

Key West Early Childhood Center



Parent/Guardian Handbook

10244 Key West Drive

Dubuque, Iowa

52003

Sue Ellen Nolan

Director

Phone: 563-583-1881

Email: kwecc@yousq.net

Table of Contents

Our Program		Meetings	16
Philosophy and Mission	3	Conferences	16
Program Goals	3	Complaint Procedures	16
Non-Discrimination Policy	3	Custodial Agreements	16
Hours of Operation	3	Dual Parent Reporting	16
Classrooms	3	Mandatory Reporter	16
Child/Staff Ratios	4		
Curriculum	4	Health and Safety	
Curriculum Goals	4	Tobacco, Drugs, Alcohol	17
Outside Services	4	Weapons	17
Staff Training Requirements	5	Chemical Right to Know	17
Access Policy	5	Accidents/Incidents	17
Arrival/Departure	6	First Aid Kit	17
Daily Schedule	7	Injury Policy	17
Dress Code	7	Handwashing	18
Supplies	7	Medical Records	18
Rest Time	8	Immunization Requirements	19
Safe Sleep Policy	8	Illness Policy	19
Diapering/Toileting	8	Childhood Illness Guidelines	20
Discipline Policy	9	Communicable Disease	21
Biting Policy	9	Emergency Authorization	21
Meals	10	Medication Policy	22
Breastfeeding	11	Sunscreen Policy	22
Bottle Policy	11		
Field Trip Policy	11	Emergency Procedures	
Withdrawal/Discharge	12	Evacuation	23
		Blizzard/Severe Weather	23
Enrollment, Admissions, Fees		Fire	23
Enrollment Guidelines	13	Tornado	23
Care Definitions	13	Structural Damage	23
Family Orientation	13	Intruders	23
Schedules	14	Intoxicated Parent	23
Billing	14	Lock Down	24
Fees	15	Lost/Abducted Children	24
		Power Failure	24
Parent Involvement		Chemical Spills	24
Communication	15	Drinking Water Safety	24
Visiting	15	Radon Testing	24
		Covid-19 Policy	25

Our Program

Philosophy and Mission

The mission of the Key West Early Childhood Center is to provide a safe, nurturing environment to young children. We strive to develop their cognitive, social/emotional, physical, language and aesthetic skills. Through guidance and instruction, our goal is to help children grow into caring responsible individuals and lifelong learners.

Program Goals

Our center believes that a powerful education begins with collaboration between home and school. Families and children will be treated with love and understanding, with the goal of building trust and mutual respect. Every child in the center's care should feel loved, appreciated, and valued for their individuality. The center will strive to provide experiences rooted in individual expression, creativity, and curiosity that foster development of language, social emotional and cognitive skills. It is our goal that children will establish confidence, self-worth, and a lifelong love of learning while in our program.

Notice of Non-discrimination

Key West Early Childhood Center is an equal opportunity educational institution. No person at Key West Early Childhood Center shall, on the grounds of: race, color, age, gender, national origin or physical disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity sponsored by this child care center.

Hours of Operation

Operating hours are Monday-Friday 6:30am-5:30pm, with the exception of specific federal holidays (New Year's Day-or designated day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Day after Thanksgiving, Christmas Eve, Christmas Day or designated day.

Weather Related Closure

If the center were to close due to severe weather, parents will be notified via text message, email, and/or local radio and TV stations. If the center needed to close early, parents would be notified immediately via text, email, and/or telephone call and should arrive within 30 minutes to pick up their children. If conditions would be such that travel would be dangerous or impossible, parents and children shall remain at the center until travel becomes safe.

Classrooms

Key West Early Childhood Center consists of 7 classrooms. Each classroom has its own daily schedule and routine. For specific information about a classroom, please see the director or your child's teacher.

Infant Room: Ages 0-12 months

Transition Room: Ages 10-18 months

Toddler Room: Ages 18-30 months

Two Year Old Room: Children may begin on or after their 2nd birthday

Three Year Old Room: Children may begin on or after their 3rd birthday

Four Year Old Preschool: Iowa residents who are 4 years old by September 15th may enroll in the Statewide Voluntary Preschool Program (SWVPP).

Overflow classroom: Used for school age children and/or additional preschool classes as needed

Children are placed in classrooms based upon age as well as developmental needs. Classroom transitions are at the discretion of the director.

Staff/Child Ratios

Key West Early Childhood Center provides care for children birth through 10 years old. The center follows DHS mandated ratios at all times, which are as follows: Infants/Toddlers 1:4, Two Year Olds 1:6, Three Year Olds 1:8, Four Year Olds 1:12 (1:10 during SWVPP hours), Five and older 1:15.

Curriculum

The Creative Curriculum for Early Childhood is the curriculum used throughout the center. This curriculum is endorsed by the Iowa Department of Education and used throughout the Dubuque Community School District. The philosophy behind the curriculum is that young children learn best by doing. Learning isn't just repeating what someone else says: it requires active thinking and experimenting to find out how things work and to learn first-hand about the world we live in. We're teaching them *how* to learn, not just in preschool, but all through their lives. The flexible lesson structure specifically develops critical early learning skills, oral language, listening comprehension, vocabulary, phonological awareness, print awareness and alphabet knowledge as well as teaches early mathematics skills. Group activities and learning centers complete the program's comprehensive approach, addressing social and emotional development, motor skills, science, social studies, music, and art.

Curriculum Goals

Children will develop:

- a positive self-concept, appropriate self-control, and sense of belonging
- curiosity about world, confidence as a learner, creativity and imagination and personal initiative
- relationships of mutual trust and respect with adults and peers, understand perspectives of others, and negotiate and apply rules of group living
- respect for social and cultural diversity for community and social roles
- appreciation for fine arts, humanities and sciences
- knowledge about the care of their bodies and maintain a desirable level of health and fitness
- use of language to effectively communicate through reading, writing, listening, and speaking
- ideas and feelings through creative play, drama, dance and movement, music, art and construction
- critical thinking, reason, and solve problems
- understanding of relationships among objects, people and events (i.e. classifying, ordering, numbers)
- knowledge of the physical world, manipulate objects for desired effects
- competence in management of their bodies using both gross and fine motor skill

Outside Services

Should the need arise, students enrolled in KWECC have access to a variety of special services. Our center has access to the Keystone Area Education Agency, which includes specialists in speech, audiology, and cognitive development. The center supports these as well as additional approved outside services by allowing the providers access to our program space to observe and work with children.

Reasonable Accommodation

In order to provide quality and continuity of care, the center should be notified of any special services or educational plans that are in place for a child. The center will make any and all reasonable accommodations to help each child in our care find success.

Staff

Key West Early Childhood Center employs qualified, caring staff members. Prior to employment, all employees must be declared healthy and fit to perform all necessary job duties by a physician and cleared through state and national background checks. Upon hire, each staff member will receive on the job training regarding his/her specific duties. Within the first 90 days of employment, all staff members must complete training in: CPR, First Aid, Universal Precautions, Mandatory Reporting of Child Abuse, and the Iowa Childcare Essentials. These trainings must be kept up to date throughout the staff member's employment. Additionally, each staff will complete continuing education training annually as required by the Department of Human Services.

Volunteer Policy

All volunteers must be approved by the Director and are required to follow center guidelines and procedures. Behavior which in any way jeopardizes the welfare of the children or interrupts the program will not be permitted. Volunteers will be always supervised by center staff. No volunteer will be given caretaking responsibilities for any child.

Access Policy

Key West Early Childhood Center has the responsibility of keeping all children within the center safe. As such, the following policy will be followed regarding access to the children while in the center's care.

1. Only those who are employed by the center and have been approved through necessary background checks will have unrestricted access to children. "Unrestricted Access" means being left alone with and/or responsible for the care of a child.
2. Persons who do not have unrestricted access will always be under the direct supervision of a paid staff member and will not be allowed to assume any childcare responsibilities. The primary responsibility of supervision and monitoring will be assumed by the classroom teacher or other designated staff members.
3. KWECC staff will approach unknown persons on the premises and determine the purpose of their presence. If staff is unsure about the reason, they will contact the Director or designee to get approval for the person to be on site. If it becomes a dangerous situation, staff will follow the "intruder in the center" procedure. Non-agency persons who are on the property for other reasons such as maintenance, repairs, etc. will be monitored by paid staff and will not be allowed to interact with the children on premise.
4. A sex offender who has been convicted of a sex offense against a minor (even if the sex offender is the parent, guardian, or custodian) who is required to register with the Iowa sex offender registry (Iowa Code 692A):
 - a. Shall not operate, manage, be employed by, or act as a contractor or volunteer at the childcare center.
 - b. Shall not be on the property of the childcare center without the written permission of the center director, except for the time reasonably necessary to transport the offender's own minor child or ward to and from the center.

- i. The center director is not obligated to provide written permission and must consult with their DHS licensing consultant first.
- ii. If written permission is granted it shall include the conditions under which the sex offender may be present, including:
 1. The precise location in the center where the sex offender may be present.
 2. The reason for the sex offender's presence at the facility.
 3. The duration of the sex offender's presence.
 4. Description of how the center staff will supervise the sex offender to ensure that the sex offender is not left alone with a child.
 5. The written permission shall be signed and dated by the director and sex offender and kept on file for review by the center licensing consultant.

Arrival/Departure

Arrival

The center opens at 6:30am. No children will be allowed entrance to the building prior to 6:30am. Upon arrival, parents are responsible for bringing their children into the center. Parents are never to drop a child off and allow him or her to come into the center or classroom unattended. Children should wash their hands upon entering the classroom before joining in activities.

Departure/Pick-up

Children will only be released to parent/guardian and persons listed on the authorized pick-up form. If someone other than the parent/guardian will be picking up a child, the center must be notified prior to pick up time. All authorized pick-up persons must be at least 16 years of age.

If you are going to be later than your scheduled pick-up time, you must call as soon as possible to notify the staff. Additional billing charges may apply for additional hours. Please reference the rate sheet for billing information. The center closes at 5:30pm. In the event that a child is left at the center past closing, the staff will attempt to contact the child's parent(s). If a parent cannot be reached within 10 minutes, the staff will call the emergency contacts on file. If a parent or emergency contact cannot be reached within 30 minutes, Child Protective Services will be called. All late pick-ups (past 5:30pm) are subject to an additional fee, as outlined in the rate sheet.

Checking In/Checking Out

The center uses a computer management system to keep track of children's attendance. Parents are required to check their children in and out each day. Any missed punches should be reported to a staff member as soon as possible. Please do not allow children to use the check in computer.

Daily Schedule

All classroom schedules are created according to the developmental stages of children and are subject to change based upon daily needs of children, weather, or special activities. The following is a sample schedule. Each teacher has a schedule posted in the classroom.

6:30-8:00am: Drop off, manipulatives, tabletop activities
8:00-8:30am Toileting/Diapering, Hand washing
8:30-8:45am Morning meeting: songs, finger plays, letters, numbers, etc.
8:45-9:00am Morning Snack
9:00-9:30am Music and Movement
9:30-10:45am Indoor Play: Centers, art activities, sensory play
10:45-10:50am Story Time: Teacher led book, flashcards, etc.
10:50-11:25am Outdoor Play: Sensory experiences, balls, bikes, stroller rides
11:30-12:00pm Hand washing, Lunch
12:00-12:30pm Toileting/Diapering, Hand washing
12:30-2:30pm Rest Time Toileting/Diapering, Hand washing
2:30-3:00pm Afternoon Snack
3:00-4:00pm Outdoor Play: Sensory experiences, balls, bikes, stroller rides
4:00-4:30pm Indoor Play: Small groups, centers, art activities, sensory play, Toileting/Diapering
4:30-5:30pm stories, puzzles, manipulatives, Departures

Dress Code

We ask that you dress your child in comfortable clothing so that he or she will feel free to participate in all activities from easel painting to water play. Though we take precautions, play will sometimes get messy. Please do not send children in clothing that cannot get dirty. All infants and toddlers must wear clothing that covers the diaper.

Children who are able to walk should be sent in shoes each day. For safety reasons, all shoes must be closed toe. No flip flops will be permitted. Sneakers/rubber soled shoes are preferred, as smooth bottomed shoes are a hazard on the gym floor.

We will be playing outside daily. All children should arrive each day with seasonably appropriate outdoor clothing. In the winter, this includes snow pants, boots, hats, gloves, and a heavy coat.

Children who wear earrings should only wear stud earrings. No other jewelry, including teething necklaces/bracelets will be allowed.

All children should have at least one seasonably appropriate change of clothing at the center. All items should be labeled with the child's first and last name. The center is not responsible for any items that are not labeled.

Supplies

Each year, parents will be charged a supply fee to purchase classroom supplies for their child to use. We ask that parents provide the following, as applicable:

- Diapers
- Wipes
- Bottles
- Formula/Breast Milk
- Baby Food

- Seasonably appropriate change of clothing

Lost and Found

The lost and found is in the entryway. Articles that can be easily lost should be marked with the child's whole name rather than using initials or first name. Periodically, lost and found items are donated.

Toys/Items brought from home

Occasionally, children may be invited to bring an item from home for a classroom activity. Outside of these occasions, we ask that children do not bring toys or other items from home. The center will not be responsible for any toys or other items that become lost at the center.

Rest Time

Each classroom (excluding infants) will have rest time every afternoon following lunch. Children will be encouraged but not required to sleep. For children who do not sleep, after a period of rest a quiet toy or activity will be offered. As children wake up, classrooms will resume afternoon activities. Blankets are provided by the center for nap time. In order to reduce the spread of illness, we ask that children do not bring items from home for rest time (pacifiers are allowed). All center bedding is laundered at least weekly.

To prevent disruption of the classroom, children may not be scheduled to arrive during naptime.

Infant sleep policy

In order to reduce the risk of SIDS (Sudden Infant Death Syndrome) in the childcare environment, and per the American Academy of Pediatrics recommendations, the following guidelines will be followed for infant sleeping in the center:

- All infants will be placed on their backs to sleep
- If a parent requests that an infant be placed in a different position, a signed physician's note stating why it is medically necessary must be provided
- Infants will not be permitted to sleep anywhere other than a crib
- All cribs will have a firm mattress with a tight-fitting sheet
- Blankets, toys, bottles, or other items will not be placed in the crib with an infant-this includes swaddling
- Sleeping infants will be checked periodically by staff members
- No sleeping infant will be left unattended
- If an infant requires something for warmth while sleeping, a "sleep sack" can be used

Diapering/Toileting

Per the Department of Human Services requirements, all children's diapers will be checked at least every two hours. At each diaper change, wipes will be used. For sanitation purposes, the center will not allow the use of cloth diapers or reusable wipes. The use of diaper creams is permitted but requires a signed medication form. The center will not use any cream that is not specifically labeled for use in the diapering area without a doctor's note. The center will not use baby powder.

Parents should note that our three and four year old classrooms do not have direct access to a bathroom in the classroom. Children are taken to the restroom at regular intervals throughout the day, as well as when they ask to

go. Due to ratio requirements, we do recommend that all children in these classes are able to use the toilet independently.

Discipline Policy

Our main objective is to develop a warm, supportive, and responsive environment in which children feel good about themselves and others while they are away from home. It is our goal to set limits and expectations for children that encourage their growth and development, while keeping them safe. It is important to treat each child as an individual in a manner which is appropriate to the child's development, activity, and general well-being. Consistency, positive reinforcement, natural consequences, and positive redirection are used at the center to shape appropriate behavior in children.

It is our expectation that children will follow directions of teachers/staff members and treat people and property with respect. Children behaving in an inappropriate manner (throwing toys, hitting, etc.) will be redirected to a different activity. For example, a child throwing blocks may be directed to an activity where he/she can throw a soft ball. If a child is in a situation in which he/she is causing self-injury, injury to others, or damage to equipment, he or she may be removed from the play area or asked to take a break from the activity that caused the conflict. The goal of redirection is to help children develop self-discipline. Discipline practices should be consistent, a logical consequence to the action of the child, and appropriate to the age and circumstances of the child.

No punishment will be used in connection to rest, food, or toileting-*ie.* a child will not be disciplined for a toileting accident or for not eating all his/her food. The center will not use any form of corporal punishment.

Parents should maintain open communication with the staff about any changes, observation, questions, or suggestions they have regarding their child. If a child has a repeated behavior that is cause for concern, the child's teacher will discuss the concern with the child's parent. The teacher may request a conference with the parent and the director. If necessary, the teacher or director may recommend services such as Keystone AEA for the child to assist in developing a behavior plan.

It is our goal for all children to find happiness and success in our center. If the center is unable to provide the level or type of care necessary for a child to succeed in our environment, the parent may be asked to remove the child.

Biting Policy

Our Perspective on Biting

Biting is a very common behavior among children birth to three years. It is important to think positively of the children who bite. If we label children as "biters", we harm children's self-perceptions. Biting is a form of communication. Biting is almost always a response to the child's needs not being met or coping with a challenge or stressor. Five broad causes of behaviors include: 1) the developmental stage of the child, 2) individual differences, 3) the environment, 4) inability to verbalize, 5) unmet emotional or physical needs- such as being over-tired or teething. Essential to preventing biting is developmentally appropriate environments including schedules, activities, routines, and transitions. It is vital that families maintain open, honest communication with center staff in order to best meet the behavioral needs of the child.

Response to Individual biting Incidents

When staff observe signs that a child might be on the verge of biting, he or she may be able to act immediately and prevent the biting behavior (e.g., distraction, redirection and/or the close physical presence of staff). If a biting incident does occur appropriate staff response will include the following:

- Teachers will address the child that bit in a short, simple, and clear way, using a firm and calm voice.
- Teachers will provide first aid care for each child that was involved in the biting incident. (Including but not limited to washing/cleaning bitten area, offering cold compress, and comforting child)
- Teachers will talk to the child who bit about different strategies s/he can use instead of biting.
- Incident reports will be written for each child.

Assess the Environment in which Bite Occurred

Children bite to fulfill a need or cope with a challenge. Rather than focusing on the child as needing 'discipline', it is the center's responsibility to observe the child and determine the child's needs. Through observation and assessment, teachers work to identify the potential causes for the challenging behavior so that further incidents can be prevented. The teacher must seek to understand the meaning of the child's behavior and discover, together with the child, more effective means for communicating.

Documentation

Incidents should be documented to assist staff with identifying patterns and preventing future incidents through possible changes to the environment and intentional teaching strategies. A confidential copy of the report will be maintained in the child's file. Parents will be provided with a copy of an incident report if their child is bitten or bites. Under no circumstances will staff members share the name of the other child involved in a biting incident with parents.

Repeated Biting Incidents

In the instance of a child who bites repeatedly, the staff and director may consult the parents to work on a plan of action for home and school to address the behavior. Under no circumstances will children in the center's care be bitten by staff or purposely by another child in retaliation, or have any material placed in their mouth to attempt to deter the biting. The plan of action will focus on what triggers the biting, and how the parents and center can work together to meet the needs of the child. Discharging a child without first addressing the underlying causes of biting behaviors and meeting the needs of the child is not an appropriate response to biting or other challenging behaviors.

Meals

A morning snack, lunch, and an afternoon snack are served at the Center. Lunch is catered each day by HyVee. Snacks are provided by the Center.

Menus follow a five-week cycle and are posted at the center. The Center follows all Child and Adult Care Food Program Guidelines for all meals and snacks.

Children arriving after mealtimes will not be served the meal. Parents should consult their child's individual classroom schedule to ensure that children arrive in time for meals.

Sample Menu

<u>Morning Snack</u>	<u>Lunch</u>	<u>Afternoon snack</u>
Graham Crackers	Spaghetti and Meatballs	Apple slices
Milk	Mixed vegetables	String Cheese
	Applesauce	Water
	Milk	

We ask that parents refrain from bringing food from home unless a substitute is medically necessary. Food allergies need to be documented by a physician before parents bring substitute food or drinks into the center. Parents wishing to bring a treat for their child's birthday should consult the child's teacher about food allergies. Treats must be store bought and individually packaged. Foods served must be a creditable food item from one of the four food groups. For the health and safety of all children **no home baked goods are allowed.** Please no cupcakes.

Infant feeding

Infants will be fed on demand according to the schedule provided by parents. Parents must provide their own bottles, milk/formula, and baby food for infants. Any food brought into the center, including bags/bottles of breast milk, must be labeled with the child's first and last name. Bottles will be sent home nightly to be washed and sanitized.

Breastfeeding Policy

Our center recognizes the importance of breast milk to a child's health and development. Mothers are welcome to come to the center to nurse their children throughout the day. Breast milk may be brought in bottles or bags. Each container must be labeled with the child's name and the date expressed. Any unused milk will be sent home nightly. Empty bottles will be sent home with parents each night to be washed and sanitized.

Bottle policy

Formula bottles, once mixed, can be refrigerated for up to 48 hours. Human milk stays good in the refrigerator for 48 hours or in the freezer for three months. Once a child drinks out of a bottle, or once a bottle is warmed, it is only good for one hour. After that hour has lapsed, the bottle will be discarded.

Field Trips and Transportation

- Field trips and guest speakers are part of the curriculum and are offered throughout the year. Examples of trips that may be taken include library, pumpkin patch, apple orchard, fire station, and veterinary clinic. Guest speakers may include: the Visiting Nurses Association, The Dubuque Humane Society and parent volunteers. Permission slips will be sent out in advance and will include the following information:
 - means of transportation
 - time and date
 - what child may need to bring
 - cost
- A child will NOT be able to go without a signed permission slip. If you choose not to have your child participate in the field trip, they will not be able to attend the center during the scheduled time of the trip.
- The following safety precautions for field trips will be implemented:
 - First aid kit will be accessible

- Extra staff will be in attendance.
 - Volunteers in attendance will have completed a background check
 - Student and staff emergency information will be on hand
 - Staff cell phone will be available
 - Staff will perform headcounts of the children at the beginning, end and throughout the trip
 - A final vehicle check will be performed to make sure all children have exited vehicle.
- Transportation Code 441IAC 109.10(12) will be followed:
As outlined in Iowa Code section 321.446, all children transported in a motor vehicle that is subject to registration, except in a bus, shall be individually secured by a safety belt, safety seat, or harness in accordance with federal motor vehicle safety standards and the manufacturer's instructions.
 - a. Children under the age of six shall be secured during transit in a federally approved child restraint system.
 - b. Children under the age of 12 shall not be in the front seating section of the vehicle.
 - c. Drivers of vehicles shall possess a valid driver's license and shall not operate while under the influence of alcohol, illegal drugs, and/or prescription or non-prescription drugs that could impair their ability to operate a motor vehicle.
 - d. Vehicles that are owned or leased by the center shall receive regular maintenance and inspection according to manufacturer-recommended guidelines for the vehicle, as well as tire maintenance and inspection.

Withdrawal

We ask that a two-week notice is provided if a parent or guardian intends to remove their child from care. Withdrawal without a two-week notice will result in the account being billed for two final weeks beyond the child's last day. If a year-end statement is requested after withdrawal, it is the caregiver's responsibility to ensure that updated contact information is on file.

Discharge

In some instances, it may become apparent that the center is unable to meet the family/caregiver's expectations and/or provide the level of care a child requires. In these instances, the director will schedule a meeting with the family/caregiver and child's teacher (if applicable.) The center will make all reasonable efforts and accommodations to resolve these issues. In the event that a resolution cannot be reached, the center reserves the right to request that the family find alternative care.

Situations that may result in discharge include but are not limited to:

- Failure of family to meet center policies
- Failure of family to pay fees as explained in handbook
- Inability of child to adjust to group setting
- A child that is a threat to other children, staff, or self.

Enrollment

Enrollment Guidelines

To enroll a child, the following must be completed and turned in a minimum of one week prior to admission:

1. A physical exam form, including a record of immunization, signed by a licensed medical doctor, doctor of osteopathy, physician's assistant, or advanced registered nurse practitioner. This excludes chiropractors.
2. Copy of birth certificate
3. Enrollment Form
4. Medical History Form
5. Sunscreen Permission Form
6. Handbook Agreement Form
7. Tuition Express Payment Form
8. Intended Schedule Form
9. Payment of Registration Fee
10. Payment of first week's tuition

Enrollment Forms

Enrollment forms MUST include the name of the child's doctor and dentist with current address and phone number where they can be reached. Any changes throughout the year, particularly changes in address or phone number of parents, should be reported to the director in writing as soon as possible. The Department of Human Services requires that all enrollment forms be updated annually.

Care Definitions

Key West Early Childhood Center has three categories of care. Full Time, Part Time, and Drop in. Children under the age of two must maintain a full time contract.

Full Time Care refers to care for 36 or more hours per week.

Part Time Care refers to care for 24-35 hours per week.

Drop-In Care refers to care on an "as needed" basis, with no regular schedule. Drop-in care is only available when the center census is low and at the discretion of the director.

New Family Orientation Procedure

When a family expresses interest in enrollment, a tour is scheduled with the director. During the tour, parents receive a tour of the center and all required paperwork, including the parent handbook. After the tour, there is an opportunity for questions with the director.

Once a family decides to enroll, all necessary paperwork must be completed and turned in prior to the child's start date. At that time, a brief meeting is scheduled with the child's teacher. This meeting allows the family to become familiar with the teacher and the child's classroom as well as provides an additional opportunity for questions to be answered.

Any family that requires assistance with completing necessary paperwork and/or translation services can notify the director. The director will assist as she is able and reach out to local resources (such as the Multicultural Center or local colleges) for translation services or other assistance as needed.

Schedules

Upon enrollment, all families will receive a master schedule form. This form is to be completed and returned prior the start of care. This schedule will establish contract hours. The contract hours determine the weekly minimum tuition charge for each child. All part time families must contract for a minimum of 24 hours per week. All full time families must contract for a minimum of 36 hours per week. Families may request to use additional hours of care beyond the weekly contract. All schedule requests must be reported by 5:00pm on Tuesday for the following week. The center will not guarantee care for any additional hours beyond the weekly contract if schedule changes are not submitted prior to the deadline. All children under two must maintain a full time contract.

Contract Changes

Contracts may be changed up to twice per year. All contract changes require a 30-day notice. Changes that would alter a child's enrollment status (ie. part time to full time) require director approval.

Reduction in Care

If reduction in care (ie. full time to part time) is desired, the family must provide a 30 day notice. If care is reduced, there is no guarantee that the child will be able to return to full time at a later date. Children under 2 must maintain full time hours.

Early Arrival/Late Pick Up

Children will not be permitted in the center prior to 6:30am. Children who are picked up after 5:30pm will be charged a late fee. The center reserves the right to terminate care for repeated late pick ups.

Billing

All childcare fees are due on the first day of service for the week, typically Monday. All families will be required to provide bank information for automatic payments from a checking or savings account. Each child will be billed for the regular contract amount. Any hours in excess of contract hours will be billed accordingly with the following week's billing. All over contract hours are billed at the part time rate.

Childcare Assistance

Our center is happy to work with agencies that provide childcare assistance. Paperwork guaranteeing payment from the subsidizing agency or program must be submitted with enrollment paperwork prior to care. If a child is enrolled without approval from the agency providing assistance, the parent will be responsible for the cost of care until the approval is received. Parents are responsible for keeping their approval current with the providing agency.

Parents who receive subsidized care are financially responsible for any costs not covered by childcare assistance. These costs include but are not limited to: activity fees and charges for any attendance outside of the approved units, including units attended if/when approval has lapsed.

Families receiving subsidized care will be required to follow all scheduling and billing policies.

Fees

Please see the rate insert for current fee amounts.

Registration Fee

A one-time registration fee of \$50 will be charged upon enrollment.

Supply Fee

Families will be billed a supply fee per child each August.

Late Payment Fee

Late fees are charged weekly on balances 14 days past due. After two concurrent late fees have been applied, service may be discontinued until balance is paid in full.

Insufficient Funds

All returned payments are subject to a processing fee.

Lunch Fees

Lunches are provided by HyVee. Parents will be responsible for the cost of lunches.

Late Pick Up Fee

Any child in the center past closing (5:30pm) will be billed a late pick-up fee.

Activity Fee

Occasionally, students will participate in activities beyond the typical classroom routine, i.e. field trips. Any fees for these activities will be charged to the family. The family will be notified of fee amounts prior to the trip.

Parental Participation

Communication

A strong educational foundation is built upon a connection and relationship between home and school. Parents are encouraged to actively participate in this relationship through regular communication with teachers and the center. All children under the age of two will receive daily communication via the ProCare App. Upon enrollment, families will receive an invitation to sign up for the app. Information shared via the app will include diapers, bottles, meals, naps, and a summary of daily activities. Parents and teachers may use the app to communicate directly as well. At the end of each day, the app will generate a summary of the day's events that a parent may elect to receive via email.

Visiting

Parents/Guardians may visit or pick up their child at any time. Throughout the year, we may invite parents or grandparents to visit our classrooms for special events. We encourage all families to participate in our programming

through visits, sharing hobbies, sharing cultural experiences, or just stopping in to read a story! A strong educational foundation is built upon a connection and relationship between home and school.

Meetings

Events may be scheduled throughout the year for parents, offering chances to become better informed about issues relating to child development, parenting, and childcare. In addition, social events will be planned to provide opportunities for families a chance to get to know each other.

Conferences

Conferences will be held each year in October and March for the Statewide Voluntary Preschool Program. This is an opportunity for families to receive formal feedback about their child's progress. We encourage all families to participate. Parents may request a conference with their child's teacher and/or the director at any time.

Complaint Procedure

It is our goal that families will always be happy with the services provided by our center. If a parent has a complaint or concern, the following procedure should be followed:

- Address the concern with the teacher that it directly pertains to, or the lead teacher in the classroom that the concern pertains to.
- If the concern is not resolved or if the parent is uncomfortable speaking to the teacher, a concern may be addressed verbally or in writing with the director. All concerns submitted in writing should include a name so that the director may follow up once the concern is received and addressed.
- The director will address the concern as he/she sees fit.

It is our goal that all concerns will be resolved in a manner that suits the needs of the child, parent, and center while still complying with all policies and procedures set forth by the Department of Human Services.

Custodial Agreements

Key West Early Childhood Center will not become involved in custodial disputes between parents. The center is unable to provide supervision for parental visits. The center is unable to deny access to parent without a court order on file. If a court order is on file at the center, the center will follow the order as it pertains to pick up and parental access.

Dual Parent Reporting

Unless otherwise decreed by a court order, information commonly made available to parents of any child will be made available to both parents. Contact information, including address and phone number of both parents should be on file at the center.

Mandatory Reporting

As outlined in the Iowa code, all providers of early childhood services are mandated by law to report any suspected cases of sexual abuse, physical abuse, or neglect. Iowa law states that the preschool and childcare personnel may take, at public expense, photographs of the injured area. Any person participating in the making of, or in the investigation of, a report shall have immunity from any liability, civil or criminal, which might otherwise be imposed. In compliance with School Laws of Iowa, all employees of Key West Early Childhood Center who has a reasonable

belief that a child under the age of 18 has been abused by a person responsible for the care of the child, as defined by law, shall report the suspected abuse verbally to Department of Human Services (DHS) within 24 hours and follow the verbal report with a written report on appropriate forms. The phone number for the area Department of Human Resources is 557-8251.

Health and Safety Policies

Drugs, Alcohol, and Tobacco

Key West Early Childhood Center is a drug, alcohol, and tobacco free environment. This includes smokeless tobacco, vaping, and electronic cigarettes. This applies to the building, surrounding grounds, sidewalks, parking spaces, and any vehicles owned by the center.

Weapons

No weapon of any kind will be permitted on the grounds of Key West Early Childhood Center for any reason.

Chemical Right to Know Law

The Chemical Right to Know Law requires that all schools/early childhood centers in the nation prepare a list of chemicals that are known to be present in their buildings and to maintain material safety data sheets (MSDS) on them. The law further states that all chemicals are to be appropriately labeled, storage areas are to be posted for the hazardous chemicals, and employees that work with the chemicals are to be trained in the safe handling of these chemicals. The early childhood center is also to acquaint the local fire department with the location of hazardous chemicals in the building. If you want to know what chemicals are used in the school and where they are stored, please contact the director.

Accidents/Incident Reports

Incidents or accidents resulting in injury to a child will be reported to the parent on the day of the incident/ accident. The written report will be prepared by the staff person who observed the incident or accident and shall include a general description of the incident/accident and of the action taken, if any, by the staff at the center. Parents will receive dated reports on the day of the incident/accident. If a child is hurt more severely, the staff will call 911 or transport the child as quickly as possible to the emergency room and contact the parents.

First Aid Kits

First aid kits are available in all classrooms. When traveling to the playground, gym, or on a field trip, first aid kits are brought along. Each kit includes emergency contact information for all children.

Injury policy

Though every precaution is taken, children may occasionally become injured while in care. If a child is injured, the staff members present will perform First Aid and/or CPR in accordance with their training. The parent will be notified as soon as possible about any injury that may require further medical attention. If a child requires emergency medical treatment, medical personnel will be notified. After the child is cared for, an incident report will be completed to be given to the parent upon pick up.

Hand washing

Proper hand washing is the best defense against the spread of illness. All staff members and children will wash hands using the following procedures:

1. Wet hands
2. Apply soap
3. Scrub hands for at least 20 seconds
4. Rinse hands for at least 20 seconds
5. Dry hands using a disposable towel
6. Turn off water using towel
7. Dispose of towel in trash can

Hand washing will be done regularly by children and staff at the following times:

- Upon arrival at the center or reentry from outdoors
- When moving to a new classroom
- Immediately before eating or participating in any food service activity
- After eating
- After diapering
- Before leaving the restroom
- After wiping noses or other exposure to other bodily fluids
- Before and after use of shared sensory materials
- After handling animals
- Before and after administering non-emergency first aid

Medical Records

Prior to beginning care, all children must have a physical examination and immunization record on file at the center. Physicals must be dated no more than 12 months prior to start date and must be signed by the health care provider. Physicals done by a chiropractor do not meet this requirement. All immunizations must be up to date for the child's age and maintained throughout the child's enrollment.

Physical exams must be updated yearly and immunization records must be updated each time a child receives a new immunization. Parents are responsible for providing updated forms to the center. Children who do not have updated forms on file will not be able to attend.

School age children (Kindergarten and older) will need a physical examination from the doctor prior to initial enrollment in the center. Each year after the initial physical, the childcare center will require a statement of health status signed by the parent or legal guardian that certifies that the child is free of communicable disease and that specifies any allergies, medications, or acute or chronic conditions. The statement from the parent shall be submitted annually thereafter.

Immunizations Required for Childcare

*Partial immunization does not guarantee protection. Children should be fully immunized

2 months old	First DTP (Diphtheria-Tetanus-Pertussis)	15 months old	MMR (Measles-Mumps-Rubella)
	First Polio (Oral Trivalent)		Fourth DTP
	First Haemophilus B (HIB)		Third Polio
	First Pneumococcal		Third Pneumococcal
4 months old	Second DTP	18 months old	Fourth HIB
	Second Polio	24 months old	Varicella (chicken pox)
	Second HIB	4-6 years old	Fourth Pneumococcal
	Second Pneumococcal		Second MMR
6 months old	Third DTP		Fifth DTP
	Third HIB		

Illness Policy

Parents are responsible for notifying the center of any changes to a child's health status, include food allergies/sensitivities, exposure or contraction of communicable diseases, and diagnoses of illnesses or disease that will affect the care of the child at the center.

If a child becomes ill while at the center, parents will be notified immediately. Ill children will be isolated from the group and kept comfortable until the parents can arrive. In the best interest of ill children as well as to prevent the further spread of illness, we ask that parents arrange for ill children to leave as quickly as possible.

The following are symptoms that will result in a child being sent home from care:

- A fever of 100 degrees or higher (taken under arm)
- Vomiting and/or diarrhea
- Any illness or symptoms that compromise staff member's ability to care for other children

A child who is sent home from care may NOT return to the center the following day and must remain home additional days, if needed, until symptom free and without fever reducing medication for at least 24 hours. The center reserves the right to require a doctor's release prior to a child's return to care.

Please note that your pediatrician recommendation for return to care may vary from the childcare center policy. In this instance, the childcare center policy will be followed (for at least a minimum requirement of exclusion but may be longer if required by pediatrician or public health requirements). Group care varies from individual home care, and though a child may appear healthy, the center has a responsibility to do as much as possible to prevent the spread of illness to other children. Exceptions to center policies will not be made.

Common Childhood Illness Guidelines

Illness/Symptom	Existing Symptoms	Should the child be excluded?	Readmission when:
Cold Symptoms	-Runny/stuffy nose -Scratchy throat -Coughing -Sneezing -Watery eyes -Fever	No, unless <ul style="list-style-type: none"> ▪ Fever ▪ Child has difficulty breathing ▪ Child has blood red or purple rash not associated with injury ▪ The child meets other exclusion criteria 	-Exclusion criteria are resolved Note: A child must be fever free for 24 hours without fever reducing medication before return to the center
Cough/Croup	-Dry or wet cough -Runny nose (clear, white, yellow-green) -Sore throat -Throat irritation -Hoarse voice, barking cough	No, unless <ul style="list-style-type: none"> ▪ Severe cough - cannot participate ▪ Rapid and/or difficulty breathing ▪ Cyanosis (i.e., blue color of skin or mucous membranes) 	-Exclusion criteria are resolved -If child has Pertussis, must be excluded for 5 days after beginning of antibiotics
Diarrhea	-Loose stool not associated with medication, breast feeding, or change in diet	Yes, if <ul style="list-style-type: none"> ▪ Two or more instances of diarrhea ▪ Accompanied by other exclusion criteria ▪ Known illness in center 	-Diarrhea has stopped for 24 hours -Cleared by a medical professional to return in cases of diagnosed infection
Earache/Ear Infection	-Fever -Pain or irritability -Difficulty hearing -"Blocked" ears -Drainage	No, unless <ul style="list-style-type: none"> ▪ Unable to participate ▪ Care would compromise staff's ability to care for other children ▪ Accompanied by other exclusion criteria 	-Exclusion criteria are resolved
Fever	-Flushed, tired, irritable, decreased activity, feels hot to the touch. -Temperature considered elevated, leading to concern of possible disease. 100 degrees auxiliary (arm pit)	Yes, if <ul style="list-style-type: none"> ▪ Fever is above 100 degrees ▪ Unable to participate ▪ Care would compromise staff's ability to care for other children ▪ Immunization received the previous day ▪ Infant under 4 months with elevated temperature, even if no behavior changes 	-Child is fever free (without medication) for 24 hours -Able to participate Note: Fever reducing medications should NOT be given prior to bringing a child to the Center, as they may artificially cover exclusion symptoms
Illness/Symptom	Existing Symptoms	Should the child be excluded?	Readmission when:
Hand, Foot, & Mouth Disease	-White patches on tongue & cheeks -Pain with swallowing	No, unless <ul style="list-style-type: none"> ▪ Drooling steadily related to mouth sores 	-Child is on medication (if indicated)

	-small blisters on hands and feet	<ul style="list-style-type: none"> ▪ Unable to participate ▪ Fever 	-Exclusion criteria are resolved
Pink Eye	-Watery, itchy eyes -yellow or green drainage -swollen, red/pink eyelid -pain in eye -eye may be matted shut after sleeping	Yes, if <ul style="list-style-type: none"> ▪ Infection is bacterial ▪ Medical professional requires exclusion Caring for the child would compromise staff's ability to care for other children	-Child is on eye drops for 24 hours -Medical professional clears child for return
Rash	-Skin may show similar findings with many different causes. Determining cause of rash requires a competent health professional that considers information other than just how the rash looks	No, unless <ul style="list-style-type: none"> ▪ Rash with behavior change or fever ▪ Has oozing/open wound or infected sores ▪ Has bruising not associated with injury ▪ Has joint pain and rash Unable to participate	-Child is on medication (if indicated) -Exclusion criteria are resolved -Able to participate Note: We may ask for health professional's note if rash does not resolve
Sore/Strep throat	-Verbal children will complain of sore throat. Younger children may be irritable with decreased appetite and increased drooling. May see white patches on sides of throat	Yes, if <ul style="list-style-type: none"> ▪ Inability to swallow ▪ Excessive drooling with breathing difficulty ▪ Fever ▪ The child meets other exclusion requirements 	-Able to swallow -Able to participate -On medication for 24 hours (if indicated) -Exclusion criteria are resolved
Vomiting	-Vomiting -Stomachache -Cramping	Yes, if <ul style="list-style-type: none"> ▪ Vomiting not associated with coughing/choking ▪ Vomiting and fever ▪ Vomit that appears green/bloody ▪ No urine output for 8 hours ▪ Recent history of head injury 	-Vomiting ends for at least 24 hours

Communicable Diseases

If a child is diagnosed with a communicable disease, parents should notify the center immediately so that all exposed persons may be notified. A posting will be placed near the main entrance for any communicable disease that is identified in the center. Confidentiality will be maintained in all instances of illness.

The center will follow Iowa Department of Health guidelines for all communicable diseases. In the event of an illness outbreak, the center will work directly with the Childcare Nurse Consultant and local health officials to determine protocols for cleaning and guidelines for ill children and staff to return to care.

Emergency Authorization

All children must have updated emergency contact information, including doctor and dentist on file. It is important that this form is kept current, as it will be used as reference to secure care and notify the parent if there is an emergency. If the child requires transport to a health facility, emergency medical personnel will be summoned. Parents will be notified as soon as possible of all steps taken to secure emergency medical treatment for the child. The parent is responsible for all fees associated with emergency medical care.

Medication Policy

In some circumstances, a child may need to be given medication while in care. The center strongly encourages parents to avoid sending medication to the center if possible. In the instance a child needs to be given a medication, the parent must notify the office via telephone or email prior to bringing the medication to the center. Medication will not be given without prior director approval. All medication must be in the original container. If the medication is prescription, the label must be intact. Medication will be locked up and kept out of reach of children. All medication given at the center, including sunscreen, diaper cream, and lotion, requires a medication form to be signed by the parent. The medication form will include:

- Child's Name
- Medication name and reason given
- Dosage and time of day to be given
- A start date and end date for medication (not to exceed 30 days)

All medication given at the center will require a doctor's authorization. In the instance of prescription medications, the prescription label will serve as doctor's authorization. The center will not administer medications for discomfort or fever (ie. ibuprofen/acetaminophen, teething drops, gas drops) without a doctor's authorization. The authorization must include the medication, dose, reason given, time to be given, and duration for medication. The parent is responsible for obtaining this authorization.

The center will administer over the counter topical items without a doctor's authorization. This includes diaper cream, lotions, sunscreen, and lip balm. These items require a medication form signed by the parent.

The center will not:

- Give medication for any purpose or using any method not listed on the label
- Give medication to anyone other than the person prescribed
- Administer or store expired medication

Emergency/Rescue Medications/Chronic Disease

Emergency/rescue medications and medications for chronic disease (such as diabetes) may be used at the center. In addition to a medication form, these medications require an action plan reviewed and signed by the parent and the child's physician. The center will not accept children with emergency/rescue medication or medications required for chronic disease until the teachers and/or director have been trained on use the medication and a care plan is on file. The center will work with the family, the child physician, and the Childcare Nurse Consultant to ensure that care plans are accurately developed and executed.

Sunscreen Policy

Overexposure to the sun poses a great risk, especially to children. As such, all children at the center will be required to have sunscreen applied before outdoor play, particularly in the months of April-October. The center will provide sunscreen. If a child has an allergy that requires the use of a different sunscreen or no sunscreen at all, a doctor's note must be presented, along with an alternate sunscreen.

Emergency Procedures

Evacuation

If we need to evacuate our building in case of an emergency, we will go to the St. Joseph's Key West Church basement (Primary) Phone # 582-3774 or Key West Fire Station Phone # 557-9556(Secondary).

Blizzard/Severe Weather

If the center were to close for a blizzard or other severe weather, parents will be notified via local radio and TV stations. If the center needed to close early, parents would be notified immediately via email and/or telephone call from the director and should arrive within 30 minutes to get their children. If conditions would be such that travel would be dangerous or impossible, parents and children shall remain at the center until travel becomes safe.

Fire

Fire drills are practiced monthly at the center to prepare staff and children for an emergency. In the event of a fire, children and staff will evacuate using the quickest and safest evacuation route. Children will evacuate on foot, in an evacuation crib, or by being carried. Teachers will be responsible for taking first aid kits, which include emergency contact information for all families. All staff and children will meet at the St. Joe's church (immediately next to the center). The director or his/her designee will conduct a head count. Once all children are accounted for, emergency contacts will be notified.

Tornado

Tornado drills are practiced monthly at the center to prepare children and staff for an emergency. In the event of a tornado warning, all children, staff, and any others present in the building will be notified by the center weather radio. Occupants will seek shelter in the bathrooms of the center. Children staff, and all building occupants will remain in the bathroom until the emergency services announce an all clear. In the event of structural damage, the children and staff will relocate to the primary or secondary relocation site. Parents will be notified as soon as possible and given information regarding pick up.

Structural Damage

In case of structural damage, the children will be taken out of the building to the primary relocation site immediately. We will proceed to call 911. We will not return to the center until the building is declared safe. Parents will be notified as soon as possible.

Intruders

Any unfamiliar persons arriving at the center will be asked for identification. No child will be released to any persons not on his/her pick up list. If a person enters that is a safety risk or concern for staff or children, the person will be asked to leave. The police will be notified if any person enters that poses a threat to the children or employees.

Intoxicated Parent

If a parent arrives to pick up a child and appears to be under the influence of drugs or alcohol, the staff members will discourage the parent from leaving the center with the child. One of the child's emergency contacts will be called to provide transportation. If this agreement cannot be reached by the staff member and the parent, the police will be notified.

Lock Down

Upon direction from the police department, it may be necessary to lock down the center for the safety of the children. If the building is placed on lockdown, all doors will be closed and locked, blinds closed, and lights turned off. The teachers will keep children away from doors and windows. No one will be allowed entry or to exit the building. The building will remain on lockdown until given the "all clear" by the police.

Power Failure

If the power would go out at the center, children will be kept calm and comfortable and daily activities will proceed as much as possible. The building is equipped with emergency lights and all classrooms have flashlights, with staff aware of their location. If necessary, the power company will be notified. Unless the power failure is accompanied by an emergency that would require evacuation, all children and staff will remain in the building. If evacuation is necessary, staff will follow the evacuation procedure, looking for and avoiding any downed power lines. If the power failure would cause a safety risk for the children, the center will close, and parents will be notified via telephone by the director or his/her designee.

Lost or Abducted Children

In the unlikely event that a child would be lost while in our program, the following steps will be taken:

- Staff will conduct a search of the immediate area.
- Staff will notify the childcare director.
- The childcare director will conduct a complete search of the childcare center or the field trip area.
- The director will proceed with a search of the immediate surrounding areas and perimeter of the childcare center.
- If the missing person is not located, the director will notify EMS personnel.
- The director will implement the emergency call list and contact the parent/guardian.
- An incident report will be completed.

Chemical Spill

If there is a minor chemical spill of a non-hazardous substance, the area will be blocked off and cleaned up immediately. However, if it is a serious or hazardous chemical spill, the children will be removed from the building, emergency services will be notified. If there would be a chemical spill within the community, we will follow the Dubuque City Crisis Management Plan.

Drinking Water Safety

Key West Early Childhood Center is not on city water. As a result, water quality samples are taken and tested monthly.

Radon Testing

Testing will be done every two years according to the DHS regulations for childcare centers and preschools.

Covid-19 Policy

For reference, you are considered a close contact to someone who tests positive for Covid-19 if you are within 6 feet or less for a period of 15 minutes or more within that person's contagious period. The contagious period begins 48 hours BEFORE the onset of symptoms.

If a child or staff member tests positive for Covid-19

Those who are exposed:

- All exposed children are recommended to quarantine for a period of 10 days
- Monitor for symptoms of Covid-19. If symptoms develop the individual should be tested
- Quarantine may end after 10 days with no symptoms (no test required.) Quarantine may end sooner if the exposed person receives a negative test result no sooner than 7 days after exposure.
- Asymptomatic persons who are vaccinated and wearing masks do not need to quarantine

Those who test positive

- Must quarantine for a period of at least 10 days from onset of symptoms (or positive test if asymptomatic)
- May return to work/care after 10 days have passed AND fever free without medication AND symptoms are improving

If someone in your home (other than the child who attends care) tests positive for Covid-19

- Your child will need to be excluded from care and should quarantine away from the individual who has tested positive
- Quarantine may end and child may return to care after 10 days with no symptoms (no test required.) Quarantine may end sooner if the child receives a negative test result no sooner than 7 days after exposure.
- If the child is unable to quarantine away from the covid positive family member, the child may return after 10 days with a negative test. The test should be taken the day prior to the child's return. This only applies when a child has not developed any symptoms. If the child develops symptoms after return to care, he/she will need to quarantine for an additional 5 days and have a negative test within 24 hours prior to return to care.

Any child with two or more symptoms of Covid 19 will be excluded from care until an alternative diagnosis is received and/or the child has a negative Covid-19 test. A copy of the negative test and/or doctor's note indicating alternative diagnosis must be provided. As always, all children will need to be symptom free without medication for at least 24 hours prior to return to care.

Symptoms of Covid-19 include:

- Fever >100.4
- Diarrhea
- Cough

- Difficulty breathing
- Sore throat
- Headache
- Loss of taste and/or smell

Please note that these guidelines reflect current CDC, DHS, and IDPH recommendations. We will continue to monitor the illness levels at our center as well as keep up to date with any changes in recommendations and edit this protocol accordingly.