



# Early Childhood Education Program

## FAMILY HANDBOOK

*Updated July 2024*

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## A Children's Place Day Care Center (ACP)

### WELCOME

Dear Family,

Welcome to A Children's Place Daycare Center! We are pleased that you have chosen ACP to care for your child! In November 1971, a member of the congregation of the First Presbyterian Church recognized the need for daycare services, and ACP was started as a non-profit, non-sectarian child day care center. For more than 40 years, ACP has been committed to providing the highest quality programming for the children and families in our community.

The curriculum at ACP is developmentally appropriate which includes play-based, active, hands-on learning. For school success children must develop physically, mentally, emotionally, socially, and creatively. For the young child play and work involve the same actions: interacting with people, manipulating objects, and making discoveries that help make sense of the world. Learning happens naturally through play. Our program offers a mixture of teacher-planned and children's choice activities. The curriculum is flexible to meet diverse needs and to respect and welcome differences.

Parents and guardians are always welcome at our center. Your partnership with your child's teachers will help strengthen your child's learning. We encourage you to get involved by sharing your skills and talents, volunteering or offering to be a guest reader.

Hopefully, all of your questions will be answered in this handbook, but if they aren't, please don't hesitate to ask. We want this to be a good experience for YOU and your CHILD!

Thank you for choosing A Children's Place Day Care Center. We look forward to providing your child with a caring and enriching environment.

Sincerely,

Krista Hansen  
Director  
716-487-2238

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## **ABOUT US**

### ***Philosophy and Mission***

ACP provides safe, healthy, and happy childcare for children ages six weeks to five years of age without regard to race, religious affiliation, or socio-economic status. In this environment, we shall nurture social, physical, cognitive, and emotional development; cultivate learning and creative expression; and meet the individual needs of each child and his or her family.

The First Presbyterian Church provides a home-like atmosphere for the children through its generous contribution of facilities. It is the responsibility of the staff to maintain the facility as a sanitary, safe, and comfortable place for the care of children.

### ***Certification***

ACP is licensed through The Office of Children and Family Services

ACP is licensed for children ages 6-weeks to 5 years.

ACP is licensed for 8 infants, 24 toddlers, and 74 preschoolers.

### ***Classrooms***

Angelfish: 6-weeks to 18 months (Infants)

Clownfish: 18 months to 27 months (younger toddlers)

Jellyfish: 29 months to 36 months (older toddlers)

Butterflyfish: 3 years to 5 years (Preschool)

Sunfish: 3 years to 5 years (Wrap Care)

Rainbowfish: 3 year-olds (UPK 3 through Jamestown Public Schools)

Starfish: 4 year-olds (UPK 4 through Jamestown Public Schools)

### ***Definition of Family***

In this handbook we refer to family as a parent, legal guardian, sponsor or anyone else who provides for the well-being, best-interest and responsibility of the child in our care.

### ***Hours of Operation***

Child care services are provided from 7:30 AM to 5:30 PM, Monday through Friday.

UPK 3 and 4 hours are 9:00 AM to 2:00 PM

### ***Holidays***

We are closed for certain holidays:

New Year's Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and the Friday after Thanksgiving, and Christmas Day.

If the holiday falls on a Saturday, the center will be closed the preceding Friday. If the holiday falls on a Sunday, the center will be closed on the following Monday.

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There will be early closings on Christmas Eve and New Year's Eve. The center will close at 3:30. The center will take inventory of the need for care on Christmas Eve and New Year's Eve. If there is not a great need for care, the center may choose to close for Christmas Eve and New Year's Eve.

Our UPK programs follow the Jamestown Public School calendar. Wrap care is available at an additional cost for our UPK students.

### ***Admission & Enrollment***

All admission and enrollment forms must be completed and enrollment fee and first tuition payment paid prior to your child's first day of attendance.

An enrollment fee of \$50.00 is due at the time of enrollment. This fee is non-refundable.

To hold a spot for your child for future enrollment, the enrollment fee and first week's tuition payment is required. This is a non-refundable holding fee that will be credited to your account and used for the first week of attendance.

Based on the availability and openings, our facility admits children from 6-weeks to 5-years of age.

Children are admitted without regard to race culture, sex, religion, national origin, or disability. We do not discriminate on the basis of special needs as long as a safe, supportive environment can be provided.

### ***Inclusion***

ACP believes that children of all ability levels are entitled to the same opportunities for participation, acceptance and belonging in child care. We will make every reasonable accommodation to encourage full and active participation of all children in our program based on his/her individual capabilities and needs.

### ***Non-Discrimination***

At ACP equal educational opportunities are available for all children, without regard to race, color, creed, national origin, gender, age, ethnicity, religion, disability, or parent/provider political beliefs, marital status, sexual orientation or special needs, or any other consideration made unlawful by federal, state or local laws. Educational programs are designed to meet the varying needs of all students.

### ***Confidentiality***

Unless we receive your written consent, information regarding your child will not be released with the exception of that required by our regulatory and partnering agencies. All records concerning children at our program are confidential.

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### **Staff Qualifications**

Our teachers are hired in compliance with the state requirements and qualifications as a base minimum. In accordance with Regulation 418-1.13: Staff must be mature, of good character, and possess suitable personal qualifications. Staff must be in good physical and mental health and have the energy and emotional stability necessary to fulfill the responsibilities of their positions.

Every potential staff member undergoes a federal and state background check, provides a medical statement, and completes a 5-hour Health and Safety training and Mandated Reporter Training.

At the beginning of employment, the Director will provide an orientation session that will include the following: Review that all required documents have been submitted, review of the staff handbook, health care plan, NY State Regulations for day care centers, and training requirements. (Regulation 418-1.15)

All teachers and assistant teachers complete 30 hours of professional development every two years, with 15 hours within the first six months of employment. The trainings address all topics or subject matters required by state and federal law. The required topics are: Principles of childhood development, nutrition and health needs of children, child care program development, safety and security procedures, business record maintenance and management, child abuse and maltreatment identification and prevention, statues and regulations pertaining to child care, and ACES trauma and resiliency.

We strongly discourage families from entering into employment arrangements with staff (i.e. babysitting). Any arrangement between families and our caregivers outside the programs and services we offer is a private matter, not connected or sanctioned by A Children’s Place.

### **Child to Staff Ratios**

Children are supervised at all times. All caregivers receive scheduled breaks which reduce fatigue and help to ensure alertness.

We maintain the following standards for child to staff ratios:

<b>Age</b>	<b>Child to Staff</b>	<b>Maximum Group Size</b>
6-weeks- 18 mo.	<u>4 to 1</u>	<u>8</u>
18 mo-36 mo.	<u>5 to 1</u>	<u>12</u>
3 year-olds	<u>7 to 1</u>	<u>18</u>
4 year-olds	<u>8 to 1</u>	<u>21</u>
5 year-olds	<u>9 to 1</u>	<u>24</u>

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## *Communication & Family Partnership*

**Daily Communications.** You may receive daily notes from center staff will keep you informed about your child's activities and experiences at the center. Notes will be placed into your child's cubby at the end of the day.

**Bulletin Boards.** Located throughout the center, bulletin boards provide center news, upcoming events, faculty changes, holiday closing dates, announcements, etc.

**Newsletters.** Monthly newsletters provide center news, events, announcements, etc. These newsletters are available at the sign-in/sign-out desk for your taking.

**Email.** We encourage you to provide an email address that you use regularly so that we may send you announcements, event invitations, newsletters and general updates.

**The Remind App.** Parents are added to the Remind App at the time of enrollment. The remind app enables you to text the director and classroom teacher throughout the day. You can use this to let the center know your child will be late, absent, picked up early, and check in on your child. The center will use the app to let you know of any center updates, policy updates, closures, and may use the app to contact you about your child being ill.

**Family Visits.** Family participation is encouraged. Visit our classrooms, volunteer, come along on a field trip, or eat a meal with your child. Signing in is required for the safety and protection of our children. Each visitor must sign in while on premises and sign-out upon leaving

**Conferences.** Family & teacher conferences can be requested by both the parents or the center. During these conferences, we will discuss your child's strengths, likes and dislikes, and styles of learning. We will work together to set goals for your child's growth and development. You may request additional conferences regarding your child's progress at any time. We encourage you to communicate any concerns.

## *Open Door Policy*

We are delighted to have family members participate in our program. Parents/Guardians are welcome to visit the program any time during regular program hours. The infant room welcomes parents/guardians to nurse or feed their infants.

Open Door Policy does not mean the doors will be unlocked. For the safety and protection of the children, external doors will be kept locked at all times.

Our team will always do their best to speak with parents/guardians. Since staff days are devoted to caring for children, it is usually not feasible to have a long discussion during regular program hours. If a situation requires a longer discussion, kindly arrange for an appointment.

## *Publicity*

Occasionally, photos will be taken of the children at the center for use within the center or on our website. Written permission will be obtained prior to use of photographs.



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Unless the family indicates that they want their child to participate, we will not use pictures and names of children for publicity.

## **CURRICULA & LEARNING**

### ***Learning Environment***

We provide a rich learning environment with curricula that are developmentally appropriate to the specific ages in each classroom. We have a flexible day routine that allows children to advance at their own pace. We strongly believe that learning happens through play. Learning and exploring are hands-on and are facilitated through interest areas. Our program is designed to enhance children's development in the following areas: creativity, self-expression, decision-making, problem-solving, responsibility, independence, and reasoning. We encourage openness to that which is different from us, and the ability to work and play with others.

### ***Curricula & Assessment***

ACP uses the Creative Curriculum. The Creative Curriculum includes developmentally appropriate goals and objectives for children within four main categories of interest: social/emotional, physical, cognitive and language. Within this stage, children learn how to make friends, how to have group interactions and how to follow rules. As part of this curriculum, we gather information about each child's developmental abilities and evaluate progress so we can modify and adjust what we are doing in our classroom so as to deliver the best individualized instruction for each child. This evaluation is communicated to families periodically during the school year using various formal and informal tools, forms, and resources.

For information about your child's day, please see copies of daily schedules and lessons plans posted in each classroom.

### ***Developmental Screening***

ACP uses the Ages and Stages Questionnaire (ASQ) and the Ages and Stages Questionnaire: Social Emotional (ASQ:SE) The ASQ and ASQ:SE is a teacher or parent-completed questionnaire that may be used as a general developmental screening tool. In most cases, these questionnaires accurately identify young children who are in need of further evaluation to determine if they are eligible for early intervention services. To coincide with curriculum-based assessment(s), we monitor each child's achievement of developmental milestones, share observations with parents/guardians, and provide resource information as needed for further screenings, evaluations, and early intervention and treatment. The developmental screening process is a collaborative one, involving parents/guardians and done in conjunction with the child's primary care provider and health, education, and early intervention consultants. Developmental screening is conducted with written consent from the child's parent/guardian(s).

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### ***Outings and Field Trips***

In accordance with the regulations set forth by The Office of Children and Family Services, we conduct supervised outdoor play and/or walking trips around the neighborhood every day for all children, except during inclement or extreme weather. Children are accounted for at all times. A permission statement for participation in walking trips is included in the enrollment package.

### ***Transitions***

Your child's transition in child care should be a positive and exciting learning adventure. We will work with you and your child to ensure the smoothest possible transition occurs as new routines and new people are introduced.

#### ***Transition from home to center***

Prior to your child's first day, you will have an opportunity to tour the center, meet with your child's peers and teachers, and communicate any anticipated concerns. At this time please share the best communication methods that the teacher may use to reach you.

#### ***Transition between learning programs***

Children are transitioned to the next program based on age, developmental readiness, state licensing requirements, and space availability. During the transition, current and future teachers will meet with you to propose a plan to introduce your child into the new program.

### ***Electronic Media***

Our normal daily routine does not include electronic media (television/TV, video, DVD) viewing and computer use but from time-to-time, we may use a television show without advertisements as a teaching aid and discussion stimulator. All Electronic Media will be screened prior to use and will consist of non-violent and high-quality educational material. Our focus is to provide your child a positive experience with increased understanding of the world. Electronic Media will be offered only as a free choice, used to meet a developmental goal, and limited to no more than 30 minutes per week per child.

New York State rules prohibit any screen time for children under two. This includes TV, videos and computers.

### ***Multiculturalism***

Multiculturalism is vital for all children because it sets social goals and promotes respect for all people and the environment we inhabit. We utilize books, music, games, and a wide range of activities as aids to teach our children respect for our world and the diversity of life upon it.

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## ***Celebrations***

ACP encourages an enhanced understanding of and respect for different cultures and beliefs of children, families, staff and community. For celebrations, all “treats” must be store bought and individually wrapped. Please consider sending in small prizes rather than food items. A list of birthday/celebration ideas are attached.

## ***Rest Time***

Under NYS Child Care Regulations, ACP is obligated to provide a regular scheduled rest period. (Regulation 418-1.7)

Infants sleep according to their own schedule and are put to sleep on their backs. Caregivers/teachers directly observe infants by sight and sound at all times and check on sleeping infants frequently.

After lunch, all children participate in a quiet rest time. Children are not required to sleep and may be given quiet activities. For children who do not fall asleep, a space for quiet play will be made available.

Sleeping arrangements for infants through 12 months of age require that the infant be placed flat on his or her back to sleep, unless medical information from the child’s health care provider is presented to the program by the parent that shows that arrangement is inappropriate for that child. Children may not sleep or nap in car seats, baby swings, strollers, infant seats or bouncy seats unless otherwise prescribed by a health care provider. Should a child fall asleep in one of these devices, he or she must be moved to a crib/cot or other approved sleeping surface.

## ***Toilet Training***

The most important factor in making the toilet learning experience successful and as low-stress as possible is a family/teacher partnership that supports the child. Research indicates that children cannot successfully learn how to use the toilet until they are physically, psychologically, and emotionally ready. Many pediatricians say that most children under 24 months of age are not physically capable of regulating bladder and bowel muscles. Most positive toilet training occurs only after children show signs of physical control or awareness of their bodily functions and when they demonstrate an interest or curiosity in the process. We are committed to working with you to make sure that toilet learning is carried out in a manner that is consistent with your child’s physical and emotional abilities and your family’s concerns.

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## GUIDANCE

### *General Procedure*

ACP is committed to each student's success in learning within a caring, responsive, and safe environment that is free of discrimination, violence, and bullying. Our center works to ensure that all students have the opportunity and support to develop to their fullest potential and share a personal and meaningful bond with people in the school community.

Thoughtful direction and planning ahead are used to prevent problems and encourage appropriate behavior. Communicating consistent, clear rules and involving children in problem solving help children develop their ability to become self-disciplined. We encourage children to be fair, to be respectful of other people, of property, and to learn to understand the results of their actions.

### *Discipline Policy*

Caregivers will use positive guidance, redirection and the setting of clear-cut limits that foster the child's own ability to become self-disciplined. Caregivers will encourage children to respect other people, to be fair, respect property, and learn to be responsible for their actions. Discipline involves teaching character and self-control. Because people differ in how they approach discipline, families and caregivers must discuss the goals and methods of discipline for each child.

### **Physical punishment and abusive language are forbidden at the center's childcare programs.**

Parents are asked to support and reinforce the following "I Can Rules":

- I can keep myself safe.
- I can keep my friends safe.
- I can listen to my teacher.

We will strive to accomplish these expectations by:

Redirecting: Helping a child choose to change locations within the group or activity in which s/he is involved.

Providing Calming Time: Providing a place where a child can be somewhat alone to engage in individual activities that will help calm and provide time to regain self-control.

Talking with children: Providing time and a place to sit down with children involved in a certain situation and facilitating their making a plan of acceptable ways to handle the situation, if it should happen again.

### *Challenging Behavior*

Children are guided to treat each other and adults with self-control and kindness.

Each student at ACP has a right to:

- 
- Learn in a safe and friendly place
  - Be treated with respect
  - Receive the help and support of caring adults

Our program recognizes the importance of dealing with aggressive behavior.

- Teachers help children find acceptable ways to express their anger, negotiate to get what they want or need, and handle aggression directed towards them by their peers.
- We encourage children to express their feelings into words and to negotiate resolutions to conflict.
- Teachers facilitate conversations between children when problems arise.

If the above measures in the classroom do not work to resolve the aggressive behavior, a conference will be scheduled between teacher and parent to discuss goals for their child's self-control along with techniques and consequences to help the child learn to express themselves in more appropriate ways. If the steps and approaches mentioned above for resolving unacceptable behavior are unsuccessful, the child will be dismissed from the program. It is crucial to the health and wellbeing of ALL the children in the program to maintain a safe and happy environment.

When a child becomes verbally or physically aggressive, we intervene immediately to protect all of the children. Our usual approach to helping children with challenging behaviors is to show them how to solve problems using appropriate interactions. When discipline is necessary, it is clear, consistent and understandable to the child.

### ***Physical Restraint***

Physical restraint is not used or permitted for discipline. There are rare instances when we need to ensure a child's safety or that of others and we may restrain a child by gently holding her or him only for as long as is necessary for control of the situation.

### ***Notification of Behavioral Issues to Families***

If a child's behavior/circumstance is of concern, communication will begin with the parents as the first step to understanding the child's individual needs and challenges. We will work together to evaluate these needs in the context of our program.

On rare occasions, a child's behavior may warrant the need to find a more suitable setting for care. Examples of such instances include:

- A child appears to be a danger to others.
- Continued care could be harmful to, or not in the best interest of the child as determined by a medical, psychological, or social service personnel.
- Undue burden on our resources and finances for the child's accommodations for success and participation.

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## TUITION AND FEES

### **Important Notice**

All payment and fee processing will be completed by the finance manager. He/she will be in charge of collecting tuition and other fees and contacting families regarding payment issues. If you have a question or concern regarding a payment or fee, please contact Michelle Butman at 716-487-1984 ext 201.

### **Tuition Rates**

Effective January 1, 2024 the rates will be as follows:  
(All classrooms will require a yearly \$50.00 registration fee due at the time of enrollment and every subsequent January)

#### **Angelfish (6 weeks-18 months)**

Weekly \$295    Daily: Over 5 hours \$64  
Daily: Under 5 hours \$43

#### **Clownfish/Jellyfish (18 months- 36 months)**

##### **Butterflyfish (3-5 years)**

Weekly \$275    Daily: Over 5 hours \$59  
Daily: Under 5 hours \$39

#### **Wrap Care (Before and After UPK Program Hours)**

\$8.00 per hour (Based on schedule provided at enrollment)  
School Breaks: \$253    Holiday \$55  
Half Days \$37

\*A 10% sibling discount will be applied if the family enrolls more than one child.

If this will cause a hardship to you, please call (716) 487-2238 to speak to the director about possible scholarships. Scholarships are given on a case by case basis and funds are limited.

Families' contract for a specific weekly schedule as indicated on the Enrollment Agreement Form. Payment for this contracted schedule is required every week year-round whether or not your child attends; this enables us to pay teachers a stable salary every week all year. No credits are given for sick days, holidays, staff training closure or closure due to inclement weather.

Each year, families will be given an option to hold their child's spot in program while they vacation or if their child is absent for a full week due to illness. The \$40 holding fee option may only be used three times in a 12-month time period from January-December. Notification of a vacation **must be given to the director a minimum of two weeks prior to vacation start date**. The week hold fee is applied to a regular week of care, Monday – Friday.

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## **Payment**

Payment is always due in advance with no deduction for any absences, holidays, or closures due to inclement weather, power outages, or other situations beyond our control. Payment is due weekly by 2:00 pm on Friday for the following daycare week, as outlined in the *Enrollment Agreement*.

A non-refundable registration fee of \$50 is due at the time of enrollment

## **Methods of Payment**

Payments may be made in cash or check made out to ACP Day Care Center. Envelopes are provided for payments. Envelopes are located in the front entrance, in the church office, and outside the center office. Payments may be made in the center office to the director or assistant, or the church office to the finance manager between 9:00-3:00. Check payments may be put through the mail slot on the Church Office door after office hours. When making payments in cash, change cannot be guaranteed.

## **Late Payment Charges**

Late payments can pose serious problems for our programs and as a result, it is important that payments are made on time each week. Accounts more than 3 weeks past due are subject to a \$10 per week late fee and services may be suspended until balance is paid in full. In the event that a delinquent account is turned into a collection agency, parents will be responsible for all additional fees.

## **Returned Checks/Rejected Transaction Charges**

All returned checks will be charged a fee of \$35 due with the next tuition payment. Two returned checks or rejected transactions will result in your account being placed on "cash only" status.

## **Late Pick-up Fees**

Late pick-up is not a normal program option and will only be considered as an exceptional occurrence. Late fees of \$2.00 per minute will be assessed beginning at 5:30 PM and will be due upon arrival. **Repeated late pick up may result in child care services being terminated.**

## **DSS Regulations**

For families qualifying for child care subsidies through the Department of Social Services

- Paperwork stating you have been approved must be received before the child's start date. You may opt to pay privately until approval is received. Any payments received by DSS will be credited to your account.
- Illness or other absence: A maximum of twelve days will be allowed in a consecutive three-month time period.
- Anything in excess of three days requires approval from your childcare case manager before we, the provider, can receive payment from the Department of Social Services. If your case manager does not approve the sick days, the

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amount due will be charged to your personal account (making you responsible for payment). Attendance sheets are sent to Mayville every month.

- ACP and case manager have the right to request a physician's excuse. If your child/children miss three consecutive days, you will be required to have a doctor's excuse to return (no exceptions). You must call the provider by 8 a.m., either the classroom or office, if your child/children will not be attending on their contracted day.
- Vacation will NOT be paid by Social Services. Anyone who wishes to take their child/children out due to vacation must follow the vacation requirements outlined below. The parent is responsible for the \$35 holding fee for each vacation week.
- DSS does not pay for maternity leave. You must temporarily withdraw from the program (six weeks). Upon return, if we have a slot open, your childcare will continue as previous assuming all paperwork is still current according to state regulations. You may opt to pay a holding fee to save a spot for your child.
- If you should lose your job, you need to have your job search time approved by DSS in order to continue to have care. You must notify the Billing Coordinator that you have lost your job and whether or not you have been approved for job search care. If the job search time is not approved your child will be withdrawn from the program. To return after being withdrawn from the program, you must reopen your case with DSS and call us to see if we have any openings. Paperwork must still be current according to state regulations.
- Reminder: You will be responsible for any care not covered by DSS.
- If your payment is not paid by Tuesday, the week of actual care, childcare will be denied on Wednesday morning and your Case Manager will be notified. At that time your voucher will be cancelled.

## **ATTENDANCE & WITHDRAWAL**

### ***Absence***

If your child is going to be absent or arrive after 8:00 AM, please call us at 716-487-2238 or alert us using the remind app. We will be concerned about your child if we do not hear from you.

### ***Vacation***

Vacation days only apply if your child is normally scheduled to attend on those days. Each child is given 3 weeks of vacation credit each calendar year. A \$35 holding fee is required for each vacation week.

### ***Withdrawal***

A written notice, 2 weeks in advance, is required by the center when a child is being withdrawn. Failure to notify will result in a 2-week tuition charge.



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### ***Transfer of Records***

Whether transitioning to the next program setting or to a new classroom, your child's records will be transferred internally.

If your child is transitioning to a new school, a written request from you with instructions to where the records should be sent is required.

### ***Closing Due to Extreme Weather***

Should severe weather or other conditions (i.e., snow, storms, floods, tornadoes, hurricanes, earthquakes, blizzards, loss of power, loss of water) prevent us from opening on time or at all, notification to the families will be announced on 93.3, 106.9, our Facebook page, and through the remind app. Be aware that the center will only close if there is a ban on driving or for electrical and water issues within the building.

If it becomes necessary to close early, we will contact you or your emergency contacts as soon as possible. Your child's early pick-up is your responsibility to arrange.

## **DROP-OFF AND PICK-UP**

### ***General Procedure***

We open at 7:30 AM. Please do not drop-off your child prior to the opening. Parents are expected to accompany their children and sign them in.

We close at 5:30 PM. Please allow enough time to arrive, sign your child out, and leave by closing time.

Change can be overwhelming for all people, adults and children alike. While adjusting to a new situation, it is normal for children to be upset when parents leave. To assist your child:

- Arrive early to avoid rushing, which is stressful for children.
- Avoid passing on your own anxious feelings to your child.
- Always say good-bye.
- Be firm in saying, "Good-bye, I'm going now. I love you."
- Prepare your child for any changes in routine, especially pick-up time.
- Try to be specific when picking up your child, try to arrive when you said you would.
- Put aside the day's problems and take some time to hear about your child's day.

### ***Cell Phone Usage***

The times you spend in the center dropping off and picking up your child are the primary windows of time we have to communicate with you about your child. In order to make the best use of these opportunities, as well as to be attentive to your child and other children, we ask that you NOT use your cell phone at any time while picking up your child.

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### ***Authorized & Unauthorized Pick-up***

Your child will only be released to you or those persons you have listed as Emergency and Release Contacts. If you want a person who is not identified as an Emergency and Release Contact to pick-up your child, you must notify us in advance, in writing. Your child will not be released without prior written authorization. The person picking up your child will be required to show a picture ID as verification. Please notify your pick-up person of our policy.

In order to safeguard your child, we will need copies of any court ordered custody agreements. Without a custody agreement, we are not able to prevent the release of your child to a parent.

If a child has not been picked up after closing and we have not heard from you, attempts will be made to contact you, and the contacts listed as Emergency and Release Contacts. Provisions will be made for someone to stay with your child as long as possible, but if after 30 minutes we have not been able to reach you or a person listed as an Emergency and Release Contact, we will call the local child protective services agency. Please have a back-up plan for picking up your child.

### ***Right to Refuse Child Release***

We may refuse to release children if we have reasonable cause to suspect that any person picking up a child is under the influence of drugs or alcohol, or is physically or emotionally impaired in any way that may endanger the child. To protect your child, we may request that another adult listed as an Emergency and Release Contact pick-up the child or we may call the police to prevent potential harm to your child. Reoccurring situations may result in the release of your child from the program.

## **NUTRITION**

### ***Food Prepared for or at the Center***

Food prepared for or at the center will be properly planned, prepared and portioned according to the Child and Adult Care Food Program (<http://www.fns.usda.gov/cnd/care/>) and the state requirements for food service. Menus will be sent home monthly.

Whole grains are served once daily. Fresh fruits and vegetables are served as often as possible. Only 100% fruit juice is served once a week.

We highly encourage children to eat the food provided at the center. Food brought from home daily will be offered as an alternative after the center food is served. Food from home must be a healthy alternative to the food provided by the center, for example, a sandwich or yogurt to supplement the meal provided.

Please do not drop your child off with candy, pastry, gum, cookies, or sweet drinks.

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## **Food Allergies**

If your child has a food allergy, you must notify us in writing so that we can make appropriate substitutions. The written notification should list appropriate food substitutions and must be updated at least annually.

Food allergies can be life threatening and each child with a food allergy must have an action plan for emergency care completed by the family physician before child's start date. In the event that an allergy is detected after enrollment, the emergency care form must be completed within 2 weeks, or in the case of life threatening allergies, before the child can return to care.

## **Meal Time**

Breakfast is served from 8:30 AM-9:00 AM

Lunch is served from 11:30 AM – 12:00 PM

Snack is served from 2:30 PM-3:00 PM

At meal time the dining table is set with plates and flatware, and the food is placed in small bowls from which the children can help themselves. Everyone sits at the same table. Children are encouraged to serve themselves from food passed around each table. Good table manners are modeled and encouraged. **\*At this time, teachers are serving children and maintain social distancing when possible\***

A caregiver who is trained in first-aid for choking is in the building at all times.

## **Infant Feedings**

Infant feedings follow these procedures:

- Infants will be held for bottle-feeding until able to hold his or her own bottle. Bottles will never be propped.
- Infants are fed "on cue" to the extent possible (at least every 4 hours and usually not more than hourly) and by a consistent caregiver/teacher.
- It is not recommended to put cereal in a bottle, in fact CACFP advises against it. When a baby is ready for solid food (usually around 4-6 months) and infant cereal is started, it is developmentally appropriate (swallowing, etc.) to provide that cereal via spoon.
- Breastfeeding is supported by providing a place for nursing mothers to feed their babies. Expressed breast milk may be brought from home if frozen or kept cold during transit. All breast milk and formula shall be returned to the child's home or discarded at the end of each day. Previously frozen, thawed breast milk must be used within 24 hours. Bottles must be clearly labeled with the child's name and the date the milk was expressed. Frozen breast milk must be dated and may be kept in the freezer for up to 6 months.
- Breast milk and formula brought from home must be dated and labeled with the child's first and last name.
- Solid foods will only be introduced after a consultation with the child's family.

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## *Children 24 Months and Older*

- No child shall go more than 4 hours without a meal or snack being provided.
- Children are encouraged to self-feed to the extent that they have the skills. Children are encouraged, but not forced to eat a variety of foods.
- Round, firm foods that pose a choking hazard for children less than 4 years of age are not permitted. These foods include: hot dogs, whole grapes, peanuts, popcorn, thickly spread peanut butter and hard candy.

## **HEALTH**

### *Immunizations*

Immunizations are required according to the current schedule recommended by the U.S. Public Health Services and the American Academy of Pediatrics, [www.aap.org](http://www.aap.org). Every January, we check with the public health department or the American Academy of Pediatrics for updates of the recommended immunization schedule. Our state regulations regarding attendance of children who are not immunized due to religious or medical reasons are followed. Unimmunized children are excluded during outbreaks of vaccine preventable illness as directed by the state health department.

All caregivers, teachers, and staff are required to be current with all immunizations routinely recommended for adults by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC).

Immunization records are due at the time of enrollment and when new immunizations are given.

### *Physicals*

Routine physicals are required according to the current recommendations of the American Academy of Pediatrics, [www.aap.org](http://www.aap.org). A copy of your child's physical must be received before your child's start date. The physical must state the child is "free of communicable diseases." Families are responsible for assuring that their child's physicals are kept up-to-date and that a copy of the results of the child's health assessment is given to the program.

### *Illness*

We understand that it is difficult for a family member to leave or miss work, but to protect other children; you may not bring a sick child to the center. The center has the right to refuse a child who appears ill. You will be called and asked to retrieve your child if your child exhibits any of the following symptoms. This is not an all-inclusive list. We will try to keep your child comfortable but he/she will be excluded from all activities until you arrive.

- Illness that prevents your child from participating in activities.
- Illness that results in greater need for care than we can provide.
- Illness that poses a risk of spread of harmful diseases to others.
- Fever of 100.4\* F

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- Diarrhea – stools with blood or mucus, and/or uncontrolled, unformed stools that cannot be contained in a diaper/underwear or toilet.
  - Vomiting – green or bloody, and/or more than 2 times during the previous 24 hours.
  - Mouth sores caused by drooling.
  - Rash with fever, unless a physician has determined it is not a communicable disease.
  - Pink or red conjunctiva with white or yellow eye discharge, until on antibiotics for 24 hours.
  - Impetigo, until 24 hours after treatment.
  - Strep throat, until 24 hours after treatment.
  - Head lice, until treatment and all nits are removed.
  - Scabies, until 24 hours after treatment.
  - Chickenpox, until all lesions have dried and crusted.
  - Pertussis (Whooping Cough), until 5 days of antibiotics.
  - Hepatitis A virus, until one week after immune globulin has been administered.
  - Tuberculosis, until a health professional indicates the child is not infectious.
  - Rubella, until 6 days after the rash appears.
  - Mumps, until 5 days after onset of parotid gland swelling.
  - Measles, until 4 days after onset of rash.
  - Has a physician or other health professionals written order that child be separated from other children.

Children who have been ill may return when:

- They are free of fever, vomiting and diarrhea for 24 hours.
- They have been treated with an antibiotic for 24 hours.
- They are able to participate comfortably in all usual activities.
- They are free of open, oozing skin conditions and drooling (not related to teething) unless:
  - The child's physician signs a note stating that the child's condition is not contagious, and;
  - The involved areas can be covered by a bandage without seepage or drainage through the bandage.
- If a child had a reportable communicable disease, a physician's note stating that the child is no longer contagious and may return to our care is required.

Please see attached Illness Policy for more information.

### **Allergy Prevention**

Families are expected to notify us regarding children's food and environmental allergies. Families of children with diagnosed allergies are required to provide us a letter detailing the child's symptoms, reactions, treatments and care. A list of the children's allergies will be posted in the main area and kitchen. We are trained to familiarize ourselves and consult the list to avoid the potential of exposing children to substances to which they have known allergies.

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In 2019 Governor Cuomo signed new legislation called “Elijah’s Law”. The law is named after 3-year-old Elijah Silvera from New York City who was given a grilled cheese sandwich while at day care despite having a known severe dairy allergy. After Elijah went into anaphylaxis, his family was not told what he had eaten and 911 was not called. Elijah died in November 2017. Implementation of Elijah’s Law requires changes to licensed child care program protocols that are intended to prevent further tragedy.

As child care professionals, we play a critical role in protecting the health and safety of the children in our program. The US Centers for Disease Control and Prevention (CDC) estimates that 1 in 13 children is impacted by allergies. Allergies have the potential to create a life-threatening situation. Anaphylaxis must be treated right away. This new regulation brings increased knowledge about allergies, prevention of anaphylaxis, and what action is to be taken during a medical emergency, to enable child care providers to save lives.

Anaphylaxis is a multi-system allergic reaction. Symptoms of anaphylaxis usually involve more than one part of the body such as the skin, mouth, eyes, lungs, heart, gut, and brain. Some symptoms include:

- Shortness of breath, wheezing, or coughing
- Pale or bluish skin, faintness, weak pulse, dizziness
- Tight or hoarse throat, trouble breathing or swallowing
- Significant swelling of the tongue or lips
- Many hives over the body, widespread redness
- Vomiting a lot, severe diarrhea

For children with an allergy, parents and the child’s health care provider must work with the child day care program to develop written instructions outlining what the child is allergic to, the steps that must be taken to avoid that allergen, and what to do in the event the child experiences an allergic reaction. The Individual Allergy and Anaphylaxis Emergency Plan must be reviewed upon admission, annually thereafter, anytime there are staff or volunteer changes, and/or anytime information regarding a child’s allergy or treatment changes. This document must be appended to the child’s Individual Health Care Plan.

The ***Individual Allergy and Anaphylaxis Emergency Plan*** must include the following:

- Name of the child
- Child’s date of birth
- Child’s weight
- Whether the child has asthma
- Information about the diagnosis, including the type of allergy or allergies the child has (based on diagnosis from a health care provider)
- Strategies to minimize the risk of exposure to the allergen(s) while the child is at the child care program

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- Specific symptoms of mild and severe reactions that would indicate the need to administer medication
  - Information on the child's medication, including dose and method of administration and where the medication will be stored
  - Name and contact information of the health care provider
  - Name and contact information of the parent(s)/guardian(s)
  - Signature of the parent(s)/guardian(s) and the health care provider and a program representative

We must receive these completed forms before enrollment in order for your child to continue to attend program. Once we receive your child's forms they will be reviewed and approved by our health care consultant. Children will not be permitted in program without ALL completed forms and any required updated supply of medication as needed. The policy sets guidelines to be followed by child day care programs for both the prevention of anaphylaxis and during an anaphylaxis emergency. The policy is posted in English and Spanish on the OCFS website at:

<https://ocfs.ny.gov/programs/childcare/policies/>.

### **Medications**

- (A) Our center does not administer prescription or over the counter medication to children other than **EPI-pen, inhalers, and breathing treatments; diaper cream, sunscreen, and bug repellent**
- (B) All medications should be handed to a staff member with specific written instructions for administration. Medications should never be left in the child's cubby or with the child to administer on their own. Our staff will ensure that the medication is recorded along with the directions and proceed to dispense the medication as directed.
- **Prescription EPI-pen, inhaler, and breathing treatments** require a note signed by the family and a written order from the child's physician. The label on the medication meets this requirement. The medication must include your child's name, dosage, current date, frequency, and the name and phone number of the physician. All medications must be in the original container (you may request pharmacies to fill your prescription in two labeled bottles). Please specify the dosage and time(s) to be administered for each medication.
- (C) **Non-prescription topical ointments** diaper cream, sunscreen and insect repellent require permission from parent. Permission form is included in enrollment packet. Ointment bottles must be labeled with child's first and last name. Usage will be documented by staff and communicated to parent.

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## SAFETY

### *Clothing*

Please dress your child in practical clothing that allows for freedom of movement and is appropriate for the weather. Your child will be involved in a variety of activities including: painting, outdoor play, sand, weather, and other sensory activities. Our playground is used as an extension of the center, and daily programs are conducted outside whenever weather permits.

One particular aspect of concern is the risk associated with children's clothing that may become entangled with climbing or sliding equipment that could lead to choking or other serious harm. All drawstrings from children's clothes should be removed as a precaution.

Sandals and flip-flops are not appropriate for center play and make it difficult for your child to participate in some activities.

### *Extreme Weather and Outdoor Play*

Outdoor play will not occur if there is a heat index warning, or the temperature is 20 °F or less. Additionally, outdoor play will be cancelled if there is an air quality warning in place.

### *Communal Water-Play*

Communal, unsupervised water play is prohibited. Supervised children are permitted to engage in water-play.

### *Lead Poisoning*

An Equal Opportunity Poison What Every Parent Should Know About Lead Poisoning in Children:

- Lead poisoning poses an invisible danger to your child.
- One in 11 children in America have high levels of lead in their blood.
- According to recent Centers for Disease Control and Prevention (CDC) estimates, 890,000 U.S. children ages 1 -5 have elevated blood levels.
- Most children with elevated blood levels do not look or feel sick.
- The longer children have lead in their blood, and the higher the level, the more serious their problems may be. Long-term effects of lead in a child can be severe. They include learning disabilities, decreased growth, hyperactivity, impaired hearing and even brain damage. At very high levels, lead can cause seizures, coma and even death.
- Lead can be found in paint, dust, soil and water.
- The most common source of lead in homes is lead-based paint. Keep your children away from peeling paint and dust from broken plaster.
- Use lead-free dishes. Some older dishes may have lead in their glaze.
- Use cold tap water—not hot—for infant formula or cooking. Many older homes still have lead water pipes.



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- Store food from open cans in glass or plastic containers. (Some cans are made with lead solder.)
  - Wash your baby's pacifier, teething rings and toys often. This will help remove any lead dust. \* Wash your toddler's hands before meals. Little hands like to explore!
  - Damp mop floors and damp wipe surfaces twice a week to reduce lead dust. \* Feed your child the right food to GET AHEAD OF LEAD. A diet high in iron and calcium is best!
  - Have your child tested for lead levels!

All children six months to six years should be screened regularly. A simple blood test is all that is required. Ask your doctor about lead screening.

### *Injuries*

Safety is a major concern in child care and so daily safety inspections are completed inside and outside the center area in order to prevent injuries. First aid will be administered by a trained caregiver in the event that your child sustains a minor injury (e.g., scraped knee). You will receive an incident report outlining the incident and course of action taken. If the injury produces any type of swelling or needs medical attention, you will be contacted immediately. Each classroom is equipped with a first aid kit meeting the state regulations.

In the event of a serious medical emergency, the child will be taken to the hospital immediately by ambulance, while we will try to contact you or an emergency contact.

### *Biting*

Biting is a normal stage of development that is common among infants and toddlers – and sometimes even among preschoolers. It is something that most young children will try at least once.

When biting happens, our response will be to care for and help the child who was bitten and to help the biter learn a more appropriate behavior. Our focus will not be on punishment for biting, but on effective behaviors that address the specific reason for biting.

Notes will be written to the family of the child who was bitten and the biter's family. We will work together with the families of each to keep them informed and to develop strategies for change.

### *Respectful Behavior*

All children and families will be treated with respect and dignity. In return, we expect the same from all of our families. We will not tolerate hostile or aggressive behavior. If this occurs, we reserve the right to ask you to control your behavior or to remove your children from our care.

### *Smoking*

The poisons in secondhand smoke are especially harmful to infants and young children's developing bodies, therefore the indoor and outdoor center environment and

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vehicles used by the center are non-smoking areas at all times. The use of tobacco in any form is prohibited on the center's premises.

### ***Prohibited Substances***

The use of alcohol or illegal drugs is prohibited on the center's premises. Possession of illegal substances or unauthorized potentially toxic substances is prohibited.

Any adult who appears to be inebriated, intoxicated, or otherwise under the influence of mind-altering or polluting substances is required to leave the premises immediately.

### ***Dangerous Weapons***

A dangerous weapon is a gun, knife, razor, or any other object, which by the manner it is used or intended to be used, is capable of inflicting bodily harm. Families, children, staff or guests (other than law enforcement officers) possessing a dangerous weapon will not be permitted onto the premises.

In cases that clearly involve a gun, or any other weapon on our premises, the police will be called and the individual(s) involved will be immediately removed from the premises. This policy applies to visible or concealed weapons.

### ***Child Custody***

Without a court document, both parents/guardians have equal rights to custody. We are legally bound to respect the wishes of the parent/guardian with legal custody based on a certified copy of the most recent court order, active restraining order, or court-ordered visitation schedule. We will not accept the responsibility of deciding which parent/guardian has legal custody where there is no court documentation.

The NYS Commissioner of Education has ruled that non-custodial parents have the right to participate in the educational process of their children to the same extent as the custodial parent, unless they are specifically prohibited by court order from doing so. The center will provide, upon request, the same information to non-custodial parents that it provides to the custodial parent. Without a court order, we cannot refuse to release a child to his/her biological parent

### ***Suspected Child Abuse***

We are required by law to report all observations of child abuse or neglect cases to the appropriate state authorities if we have reasonable cause to believe or suspect a child is suffering from abuse or neglect or is in danger of abuse or neglect, no matter where the abuse might have occurred. The child protective service agency will determine appropriate action and may conduct an investigation. It then becomes the role of the agency to determine if the report is substantiated and to work with the family to ensure the child's needs are met. Our center will cooperate fully with any investigation and will maintain confidentiality concerning any report of child abuse or neglect.

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## EMERGENCIES

### *Shelter in Place*

The center holds two shelter-in-place drills annually. These drills are announced to parents in advance. These drills include earthquake drills, tornado drills, winter weather/blizzard drill, Chemical explosion/leak drill, and active shooter drill.

### *Fire Safety*

In accordance with the NY State Regulations, unannounced practice fire drills must be done once a month. These drills help children and staff to be comfortable with evacuation procedures. In the event the center has to be evacuated, ACP has made arrangements with the Robert H. Jackson Center at 305 East 4<sup>th</sup> Street to evacuate to this location.

Our center is fully equipped with smoke detectors, fire alarms, fire extinguishers, sprinkler system, exit signs, emergency lights.

Our fire evacuation plan is reviewed with the children and staff on a monthly basis.

### *Emergency Transportation*

In the event your child needs to be transported due to a medical emergency, if no other authorized person can be contacted and the need for transportation is essential, an ambulance will be called for transportation. A proper escort will accompany and remain with the child until a family member or emergency contact arrives.

## CENTER POLICIES

Our center policies not included in this handbook are reviewed [\[click here to insert frequency\]](#) and updated as needed. They are available for review upon request to the center director.