, if your child wears diapers. Swim diapers that open on the sides are preferable, if you can find them.

## CURRICULUM AT THE CENTER

Early childhood curriculum includes everything that a child does and experiences. This includes their play, small and large group activities, movement, books, toys and materials, the physical environment, eating, sleeping, and even toileting. In all of these areas, we plan for the children to encounter and experience a variety of learning opportunities. Our environment is “print rich,” materials are provided for enriching and expanding on their play, and we support them with and coach them through being able to participate fully in every activity as independently as possible.

When targeting specific areas of learning and development, the Children’s Center lead staff employs a combination of thematic and child-directed curriculum. Every month or two, a new curriculum theme will be introduced to the children to explore. Possible themes can include water, weather, food, animals, community, occupations, dinosaurs, and space. The current curriculum is posted near the sign-in chart when you enter the classroom. Curriculum activities are planned by the lead staff, and both the lead staff and assistant teachers take part in implementing the curriculum in the classroom.

While all of the children, regardless of age, spend time together and have opportunities to explore different activities together at the Center, each child is also a part of a small group of their peers, led by a lead teacher. These small groups meet for short periods of time each day and are only a small part of their time at the Center. The curriculum for these small groups is designed by each lead teacher and is frequently developed in collaboration with the children in the small group. This gives the children the opportunity to participate in developing their own learning experiences and choosing activities based on their personal interests. In addition to the small group times with the lead staff, our assistant teachers may take initiative in creating small group experiences for the children based on their own interests and experience, such as yoga, dance, fine art, music, and gymnastics.

## ASSISTANT TEACHERS AT THE CENTER

The Children’s Center employs Boston University work-study students as assistant teachers in our program. These students work in our classroom for at least two 3-4 hour shifts each week, and they are also required to attend a weekly professional development meeting. They are supervised by the lead staff and all their training occurs while they are working in the classroom. Assistant teachers do not have unsupervised contact with the children at any time. They are not required to be Education students, and they are not required to have previous experience working with children in order to be employed at the Center.

Since our assistant teachers work in the classroom for short shifts only a few times each week, they do not see the full picture of your child’s experience at the Center. For that reason, we ask that you do not speak to the assistant teachers about your child’s day or about any other questions you might have. Instead, we ask that you always speak with the lead staff at drop-off and pick-up to share information about your child and to learn about your child’s day. Since the lead staff spends the majority of their day with your child, they will have the most accurate information about his/her experiences at the Center.

### Babysitting

Each semester, the Center distributes a list of assistant teachers who have expressed interest in babysitting for children at the Center. If you choose to hire an assistant teacher to babysit your child, it is your responsibility to check their references and meet with them outside of the Center to decide if they are the appropriate person to take care of your child. The lead staff asks that you do not coordinate hiring an assistant teacher as a babysitter while they are working in the classroom. Also, we ask that you

do not talk about your child's experience at the Center with an assistant teacher who is babysitting for your child. As previously stated, the assistant teachers only see a small portion of your child's day at the Center, so it is important that you speak with the lead staff when you have questions about how your child is doing at the Center.

## NUTRITION & FOOD

### Healthy Eating and Lunches for Your Child

It is important to expose children to healthy food options at an early age in order to promote good eating habits as they grow and develop. The Center attempts to maintain a healthy environment for all the children, and we provide both a morning and an afternoon snack. Parents must provide a lunch for their child each day. Non-nutritious snack foods for lunch (such as candy, cakes, puddings, cookies, or other sugary foods) are not permitted. Healthy options, such as meats or other proteins, vegetables, fruits, and unflavored yogurt or other dairy choices are recommended instead. A drink should be provided, and water is recommended instead of juice or milk.

### Snack and Cooking at the Center

Snacks are provided by the Center in the morning and the afternoon each day. Snacks include, but are not limited to, crackers, graham crackers, rice Chex, rice cakes, oatmeal, cheese (usually Colby Jack or mild cheddar), whole milk, plain yogurt with honey, cream cheese, and a variety of fruits and vegetables, such as apples, pears, peaches, raisins, pineapple, blueberries, strawberries, cucumbers, steamed carrots or peas, and celery. The children will have the opportunity to participate in cooking projects twice a week, and these foods that they have prepared together are included in the snack menu each week.

### Lunch Containers

Children's lunches are stored in their cubbies in the classroom. In order to keep food cold, please include an ice pack in your child's lunchbox. You are also welcome to send in warm lunch food options, such as pasta or soup, in an insulated thermos. Please note that the Center does not heat or refrigerate lunches for children. Glass or ceramic containers or bottles of any kind may not be sent in a child's lunch, in case they break while at school.

Families can send children's lunches into the Center in a variety of different containers. As we support the children to be able to feed themselves as independently as possible, we suggest that you choose containers that your child will be able to open independently or with minimal support. We also suggest using reusable containers, as the teachers will talk about sustainable practices, such as recycling, composting, and reusing during lunch time.

### Allergies or Dietary Restrictions

Please alert the lead staff to any allergies or dietary restrictions your child may have so that appropriate accommodations can be made to meet their needs. The Center staff will work collaboratively with families to meet their child's specific health care needs throughout the day.

## BIRTHDAYS AT THE CENTER

We celebrate every child's birthday at the Center! When your child's birthday is approaching, the lead staff will talk with you and your child about his/her celebration. We will ask you if you would like to come to visit for music group and lunch. If you would like to, then we will ask you which day works best for you to celebrate, and if you cannot come, we will celebrate your child's birthday on or close to his/her actual birthday.

Each child chooses a cooking project to make with his or her small group. This "special snack" will be something s/he will share with all of the children after lunch on the day that we celebrate his/her birthday. Because of licensing regulations, we unfortunately cannot accept foods made at home. In addition to making the "special snack," all of the children will have the opportunity to help in creating a "Birthday Banner" for you child, where they may draw a picture and/or write a note to your child, and glue their photograph on to show that they helped make the banner. The banner will be presented to your child at music group and your child will get to take the banner home at the end of their special day.

## PERMISSION NOTES

*Pick-Up Notes and Notes for Lip Balm, Lotion, Cream, or Medications*

### **Pick-Up Notes**

If someone other than a child's parent/guardian is picking-up a child, the lead staff needs a note permitting that person to do so. The note should include the person's full name, the date(s) that person can pick your child up, and a statement that you are giving that person permission to pick your child up. If it will be the first time we are meeting the person picking your child up, please let them know that we will be asking for a photo ID to confirm their identity.

You may choose to write a "standing note" for a person to pick your child up regularly. You should let the lead staff know in your note if this person has permission to pick up without prior verbal notification from you or if you will let us know each time the person will pick your child up. If you tell the lead staff that you will notify them when a person will be picking up your child, we cannot allow your child to leave with that person unless you have notified us in advance. If you would like that person to pick up your child, you can let us know when you drop-off your child, and you can let us know by phone if it is a last-minute decision.

To give permission for someone to pick up your child, you can write a note and give it to a lead teacher, or you can send an email to the Children's Center at [bucci@bu.edu](mailto:bucci@bu.edu). We also have ready-made notes at the Center that you can fill out. An example of the pick-up note follows this section of the handbook.

### **Notes for Lip Balm, Lotion, or Cream**

If you notice that your child's skin or lips are dry, we request that you apply lotion or lip balm at home consistently before bringing it to the Center. If the applications at home do not help your child's dry skin, we are happy to apply the lotion or lip balm to your child at the Center in addition to the applications you are doing at home. We can apply lotion and/or lip balm before your child goes outside (twice a day), before nap time (once a day), or both (three times a day). If you would like your child to have lip balm and/or lotion applied both before nap *and* before going outside, we will need two of each of the lip balms or lotions since they are stored in different areas of the classroom. You can write a note and bring it in with the lip balm/lotion, or you can ask for a ready-made note to complete. An example of the ready-made note follows this section of the handbook.

If your child needs cream, lotion, ointment, or special wipes during diaper changes or when they use the bathroom, we will need written permission to use/apply these as well. You can write a note and

bring it in, or you can ask for a ready-made note to fill out. An example of the ready-made note follows this section of the handbook.

### **Medications**

If your child needs (a) prescription medication of any kind, (b) non-prescription over-the-counter medication taken internally (by mouth, eyes, ears), or (c) non-prescription topical medication applied to broken skin, we will need a signed note from a doctor. The prescription label will suffice as a doctor's note for prescription medication, but we will need a doctor's note for all non-prescription medication. You will also fill out a form permitting us to administer your child's medication. Please see the Medication Administration Policy on page 29 for more information. Please also see the Medication Consent Form on page 14.

***Please note:** lip balms, lotions, creams, ointments, sunscreens, vitamins, or any medication of any kind should **not** be kept in a child's bag or cubby, or in any place that is within reach of the children at the Center. They should always be given directly to the lead staff so the appropriate paperwork can be completed.*

## Diaper Cream Permission Form

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Please apply  diaper cream,  baby powder,  special wipes,  other: \_\_\_\_\_  
to my child on his/her (specify area(s)):

\_\_\_\_\_

- each time they use the bathroom or at each diaper change, or  
 only after each bowel movement.

Choose one of the following:

- Apply on the following date(s): \_\_\_\_\_  
 Apply daily until further notice.  
 I will bring it in when it is needed.

Note is valid through (date): \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

## Pick-Up Permission Form

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Please allow \_\_\_\_\_  
to pick up my child from school.

- This is for the following specific date(s):

\_\_\_\_\_

- or -

- This is a standing pick-up note, good through the following date: \_\_\_\_\_

If this is a standing note, check one:

- Each time this person picks up my child, I will notify you beforehand.  
 This person is allowed to pick up my child without prior notification from me.  
 This person will only pick up according to the following schedule:

\_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

## Chapstick and Lotion Permission Form

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Please apply  chapstick  lotion  other (specify): \_\_\_\_\_  
to my child on his/her (specify area(s)):

\_\_\_\_\_

- every day  before nap (once a day)  
 before going outside (twice a day) or  
 both (three times a day).

- Apply for the following dates: \_\_\_\_\_  
 Apply daily until further notice, good through (date): \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

# IF YOUR CHILD IS SICK

## If your child has a fever, diarrhea, vomiting, or rash:

- Children must be fever free for 24 hours, without the use of fever-reducing medication, before returning to the Center. Please call the Center to speak to the lead staff if you have questions.
- Children must stay home if they have diarrhea related to an illness or uncontrollable diarrhea, until the diarrhea has stopped.
- If your child is vomiting due to illness, they must stay home until the vomiting has stopped and they are well enough to return to the Center.
- If your child has an unexplained rash (not eczema), the child must stay home until the rash is identified by his or her pediatrician and it is deemed that the rash is not contagious.

## If your child is unwell, but does not have the above symptoms:

- If your child has a sore throat, we may ask you to check with your pediatrician to be sure that s/he does not have strep throat or another contagious infection.
- If your child has a runny nose, cough, or is sneezing, but they are well enough to keep up with the routine of the Center, then they may attend. However, if your child is lethargic and cannot keep up with our routines, we ask that you keep your child home. Always feel free to call and talk with the lead staff about your questions or concerns.

## If your child becomes unwell (non-emergency) while in our care:

- If your child develops a fever, rash, begins vomiting, or if s/he develops diarrhea that cannot be explained by diet or is uncontrollable, we will call you and you must pick your child up immediately. Your child will not be able to return to the Center until he/she is free of these symptoms.
- If your child develops any other signs or symptoms of illness, the lead staff may call to let you if they are concerned. They will discuss with you the possibility of your child staying at school or going home. Please know that the lead staff does their best to keep your child at the Center, and they will ask you to take your child home only if they feel strongly that he/she is too unwell to be at the Center or may pose a health risk to the other children and staff.

## If your child is taking medication:

- If your child has a **contagious** illness that requires antibiotics, he/she will need to be on the antibiotics for a full 24 hours before returning to the Center. This includes, but is not limited to, strep throat and conjunctivitis.
- If this is the first time your child will be taking a medication, the first dose of the medication must be administered at home before it can be administered at the Center. This does not include rescue medications, such as epi-pens or inhalers. In addition, you will need to wait at least a couple of hours after giving your child a medication for the first time before bringing him/her to school, in case s/he develops an adverse allergic reaction.

Commonwealth of Massachusetts  
Department of Early Education and Care

**MEDICATION CONSENT FORM 606 CMR 7.11(2)(b)**

Name of child: \_\_\_\_\_

Name of medication: \_\_\_\_\_

Please  one of the following: Prescription: \_\_\_\_\_ Oral/Non-Prescription: \_\_\_\_\_

Unanticipated Non-Prescription for mild symptoms \_\_\_\_\_

Topical Non-Prescription (**applied to open wound/ broken skin**) \_\_\_\_\_

My child has previously taken this medication \_\_\_\_\_

My child has **not** previously taken this medication, but this is an emergency medication and I give permission for staff to give this medication to my child in accordance with his/her individual health care plan \_\_\_\_\_

Dosage: \_\_\_\_\_

Date(s) medication to be given: \_\_\_\_\_

Times medication to be given: \_\_\_\_\_

Reasons for medication: \_\_\_\_\_

Possible side effects: \_\_\_\_\_

Directions for storage: \_\_\_\_\_

Name and phone number of the prescribing health care practitioner:  
\_\_\_\_\_

**Child's Health Care Practitioner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I, \_\_\_\_\_, (parent or guardian) gives permission  
(print name)

**to authorize educator(s) to administer medication to my child as indicated above.**

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
For topical, non-prescription **NOT** applied to open wound / broken skin (parent signature only)

SG/LG/SAMedicationConsent20100122



# PARENT COMMUNICATION AND PARTICIPATION

## Parent Communication

Verbal communication about your child happens on a daily basis at drop-off and pick-up. We also send notes and newsletters through email, and we leave letters and receipts in your Family Mailbox in the coatroom. Please feel free to speak with any lead staff person at any time about your child's experience at the Center. Also, feel free to ask any questions or share concerns or feedback you might have for us.

## Kaymbu Photosharing, Messaging, and Daily Note

Kaymbu (CAME-boo) is a cloud-based app designed for teachers and schools to share photos and videos with families. The lead staff use the Kaymbu app to capture classroom activities, both for internal documentation and for secure sharing with families. Kaymbu helps to strengthen the engagement and connection between home and school, allowing you to share in and communicate about your child's development. When you receive photos of your child, you will have the opportunity to download the photo or video. At the end of each school-year, Kaymbu will offer you the opportunity to receive a digital or printed yearbook of all the photos of your child on Kaymbu from that year.

Kaymbu offers a messaging tool, which allows us to quickly send you emails regarding topics such as traffic situations that might affect your drop-off or pick-up or changes in schedule. We may also use the messaging tool to remind all families about bringing supplies in for your children, such as hats and gloves when the weather gets colder. Another app we use to message families, which is also from the Kaymbu company, is called Daily Note. We use Daily Note to send information about a specific child to their family. For example, we may use Daily Note to notify a family that their child is running low on diapers.

## Visiting the Center and Parent Participation

You may visit the Center, announced or unannounced, at any time during your child's day. Young children do best when they know what to expect, so we recommend that you let us know your plans to visit so that we can discuss a plan for helping your child with a second separation from you. We invite families to participate in projects with the children, cook with the children, or attend music group to share an instrument, sing with us, or share a general love of music. Families are also invited to visit the Center to celebrate their child's birthday or holidays with us.

# ASSESSMENTS AND CONFERENCES

At the Center, the lead staff use the Early Learning Scale (ELS) to assess the children in their small group. The ELS is a system for assessing the development of young children. It helps us evaluate the progress your child is making in three key educational areas: Math/Science, Social-Emotional/Social Studies, and Language/Literacy. Educators have determined that competence in these areas is critical to your child's future success in elementary school.

Young children are highly individual in their development. Each child masters important skills at a different pace, and their abilities change on a daily basis. So, rather than comparing your child to other children, we use the ELS to assess your child's progress over time. We compare what your child can do now with the abilities s/he showed a few weeks or months ago. Because the ELS tracks individual progress, we can use it for all children, including children who do not speak English at home and children who have disabilities.

We use the ELS as a guide to help us observe our children in their daily play. We document our observations by making specific notes about what each child knows and can do. We also collect samples of our children's work and take photographs of their activities. The notes, samples, and photos are stored and organized in a separate portfolio or electronically for each child.

We combine this information with information that you provide to plan appropriate activities for your child, and we share what we observe with you. This keeps you aware of your child's development at the Center so you can provide more learning opportunities at home.

#### How does the ELS help my child?

We use the ELS as a guide while we observe your child in play. We pay close attention to what your child is doing and note what skills s/he is demonstrating. We may ask him/her questions or suggest new activities to find out more about his/her current abilities in the domains of Math/Science, Social Emotional/Social Studies, and Language/Literacy. And we also collect samples of your child's work in these learning areas.

Next, we evaluate the information and samples we have collected. We compare them to previous assessments of your child and also to general early childhood learning expectations. This allows us to set new learning goals, prepare an appropriate learning environment, and suggest activities that will help your child progress. We use the assessment to help your child celebrate what he has learned and to encourage him/her to focus on more challenging tasks and concepts.

#### Families and Parent-Teacher Conferences

Families play a key role in their child's development. You were your child's first teacher, and s/he will continue to learn from you. Now that your child is at the Center, the teachers will be your partners in helping your child learn and grow.

To make our partnership a success, it's important to share information with each other. As we observe and assess your child over time, we'll tell you what we learn. We'll schedule formal conferences in the Fall and Spring semesters to explain how your child is growing and what s/he is learning. At these conferences, we'll discuss the Child Development Summary and share information about how s/he is growing. We'll also share information more informally when you drop-off or pick-up your child each day. Additional conferences can also be scheduled at your request, if you would like time to discuss a particular issue or situation regarding your child.

During daily conversations and bi-annual conferences, we hope you will also share your observations with us. Children often demonstrate different skills and interests at home than at school, so you have knowledge about your child that we may not have. When you see your child trying something new or demonstrating a skill you haven't seen before, make a note so you can tell us about it later. By sharing information, we can work together to help your child succeed.

## COMMUNITY INVOLVEMENT

#### Boston University Participation

At the Center, your children will have many opportunities to benefit from being a part of the greater Boston University Community. Below are a few ways that your child may have the opportunity to engage with his/her community at BU:

#### Sargent College

We have a partnership with the Speech Therapy, Occupational Therapy, and Audiology/Hearing programs at Sargent College. Each year, the director may notify you and request your permission to have your child participate in speech and language, occupational therapy, and hearing screenings at the Children's Center. These screenings are conducted by students in Undergraduate and Graduate programs in Sargent College, and they are overseen by Sargent College faculty. Every year, many children enjoy the opportunities they have to play "special games" with engaging, child-oriented adults from their community!

#### College of Fine Arts

Over the years at the Center, many students and faculty in CFA have offered to come to the Children's Center to share their love and knowledge of art and music with the children. Adults from the CFA

community have come to play instruments, sing, dance, and do art projects with the children. Staff at CFA will also let us know if exhibits in CFA or at the 808 Gallery might be of interest to us and the children, and we have taken the children on field trips to observe the installations there.

#### Student Groups and Assistant Teachers

Because we have assistant teachers who are students in the University community, they give us a connection to student groups who may participate in activities that are interesting to the children. For example, we have had students from the Organic Gardening Club come and help us with our garden. Students from a cappella groups have come to perform for the children and students from dance troupes have also come to dance for the children.

#### Field Trips

During your child's time at the Center, they will have the opportunity to participate in field trips to explore their local community. These trips happen on an irregular basis, except for trips to FitRec, and we will notify you in advance whenever your child will be participating in a trip.

#### On-Campus Trips

Part of the paperwork that you will complete to enroll your child at the Center includes a permission form for your child to visit places on the Boston University Campus. For example, we have visited the CAS green house, the GSU Farmer's Market, and the 808 Gallery. We will notify you in advance if your child will be participating in an on-campus trip, but you will not need to sign a permission form each time they do so.

#### FitRec Trips

Each week, a group of children from the Center will go to a gym space at the Fitness and Recreation Center. A different group of children goes each week, and we will let you know when it is your child's turn to go. At the gym, the children will move, play with gross motor materials, such as hula hoops, balls, and parachutes, and they will also play running games.

#### Off-Campus Trips

In addition to exploring the University community, your child may have the opportunity to visit a location that is considered off-campus. An off-campus trip might include a trip to a park, the post office, a café, or the grocery store. Since these establishments are not a part of the Boston University campus, you will need to sign a permission form if it is your child's turn to go on one of these trips.

# HELPING CHILDREN GROW AT THE CENTER

*The following is one of our policies at the Children's Center, and it is used as a guideline for teachers to support children using best practice for early childhood education.*

One of the most important tasks teachers face while working at the Center is to help each child learn self-control and ways to get along with others. It is the teacher's role to promote positive self-esteem in each child. The adult's behavior plays a large role in helping to accomplish these goals. The ways in which teachers encourage and discourage specific behaviors will influence every child at the Center. As a result, the Center's method of setting limits is one of the primary skills that each teacher needs to develop in order to be successful in supporting the children.

Children at the Center are learning how to interact with the rest of the world and trying to learn acceptable social behaviors. Young children are very egocentric, and they see most everything as existing for themselves. The adults in their lives need to help them understand the world around them. Children test the adults around them in order to find out what they can and cannot do. This process helps the children develop *internal* controls and become individuals who feel good about themselves. It is the teacher's job to help the children by giving positive feedback and setting clear and consistent limits.

## Basic guidelines:

1. Consider the child's ability and your expectations, making sure that they are age-appropriate.
2. State your expectations. It is not enough to tell the children what they can't do. We also need to tell them what they *can* do. For example-- "Blocks are not for throwing. You can build with them."
3. Be encouraging and positively reinforce improvements through recognizing positive behavior. Remember children seek adult attention. If you only respond to them when they are acting out, they will quickly learn that this is the way to get your attention. It is important that you encourage children's positive behaviors through your verbal feedback.
4. Prepare children for changes and transitions. Children need to feel in control. If they are prepared for the transition, know before hand, and are given some choice in how they want to make the transition, they are more likely to cooperate with the adult's expectation. For example - "In two minutes it will be time to go to the bathroom. (Two minutes lapses) Your two minutes are now over, do you want to walk over to the bathroom by yourself or hold my hand?" The choice always needs to be stated in a way that allows you, the teacher, to accomplish your goal, in this case, having the child go to the bathroom.
5. Never ask a child a question that will have a yes or no response unless you mean to do so. For example--It's clean up time. If you ask "Do you want to clean up?" and the child responds "No," then you have gotten a response that was a valid answer to your question. You didn't mean to ask the child if s/he wanted to clean-up because everyone needs to help clean-up. The issue is not whether the child is going to clean-up, but rather how the child is going to complete this task. Remember children need to feel autonomous, so always give them choices. This makes them feel in control. For example, you can approach the clean-up task in the following way. Ask the child whether s/he would like to clean-up the big blocks or the small blocks. In this way, s/he is given a choice within the expected goal. If the child is unable to make the choice, you can say "Either you make the choice or I will choose for you," then follow through with this limit. Although this technique generally works, it may be that the child is still not ready to clean-up. At that point, you may need to ask for the assistance of a lead teacher. The lead teacher may determine that the child needs to sit until s/he is ready to do the expected task or activity.

6. Reassure children that their feelings are valid, but teach them the appropriate social behavior to express these feelings. For example, a child might be very angry because another child took his/her toy. As a result, s/he starts to hit the child who took the toy. In this case, the teacher first needs to stop the child from hitting, either by moving close to the child and letting him/her know that people are not for hitting, or by holding the child's hands so that s/he will not hit. Then, the teacher should acknowledge the child's feelings by saying, "You are mad that he took your toy. It's okay to be mad, but it is not OK to hit people. You can tell him that you do not like when he takes your toy and that he can play with it when you are done." The other child should be told that he can ask to use the toy when his peer is done. If s/he does not willingly give back the toy, the teacher should help him/her do so. While doing this, the teacher can tell him/her that s/he is mad that s/he cannot have the toy now, but it is not okay to take the toy away from another child. S/he can either wait for the toy, or play with another toy. The child who took the toy may then say that the toy is his/hers. In this instance, the teacher can acknowledge his/her feelings by saying, "You really want to play with that toy but it is not your turn right now. You can have it when the other person is done." Young children have a difficult time separating reality from fantasy, and they often believe their fantasy is real. It is the teacher's job to help them understand and cope with their real environment. In this case, the child may truly believe the toy belongs to them, so it is the teacher's job to help them understand the reality that the toy belongs to the Center and they want the next turn playing with the toy.
7. Acknowledge and accept your feelings when dealing with the children. Many times children remind you of your early childhood or someone you knew. This can impact your feelings and, consequently, your reactions to the child. It is important to talk about this with other staff members so that you can see the child for him/herself and react appropriately to his/her needs, instead of your own.

## IMPORTANT POLICIES

1. Administrative Plan.....	21
2. Parental Information, Rights, and Responsibilities.....	22
3. Behavior Management.....	24
4. Referral and Termination Plan.....	25
5. Transportation Plan.....	26
6. Contingency Plans in Case of Emergency.....	27
7. Evacuation Plan.....	27
8. Emergency Plan In Case of Injury: Children.....	28
9. Injury Prevention at the Center.....	29
10. Injury Prevention and Emergency Plan: Field Trips.....	30
11. Medication Administration Policy.....	31
12. Management of Infectious Diseases.....	33
13. Specific Health Care Needs.....	34

## ADMINISTRATIVE PLAN

The Center staff consists of the Director, one Assistant Director, five Lead Teachers, and Teaching Assistants who are work-study students and volunteers.

The Center Director is responsible for the overall administration of the Center, including staff hiring and supervision, staff development and training, supervising enrollment and records maintenance, budget development, family involvement, Advisory Board communication, and all other areas of Center programming.

The Assistant Director works in the classroom part-time and is responsible for the daily administration of the Center. The Assistant Director is also responsible for maintaining the child and staff files, staff scheduling, hiring and orienting Assistant Teachers, maintenance of supplies and the facility, and supporting the Director in the overall operation of the Center.

The Lead Teachers and the Assistant Director work in the classroom, plan curriculum and daily activities, maintain supplies, communicate with parents, supervise Assistant Teachers and volunteers, participate in staff training, maintain health and nutrition programs, and assume other responsibilities, as determined by the Director and the Assistant Director.

Complete and accurate accounts, books, and records are maintained by the Boston University Budget Office.

The Assistant Director and Lead Teachers are full-time employees. Teaching Assistants work part-time according to schedules set at the beginning of each semester. The Director spends between 60%-80% of full-time at the Center.

In the temporary absence of the Center administrator(s), designated Lead Teacher(s) will act in place of the Assistant Director. Temporary absence of an administrator is limited to two weeks.

# PARENTAL INFORMATION, RIGHTS AND RESPONSIBILITIES

## Meeting with Parents:

The Center Director or Assistant Director will meet with the parent(s) prior to admitting a child to the Center. All parents are required to attend an orientation session and spend time at the Center prior to receiving an application.

## Parent Information:

Upon enrollment, families will be given a copy of the Children's Center Family Handbook. During the initial enrollment meeting, the Director or the Assistant Director will review the policies and procedures included in this handbook.

## Parent Conferences and Reports to Parents:

The Center will, periodically, but at least every three (3) months, prepare a written progress report of the participation of each child in the Center. These reports will be maintained in the children's records. A designated Lead Teacher will meet with parents at least every six (6) months to discuss their child's activities and participation in the Center. In addition:

- 1) The Center will bring special problems or significant developments to the parent's attention as soon as they arise.
- 2) The Center will make the lead staff available for individual conferences with parents upon parental request.
- 3) The Center will provide the following screenings by the Sargent College of Allied Health:
  - a) Occupational Therapy
  - b) Hearing
  - c) Speech & Language

The results and reports from these screenings will be shared with the parents and maintained in the child's file.

## Parent Visits

The Center permits and encourages parents to visit their children while they are at the Center at any time.

## Parent Input.

The Center allows parental input in the operation of the Center and its programs at any time. Lead staff is available to the parents at all times to discuss any concerns that parents may have. The Center will provide an explanation to the parents(s) when a parent makes suggestions about the program or its policy and these suggestions are not adopted. There is an Advisory Board for the Center, which includes parent representatives.

## Notification of Injury

The Center informs parents immediately of any injury that requires emergency care beyond minor first aid. The Center also informs parents, in writing and verbally, of any first aid administered to the child within 24 hours of the incident.

## Confidentiality and Distribution of Records

Information contained in a child's record will be privileged and confidential. The Center will not distribute or release information in a child's record to anyone not directly related to implementing the



program plan for the child without written consent of the child's parent(s). The Center will notify the parent(s) if a child's record is subpoenaed.

The child's parent(s) will, upon request, have access to the child's record at reasonable times. At no time should such access be delayed more than (2) business days after the initial request without the consent of the child's parent(s). Upon such request for access, the child's entire record, regardless of the physical location of its parts, will be made available.

The Center will duplicate and distribute information without any cost to parents and will maintain a permanent, written log in each child's record indicating any persons to whom information contained in a child's record has been released. Each person distributing or releasing information contained in a child's record, in whole or in part, will, upon each instance of distribution or release, enter into the log the following: name, signature, position, the date, the portions of the record which were distributed or released, the purpose of such distribution or release, and the signature of the person to whom the information is distributed or released. Such log will be available only to the child's parent(s) and center personnel responsible for record maintenance.

#### Amending the Child's Record.

- 1) A child's parent(s) will have the right to add information, comments, data, or any other relevant materials to the child's record;
- 2) A child's parent(s) will have the right to request deletion or amendment of any information contained in the child's record. Such request will be made in accordance with the procedures described below:
  - a) If the parent(s) is of the opinion that adding information is not sufficient to explain, clarify, or correct objectionable material in the child's record, the parent will have the right to have a conference with a lead teacher to make the objections known;
  - b) The Center will, within one (1) week after the conference, render to such parent(s) a decision in writing stating the reason or reasons for the decision. If the Center's decision is in favor of the parent(s), the Center will immediately take steps as may be necessary to put the decision into effect.

#### Transfer of Records

Upon written request of the parent(s), the Center will transfer the child's record to the parent(s), or any other person the parent(s) identifies, when the child is no longer in the care of the Center.

#### Research and Experimentation: Unusual Treatment

Children will not be involved in any research without the written, informed, consent of the child's parent(s) or guardian(s). They will never be involved in any experimentation or unusual treatment. A general consent will be obtained for observations done as class work by university students. Only observation will be done – no interaction will occur between the child and observer, and there will be no identification of the child in any observational report. No other involvement in research, experimentation, or unusual treatment will occur at the Center. There will be no identification of an individual child and no physical harm to a child.

#### Other Activities Not Related to Child Care

Children will not participate in any other activities that are not related to child care unless written parental consent is obtained. Such activities may include but are not limited to: fundraising and publicity, including media interviews and photographs.

# BEHAVIOR MANAGEMENT

The Boston University Children's Center believes that children need limits set because they are asking for direction and understanding. Children act out when they are confused or do not understand what is expected of them. When a child initially acts out, the teacher with the child should talk to him/her to assess the problem. If the teacher can determine what the problem is, the teacher should then verbalize to the child, in language the child can understand, what is happening. Then the teacher should provide direction so the child can develop the appropriate social behavior needed to achieve his/her goal. Sometimes this does not work, and a child needs time to collect him/herself in order to gain control. When this occurs, a teacher helps the child remove him/herself away from the situation because s/he needs time to calm down. The teacher should offer suggestions to the child about how to calm his/her body. When the child is able to return to the group, s/he will return with a teacher to discuss the situation. Sometimes a child needs to have continued adult support in order to play appropriately with other children. If this occurs on a consistent basis, the teachers meet and work with the parents to discuss support services that may be appropriate to help the child. It is the belief of the Center that a child who is continuing to act out may need outside support.

Additionally, the following practices are strictly prohibited:

- 1) Spanking or other corporal punishment of children
- 2) Subjecting children to cruel or severe punishment such as humiliation, verbal or physical abuse, neglect, or abusive treatment, including any type of physical hitting inflicted in any manner on the body, shaking, threats, or derogatory remarks.
- 3) Depriving children of outdoor time, meals or snacks, force feeding children or otherwise making them eat against their will, or, in any way, using food as a consequence.
- 4) Disciplining a child for soiling, wetting, or not using the toilet; forcing a child to remain in soiled clothing or to remain on the toilet, or using other unusual or excessive practices for toileting.
- 5) Confining a child to any piece of equipment for an extended period of time in lieu of supervision.
- 6) No child will be removed from an activity for an extended period of time as a result of negative behavior.

## REFERRAL & TERMINATION PLAN

The Boston University Children's Center is committed to working closely with parents and the community so that each child can have access to the services he or she may need. If the lead staff feels that a child needs special services, they will assist the parents in making contact with those services. The lead staff will explore with the parent appropriate social, mental health, educational, and medical services available to the family so that the child can benefit from the additional services. The Center will make every effort to continue supporting the child and making appropriate accommodations, as necessary. However, if the parent(s) and lead staff believe that the Center cannot appropriately meet the child's specific needs, the child must be terminated. If a child must be terminated, the Center will assist parents in finding a different program that will better meet their child's specific needs.

When a Lead Teacher has a concern regarding a child, the Director is notified. The Lead Teachers and the Director document the concern and review the child's developmental history to make a determination as to whether further action is necessary. Reviewed documentation includes, but is not limited to, classroom observations, anecdotal logs, and developmental summaries.

The Director and/or designated Lead Teacher will schedule a conference with the child's parents to discuss the concern and provide referral information. During this conference, the Director and/or designated Lead Teacher will provide to the parent a written statement, including the reason for recommending a referral for additional services, a brief summary of the classroom observations related to the referral, and any efforts the Center may have already made to accommodate the child's needs. The Director and/or designated Lead Teacher will also offer support to the parent in contacting specific referral services. Additionally, the Center may, with parental written consent, contact the referral agency directly. The Center will maintain a written record of any referrals and the results.

If the child is at least two and a half years of age, the Director and/or designated Lead Teacher shall inform the child's parents of the availability of services and their rights, including the right to appeal, under Chapter 766. If a child is under the age of three, the Director and/or designated Lead Teacher shall inform the child's parents of the availability of services provided by Early Intervention Programs.

# TRANSPORTATION PLAN

The Boston University Children's Center does not provide transportation. Families must contact the Center by 10:00am on any day that their child will not be in attendance.

## Transportation to and from the Center:

All children at the Center are dropped-off and picked-up by their parents or guardians. If a child will be picked-up by someone other than a parent or guardian, dated written permission is required with the following information:

- Full legal name of individual picking child up from the Center
- Date(s) individual is picking child up from the Center
- Signature of parent or guardian

Photo identification of individual picking child up will be checked and verified by the lead teacher before the child is released.

## Transportation in the case of an emergency:

In case a condition occurs which necessitates evacuating the children from the Center, such as a bomb threat, loss of power, heat or water that is detrimental to the children's health and safety, fire, or natural disaster, the children will be evacuated first to the "grassy area" behind the Center then to one of the dormitories located on West Campus. The director or assistant director will be responsible for taking the emergency information binder to the emergency location. Attendance will be taken en route to the emergency location by one of the lead teachers. The parents will be notified of the emergency and the location of the children by one of the lead staff via the Center's cellular telephone.

In a case of a natural disaster where evacuation is not possible, the children will be moved to the "safest" part of the building by the lead staff person on duty. Emergency personnel will be contacted either through the Center phone, the cellular phone or by going to the Boston University Police Department, which is located next door to the Center.

## Transportation on field trips:

Children at the Center either walk or travel by Trolley (Massachusetts Bay Transportation Authority) when on field trips.

## Safety and supervision of children who walk to the Center or arrive by public transportation:

All children who walk or travel to the Center by public transportation are accompanied by a parent or guardian.

## Special arrangements for children with disabilities:

The Center is a handicap accessible facility. When on field trips, only handicap accessible facilities will be visited. When traveling on field trips, only handicap accessible Trolleys and train stations will be utilized and appropriate supports will be available for children with disabilities who require assistance when walking.

## CONTINGENCY PLANS IN CASE OF EMERGENCY

In case a condition occurs which necessitates evacuating the children from the Center, such as a bomb threat, loss of power, heat or water that is detrimental to the children's health and safety, fire, or natural disaster, the children will be evacuated to the "grassy area" behind the Center. Attendance will be taken en route to the emergency location by one of the lead teachers. The parents will be notified of the emergency and the location of the children by one of the lead staff via the Center's cellular telephone. Once the children and staff have all been accounted for based on attendance and staffing for that day, everyone will walk to the Fitness and Recreation Center, our emergency evacuation location. In the absence of the director, the assistant director or designated lead teacher will assume authority and be responsible for taking the emergency backpack to the emergency location. Parents will also be notified if the evacuation is temporary and the expected time the children will return to the Center. If it is unclear how long the children will need to remain evacuated, the director and/or the assistant director will make the determination if parents need to come and pick their children up from the emergency evacuation location.

In a case of a natural disaster where evacuation is not possible, the children will be moved to the "safest" part of the building by the lead staff person on duty. Emergency personnel will be contacted either through the Center phone, the cellular phone or by going to the Boston University Police Department, which is located next door to the Center.

When considering evacuating or sheltering in place, the lead staff will follow the directions of the Boston University emergency alert system. In emergency situations, an automatic emergency alert is sent out by the university emergency personnel via email, phone calls, text messages and web site emergency information postings. These alerts are continuously updated throughout an emergency situation in order to keep all individuals on campus informed.

## EVACUATION PLAN

Before each semester, lead teachers and teaching assistants will be advised of the following procedures:

In case of fire, alarms throughout the center will sound. When these alarms are activated, the BU Police and the Buildings and Grounds Emergency Desk are automatically notified.

Lead teachers and teaching assistants will take all children to the closest exit. They will then walk to the back of the building toward the designated grassy area across the courtyard. One lead teacher will take the attendance sheet and will call out the names of the children in attendance that day while the remaining teachers respond, "Here," when they see the child. If a child in attendance is not accounted for, a lead teacher will notify the first emergency responder upon arrival.

A designated lead teacher will check all areas of the Center for any remaining children. The Assistant Director is responsible for practice fire drills at least once a month. She will maintain documentation of the drills.

## EMERGENCY PLAN IN CASE OF INJURY: CHILDREN

*All staff are certified in pediatric and adult first aid.*

*All lead teachers are also certified in pediatric and adult CPR.*

- 1) Staff will check child and injury immediately.
- 2) If the injury is minor, appropriate first aid is administered by a lead teacher. The injury and first aid administered is logged in the injury log book and an injury report form is completed by the lead teacher who administered the first aid. The injury report form is copied. Both copies of the injury report form are signed and dated by a parent. One copy of the injury report is kept in the child's file and the other is taken by the parent.
- 3) If there is a question about the seriousness of the injury, a lead teacher will attempt to contact the child's parent immediately. If the lead teacher is unable to reach either parent, an attempt will be made to contact the individuals listed on the Emergency Contact Form.
- 4) If the lead teacher is not able to contact the child's parent(s) or emergency contact(s), she must contact Anne Ferrari-Greenberg, Health Care Consultant at 508-881-5107 (work) or (508)641-1984 (cell).
- 5) If the child is ambulatory, the lead teacher should call the BU Police at 3-2121 or activate one of the emergency alarms located in the office and classroom. The BU Police will immediately dispatch an ambulance for the child. A lead teacher will then try to contact the child's family again in order to inform them of their child's injury and where the child is being taken for emergency care. One lead teacher will travel with the child to the emergency medical facility. The lead teacher accompanying the child to the emergency medical facility will take the emergency binder.
- 6) There will always be at least one lead teacher and a teaching assistant on all field trips. A first aid kit, the emergency telephone numbers, and the Center cell phone will be brought on all trips. If the child is injured on a field trip, the lead teacher will assess the situation, and, if the injury is minor, give the necessary first aid. If the injury is serious, the lead teacher will call 911 or 617-353-2121, if on campus. Once off the phone with emergency services, the lead teacher will contact the Children's Center to report the injury and request a third teacher to help bring the remaining children back to the center. The lead teacher will accompany the child to the emergency medical facility. A lead staff member at the center will contact the parent(s) or an emergency contact, if unable to reach the parent(s).
- 7) The center shall immediately report to EEC any injury or illness of a child which occurs during hours while the child is enrolled in care at the center which requires medical assistance.

## INJURY PREVENTION AT THE CENTER

- 1) The environment will be maintained in a clean, smoke free and safe manner at all times. Upon arrival, the morning lead teacher will check the environment for any hazards and remove or repair anything that might be dangerous.
- 2) Before going outside, the playground the playground will be checked by a teacher. All equipment will be checked daily and any problems will be reported to Facilities Management for repairs.
- 3) The following items will be kept on a high shelf or other secure place out of children's reach:
  - a. Toxic substances
  - b. Medications
  - c. Sharp objects
  - d. Matches
  - e. Other hazardous objects
  - f. Liquids, foods and appliances that could cause burns
- 4) No poisonous plants will be kept in the Center.
- 5) Whenever a child is injured, the injury is reported to a lead teacher. The lead teacher writes the injury in the log book. A log of all injuries will be maintained at the Center. The log book is routinely monitored to identify areas where injuries occur frequently. In these instances, the administrator assesses whether changes need to be made in how the children are being supervised in order to help avoid repeat injuries.
- 6) An injury report form will be completed for any incident which requires first aid or emergency care. A copy of the report is given to the parent and a copy is placed in the child's file. The report includes the following information:
  - a. Name of the child
  - b. Date, time, and location of accident or injury
  - c. Description of injury and how it occurred
  - d. Names of teachers who were present at the time of the injury
  - e. Name(s) of teacher(s) who administered first aid
  - f. Type of first aid administered

# INJURY PREVENTION AND EMERGENCY PLAN WHILE ON FIELD TRIPS

## INJURY PREVENTION

- 1) There will always be at least one lead teacher and a teaching assistant on all field trips.
- 2) A first aid kit, the emergency telephone numbers, and the Center cell phone will be brought on all trips.
- 3) Once at a field trip location, the lead teacher will inspect the area for possible hazards, which will be removed by the teacher or avoided by the group.

## EMERGENCY PLAN

- 1) When a child is injured, the lead teacher will assess the situation, and, if the injury is minor, give the necessary first aid.
- 2) If the injury requires emergency care, the lead teacher will call 911 or 617-353-2121, if on campus.
- 3) Once off the phone with emergency services, the lead teacher will contact the Children's Center to report the injury and request a third teacher to help bring the remaining children back to the Center.
- 4) A lead teacher at the Center will contact the parent(s) or an emergency contact, if unable to reach the parent(s).
- 5) The lead teacher will accompany the child to the emergency medical facility. The lead teacher accompanying the child to the emergency medical facility will take the emergency binder.

## LOST CHILD PLAN

- 1) When children go on field trips, they each wear a printed label with the following information: Center name, Center address, Center cell phone number, and Center land line phone number.
- 2) If a child goes missing when on a field trip, the lead teacher will send a teaching assistant to the front desk of the facility to let them know about the lost child. At the same time, the lead teacher, the other teaching assistant and the remaining children will retrace the route the group took during the trip.
- 3) If the child is not found, the lead teacher will call the Center to have the assistant director or the director come to the facility with the missing child's face sheet and photograph. At this point, the parents/guardians of the child and the BU Police will be contacted and notified of the missing child by the assistant director or the director.
- 4) Once the assistant director or director arrives at the trip location with the child's face sheet and photograph, the lead teacher on the trip will share all necessary information. This lead teacher will then return to the Center with the assistant teachers and the remaining children.
- 5) The assistant director or director will remain at the trip location to talk with the parents/guardians and the BU Police and to continue to assist in the search for the missing child.



# MEDICATION ADMINISTRATION POLICY

## Information for All Medication Administration

- When medication must be administered to a child at the Center, it must be given directly to a lead teacher by the parent. Parents must fill out the medication consent form, which will be kept in the file folder on the wall in the kitchen.
- No first dose of any medication, prescription or non-prescription, will be administered at the Center
- Child-proof caps on medication containers are mandatory
- Medication cannot be stored in lunch boxes
- Medication is administered by lead staff only
- Any unused medication will be returned to the parent
- All medications will be kept labeled in original containers, with the child's name, the name of the drug and the directions for its administration and storage. This does not apply to topical non-prescription medications which are not applied to open wounds, rashes and broken skin.
- The Center will maintain a written record of the administration of any medication, prescription or non-prescription, to each child which includes the time and date of each administration, the dosage, the name of the staff member administering the medication and the name of the child. The completed medication record will be made part of the child's file. This does not apply to topical non-prescription medications which are not applied to open wounds, rashes and broken skin.
- Parents are notified at the end of the day if a topical medication is applied to a diaper rash
- All non-refrigerated medications are kept in a medication box on top of the refrigerator, out of reach of the children.
- All refrigerated medications are kept in a medication box in a drawer in the refrigerator, out of reach of the children.
- All medications found in United States Drug Enforcement Administration (DEA) Schedules II-V will be kept in a secured and locked place at all times when not being accessed by an authorized individual.
- Emergency medications are immediately available for use, as needed

## Information for Prescription Medication

- Prescription medication will not be administered to a child without written parental authorization which indicates that the medication is for the specified child.
- Prescription medication will not be administered to a child without a written order from a physician, which may include the label on the medication. This order must include the child's name, drug name, directions, storage, dosage, the date and number of times per day and number of days the medication is to be administered.
- No medication will be administered contrary to the label on its original container without written physician authorization.

## Information for Non-prescription Medication

- The Center staff will not administer non-prescription medication without a written order from a physician, which must include medication(s), dosage and criteria for administration.
- Non-prescription medication will not be administered to a child without written parental authorization which indicates that the medication is for the specified child.
- The physician may give a standing order listing the medication(s), dosage and criteria for administration. This order will be valid for no more than one year from the date it was signed.
- Written parental consent for non-prescription medication administration must be renewed weekly with dosage, times, days and purpose.
- No medication will be administered contrary to the label on its original container without written physician authorization.
- Non-prescription medications must be in the original manufacturers packaging

### **Topical Non-prescription Medication**

- Written parental authorization is required for non-prescription topical medications to be administered and directions for administration. This statement will be valid for no more than one year from the date it was signed.
  - a. Topical medications, such as petroleum jelly and anti-bacterial ointments, when applied to open wounds or broken skin, must be stored in the original container, labeled with the child's name, and used only for that specific child. Written authorization from the child's pediatrician is required.
  - b. Topical medications, such as chapstick, diaper rash ointments, and hand/face lotions, which are not applied to open wounds, must be labeled with the child's name, and used only for that specific child.
- Sunscreen may be applied by parents in the morning. The Center staff does not apply sunscreen on children.

### **Individual Health Care Plans**

- Lead teachers will work cooperatively with the health care consultant, parents, and the child's health care practitioner to develop an individual health care plan (IHCP) for each child with a chronic medical condition.
- Each individualized health care plan will contain the following information:
  - a. Description of the chronic condition
  - b. Symptoms
  - c. Any medical treatment that may be necessary while the child is in care
  - d. Potential side effects of that treatment
  - e. Potential consequences to the child's health if the treatment is not administered
- The written parental consent and physician's authorization will be valid for one year, unless consent is withdrawn sooner. The consent and authorization must be renewed annually.
- All lead teachers will complete training, given by the child's health care practitioner, the child's parents/guardians or the Center health care consultant, that specifically addresses the child's medical condition, medication, and other treatment needs.
- In the event of an unanticipated medication administration for a non-life threatening condition, the lead teachers will make a reasonable effort to contact the child parent(s) prior to administering the medication or beginning an unanticipated medication treatment. If the parent(s) cannot be reached in advance of the medication treatment, they will be contacted as soon as possible after the medication is administered.
- Lead teachers must document all medication administration in the child's medication administration log.

### **Training**

- All lead staff must be trained in the "5 Rights of Medication Administration" and demonstrate competency in medication administration before being authorized to administer any medication.
- All lead staff must be trained annually by the Center's health care consultant in proper medication administration. No lead staff member will be authorized to administer medication until he or she has demonstrated competency in medication administration to the health care consultant.

# MANAGEMENT OF INFECTIOUS DISEASES

## Care of Mildly Ill Children

A child who is mildly ill may attend the Center if s/he is able to keep up with the daily routines and s/he does not show signs of fever, vomiting, diarrhea, or contagious rash. The Center can administer prescription or non-prescription medications with written permission from a doctor, which may include the prescription label on the medication. In addition, the parent must complete the Medication Consent Form, which will be kept on the refrigerator door in a file.

## Exclusion Policy

Whenever a child is sick at home and cannot attend the Center, parents are asked to call the Center to report the illness. If there is any doubt about the kind of illness a child has, the Center will request that the child be seen by his/her pediatrician in order to determine the illness and if it is contagious.

A sign will be posted on the front door of the Center notifying parents of the other children in the program about the specific contagious illness, its incubation period and symptoms of the illness.

Children will not be allowed to attend the Center if:

- They are unimmunized and do not meet criteria for medical or religious exemption from vaccination.
- They cannot participate in the daily routine of the Center.
- They have a fever, rash, diarrhea, or they are vomiting.
- They have a communicable disease that requires exclusion as required by the Massachusetts Department of Public Health (including but not limited to strep, influenza, measles, mumps, rubella, pertussis, varicella and conjunctivitis).

## Children Who Become Sick at the Center

If a child has already been at the Center and show signs and symptoms for exclusion, the parent will be notified and the child will be separated from the other children and cared for in the office with supervision while waiting for the parent to arrive.

## Returning to the Center after Illness

- A child who has had a fever should not return to school until the temperature is back to normal.
- A child on antibiotics should not return to school until 24 hours after beginning the medication and with the approval of a physician.
- If the child has an infectious illness, the child cannot return to the Center without the approval of a physician that s/he is no longer contagious.

## SPECIFIC HEALTH CARE NEEDS

The director or assistant director meets with parent(s) prior to admission to discuss both the child's development and to identify any specific health care needs that the child may have, including allergies. If the child is identified as having a specific health care need or allergy by the parent(s) or by the child's medical records, the Center will work with the parent(s) to develop a plan to meet the needs of the child.

### ALLERGIES

All staff will be made aware of children with allergies. These allergies will be posted and covered both in the classroom and on the refrigerator in the kitchen. Children who have specific food allergies will *not* be served any food containing those allergens. If a child is allergic to specific chemicals or other materials, they will not be kept or used in the classroom.

If a child requires an Epi-pen, the families will provide two to be left at the Center. One Epi-pen will be located in the classroom, hanging on the bulletin board to the right of the big bathroom and the other will be kept in the trip backpack with a copy of the child's Individual Health Care Plan. Standing parental and doctor's permission to administer the Epi-pen will be kept in the child's file and will be valid for one year from the date on the permission. If an Epi-pen is administered to a child, 911 will also be called and the Center's plan for emergency illness or injury will be followed.



