

# MARBLEHEAD CHILDREN'S CENTER

## PARENT HANDBOOK

### *SECTION 1: INTRODUCTION*

Welcome!

New beginnings are exciting for children, their parents and teachers. At Marblehead Children's Center, we are committed to helping you make an easy, comfortable transition into our program by clearly communicating our policies, procedures, and philosophy. We hope these guidelines help your initial orientation to the school and serve as a reference throughout your child's enrollment here.

#### *Our Philosophy and Curriculum*

The purpose of Marblehead Children's Center is to provide activities which help children to develop and learn at their own growth rates, in an informal and flexible program aimed at the needs of the individual child.

Marblehead Children's Center's philosophy is based on proven child growth and psychology concepts and embodies many current developments in these fields. The combination of personal and social support with learning in a non-competitive environment is central to our program.

Curriculum and environment are carefully planned to include learning experiences that the children themselves implement through play. It is unfortunate that the term "play" is often taken to mean idle and unproductive activity...in truth, it embraces a wide range of spontaneous and productive experiences. Our classrooms are carefully planned environments which enable children, through actions, objects, and words, to explore, experiment and create their own understanding of the world they encounter. Childhood development follows a predictable path, but with a unique timetable for each child. The natural unfolding of this process is supported when the curriculum helps to strengthen a child's positive self-image. When children are provided with activities that are well matched to their developmental level, and have many opportunities each day to experience success, learning occurs naturally.

Marblehead Children's Center's teachers serve as resources and facilitators, providing support and information to both children and parents.

#### *Services Provided*

Marblehead Children's Center offers a variety of programs to meet the needs of the families we serve. All of our programs offer a choice of times and the number of days that your child can attend. Marblehead Children's Center is open 7 am to 6 pm, Monday through Friday.

The Infant/Toddler Program, which helps encourage the development needed for the later nursery school experience, is for children from 3 months to 2.9 years old. Play is encouraged, to help develop social interaction among children. Development areas such as fine and gross motor skills are also enhanced by the daily activities.

The Preschool Program is for 3 and 4 year old children. The daily program consists of alternating periods of individual, small, and large group activities, structured and non-structured time, indoor and outdoor play. All are important to the child's total development.

The Transitional Kindergarten Program is for 4 and 5 year old children. The daily program is similar to our Preschool Program, however, it offers a more challenging curriculum to meet the needs of the older preschooler. This program incorporates a variety of school readiness activities along with a balance of small and large group activities to encourage social growth and foster independence.

Marblehead Children’s Center does not provide transportation. Arrangements can be made with a private provider. Information is available in our office.

**Curriculum**

Marblehead Children’s Center uses a thematic approach to curriculum in center-based classrooms. Monthly curriculum themes are the basis for stories, projects, and discussions. Projects and activities are set up in the classroom, and the children are free to choose from a variety of materials. Each child is encouraged to try new activities and experiment freely in a risk-free environment. Children benefit by learning from one another, from guidance by the teachers, and through the use of carefully designed materials.

Current research is emphasizing the benefits of reading stories aloud. Time is allowed in each classroom for children to explore books and “read” on their own, including looking at the pictures. Children are also read to, in circle time and at other times during the day.

Circle time is a time for stories, discussions, songs, and other fun activities. All the children are strongly encouraged to participate in circle time. These group times offer community experiences as well as casual instruction on listening and speaking skills, taking turns, and respect for their peers’ point of view. Many children enjoy bringing stories from home that the teacher may read at circle time, and we especially encourage this when the story is related to the curriculum theme.

Typical Curriculum Themes

	PRESCHOOL THEME	INFANT/TODDLER THEME
SEPTEMBER	Autumn and Apples	Autumn and Apples
OCTOBER	Harvest and Pumpkins	Colors/Shapes/Harvest
NOVEMBER	Giving, Caring & Sharing	Nutrition
DECEMBER	Celebrations	Celebrations
JANUARY	Winter	Winter
FEBRUARY	Snow, Ice and Winter Animals	Animals
MARCH	Spring Literature	Weather
APRIL	Planting, Gardens & Earth Day	Spring
MAY	Insect & Outdoor Themes	Children’s Literature
JUNE	Ocean	Ocean
JULY/AUGUST	Summer Camp	Summer Camp

**Equal Opportunity and Non-Discrimination**

Marblehead Children’s Center is firmly committed to the concepts and practice of equal opportunity and non-discrimination. We administer our programs for children and our employment practices without regard to race, gender, religion, age, cultural heritage, national origin, marital status, sexual orientation, political belief, veteran status, disability, or any other characteristic protected by Federal, State or local law. Supporting equal opportunity goes beyond our obligation to the law. We work toward the cooperation of everyone to achieve a constructive learning and working environment for all. Discrimination or harassment in any form is not tolerated. We are responsible for upholding this policy, which, simply stated, requires that we treat each other with respect at all times.

### **Parent Involvement**

Marblehead Children's Center has an open door policy. You are always welcome to visit your child's classroom when your child is present. Throughout the school year curriculum topics will change and new themes will be explored. If at any time you would like to join in with the classroom activities, read a related book, or share your expertise with the class, please see your child's teacher(s) to arrange a convenient day and time.

Individualized written progress reports are prepared for each child in the program every six months. Any significant developments or specific concerns will be shared with you as soon as they arise. Teachers, as well as the Director, are available to meet with parents at a mutually convenient time, at your request.

If you have any general issues or concerns, or special activities you would like to see instituted, please speak with the Director. Your input is valuable in helping us meet the goals and needs of your child. Marblehead Children's Center reserves the right to decide whether or not your suggestions are right for the entire group and whether or not they will be implemented.

### **The Staff**

Children thrive when their teachers are deeply interested and committed to each of them. Our teachers enjoy working with children and parents to create a warm and consistent environment. They act as facilitators of learning and respect the idea that each child participates in the process of learning in a unique way.

All of our teachers are qualified early childhood professionals who have met strictly enforced state standards. They have been selected not only because of their knowledge and experience in the field of early childhood education, but also because their personal educational philosophy and teaching style are compatible with Marblehead Children's Center's approach. Each staff member must also pass a thorough check of personal references, a comprehensive health examination and a rigorous state screening.

We believe that learning is a life-long process, for adults as well as children. Our teachers are offered continual opportunities throughout their employment to further their education and improve their teaching skills. We offer in-service training, workshops and seminars for all of our staff. In addition we encourage the staff to participate in professional organizations and to become actively involved in the local early childhood community.

**Rosanne K. Phelan** is the owner and Executive Director of the Marblehead Children's Center. She holds degrees of Master of Early Childhood Education and Bachelor of Education.

Ms. Phelan and the late Patricia A. Nyberg founded the Seaside Nursery School in 1974. Prior to founding Seaside, Ms. Phelan and Ms. Nyberg taught in Massachusetts and New Hampshire public schools. They also worked in the British Infant System participating in a summer practicum in Oxford, England. Their further experiences include the supervision of student teachers, initiation of parent support groups, establishment of a landmark toddler program, and design of preschool program curricula.

Ms. Phelan took over management of the Marblehead Children's Center in 1986, and improved and expanded the program based on her philosophy and experience at Seaside.

## ***SECTION 2: GETTING STARTED***

### **Enrollment Procedures**

The choice you make about your child's early care and education is one of the most important decisions you will ever make. Children have different personalities and needs. At Marblehead Children's Center, our enrollment process is designed to allow you time to visit, to ask questions, to observe your child at play in his or her prospective classroom, and to assess whether your expectations and Marblehead Children's Center's programs are a good "fit."

### **Initial Visit**

The first scheduled visit to the school will provide you with an opportunity to gather information about our program and staff, and to have conversation with the Director to discuss your family's needs and expectations. The office staff will supply an enrollment registration form, tuition rate sheet, tuition policy, health form, school calendar, parent handbook, and any other appropriate enrollment materials. Your child is also welcome to visit at this time and may want to join in program activities while you meet with the staff.

### **Your Child's First Day**

Children react differently to new situations. Your child may cry when you leave, but in most cases, the tears will end as soon as you turn the corner. Try to relax. When you leave, please go with a smile and a cheerful good-bye. (You are welcome to call later in the day to speak with your child's teacher.) Many parents keep going back for one more kiss, reassuring their children over and over. Uncertainty on your part however, can hinder your child's adjustment. In all probability, your child will love school and will look forward to coming each day. If it seems that extra time and help in making the transition are needed, we will talk with you to make a plan together. Please be assured that we will not allow your child to suffer prolonged unhappiness.

## ***SECTION 3: DAILY ROUTINES*** ***TRANSPORTATION PLAN***

[7.13(2)] Transportation Plan for Marblehead Children's Center

Upon enrolling, parents will fill out paperwork indicating the Transportation Plan that they will be using for their child (children).

Marblehead Children's Center will refer to enrollment paperwork for consent in releasing a child (children) to another person other than the parent. Before releasing any child, the person or persons must be listed in the enrollment paperwork as an emergency pick up person and will be required to show a picture form of identification.

A note on the day that the child, (children) will be picked up by someone other than the parents will be needed indicating who will be transporting the child, (children).

Parents will secure transportation for their child with disabilities through the public school system. Children with disabilities who attend Marblehead Children's Center and the public school will be checked out in the office and escorted to the waiting vehicle by an administrative person. Upon returning to the center the child will be escorted from the vehicle, checked in at the office and escorted to their classroom by an administrative person.

Marblehead Children's Center does not provide transportation.

### Arrival and Departure

Marblehead Children's Center is open daily from 7:00 a.m. to 6:00 p.m. Children who arrive before 8:00 a.m. will go to the opening room which is located in the gym. Your child's teacher will meet your child in the opening room at 8:00 and take him to the classroom. Children who arrive at 8:00 or after will go directly to their classroom.

When you drop your child off at Children's Center, please be sure that the opening teacher or the classroom teacher knows that the child has arrived. The teacher will greet you and your child. It is not acceptable procedure to let the child enter the classroom on her own.

Arrival and departure times are monitored by an automatic electric time recorder, in other words, a time clock. This system allows us to keep accurate time records, and also gives a visual display so that we know which children are in the building at all times.

When your child is picked up at Marblehead Children's Center, the person who is taking the child home must let an attending teacher know that the child is leaving.

When picking your child up from school, please keep in mind that your child's teacher must continue to monitor the rest of the class even though you may feel that you have something very important to discuss. For extended discussion, you will always be able to arrange an appointment with your child's teacher or the Director at a mutually convenient time.

Other than parents, only persons with prior written authorization will be allowed to pick up a child from school. Anyone who is unfamiliar to staff, including authorized individuals, will be asked to present identification before a child is released to them. Children are allowed to leave school only when accompanied by an authorized adult. Such authorization must be renewed at least every 12 months.

It is important that a parent call the school in the morning if their child is ill or will not be attending school for any reason.

To ensure the security of the children, Marblehead Children's Center's staff will adhere to the following procedures:

1. Check pick-up authorization form in child's file. A child may be released to a person who is not on the authorized list only if the parent has provided a verifiable dated and signed note authorizing a specified person to pick up the child at a specified time.
2. Before releasing a child to someone other than a parent, staff will check the driver's license or other identification.
3. Under no circumstances will a child be released to a person who is not on the list or for whom the parent has not written an authorization note, even if the child and a staff member are familiar with the person. This includes parents of other children enrolled in the school.
4. Occasionally, schools are put into a difficult position by parents who are involved in a custody dispute. In the absence of a court order, we cannot deny a parent access to his or her child. Even with a court order, our ability to deny access is limited to notifying promptly the custodial parent and the proper police authority, should unsanctioned contact be attempted or occur at school. Difficulties of this type must be discussed with the Director so that we can clarify our procedures and limitations. Staff members will be instructed not to place themselves in jeopardy to mediate a family dispute or to attempt to enforce a court order. If a parent chooses to leave a child at school, with a court order in force, the custodial parent will be required to sign a waiver acknowledging the school's inability to physically obstruct a hostile effort to take the child from school

**Daily Communication**

Here at Marblehead Children's Center, we strive to create a warm and cozy environment where each child will be provided an opportunity for growth, challenge and friendships. Although we are available for formal discussions between parents and staff, we hope you will speak to us daily to keep us informed about the small but important changes that can affect your child's ongoing development. Our goal is to establish an ongoing dialogue with your family.

**Research and Experimentation**

Marblehead Children's Center will not permit any research, experimentation or promotions using children without first obtaining written permission from the parents of the children involved. The observer will not have identification of individual children unless appropriate.

**Children with Disabilities**

The Marblehead Children's Center will accept an application for any child with a disability. The director and the child's parents will have an initial meeting to determine the child's needs. At this meeting, with parent input, the Administrator will put in writing any modifications needed for child's participation, the staff/child ratio on which child is assigned to and any special equipment, ramps, aids or materials needed to accommodate the child. With parental consent we will request information from agencies that has been giving the child services of any kind (i.e. Early Intervention, Local Education Agency, health care provider.) This information will aid us in the care of your child. We will work with the Special Education administrator to develop a written program plan.

If the child's accommodations cause an undue burden to the center the parent will be given a 30 day written notice. The notice will include the reason for termination including but not limited to cost of accommodations and staffing issues. Toileting needs are not undue burden.

## Lunch and Snacks

Lunchtime is typically at noon and there are two daily snacks.

Lunch suggestions:

### Sandwiches

bologna/cheese  
ham/cheese  
chicken/cheese  
turkey/cheese  
cream cheese  
cheese  
grilled cheese

### Meats/Seafood

cut up hot dogs  
cut up chicken  
cut up turkey  
cut up steak  
cut up pork chops  
chicken nuggets  
chicken/turkey/ham slices  
hamburger  
tuna  
fish sticks

### Vegetables

boiled/mashed potato  
potato puffs  
carrots  
mixed vegetables  
peas  
lima beans  
corn  
broccoli  
cauliflower  
green beans

### Pasta/Rice/Soup

ravioli  
macaroni and cheese  
lasagna  
spaghetti  
rice  
soup

### Fruit

melon  
strawberries  
blueberries  
apples  
bananas  
grapes (cut-up, please)  
tangerines (peeled)  
oranges (peeled or sliced)

### Other

whole grain crackers  
cheese  
yogurt  
cottage cheese  
pickles  
whole grain bread  
raisins  
pretzels  
popcorn  
bagel

Please introduce new foods at home before sending them to school, especially shellfish and nuts, to prevent allergic reactions. Please limit sugary foods, except for special celebrations. Because they are a choking hazard we do not allow hard candy or chewing gum at school. Please be sure to label your child's lunch box or bag.

## Child Guidance

"Discipline is the slow, bit-by-bit process of helping children see the sense in acting a certain way."

James Hymes, author and early childhood educator

Guidance and discipline should always be developmentally appropriate and encourage self-control through understanding of the individual needs of each child. The goal is to enhance and reinforce the healthy growth and development of the children and to protect the group and the individuals within it. A skilled teacher combines caring with fair and consistent limits within the classroom. Children who are treated in this way feel safe and are usually more cooperative. As they grow, children learn to express their feelings and needs in more socially acceptable ways. Clear expectations, individual attention and acknowledgment of positive behaviors work wonders. But of course, there are times when conflict will arise.

Whenever possible, children will participate in the development of the rules and be allowed to resolve conflicts and find solutions themselves. A teacher will intervene when necessary and will redirect the children involved to another activity. In doing so, the teacher will discuss the inappropriate behavior with the children and restate the desired behavior, age permitting. In order to help the children gain a better understanding of the desired behavior, the consequences of the inappropriate behavior will be directly related to the actions of the child (e.g. not being allowed to play with materials that have been misused, or repairing a book that was intentionally torn.) Forcing a child to apologize to another child is usually not effective and does not validate the feelings of either child.

When redirection is ineffective, or when the difficult behavior is extreme or puts any child at risk, the teacher will seek assistance from a co-teacher, a supervisor or the school Director. Although it is important to allow children to express their anger in effective ways, keeping everyone safe is the teacher's first priority. Occasionally, a brief, supervised separation from the rest of the group can help a child regain control.

There are some specific types of disciplinary intervention that are always prohibited by Marblehead Children's Center policy:

- Corporal punishment, including spanking, shall not be used.
- No child shall be subjected to cruel or severe punishment, humiliation or verbal abuse.
- No child shall be denied food as a form of punishment.
- No child shall be punished for soiling, wetting, or not using the toilet.
- No physical hitting in any manner upon the body
- No child shall be force fed



### **Rest Time**

State regulations require that all infants, toddlers and preschool children rest after lunch for a minimum of 45 minutes. Children rest on mats in their classroom. They should bring a blanket and pillowcase from home. Rest time is a quiet, peaceful time when the lights are low and soft music plays. Most children sleep, but they are allowed to look quietly at books on their mats. Please don't ask us to excuse your child from rest time. We can recommend techniques, books, or professionals if you have difficulty getting your child to sleep at night.

### **Clothing and Diapers**

At least one change of clothes, including underwear and socks, should be kept at school at all times. All clothes sent or worn to school must be labeled with the child's full name.

Each child will have a specially designated space to hold personal belongings. The children are expected to wear shoes at all times. When a child wears heavy foul-weather boots to school in place of shoes, other shoes or hard soled slippers must be sent for use indoors.

Parents are responsible for providing diapers and diaper wipes if needed for their children. Please check with the staff regularly about your child's supply of diapers and diaper wipes. We will bag soiled clothing for daily removal.

### **Toilet Training**

Toilet training is done in accordance with requests of the child's parents and in a manner that is consistent with the child's physical and emotional abilities. Toilet training will never be coerced. All children will be allowed to use the bathroom when needed. Children will be supervised during toileting but allowed as much privacy as is appropriate. Children who are learning to be self-sufficient in the bathroom will have an easier time if they wear clothing that they can pull off and on by themselves.

### **Diapering and Toileting Policy**

Marblehead Children's Center follows the guidelines listed below.

#### Diapering Policy

Diapers shall be changed regularly when soiled or wet.

Children shall be washed and dried with individual washing materials such as single use disposable wash cloths, during each diaper change.

Children's hands will be washed thoroughly with soap and running water after changing each child. Individual towels shall be used to dry hands.

The changing table or diapering surface shall be for no other purpose.

The changing surface shall be cushioned, intact (no cracks or tears) and waterproof.

A disposable covering shall be used on the changing surface.

The disposable covering shall be changed after each use.

The changing surface shall be washed with soap and water and sprayed with a bleach solution. (the bleach shall consist of ½ cup bleach to 1 gallon of water and must be made fresh daily.)

Clothing or cloth diapers soiled by feces, urine, vomit or blood shall be double bagged in sealed plastic bags and stored apart from other items.

Soiled disposable diapers must be placed in a water-proof container with tight fitting cover and disposable plastic liner.

The container must be emptied, washed and sanitized at least daily.

A change of clothing shall be available for each child. Extra, center owned clothing shall be available for the changing purposes in addition to clothing brought from home by each child.

Staff members shall also wash their hands with soap and running water after diapering children.

### **Incllement Weather**

Marblehead Children's Center will be open during snowstorms with the exception of a 'state of emergency' proclaimed by the governor. Some snow conditions may necessitate delayed opening and/or early closing depending on the severity of the storm.

### **Transition Plan**

Plan for transitions includes but is not limited to, the director and assistant director collaborate with the classroom teacher regarding a child moving to the next classroom.

Observations of individual children will be done as appropriate.

Classroom teachers, director and/or assistant director will collaborate with parents regarding the transition.

The director and assistant director with the class room teachers and parents work as a team to insure a smooth transition for the child. The child typically visits the new classroom a week prior to the transition date.

The transition plan should be implemented according to the child's ability to understand.

Transition to kindergarten is typically done in collaboration with the public or private program the child is attending with the parent's permission.

## ***SECTION 4: HEALTH AND SAFETY***

### **Good Health**

Our goal is a healthy school. Of course during the winter months it is very difficult to keep our school germ-free. But in order to keep our school/children/teachers healthy we need you to comply with our health policy. If you send your child in sick we cannot maintain a healthy environment. We will be diligent about identifying children who are exhibiting any symptoms of illness. We will not hesitate to call you and ask you to pick up your child. For example, if you need to give your child any type of medicine in the morning before school, he is too sick to attend. Please respect the health of your child's classmates and this will result in a much better place ... less absenteeism on the part of the children and teachers.

Children will play outdoors daily, weather permitting. Parents are responsible for sending children to school in adequate clothing and footwear to maintain good health during outdoor play in all suitable weather conditions, including normal winter temperatures. Please do not ask us to keep a child inside because of a cold or other illness, except for recuperation from bronchitis or pneumonia, as ordered by a physician. A child who is too sick to go outside is usually too sick to be in a social situation with other children.

### **Illness**

Parents must understand that any new social setting offers exposure to illness and germs. Although teachers take precautions to prevent the spread of illness, children entering a new school setting may seem to catch everything that goes around for several months. Please be prepared to either stay home with your child or make arrangements for someone who can stay with your child. In general, children who are lethargic and unable to participate actively in the full, regular program will not be allowed to remain at school. Whenever your child has experienced any of the following symptoms within the previous 24-hour period, you will be expected to keep your child home for the comfort of your child and the health of the other families at school.

1. Fever of 101: Children sent home with a fever in the middle of the day may not return to school until they have been fever-free for a full 24-hour period.
2. Diarrhea: Two or more instances close together may be assumed to be contagious unless determined by a doctor not to be so.

3. Vomiting.
4. Pronounced or persistent coughing.
5. A contagious condition of any kind, including but not limited to strep, flu, respiratory infection, conjunctivitis, infectious rash, hepatitis, chicken pox, measles, mumps, scabies, lice, etc., unless accompanied by a physician's note indicating that the child is able to return to a group setting.

When sick children are kept at home, all of the children and their families benefit from better health. Marblehead Children's Center is not licensed for the care of ill children. Please remember that all symptoms must have disappeared at least 24 hours before returning to school. In some instances, a physician's certificate of good health may be required before a child will be allowed to return to school.

### **HEALTH CARE POLICY**

The health care policies and procedures established and carried out in child care programs play an important role in promoting the health and safety of children and staff. The following outline can be used to develop the center's Health Care Policy required by EEC group day care regulations 102 CMR 7.00. Parts of the outline include suggestions that are not requirements in the regulations. The health care consultant must assist in the development of the health care policy, review it at least yearly, and approve any changes. For further assistance, refer to the Health & Safety in Child Care manual published by the Massachusetts Department of Public Health and available at the State Book Store for a fee.

Each staff member must receive a copy of the policy and must be trained in the program's infection control procedures and implementation of the policy during staff orientation.

Components of the Health Care Policy 7.07 (16) (a-k) describe or list the following in each section: (location of health care policy must be posted).

(a) Emergency Telephone Numbers

Health Care Consultant:	Paula Dobrow
Fire Department:	911
Police Department	911
Rescue	911
Poison Control:	800-222-1222

Designated Adults:

Rosanne Phelan:	781- 631-1954
Gail Arsenault	781-631-1954
Karen Bird	781-631-1954

## Hospitals Utilized for Emergencies:

North Shore Medical Center  
978 745-2100  
81 Highland Avenue  
Salem, MA 01970

Salem Hospital  
978 741-120057 Highland Avenue  
Salem, MA 01970

(b) Emergency Procedures

On lookers are removed while the parents are being notified and emergency transportation

contacted (ambulance, if needed). The director or lead teacher performs first aid according to the first aid training manual.

Every effort will be made to notify a parent. When a parent cannot be reached, friends or relatives from the child's emergency authorization form will be contacted. The child will be taken to the hospital.

(c) Procedures for Using and Maintaining First Aid Equipment

First aid kits and manuals are stored in the kitchen and classrooms. First aid is administered by the director or lead teacher (trained personnel). The first aid kits are maintained by the director and contain all items as stated in the EEC regulations.

(d) Plan for Evacuation of Center in Emergency

Separate evacuation plans are posted in each classroom. One teacher will direct the children out of the building and one teacher will follow counting children as they exit. (ALL teachers are required to carry the daily attendance sheets and emergency release cards with them and take a head count before, during, and after evacuation.) Any special needs child who requires assistance will be helped by the teacher following the group out of the building.

Attendance is taken daily, and all classroom teachers must carry their updated attendance sheets with them whenever they leave the classroom. The director is responsible for making sure that evacuation drills are held at different times of the program day and are practiced with all groups of children and staff at least every other month. The director also maintains documentation of the time, date, and effectiveness of each drill in a log kept in the office.

(e) Injury Prevention Plan

All staff members are required to constantly inspect their classrooms, the indoor gym and the outdoor yard for any equipment or area that is in disrepair. All staff receives first aid training and designated staff are trained in CPR for infants and children. All accidents and injuries will be reported to parents on an Incident/Accident Report form, within 24 hours of any such occurrence. Accident Reports must be filed immediately following the incident and copies are made for the child's file, the parent and the log. The report must relate in detail the specifics of the accident, including child's name, time, type of injury, how injury occurred, location, witnesses, medical care required and who administered first aid.

Toxic substances, poisonous plants, medications, sharp objects, matches and all hazardous items are kept out of the children's reach in child-proof cabinets in the kitchen or staff room.

No smoking in areas used by children

(f) Plan for Managing Infectious Disease

Children are constantly monitored for any signs of infectious disease: i.e., green mucus from the nose, temperature exceeding 99 degrees, congested cough. Any child exhibiting such symptoms is removed from the classroom to the office to wait for the parent's arrival.

The child, while isolated, will be provided food and drink if he wants it and quiet activities, such as legos and other manipulatives which will be sanitized with a bleach and water solution by the then supervising teacher before being returned to the classroom.

If any communicable diseases, such as measles or salmonella, have been introduced into the center, the parents will be notified by a notice in their child's cubby, as well as a notice posted on the door to the classroom and the parent bulletin board. The notice shall describe the disease and contain a description of what to look for with their own child.

(g) Plan for Infection Control

All staff members and children shall wash their hands with liquid soap and running water using friction. Hands shall be dried with individual or disposable towels. Staff and children shall wash their hands at least at the following times:

1. Before eating or handling food.
2. After toileting or diapering.
3. After coming into contact with fluids or discharge.
4. After handling center animals and their equipment.
5. After cleaning.

All classroom surfaces, furniture, toys, and any other classroom equipment shall be washed with soap and water and disinfectant using the following schedule:

1. After each use:
  - a. Toilet training chairs which have first been emptied into the toilet.
  - b. Sinks and faucets used for rinsing a toilet training chair.
  - c. Diapering surfaces.
  - d. Toys mouthed by infants or toddlers.
  - e. Mops used for cleaning bodily fluids.
  - f. Bibs.
  - g. Thermometers.
2. At least daily:
  - a. Toilets and toilet seats.
  - b. Container, including lids, to hold diapers.
  - c. Sinks and sink faucets.
  - d. Drinking fountains.
  - e. Water tables and water play equipment.
  - f. Play tables.
  - g. Smooth-surfaced, non-porous floors.
  - h. Mops used for cleaning.
  - i. Cloth washcloths and towels.

3. At least monthly or more frequently as needed to maintain cleanliness when wet or soiled, and before use by another child:
  - a. Cribs, cots, mats, or other approved sleeping equipment.
  - b. Sheets, blankets or other coverings.
  - c. Machine washable fabric toys.

The disinfectant solution used is either a self-made solution consisting of a 1/4 cup of household bleach to each gallon of water (1 Tbsp per quart) which shall be prepared daily, labeled, and placed in a bottle that is sealed with a cap, or a commercially prepared disinfectant which indicates that it kills bacteria, viruses, and parasites and which can be used in accordance with label instructions. All such disinfectants shall be stored in a secure place and out of the reach of children.

- (h) **Plan for Meeting the Needs of Mildly Ill Children**  
Any child who is mildly ill will be removed from the classroom to the office and provided continual supervision by the director or classroom teacher until the parent's arrival. The child will be provided with a place to rest, food or drink if required, and appropriate indoor play activities, such as legos, which will be disinfected as stated before being returned to class.
- (i) **Plan for Administering Medication**  
Required authorization forms must be completed by the parent including all instructions. The teacher posts the instructions in a conspicuous location. The log indicates name of teacher, name of child, time, dosage, type, and date. The completed form is stored in the child's file. Medication should be stored in a secure and sanitary place and kept out of the reach of children. The administration of medication must be reliably controlled and documented as follows:  
Medication will only administered by authorized persons who have completed the "5 Rights of Medication".  
All persons will be evaluated annually in the "5 Rights of Medication" to insure their ability to administer medication.
  1. Prescription medications will only be administered when delivered in the current prescription container, labeled by the pharmacist with the child's name, physician's name, name of the medication, dosage instructions.  
The program must also receive a written order from the physician with specific instructions for administration, including length of course, allergies, and possible side effects. The physician's name and telephone number must be provided.
  2. Parents should always request prescription medication that is BID (twice/day) to preclude distribution at school whenever possible.  
Some TID (thrice/day) medications can also be scheduled completely outside of the school day.
  3. The initial dose of the medication, whether prescription or over-the-counter, must be given at home or by the doctor in order to evaluate effectiveness and observe possible side effects.
  4. Children on antibiotics may not return to the program until they have completed 24 hours of antibiotic therapy.
  5. Over-the-counter medications (e.g. Tylenol, Benydryl, etc.) will only be administered or stored by MCC with a written physician's order. Every effort will be made to contact the parent before administering any medication.

This order, called a Medication Permission Form, must accompany each medication given.

If an over-the-counter medication is ordered, we require specific instructions as to dosage, schedule, and term.

We cannot dispense over-the-counter medication on an "as needed" basis.

6. Topical, non prescription medications may only be administered to a child with the written permission of a parent. Such permission shall be valid for no more than one year from the signature date. If the Program notices an adverse reaction to such a medication, we reserve the right to require a physician's written order to continue use of the medication at school. We will not administer any such medication contrary to the written directions on its original container unless directed to do so by a physician's written order.
7. Sunscreen. Parents who want their child to wear sunscreen are asked to put on the first application before coming to school each day. Parents must supply their own bottle of sunscreen with their child's name on it. Parents must also complete and sign a Sunscreen Permission Slip before the staff can reapply sunscreen to the child before going outdoors.
8. Children with special needs or chronic conditions will be assessed individually in consultation with parent and physician. Such special needs would include, but not be limited to, the use of inhalers, insulin, Phenobarbital, or Dilantin.
9. All medications must be handed to a teacher or the office staff. No medication will be accepted when left in a bag, lunch box, cubbie, etc. No medication should be mixed into other food, unless specified by the physician as the proper form of administration. In that case, the medication must be mixed at school. Marblehead Children's Center is not responsible for replacement of spilled medication or for those left beyond the expiration date. Unused medication will be returned to the parent.
10. All medication should be clearly labeled with the child's name and/or current prescription label. All prescription and non-prescription medication will be stored with the director. Appropriate authorization forms must be stored in the child's file and updated as medication is administered.
11. The person administering the medication must know the child. No administration of medication contrary to prescription label, without M.D. authorization
12. The individual administering the prescribed medication must always be precise when measuring or distributing each dose. If there is any doubt about the accuracy of the indicated dose, it is imperative to recheck with the physician. The parent must supply any special device such as a dropper or a calibrated cup for the proper administration. Most pharmacists and physicians provide devices for giving medication to children. Some tablets which are not available in pediatric preparations may need to be crushed. This must be specified by the physician, along with any special requirements for measuring or administering the medication.
13. Each dose administered is recorded by the staff member who administered it and kept in the child's file.
14. When administering medication, no attempt will be made to restrain a child or to use unusual force if the child is upset or

uncooperative. A parent will be called immediately if such a problem occurs.

Medication Permission forms are available from the director and they are suitable for use by the doctor as a physician's order to the school.

- (j) **Plan for Meeting Individual Children's Health Care Needs**  
Parents are required to notify the center in writing regarding the child's allergies. Any new allergies/allergens should be added to the file. All allergies/allergens are noted in the individual file and posted in each classroom. If a child is allergic to a certain food, an optional snack is provided. Every effort will be made to protect a child from the exposure of the food he/she is allergic to (i.e. separate tables.) Toxic substances and all hazardous items are kept out of the children's reach in child-proof cabinets in the kitchen or staff room. Parents with written permission from their child's health care provider will be allowed to train staff in the implementation of their child's individual health care plan.
- (k) **Procedure for Identifying and Reporting Suspected Child Abuse or Neglect to the Department of Social Services**  
If any form of abuse is suspected, it must be reported to the director. The director will take the steps necessary including notifying the Department of Children and Families (617-748-2000). Staff is instructed on how to recognize the signs of abuse or neglect at workshops or staff meetings. Observations are documented and kept on file at the center. Obvious signs of abuse/neglect are reported immediately to the DSS by the center's director. Allegations of abuse/neglect by staff members are immediately investigated by the director, and the teacher is removed from the classroom. The teacher will be suspended with pay until the matter is resolved.
- (l) **Procedure for Identifying and Reporting Abuse or Neglect to EEC**  
Allegations of abuse/neglect of a child, while in care, will be immediately reported to the EEC by the director. All staff members are mandated reporters.

Each staff member must receive a copy of the policy and must be trained in the program's infection control procedures including universal precautions and implementation of the policy during staff orientation. Prior to admitting a child to the center, the parents shall be notified of the policy and shall receive a copy of the policies pertaining to the care of mildly ill children, administration of medication and the procedures for providing emergency health care. A complete copy of the policy shall be furnished to parents upon their request.



## Safe Sleep for Infants

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All of EEC's standards for the licensure of out-of-home care of children require programs to provide care to children in a way that "assures every child a fair and full opportunity to reach his full potential" (See 606 CMR 7.01; 102 CMR 3.00; and 102 CMR 5.00.) In order to reduce the risk of infant death in child care settings from Sudden Unexplained Infant Death (SUID) and Sudden Infant Death Syndrome (SIDS), EEC has established the following policy regarding sleep practices for **all children under 12 months in age**.

### Required Safe Sleep Practices:

- In accordance with the recommendations of the American Academy of Pediatrics (October, 2011), all programs serving children under 12 months in age must comply with the following safe sleep practices:
  - Infants under 12 months in age must be placed on their backs for sleeping, unless the child's health care professional orders otherwise, in writing.
  - Each child must nap in an individual crib, port-a-crib, playpen or bassinet; with a firm, properly fitted mattresses and a clean fitted sheet with no potential head entrapment areas. Always use a firm sleep surface. Car seats and other sitting devices are not allowed for routine sleep. Cribs and toddler beds must meet CPSC and ASTM safety standards. Slats on cribs must be no more than 2- 3/8 inches apart.
  - Blankets, comforters, pillows, stuffed animals, wedges, positioners, bumper pads or other soft padded materials or toys must not be placed in the crib with the baby. Sleepers and sleep sacks are good alternatives to blankets. [For family child care and large and small group and school age child care, see 606 CMR 7.11(13)(e); for residential care see 102 CMR 3.08(7)(b); for placement programs, see 102 CMR 5 10(4)(a)].
  - Bottles must never be propped and babies should not sleep sucking on a bottle of milk. Propping the bottle increases the risk of choking and of ear infections. Falling asleep with milk pooled in the mouth leads to serious dental caries in developing teeth.<sup>1</sup>
  - Home monitors or commercial devices marketed to reduce the risk of SIDS must not be relied upon for the supervision of sleeping babies.
  - Supervised awake tummy time is required daily to facilitate development and minimize the occurrence of positional plagiocephaly (flat head). Children who are younger than six months of age at the time of enrollment must be under direct visual supervision at all times, including while napping. All teachers and caregivers have taken the SIDS training as stated in the EEC Infant Sleep Safe Policy.

### Accidents and Emergencies

All staff receives first aid training, and designated staff are trained in CPR for children. All incidents and injuries will be reported to parents on an Incident/Accident Report Form, within 24 hours of any such occurrence. Minor accidents, such as cuts and scrapes, will be treated with soap and water; bruises and bumps treated with ice.

In the case of a more serious accidental injury, we will make an immediate attempt to contact a parent. If we cannot reach a parent or the designated emergency contact, we will call an

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<sup>1</sup> After feeding and before putting an infant to sleep, gently wipe any milk residue from her gums. A pacifier can be offered at sleep time instead of a bottle.

ambulance and your child's physician. A staff member will accompany your child in the ambulance to the nearest hospital and remain with your child until you arrive. You will be expected to assume responsibility for any resultant expense.

#### **Procedure for Identifying and Reporting Suspected Child Abuse**

If any form of abuse is suspected, it must be reported to the Program Administrator. The director will take steps necessary including notifying the Department OF Children and Families, 617-748-2000.

Staff is instructed on how to recognize the signs of abuse or neglect at workshops or staff meetings. Observations are documented and kept on file at the program. Obvious signs of abuse/neglect are reported immediately to DCF by the director

Allegations of abuse/neglect by staff members are immediately investigated by the director, and the teacher is removed from the classroom until the matter is resolved.

Any abuse/neglect allegations or reports will be immediately reported to Department of Children and Families by the director.

#### **Plan for Meeting Potential Emergencies**

##### **Plan for a Missing Child**

In the case of a missing child Marblehead Children's Center will be put on "lock down ". Gail Arsenaault- director and Karen Bird-assistant director will be responsible for searching for the missing child. One person will search the interior of the building while the other person will search the exterior of the building including the playground, parking lot and surrounding areas. Authorities as well as the parents will be notified immediately by an administrative person when a child is reported missing. All other children will remain in their classrooms with their teachers following their regular routine.

##### **Plan for Loss of Power, Heat or Hot Water**

*In the event that Marblehead Children's Center should lose power, heat or hot water the appropriate agencies will be notified to determine how long it will take to repair the problem. Marblehead Children's Center will notify parents via phone or e-mail and can relocate to 40 Tioga Way if necessary.*

##### **Evacuation of Building**

*In the event that Marblehead Children's Center evacuates the building, the Director will lead teachers/children to designated location. The Assistant Director will insure that all teachers, children and personal have left the building. It is the Director and Assistant Director's responsibility for contacting the parents.*

### **SECTION 5: FAMILIES' RIGHTS**

#### **Parent Information, Rights and Responsibilities**

Chapter 28a, Section 10 of the General Laws of the Commonwealth of Massachusetts mandates to the Office for Children the legal responsibility of promulgating rules and regulations governing the operation of day care centers (including nursery schools).

The licensee (day care center owner) is required to inform all parents of specific information about their rights and responsibilities at the time of admission of their child to the school. Section 7.04 of 102 CMR 7.00, the regulations which govern day care centers, contains more information.

## **Parent's Rights**

### ***Right to Visit***

You have a right to make unannounced visits to your child's room while your child is present.

### ***Parent Input***

The program must have a procedure for allowing your input in the development of center policy and procedure. The program must allow you to make suggestions, but it is up to the program to decide whether or not they will be implemented.

### ***Conferences***

You have a right to request an individual conference with the program's staff. The licensee has the responsibility to make the staff available.

### ***Meeting Prior to Admittance***

The licensee shall assure that the administrator or his designee meets with you prior to admitting your child to the center

At the meeting, the licensee in addition to the information contained in this fact sheet, must provide you with: the center's written statements of purpose; types of services provided; referral policy; behavior management policy; termination and suspension policy; a list of suggested nutritious foods you could send for snacks and meals, if it is your responsibility; the policy for identifying and reporting child abuse and neglect; the transportation plan; a copy of the health care policy (if you request it); procedure for administration of medication; procedures for providing emergency health care and the illness exclusion policy; and a copy of the fee schedule. All of this information may be contained in the "Parent Handbook".

You should also be given the opportunity to visit the center's classrooms either at the time of the meeting or prior to the enrollment of your child.

### ***Progress Reports***

At least every six (6) months, you should either meet with the center's staff to discuss your child's progress, or receive a written progress report of your child's activities and participation in the center. This report must become part of your child's center record. If your child is an infant or is a child with disabilities, you should receive a written progress report every three (3) months. Center staff must bring any special problems or significant developments, particularly if they regard infants, to your attention as soon as they arise.

### ***Your Child's Records***

Information contained in your child's record is privileged and confidential. The center's staff may not distribute or release information in your child's record to anyone not directly related to implementing the program plan for your child without your written consent. You must be notified if your child's record is subpoenaed.

### ***Access to the Record***

You should be able to have access to your child's records. The center must provide access within two business days, unless they have your permission to take longer. You must be allowed to view your child's entire record, even if it is located in more than one location. The center must have procedures regarding access, duplication, and dissemination of children's records. They must maintain a written log which identifies anyone who has had access or has received any information out of the record. This log is available only to you and the people responsible for maintaining the center's records.

### ***Amending the Record***

You have the right to add information, comments, on data, or any other relevant materials to your child's record; you also have the right to request deletion or amendments of any information contained in your child's record. Such request shall be made in accordance with the procedures described below:

1. If you are of the opinion that adding information is not sufficient to explain clarify or correct objectionable material in your child's record, you have the right to have a conference with the licensee to make your objections known;
2. The licensee shall, within one (1) week after the conference, give you a decision in writing stating the reason or reasons for the decision. If the decision is in your favor, the licensee shall immediately take steps as may be necessary to put the decision into effect.

### ***Charge for Copies***

The licensee shall not charge an unreasonable fee for copies of any information contained in your child's record.

### ***Transfer of the Record***

Upon your written request, when your child is no longer in care, the licensee can give you your child's record or transfer them to any other person you identify. The center should ask you to sign a form verifying that you have received the record.

### **Responsibilities of the Program**

#### ***Providing Information to the Department of Early Education and Care (EEC)***

The licensee must make available to EEC any information required to be kept and maintained under these regulations and any other information reasonably related to the requirements of these regulations. This includes information in your child's records. Authorized employees of the EEC are not to remove identifying case materials from the center premises and are required to maintain the confidentiality of individual records.

#### ***Reporting Abuse or Neglect***

All center staff are mandated reporters. They are required by law to report suspected abuse and neglect to both the Department of Children and Families or to the licensee's program administrator. The licensee must have written policies and procedures for reporting and must provide the written policy to you upon enrollment.

#### ***Notification of Injury***

The licensee must notify you immediately of any injury which requires emergency care. They must also notify you in writing, within 24 hours, if any first aid is administered to your child.

#### ***Availability of Regulations***

The center must have a copy of CMR 102 7.00, Standards for the Licensure or Approval of Group Day Care and School Age Child Care Programs, on the premises, available to any person upon request. If you have questions about any of the regulations, ask your center to show them to you.

## ***SECTION 6: TUITION AND ATTENDANCE POLICIES***

### **Payment**

Tuition at Marblehead Children's Center is a monthly fee based on your child's schedule, billed in advance. Bills are available prior to the end of the month, and are due on the first. A \$15.00 late fee will be charged for tuition not paid as of the tenth of the month. The only adjustment of tuition will be for extended illness (more than two weeks). Children who are on a twelve month schedule, attend for at least forty hours a week, and have attended continuously for six months are entitled to a two week vacation allowance. All payments should be made payable to Marblehead Children's Center.

### **Late Pick-up Policy**

Marblehead Children's Center closes at 6:00 PM. We have a late pick-up policy for those occasional unavoidable situations when you must be a few minutes late. Two of our teachers will wait with your child after 6:00 PM, if necessary. There is a \$15.00 charge for a pick-up anytime in the first 15 minute segment and a \$1.00 fee for every minute thereafter (\$60/hr). This is to be paid directly to the teacher who waited with your child.

Our teachers and staff work a full day and are ready to go home to their families at 6:00 PM. We expect our parents to arrive to pick up their child(ren) with enough time to comfortably exit the center by 6:00 PM (i.e. gather the child's belongings, visit the bathroom, wash hands). If you are performing any of these tasks after 6:00 PM you are considered late!

### **Termination and Suspension Policy**

Each family has an obligation to observe and follow the school's policies and procedures. If at any time the parents or child's behavior interferes with stated policies or classroom operation, it may be necessary for the school to take corrective measures.

The corrective measures may include a verbal notice, written notice, referral to a social agency, and termination. The corrective action taken will be determined by the school. The school does not guarantee that one form of action will necessarily precede another.

The following is a list of actions that will result in discussion with the Director and may be cause for termination: violation of the school's policies or safety rules, non-payment of tuition, theft or dishonesty, physical harassment, sexual harassment or disrespect toward employees. These examples are not all inclusive. We emphasize that termination decisions will be based on an assessment of all relevant factors. All meetings shall include documentation of the reasons for termination to the child's parent.

In addition, it should be noted that if the school is unable to meet the physical or social-emotional needs of a particular child, the director shall meet with the parent to suggest appropriate referrals. When any child is terminated from the school, initiated by the school or the parent(s), we shall prepare the child for termination in a manner consistent with the child's ability to understand.

Marblehead Children's Center termination policy in accordance with 7.04(17) (j) must describe our procedure for avoiding suspension and termination of a child including but not limited to:

Providing and opportunity to meet with the parents to discuss options other than suspension or termination.

Offering referrals to parents as needed.

Pursuing options for supportive services to the program.

Developing a plan for supportive services at home and at school.

Marblehead Children's Center chooses not to use a suspension policy.

### **Termination for Non-Payment**

Non-payment or consistently late payment of tuition and/or fees can be sufficient cause for termination of service. If service is terminated for non-payment, Marblehead Children's Center will pursue collection of the full amount due.

### **Absence**

When your child is going to be absent, please call Marblehead Children's Center as early as possible. If your child has a contagious illness, let us know so that we can alert other parents to look for symptoms in their children. There are no "make-up" days at Marblehead Children's Center. A tuition adjustment will be made for extended illness of two weeks or more.

### **Schedule Changes**

All children must have a regular schedule on file with the school. Marblehead Children's Center requires two weeks' written notice in advance of a schedule change. Extra hours are usually available as needed, if space is available. Schedule changes will not be accepted for holidays for which Marblehead Children's Center is closed.

### **Holidays**

Marblehead Children's Center is closed for 11 holidays a year: New Year's Day, Martin Luther King Day, President's Day, Memorial Day, Independence Day, Columbus Day, Labor Day, Thanksgiving, Day after Thanksgiving, Christmas Day, Day After Christmas. Tuition is charged on a monthly basis, without credit for those holidays for which we are closed. For example, if your child is regularly enrolled for Mondays, you will be charged the same tuition for a month in which the school is closed for a Monday holiday as you would be otherwise charged.

### **Withdrawal**

A two-week written notice is required for withdrawal. Following such notification, tuition will be charged for two weeks or until the date specified, if beyond two weeks.

## **SECTION 7: REFERRAL PLAN**

If after considerable observation and documentation by the classroom teacher, it is determined that a child/parent needs to be referred to the appropriate social, mental health, educational, or medical services, the child's teacher will speak to the director. The classroom teacher and the director will review the child's record prior to the referral. The director will arrange a conference with the parent(s) and make available a written a reason for the referral, summary of observations and a list of appropriate services. Every effort will be made to accommodate the child's needs.

The director will maintain a written record of any referrals, including the parent conference and results. A referral checklist will be kept in the child's record.

The director will, with written prior parental permission, contact the agency or service provider who evaluated the child for consultation and assistance in meeting the child's needs at the center. If it is determined that the child is not in need of services from this agency, or is ineligible to receive services, the center shall review the child's progress at the center every three months to determine if another referral is necessary.

**List of referral services will be provided upon request.**

**Marblehead Children’s Center is licensed by the Department of Early Education and Care and can be contacted at 978-826-1317.**

**I have read and understand the content described in the Marblehead Children’s Center Handbook.**

**Signature:** \_\_\_\_\_

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