



Glenshaw
Presbyterian Church

Glenshaw Presbyterian Church Early Learning Center

PARENT HANDBOOK

ELC Policies and Guidelines

2023

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ABOUT US

Philosophy

We are a non-profit early childhood setting that provides a high quality, early educational program for children from three months to five years.

We are an equal opportunity employer, and all children 3 months to 6 years old are welcome in our center. Enrollment shall be granted without regard to a child's race, color, religion, gender, or special need; and without regard to a parent or guardian's race, color, religion, age or gender.

The Early Learning Center operates a before and after care program for students who attend Burchfield Elementary and Scott Primary schools. The program is for children in grades Kindergarten through third grade.

The ELC also hosts a Summer program for children who have completed kindergarten through sixth grade. The summer program will run through the summer calendar of the Shaler school district. For more information, please give us a call at 412-487-5490.

Both the Summer program and Before and After School Care program runs in conjunction with the calendar of the Shaler school district.

Mission

Our goal is to provide children a balance of social, emotional, physical and intellectual development based on developmentally appropriate practices, including the collaboration of the staff, parents and children.

Certification

The ELC is licensed by the Pennsylvania Department of Human Services. It is also accredited by the Keystone STARS program.

Hours of Operation

The ELC is open Monday through Friday from 7:00 AM to 5:30 PM.

Holidays

The Center is closed the following days:

Good Friday

Memorial Day

Independence Day

Labor Day

Election Day Tuesday, November 7th (no school age children only)

Thanksgiving Break Thursday and Friday

Winter Break December 25th – January 1

Admission & Enrollment

Parents are expected to take the time to visit and ask questions before making a decision on enrollment.

A non-refundable registration fee of \$65 for the first child enrolling and \$45 for each subsequent child is required to hold a space for the child(ren) at the center.

When you decide to enroll your child into the ELC you will be provided with a getting to know you meeting with the center director or assistant director. At this meeting we will review your paperwork and get to know a little bit about your child to help us help them on their first day. We also encourage (2) two-hour visits for children prior to their start date. This helps your child acclimate to his or her new environment.

The following forms are necessary to complete your child's file. Some forms will be provided ahead of time and others will be completed at the enrollment meeting.

- **Child Health Report:**

By law every child under 36 months must have a current physical on file every 6 months. Every child 3 years and up must have one every 12 months. This form must show proof of current immunizations and they must have physician's signature on them.

- **Emergency Form:**

All children must have a current emergency form completed with contact information, Doctor and insurance information. Parents are the first contact in the event of an emergency, but you are required to provide two additional contact persons with phone numbers and addresses, in the event you cannot be reached. You will be asked to review and update this form every 6 months. A copy of this form is kept in each classroom of the ELC in an emergency kit for safety.

- **Request of IEP/IFSP:**

If your child has previously been identified to qualify for supplemental services, we will ask for a copy of his/her IEP/IFSP. This paperwork will help us understand methods of helping your child and their development. We will work with your family and others to help your child develop to their potential.

****ALL** required admission and enrollment forms **MUST** be completed prior to your child(ren)'s first day of attendance.

Non-Discrimination

We are an equal opportunity employer. And all children 3 months to 6 years old are welcome in our center. Enrollment shall be granted without regard to a child's race, color, creed, religion, national origin, gender, age, ethnicity, or special need; and without regard to a parent or guardian's political beliefs, marital status, sexual orientation, race, religion, age, gender, special need or any other consideration made unlawful by federal, state or local laws.

TUITION AND FEES

<u>Fee scale per day:</u>	<u>Part-day</u>	<u>Full-day</u>	<u>Extended-day</u>
	(< 5 hours)	(>=5 hours)	(>9 hours)
1 Child	\$48.80	\$58.58	\$65.10
2 Children	\$78.10	\$99.24	\$105.75
3 Children	\$97.63	\$131.78	\$138.31
1 Infant	\$62.26	\$65.36	\$77.55
1 Infant, 1 Child	\$94.93	\$108.94	\$115.16
1 Infant, 2 Children	\$119.83	\$136.97	\$143.19

If absent for any reason on a scheduled day, the following discount will be given:

Part Day -\$5/one child or family

Full Day - \$10/one child or family; \$5/one child off and sibling(s) present

We request that all children arrive each day no later than 10:00 AM for staffing purposes.

The ELC does not provide service after 5:30 p.m. 1st offense the late fee is \$15.00 + \$1 per minute after 5:30. 2nd offense the late fee is \$25.00 + \$1.00 per minute after 5:30. 3rd offense the late fee is \$35.00 + \$1.00 per minute after 5:30. After 3rd offense we have the right to terminate your agreement with us.

Each day, your child(ren) must be signed both in upon arrival and out at dismissal using the touch screen on one of the kiosks. Failure to do so will result in a safety fee of \$3 in addition to the daily rate charged.

Payment Policy

If you need to request a day off for your child, you must email the Director at All balances are due in full on the last day of the child's week. Upon request, a balance may be carried to the end of the second week. If a family's balance exceeds \$500, children may not come to the Center for care until that balance is paid in full. We need a two-week notice for disenrollment from The Center. If you disenroll your child with an outstanding bill due to The Center, after 30 days, there will be a 1% charge added to your bill and a 1% charge added after every 30 days until the bill is paid in full.

All returned checks or rejected ACH (automatic debits) or credit card transactions will be charged a fee of \$36. This charge may be collected electronically. Two or more returned checks or rejected transactions will result in your account being placed on "cash only" status.

Attendance/Scheduling

We have designed the ELC to be flexible to suit your needs. However, flex scheduling is not available. Minimum attendance is three full or extended-days. We offer families a maximum of two weeks of vacation during which their child(ren) can be taken off the schedule for the entire week and will not be charged for that week. Around a holiday, if we are closed, families must maintain their normal schedule or sacrifice a vacation week for less than their normal days.

If you need to request a day off for your child, you must email the Director at fawn@glenshawchurch.org by noon on the Tuesday of the week prior or the request will not be honored. Schedule changes are only accepted via email to the director of the center.

Daily Classroom Schedules

Infants

7:00 am - 8:00 am: Greeting and free play

Diaper Changes

8:00 am – 8:45 am: First feeding bottles/food

Diaper Changes

8:45 am – 9:00 am: Tummy Time

9:30 am – 10:00 am: Reading Stories/Morning Naps

10:00 am – 11:00 am: Exploration of the room, toys and books

Diaper Changes

11:00 am – 11:45 am: Second feeding bottles/food

11:30 am – 1:00 pm: Naps

Diaper Changes

1:00 pm – 2:00 pm: Free play/stories/exploration

2:00 pm – 3:00 pm: Third feeding bottles/food

Diaper Changes

3:00pm – 4:00 pm: Afternoon Naps

Diaper Changes

4:00 pm – 6:00 pm: Free play and going home

Young Toddlers

7:00 am - 8:00 am: Greeting and free play

Diaper Changes

8:00 am – 8:40 am: Dress Up/Balls/Poppers*

8:40 am – 8:45 am: Clean Up

Diaper Changes

8:45 am – 9:00 am: Song Time

9:00 am – 9:10 am: Handwashing

9:10 am – 9:40 am: Snack

9:40 am – 9:45 am: Handwashing

9:45 am – 10:45 am: Art/Outside Time*

Diaper Changes/Handwashing

11:00 am – 11:30 am: Lunch, followed by handwashing

11:30 am – 1:00 pm: Naps

Diaper Changes as children wake up

1:00 pm – 3:00 pm: Free play/stories/bubbles/blocks*

Diaper Changes/Handwashing

3:00pm – 3:30 pm: Snack

3:30 pm – 3:35 pm: Handwashing

3:35 pm – 4:00 pm: Movement music*

Diaper Changes

4:00 pm – 6:00 pm: Free play and going home*

****When ratio requires, groups are divided. Groups rotate activities.***

Older Toddlers

7:00 am - 8:30 am: Greeting and free play

(7:45 am – 8:30 am Diaper Changes/Pottying/Handwashing)

8:30 am – 8:55 am: Table Toys

8:55 am – 9:00 am: Clean Up (*clean up song played on iPad*)

9:00 am – 9:15 am: Circle Time (*Good Morning Song; Look who's here today song with name cards*), followed by handwashing

9:15 am – 9:45 am: Snack, followed by handwashing

9:45 am – 10:15 am: Gross/Fine Motor Activities

(9:45 am – 10:30 am Diaper Changes/Pottying/Handwashing)

10:15 am – 10:45 am: Art/Movement Music

10:45 am – 11:15 am: Outside Play (weather permitting), followed by handwashing

11:15 am – 11:30 am: Group Story/Shirt Song, followed by handwashing

11:30 am – 12:00 pm: Lunch

(11:45 am – 12:30 pm Diaper Changes/Pottying/Handwashing)

12:00 pm – 2:00 pm: Naptime

2:00pm – 3:00 pm: Quiet Time/Read Books/Puzzles

(2:400pm – 3:00 pm Diaper Changes/Pottying/Handwashing)

3:00 pm – 3:30 pm: Snack, followed by handwashing

3:30 pm – 4:00 pm: Outside Play (weather permitting)

4:00 pm – 6:00 pm: Free Play and Going Home

(4:00 pm – 6:00 pm: Diaper Changes/Pottying/Handwashing)

****Gross Motor Activities include: Jumping Block, Big Trucks, Balance Beam, Strollers, Bowling, Etc.***

****Fine Motor Activities include: Puzzles, Threading Boards, Tweezers, Finger Puppets, Blocks, Etc.***

Preschool

7:00 am – 8:45 am: Drop Off/Free Play/Learning Centers at Tables

8:45 am – 9:00 am: Large Group Activity

9:00 am – 9:25 am: Morning Snack

9:25 am – 9:40 am: Bathroom Break

9:40 am – 10:00 am: Morning Meeting

10:00 am – 10:40 am: Outdoor Play

10:40 am -11:00 am: Story Time/Large Group Activity

11:00 am – 12:00 pm: Free Play/Learning Centers

12:00 pm – 12:35 pm: Lunch

12:30 pm – 12:45 pm: Bathroom Break

12:45 pm – 3:00 pm: Rest/Quiet Time

3:00 pm – 3:25 pm: Snack

3:25 pm – 3:40 pm: Bathroom Break

3:30 pm – 4:00 pm: Afternoon Meeting

4:00 pm – 6:00 pm: Outdoor Play/Free Play/Learning Centers/Pick Up

Prekindergarten

7:00 am – 8:30 am: Arrival/Free Play/Learning Centers at Tables

8:30 am – 9:00 am: Free Play

9:00 am – 9:30 am: Morning Snack

9:30 am – 10:10 am: Circle Time

10:10 am – 11:10 am: Center Time

11:10 am -11:20 am: Bathroom Break

11:25 am – 12:00 pm: Outside Time (weather permitting)

12:00 pm – 12:40 pm: Lunch

12:40 pm – 1:00 pm: Bathroom Break

1: pm – 3:00 pm: Rest/Quiet Time

3:00 pm – 3:30 pm: Afternoon Snack

3:30 pm – 4:00 pm: Afternoon Circle Time

4:00 pm – 6:00 pm: Outdoor Play/Free Play/Learning Centers/Pick Up

DROP OFF AND PICK UP

Dropping Off Your Child

We open at 7 a.m. Please do not drop-off your child prior to the opening.

When you bring your child to the ELC, you must drive up to curb on your left-hand side. The parking lot is ONE WAY in front of and behind the ELC. Please drive slowly in this area! By law, you are required to turn off you unoccupied vehicle. Do not leave any siblings in the vehicle while dropping off your child. Ring the buzzer to the left of the front door and you will receive entrance.

All adults must check their child in and out at the computer kiosk in the upper or lower hallway. It is essential that you remain with your child until he/she enters his/her classroom and are greeted by his/her teacher.

Please prevent the spread of germs by helping your child wash his/her hands before you leave him/her in his/her learning group.

As a rule, do not prolong your goodbye and do not sneak out of the room. Neither will help your child with his/her transition.

Picking Up Your Child

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

Please follow the same procedure for parking and entering the building. Upon entry, you may sign your child out at the computer kiosk.

When entering the room or play yard, be certain the teacher acknowledges that you are leaving with your child.

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 our child. In order to make the best use of these opportunities, as well as be attentive to your child and other children, we ask that you NOT use your cell phone at any time while visiting the center.

Authorized & Unauthorized Pick-Up

Your child will only be released to you or those persons you have listed as Emergency Contacts. If you want a person who is not identified as an Emergency 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 provide a photo 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 then the Emergency Contacts listed. Provisions will be made for someone to stay with your child as long as possible, but if after hours we have not been able to reach you or a person listed as an Emergency Contact, we will call the local child protective services agency.

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 Contact pick-up the child or we may call the police to prevent potential harm to your child. Recurring situations may result in the release of your child from the program.

PERSONAL BELONGINGS

What to Bring

- Infants should have enough clean bottles, diapers and at least two changes of clothes available for use each day. All items must be labeled with your child's first and last name.
- Young Toddlers need enough diapers and at least two changes of clothes available for use each day. All items must be labeled with your child's first and last name.
- Older Toddlers need enough diapers and at least two changes of clothes available for use each day. All items must be labeled with your child's first and last name.
- Preschoolers need at least one change of clothes, socks and shoes available for use each day. All items must be labeled with your child's first and last name.
- PreK students need at least one change of clothes, socks and shoes available for use each day. All items must be labeled with your child's first and last name.
- All children need proper outerwear each day in accordance with weather conditions.

ALL items brought from home (i.e. clothes, bottles, pacifiers, cups, blankets, lunch boxes, backpacks, jackets, coats, etc.) MUST be labeled with your child's first and last name. We are not responsible for lost or damaged items.

Please dress your child comfortably in weather appropriate clothing. We would like an extra set of season-appropriate clothing to keep at the center. Please leave it in your child's storage space. Children should wear or store closed toed shoes for daily outdoor play.

Cubbies and Mailboxes

Each child in the infant room will be assigned a bin. Each child in the Young Toddler and Older Toddler room will be assigned a cubby. Each child in the Preschool and PreK room will be assigned both a cubby and a mailbox. Bins, cubbies and mailboxes are labeled with your child's name. All personal items are to be kept in your child's bin/cubby, whichever is applicable. Please check your child's cubby/mailbox on a daily basis. This is where you will find important items/announcements that need to be taken home.

Lost & Found

You can look for lost items and bring found items to the Lost & Found box located near the main entrance of the building. Please note we are not responsible for lost personal items.

Toys from Home

We request that you do not allow your child(ren) to bring toys from home into the center unless they are part of a show & share activity.

NUTRITION

The center will provide a morning and afternoon snack for children in all rooms, except infants. Lunch is to be brought from home. Any food item brought in will be served as is. We cannot heat food items.

The following requests regarding food items are required per state regulations.

- Thermoses are prohibited in the center.
- Any circular food item (i.e. cherry tomatoes, olives, hot dogs, grapes, etc.) must be cut into four pieces.
- Kernel popcorn is prohibited in the center.

Food Allergies

Please review the daily classroom schedule for lunch and snack times. Bring a lunch and drink for your child in a labeled lunch box/bag if they are 12 months or older. When placing lunch in the refrigerator, slightly unzip the lunch box/bag to ensure proper refrigeration. According to regulations, lunch box/bag, drink cup and/or bottle must have your child's first and last name on it.

The ELC supplies a morning and afternoon snack for children in the center. The morning snack should not be considered breakfast. And only infants are able to be served breakfast.

If your child has food allergies, we will not prohibit other children from having that food, but rather we will make every possible accommodation to keep your child safe.

HEALTH

Illness

Our illness policy is designed to reduce the spread of infectious illness in the classrooms. The control and prevention of infectious diseases in childcare depends on the good communication between parents, caregivers, health departments and primary care providers. We will reference the Managing Infectious Diseases in Child Care and Schools from the American Academy of Pediatrics

When the staff has a concern about your child's health, they will give you a call to discuss symptoms and determine the course of action. Depending on the specific case, this may or may not mean that a parent/ guardian will be expected to pick up their child immediately. If your child has been ill in the past 24 hours with fever, nausea, vomiting, or diarrhea please refrain from bringing your child to the center.

Admission and Exclusion

The child care provider, not the child's family, make the final determination about whether the acutely ill child can receive care in the early learning program. Children will be excluded if:

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1. Staff are unable to meet the needs of both the ill child and the other children in the group.
 2. The child's illness prevents the child from participating comfortably in activities that the facility routinely offers for well children or mildly ill children
 3. Keeping the child in care poses an increased risk to the child or to other children or adults with whom the child will come in contact.
 4. A period of 24 hours has not passed since the child has been ill.
 5. Within the last 24 hours the child has had fever, vomit, diarrhea.
 6. After receiving antibiotics for 24 hours, a child that has been diagnosed with impetigo, pink eye, and strep throat may return.
 7. If there is a presence of lice, scabies, ringworm, shigella, pneumonia, rsv, mumps, measles, chicken pox, and rubella children will be excluded until we receive written Doctor's permission to return.
 8. If there is a presence of hand, foot or croup children will be excluded for 3-5 days. Children with whooping cough must be on a minimum of 5 days of antibiotics. All 3 diseases must have a doctor's permission for child to return to the group setting.
 9. If there is a presence of mollescum, shingles, and warts the areas must be completely covered, and, if a child contracts mrsa they will be excluded until there is no drainage from the wound.

If the ELC staff is uncertain about whether the child's illness poses an increased risk to others, the child will be excluded until a physician or nurse practitioner notifies in writing that the child may attend and interact with other children. A child whose illness does not meet any of these conditions listed above does not need to be excluded.

Illness is always an issue in child care settings. We understand the needs of working, but we must protect enrolled children from contagion. We follow state regulations on exclusion, and ask that you join with us to assure a healthy center for all of our children.

An informal health check is conducted daily by our teachers. The health check is conducted when the child arrives at the center. This helps reduce the transmission of communicable diseases. Your child should be well enough to participate in daily activities, as we are unable to provide additional teacher coverage for ill or mildly ill children.

Admission and Permitted Attendance

Permitted attendance will be at the discretion of the staff. Children will not be excluded if they carry HIV or Hepatitis B.

Procedure for Management of Short-Term Illness

The Director, assistant director, or a group supervisor will determine whether a child who appears mildly ill will be permitted to come for the day or remain in the program.

If a child appears mildly ill, but will be staying for the day:

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1. The child's caregiver will complete a symptom record to document date, time, symptoms of illness
 2. The caregiver and the parent or legal guardian will discuss treatment and develop a plan for the child's care. The staff may attempt to contact the child's health care provider only if the parent is unable to be contacted and the caregiver has questions or does not understand the instructions provided by the health care provider.
 3. The caregiver will complete the symptom record during the period the child is in care and give a copy of the symptom record to the parent or legal guardian when the child leaves the program for the day.

If Your Child Becomes Ill While in Care

1. The caregiver will notify group supervisor and director if possible. Caregiver will complete the symptom record.
2. The Director, Assistant Director, Administrative assistant, or Group Supervisor will determine if the child may remain in the program or is too ill to stay in child care.
3. The Director, Assistant Director, Administrative Assistant, or Group Supervisor will call the parent or legal guardian.
4. The child symptoms will be treated as agreed upon with the parent or legal guardian. The treatment will be written on the symptom record. The child will be reassured by the caregiver.
5. A copy of the symptom record will be given to the parent or legal guardian so that the parent or legal guardian has the information needed to continue the child's care and, if necessary, consult the child's health provider for management of the child's illness.
6. If the child is too ill to stay in child care, the child will be provided a place to rest until the parent, legal guardian, or designated person arrives. The child will be supervised at all times by someone familiar with the child. A child with a potentially communicable illness that requires the child be sent home from child care will be provided care separate from other children with extra attention to hygiene and sanitation until the child leaves the facility.
7. A parent, legal guardian, or designated person must pick up the sick child within 30 mins of the request for pick up. If child is not picked up in this timely manner, the parent will be charged a flat rate of \$15/hour in addition to their cost of daily care. The child will be excluded from interacting with other children.

Reporting Requirements

Some communicable diseases must be reported to public health authorities so that control measures can be used. The Director will obtain an updated list of reportable diseases from the local or state health authorities annually. A copy of this list will be shared with each parent and legal guardian at the time of enrollment. Families and staff will be reminded to notify the Director within 24 hours after the child or staff has developed a known or suspected

communicable disease and to inform the Director if any member of their immediate household has a reportable communicable disease. While respecting the legal boundaries of confidentiality of medical information, the Director will notify the Health Department authority about any suspected or confirmed reportable disease among the children, staff, or family members of the children and staff. The telephone number of the responsible local or state health authority to whom to report communicable disease is posted in the main upper hallway.

Families of children who may have been exposed to a child with a communicable disease or reportable condition will be informed about the exposure according to the recommendations of the local Health Department. This information will be posted on the parent communication bulletin board as all children in The ELC have risk of exposure.

Obtaining Immediate Medical Help

All caregivers will obtain immediate medical help for the following situations:

- They believe a child's life is at risk or there is a risk of permanent injury.
- The child is acting strangely, much less alert, or much more withdrawn than usual.
- The child has difficulty breathing or is unable to speak.
- The child's skin or lips look blue, purple, or gray.
- The child has rhythmic jerking of arms and legs and a loss of consciousness or seizure.
- The child is unconscious.
- The child is less and less responsive.
- The child has any of the following after a head injury: decrease in level of alertness, confusion, headache, vomiting, irritability, or difficulty walking.
- The child has increasing or severe pain anywhere.
- The child has a cut or burn that is large, deep, and/or won't stop bleeding.
- The child is vomiting blood.
- The child has a severe stiff neck, headache, and fever.
- The child is significantly dehydrated: sunken eyes, lethargic, not making tears, not urinating.

The caregiver will alert another member of the staff to call the parents or legal guardian immediately.

Some children may have urgent situations that do not necessarily require ambulance transport but still need medical attention. The list below includes situations that need to be treated within one hour. The legal guardian must be informed of the condition immediately. If the guardian or ELC cannot reach the physician within one hour, the child should be taken to a hospital.

- Fever in any aged child that looks more than mildly ill
- A quickly spreading purple rash
- A large volume of blood in the stools
- A cut that may require stitches

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- Any medical condition specifically outlined in a child’s care plan requiring parental notification

Immunizations

Immunizations will be required according to the current schedule recommended by the U.S. Public Health Service and the American Academy of Pediatrics (see www.aap.org). The Pennsylvania Department of Health regulations regarding attendance of children who are not immunized due to religious or medical reasons will be followed. Unimmunized children will be excluded during outbreaks of vaccine preventable illness as directed by the state Health Department.

Routine Preventive Health Services

Routine preventive health services will be required according to the current recommendations of the American Academy of Pediatrics (see www.aap.org). According to the ELC’s policy, documentation of an age appropriate health assessment should be obtained before the child starts receiving care. A visit to the doctor for a special health assessment or new documentation is not required for admission if documentation of an age-appropriate health assessment is current (within 3 months prior for an infant/ 6 months for a toddler/ 12 months for preschool child) and provided. Parents or legal guardians are responsible for assuring that their well-child visits are kept up-to-date and that a copy of the results of the child’s health assessment is given to the program. A child whose immunizations are not kept up-to-date will be dismissed after proof of immunization lapses one month.

Questions raised about the child’s health will be directed to the family or (with written permission of the parent or legal guardian) to the child’s health care provider for explanation and implications for child care. The ELC Director will check annually with the public health department of the American Academy of Pediatrics for updates of the schedule for routine preventive health services.

The Director will check the facility’s records a minimum of every three months to be sure each child’s immunization and other routine preventive health services are current. She will remind parents and legal guardians to provide documentation of health assessments although parents are ultimately responsible for keeping child’s file up to date.

Health Education

Health education will be a part of the curriculum for staff, families and children. Topic areas for staff and families may include: nutrition, stress management, exercise, child development, prenatal care, management of chronic disease, substance abuse, safety, first aid, control of infectious disease, HIV/AIDS, and other topic areas based on community needs and interests.

Speakers and materials may be obtained from community hospitals, children’s hospitals, voluntary health organizations, public health departments, health consultants, drug and alcohol programs, medical/oral health/nursing/mental health providers and organizations, health agencies, and local colleges and universities.

All health education activities and materials for children will be developmentally appropriate. Topic areas for children include: physical health, oral health, social health, emotional health, safety, and preventing infectious diseases.

The Director will notify parents/legal guardians if sensitive topic areas are included in the health education plan. Parents/legal guardians must notify the ELC staff if they do not want their children to be involved in activities related to a specific topic.

Medication Policy

If necessary, the ELC will dispense medication for your child. We will only dispense – over- the counter and/ or prescription medication that is in original, labeled container’s, and is accompanied by administration instructions, and is accompanied by the prescription from a doctor. All medications must have an expiration date on them. One doctor note for each prescription is required. All medications must be given to your child’s teacher to ensure they are locked up. **No medications, creams, or lip balms can be kept in a back pack, lunch box, a bag in a cubby, a diaper bag, or an infant bin.**

Parents will be asked to fill out a medication log for the medication. These forms can be found in all classrooms and in the hanging file folders in the hallway. Please mark all medication and sunscreen with your child’s first and last name on the box or container.

If your child is prescribed an epi-pen, it must be in the original box with the prescription. The epi-pen needs updated every 12 months along with the medication log.

Injury

If your child gets a minor scrape or bump, we will care for them. An accident report will be filled out by your child’s teacher informing you what happened. This will require a signature from a parent.

If your child has an injury that requires medical attention beyond first aid procedures, we will immediately work together to render the appropriate treatment. It is very important to keep your emergency form accurate. If needed, we will call 9-1-1 while we attempt to reach you. We will submit an accident/ injury report to you immediately or within 24 hours.

SAFETY

Staff

Each member of our staff has experience working with children. Every worker has valid Child Abuse History Clearance, Criminal Record Check and Federal Fingerprint Clearance. Every year we review fire safety together. We practice fire drills in the ELC. Staff members are properly trained in First Aid, CPR, Infant CPR and use of the defibrillator located in the hallway of the church. Your child’s safety is paramount to all decisions made, daily and hourly. Staff members meet monthly to continually improve the quality of our environment and of our care for each individual child.

Environment

It is our job to ensure your child remains in a safe environment. Please do not bring into the building anything that could harm a child. As a general precaution, do not bring your purse or diaper bag into the building. You may not bring a weapon into the building. While in our care, your child will not be exposed to broken toys or objects that could harm them. The ELC remains responsible for ensuring that no objects in our building are on a Consumer Product Safety recall list. We urge all parents to do the same.

Parents can easily sign up to be notified of recalled children's items. You may limit your notification to children's items and receive about one email per day that will help you keep the children we care for safe in their homes. To join a CPSC email subscription list, please go to <https://www.cpsc.gov/cpsclist.aspx>.

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 the outside temperature is greater than 88 °F or less than 32 °F degrees.

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

Prohibited Substances

The use of alcohol or illegal drugs is prohibited on the ELC 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.

Parents right to immediate access

Parents of a child in our care are entitled to immediate access, without prior notice, to their child whenever they are in our care.

In cases where the child is the subject of a court order (e.g., Custody Order, restraining Order, or protection from Abuse Order) The ELC must be provided with a Certified copy of the most recent order and all amendments. The orders will be strictly followed. In the absence of a court order, both parents shall be afforded equal access to their child as stipulated by law.

Suspected Child Abuse

All observations or suspicions of child abuse or neglect will be immediately reported to the protective services agency no matter where the abuse may have occurred. The Director will call to report suspected abuse or neglect. The Director will follow the direction of the child protective services agency regarding completion of written reports. If the parent or legal guardian of the child is suspected of abuse, The Director will follow the guidance of the child protective agency regarding notification of the parent or legal guardian. Reporters of suspected child abuse will not be discharged for making the reports unless it is proven that a false report was knowingly made.

Staff members who are accused of child abuse will be suspended or given leave without pay pending investigation of the accusation. Parents or legal guardians of suspected abused child will be notified. Parents or legal guardians of the other child in the program will be contacted by the Director. However, no accusation or affirmation of guilt will be made until the investigation is complete. Caregivers found guilty of child abuse will be summarily dismissed and relieved of their duties.

Confidentiality

Without your written consent, information in regard to your child(ren) will not be released, with the exception of that required by our regulatory and partnering agencies. All records concerning children in our program are confidential.

Staff Qualifications

Our staff members are hired in compliance with the state requirements and qualifications as a base minimum.

Typical staff certifications are as follows:

Position/Title	Education/Certification	Experience
Lead Teacher	Associate Degree in ECE	2 years
Assistant Teacher	CDA Credential	1 year
Aide	High School Diploma	# of hours
Runner	High School Diploma	# of hours

Staff members participate in orientation and ongoing training in the areas of growth and development, healthy and safe environments, developmentally appropriate practices, guidance, family relationships, cultural and individual diversity and professionalism.

We prohibit staff members from entering into employment arrangements with families (i.e. babysitting).

Child to Staff Ratios

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

In accordance with Pennsylvania State Regulations, we maintain the following standards for child to staff ratios:

Age	Child to Staff	Maximum Group Size
< 12 months	4 to 1	8
12 months - 23months	5 to 1	10
24 months – 35 months	6 to 1	12
3 years – 5 years	10 to 1	20
School aged	12 to 1	24

Communication & Family Partnership

Daily Communication Sheets are sent home from the lead teacher in each classroom. These sheets will keep you informed about your child(ren)'s activities and experiences throughout his/her day. Daily Communication Sheets will be placed into your child(ren)'s cubby/mailbox at the end of the day.

A bulletin board is located at the top of the main stairs. Here, you will find a variety of important information concerning our center and its programs. We will post child and family community information, as well as church sponsored family and child events. You will also find information in regard to health and human services, wellness, nutrition and fitness and child development.

Next to the kiosks on both the lower and upper level of the building, you will find hanging files which contain blank copies of important information sheets (i.e. Emergency Forms, Child Health Reports, Request for IEP/IFSP, etc.).

There is a parent information area in each classroom. This is where you will find the teacher's lesson plans, calendars, daily classroom schedule, special event announcements and any other information relevant to you and/or your child(ren).

Family participation is encouraged. You are welcome to visit our classrooms, volunteer for classroom events, attend classroom field trips or eat lunch with your child(ren). Checking in/out at the desk is required for the safety and protection of the children.

Child Service Reports are completed by lead teachers every six months. These reports indicate a child's age appropriate strengths and abilities, the next developmental milestones that are being worked on and what can be done at home to encourage growth and development. The lead teacher will review the report with you, have you sign to acknowledge the report was reviewed and give you a copy to keep. The center's copy is filed in your child's record.

Family and teacher conferences occur twice a year in January and July. 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 ask you to please communicate useful information and/or questions concerning your child's development or any range of concern to your child's lead teacher or the director. You may set up an appointment or speak briefly in person when dropping off your child with his/her lead teacher about concerns and triumphs related to your child.

Feel free to also communicate any range of issues via email to the director of the ELC, Fawn Pignoli. fawn@glenshawchurch.org.

Open Door Policy

Parents/guardians are welcome to visit the ELC at any time during regular hours. The infant room welcomes parents/guardians to nurse or feed their infants.

Having an Open-Door Policy does not mean the doors will be unlocked. For the safety and protection of the children, all external doors will be locked at all times. In order to enter the center, a person must ring the buzzer and the front door and a staff member will indicate when it is possible to enter. Someone entering the center for the first time will be asked to identify himself/herself and MUST provide a valid Driver's License.

Publicity

Photos will be taken of the children at different times in the center. Photos may be displayed in the center or on our website. Written permission will be indicated on the “Permission to Photograph” form to be completed for each child.

Curricula & Learning

Learning Environment

The philosophy of the ELC upholds that children need a safe, comfortable, and inspiring environment in order to develop to their full potential. The ELC provides a secure, nurturing, early educational environment that uses developmentally appropriate activities, experiences and materials to engage children in active meaningful learning.

We encourage children to accomplish set goals by completing major developmental tasks in the areas of social, emotional, physical and cognitive development.

Such goals are as follows:

- To foster positive self-identity and emotional well-being focusing on building self-confidence, self-esteem, independence and self-control.
- To develop social skills and strategies for coping with social issues.
- To encourage language and literacy development.
- To encourage children to think, reason, question, experiment and problem solve.
- To enhance physical development and skills using small and large muscle development.
- To encourage and model sound health, safety and nutritional practices.
- To foster creative expression, representation and appreciation for the arts.
- To respect and value cultural diversity.
- To enhance the awareness of the five senses: hearing, sight, smell, taste and touch.

The ELC uses the Pennsylvania Early Childhood Learning Standards.

Within 45 days of enrollment, we will complete a developmental screening and share it with you. Developmental screenings are then completed when your child moves to a new classroom.

Outings and Field Trips

Weather permitting, children will be taken outside daily for supervised outdoor play and/or walking. Children are accounted for at all times.

There is one supervised field trip per year for students in Preschool and Prekindergarten only. Pennsylvania State Law prohibits children under age 3 from going on field trips if transportation is required. Children that are age 3 must be accompanied by an adult. A Permission Slip is required to be signed for each child that plans to attend. During this field trip, children should be dressed appropriately for the season.

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.

Prior to your child's first day, you will have toured the ELC, allowed your child to visit, met your child's teacher(s) and peers and completed an enrollment meeting with the ELC's director or assistant director. Any concerns have been communicated. And the best means of communication to reach you has been established.

Children are transitioned to the next classroom 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 his/her new classroom.

Transition activities will be part of your child's education at the ELC. We will provide you with information on local schools, what to expect and ideas on how to talk to your child about going to Kindergarten.

Children who are of school age and attend Shaler School District may continue with before/after school care at our center provided there is space available. Staff members will ensure that your child arrives at the bus stop before pick up (before school) and drop off (after school) in a timely manner. The supplemental enrollment form must be completed and submitted with required registration fee by the deadline provided.

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 variety of activities as aids to teach our children respect for our world and the diversity of life upon it.

Celebrations

Your child may celebrate his/her special day with his/her friends. You may bring in a snack for the group if you choose. You may want to ask at the desk for the number of children in the room on a given day. We will serve the treat during morning or afternoon snack time. Although a birthday treat is not necessary, the connection from family to child care will help to make a positive day for your child.

We enjoy celebrating holidays. When possible, we use song and story time to relate holidays to the children. Each lead teacher will also plan a holiday party when possible. As a Christian outreach, we will celebrate Christmas and Easter with our Savior in mind.

Our holiday policy encourages an enhanced understanding of and respect for different cultures and beliefs of children, families, staff and community

Seasonal

We **MUST** have sunscreen for your child labeled with his/her first and last name. A sunscreen medication log must be completed each year. If you have multiple children in different learning groups within the ELC, please provide separate sunscreen for each of them.

Rest Time

Infants sleep according to their own schedule and are put to sleep on their backs. A crib is provided for each infant to sleep in. Blankets, as well as soft toys, are prohibited from being in the cribs with the infants. Caregivers/teachers directly observe infants by sight and sound at all times.

After lunch, all children, one year of age and older, participate in a quiet rest time. Children are not required to sleep. Children who do not sleep are given quiet activities to do.

All children, one year of age and older, are permitted, but not required, to bring a blanket from home. Blankets are provided for use by the ELC to children who do not have one. The ELC also provides cots to sleep on for all children one year of age and older.

Toilet Training

The most important factor in making the toilet training 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 demonstrate an interest or curiosity in the process. We are committed to working with you to make sure that toilet training is carried out in a manner that is consistent with your child's physical and emotional abilities and your family's concerns

GUIDANCE

Philosophy of Discipline

The ELC is committed to each student's success in learning within a caring, responsive and safe environment that is free of discrimination, violence and bullying. The 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.

Caregivers will equally use positive guidance, redirection and planning ahead to prevent problems, encouragement of appropriate behavior, communicate consistent and clear rules and involve children in problem solving to foster the child's own ability to become self-disciplined.

Where the child understands words, discipline will be explained to the child before and at the time of disciplinary action. Caregivers will encourage children to respect other people, to be fair, to respect property and to learn to be responsible for their own actions.

Caregivers will guide children to develop self-control and orderly conduct in relationship to peers and adults. Aggressive verbal or physical behavior toward staff or children is unacceptable. Caregivers will intervene immediately when a child becomes physically aggressive to protect all of the children and encourage more acceptable behavior. Caregivers will use discipline that is consistent, clear, and understandable to the child.

A child who cannot cooperate in a daily structure ex: hitting, biting, spitting more than two times during the day will be sent home and the Director has the right to suspend the child for the next day. If this behavior keeps occurring daily, a plan with the Teachers, Director and Family will be made. This may include calling Early childhood Mental Health Consultation Program 412-383-1528.

Permissible Methods of Discipline

For acts of aggression and fighting (examples include but are not limited to biting and hitting) Staff will set appropriate expectations for children and guide them in solving problems. This positive guidance will be the usual technique for managing children with challenging behaviors rather than punishing them for having problems they have not yet learned to solve.

In addition, staff may:

- Separate the children involved
- Immediately comfort the individual who was injured
- Care for any injury suffered by the victim involved in the incident
- Notify parents or legal guardians of the incident
- Review the adequacy of caregiver supervision, appropriateness of the facility activities, and administrative corrective action if there is reoccurrence

Physical Restraint will not be used except as necessary to ensure a child's safety or that of others, and then in the form of holding by another person as gently as possible only for as long as is necessary for control of the situation.

Time-out will be used if other management techniques are ineffective. Time out or removal of a child from the environment may be used selectively for children over 18 months of age who are at risk of harming themselves or others. The period of time-out will be just long enough to enable the child to regain self-control. As a general rule this period will not exceed one minute per year of age. Caregivers will monitor the effectiveness of time out and seek help when approved behavior management strategies do not seem to be effective.

Prohibited Practices

Caregivers will **NOT** use physical punishment or abusive language towards children at any time or in any situation.

Notification of Behavioral Issues to Families

If a child's behavior/circumstance is of concern, communication will begin with the parent(s)/legal guardian(s) 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.

EMERGENCIES

Closing Due to Extreme Weather or Other Circumstances

Should severe weather prevent us from opening on time or at all, please refer to school closing and delay listing on WPXI.

Should other conditions occur (i.e. loss of water, loss of power, etc.) making it necessary to close the early, you will receive a text message from our text messaging system. We will also contact you and/or your emergency contacts via phone if it becomes necessary.

Emergency Plan

Our emergency plan is located in the hallway at the top of the steps. Upon enrollment, parents are given a letter explaining the emergency procedures. We would send additional information if there were any updates to the parent plan. Our staff receives yearly training in the emergency plan.

CENTER POLICIES

Inclusion Policy

The ELC believes that children of all ability levels are entitled to the same opportunities for participation, acceptance and belonging in child care. Program enrollment is open to children of all abilities. Each child's optimal growth and development is promoted and supported through the implementation of a comprehensive system services and supports designed to identify and address individual needs within an inclusive leaning environment. 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. The Director and Assistant Director will be responsible for enforcing the inclusion policy concerning all children and families who wish to enroll or are currently enrolled.

Procedures for implementing inclusion policies:

- All staff participates in annual professional development to acquire knowledge, skills and dispositions required to implement inclusive practices.
- Each child receives a developmental/behavioral screening within 45 days of enrollment to inform individualized curriculum planning and identify additional support needs.
- Child assessments, using valid and reliable observation-based tools are completed at least twice per year. Internal data regarding child outcomes is maintained for each child.

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- Modifications in the learning program are made to ensure that all children's individual needs are met, i.e. curriculum adjustments, removing physical barriers, providing technology support.
 - Multiple and varied formats for instruction and learning are implemented to meet children's individual needs.
 - A multi-disciplinary team is established for children who receive early intervention services to ensure that an integrated process of communication and shared goal planning exists.
 - Family conferences are provided at least twice per year to discuss children's strengths, progress and developmental needs. And to engage families in shared goal planning.
 - The learning environment is assessed at least annually, using reliable observation instruments that include indicators for staff/child interaction and responsive, inclusive teaching practices. Assessment results are used to inform the program's continuous quality improvement goal planning.
 - Formal relations are established between key stakeholders to ensure a collaborative approach to providing services and supports to children, families and staff.
 - Specialized services and therapies are integrated into the general ECE program.

If a child has been identified as special needs, please be sure to provide us with this information so that we may make the necessary accommodations. We will use developmentally appropriate practices and consider the unique needs of the child when planning. Schedules, routines and activities are flexible.

Training and support are provided to ensure that all staff are comfortable, confident and competent to meet the developmental and educational needs of all children. All staff receive an orientation on inclusion policies and attend training focused on effective inclusion and/or other special needs topics whenever possible. The director provides additional support and resources as appropriate.

Early childhood educators will work with therapists, special educators and other professionals to integrate individual modifications and strategies into classroom routines and activities. The service provider is encouraged to provide services to the child in the context of the learning environment. The child's teacher and the service provider will work collaboratively to determine the best strategies to support the child in the group setting.

The ELC supports the teacher's participation in Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP) meetings. We will support families by consulting with early intervention professionals who have valuable knowledge and expertise to share with each other. We are committed to learning more about various special needs and full inclusion as part of our annual training plan.

Any adaptations will be reviewed with families and other professionals supporting your child.

Suspension/Expulsion Prevention Policy

Unfortunately, on some occasions, we are faced with making the decision of suspending or expelling a child from the ELC on either a short term or permanent basis. Prior to the need of making this decision, we will attempt to explore every other option possible to work with the family of the child(ren) in order to prevent this policy from being enforced. The following are reasons that we may have to suspend or expel a child from the center.

Causes for Suspension/Expulsion:

- Ongoing, uncontrollable tantrums/angry outbursts.
- Ongoing physical or verbal abuse towards staff members and/or other children.
- Ongoing excessive biting.
- A child is at risk of causing serious injury to him/herself or to other children.
- A parent threatens physical or intimidation actions towards enrolled children.
- A parent exhibits verbal abuse towards enrolled children.
- A parent threatens physical or intimidating actions towards staff members.
- A parent exhibits verbal abuse towards staff in front of enrolled children.

A comprehensive system of services and supports, including early intervention and inclusion planning has been established to ensure the practices such as suspension and expulsion, which have proven to be detrimental to children's health and well-being, are prevented. In the event that, after all available services and supports have been provided, a child's needs cannot be met within our inclusive learning environment, an alternative care plan will be developed in collaboration with the family.

Procedures:

The assigned Primary Caregiver/Teacher will begin the relationship building process with children and families upon enrollment. When concerns are identified regarding a child's development, learning or behavior the following intervention steps will be taken.

1. Primary Teacher will conduct observations of the child. A peer observer will also be designated to conduct observations of the child within the classroom.
2. Designated observer, i.e. Director will conduct observations in the classroom focusing on the "big picture" including the child, the environment, daily routine, classroom management, per interaction and teacher behavior/interaction.
3. A screening tool will be used will be used by both the Primary Teacher and the Director. Once conducted, the results of both screenings will be scored, compared and discussed.
4. Designated staff will meet with the child's family to share information gathered; seek additional information regarding the child within the home setting; and plan the next steps. If the family still has concerns, they will also be given a copy of the screening tool to complete. (If scores of all three screenings indicate concerns, further assessment will be scheduled.)
5. Permission to schedule early intervention consultation/assessment will be secured from the family when early intervention screening is planned.

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6. Request support by reporting to OCDEL all incidents of children at high risk for expulsion or suspension or have been asked to leave care. We will request support by completing the online form at www.surveymonkey.com/r/PAExpulsionHelp or calling OCDEL at 1-800-692-7288.
 7. An Early Intervention provider will meet with the family and staff to discuss the assessment and make plans to begin the assessment process.
 8. Designated member(s) of the team will meet with the child's family to review and discuss assessment results. If warranted, a multi-disciplinary team, along with the family, will be engaged to begin planning early intervention services and supports.
 9. Specialized professional development for staff is planned and implemented if warranted.
 10. Adaptations (curriculum, environment, etc.) are made to the learning environment, per multi-disciplinary team recommendations.
 11. Regularly scheduled multi-disciplinary meetings are planned and implemented.

***In the event that is determined a child's special needs cannot be met with the inclusive environment that has been established, the multi-disciplinary team will develop an alternative care plan to assist the family in identifying resources available to address the child's specific needs.

We maintain a zero tolerance of bullying. If you have any concerns about this at any time, please report it to the Director of the ELC.

Individual Care in a Group Center

The ELC is dedicated to caring for each child as a unique individual. However, if a child experiences little to no success in a group setting after the teacher has made reasonable accommodations, and if the child cannot find success without direct and continual guidance, we may utilize the option of one-on-one care during the time which that child is in the ELC. This may apply but is not limited to a child who has an incapacitating injury, uncontrollable behavior, inability to discern safety measures, or the absence of the ability to pay attention. When the Director and the parents/caregiver agree, a staff member will be placed in responsibility for that one child in an appropriate group setting at a rate of \$15.00/ hour in addition to the normal daily group rate.

Mandated Reporting of Suspected Child Abuse and/or Neglect

The Child Protective Services Law is designed to protect the welfare and best interest of all children. Under this Law mandated reporters are required to report any suspicion of abuse or neglect to the appropriate authorities. Mandated reporters can be held criminally responsible if they fail to report suspected abuse or neglect. All employees of the center are Mandated Reporters. The employees of the ELC are not required to discuss their suspicions with parents prior to or after reporting the matter to appropriate authorities. The guidelines of the Glenshaw Presbyterian Safe Church Policy will be followed.

PREVENTION OF SHAKEN BABY AND ABUSIVE HEAD TRAUMA

Belief Statement

We, the Glenshaw Presbyterian Church Early Learning Center, believe that preventing, recognizing, responding to, and reporting shaken baby syndrome and abusive head trauma (SBS/AHT) is an important function of keeping children safe, protecting their healthy development, providing quality child care, and educating families.

Background

SBS/AHT is the name given to a form of physical child abuse that occurs when an infant or small child is violently shaken and/or there is trauma to the head. Shaking may last only a few seconds but can result in severe injury or even death¹. According to North Carolina Child Care Rule (child care centers, 10A NCAC 09 .0608, family child care homes, 10A NCAC 09 .1726), each child care facility licensed to care for children up to five years of age shall develop and adopt a policy to prevent SBS/AHT².

Procedure/Practice

Recognizing:

- Children are observed for signs of abusive head trauma including irritability and/or high pitched crying, difficulty staying awake/lethargy or loss of consciousness, difficulty breathing, inability to lift the head, seizures, lack of appetite, vomiting, bruises, poor feeding/sucking, no smiling or vocalization, inability of the eyes to track and/or decreased muscle tone. Bruises may be found on the upper arms, rib cage, or head resulting from gripping or from hitting the head.

Responding to:

- If SBS/ABT is suspected, staff will:
 - Call 911 immediately upon suspecting SBS/AHT and inform the director.
 - Call the parents/guardians.
 - If the child has stopped breathing, trained staff will begin pediatric CPR⁴.

Reporting:

- Instances of suspected child maltreatment in child care are reported to Division of Child Development and Early Education (DCDEE) by calling 1-800-859-0829 or by emailing webmasterdcd@dhhs.nc.gov.
- Instances of suspected child maltreatment in the home are reported to the county Department of Social Services.

Prevention strategies to assist staff* in coping with a crying, fussing, or distraught child

Staff first determine if the child has any physical needs such as being hungry, tired, sick, or in need of a diaper change. If no physical need is identified, staff will attempt one or more of the following strategies⁵:

- Rock the child, hold the child close, or walk with the child.
- Stand up, hold the child close, and repeatedly bend knees.
- Sing or talk to the child in a soothing voice.
- Gently rub or stroke the child's back, chest, or tummy.
- Offer a pacifier or try to distract the child with a rattle or toy.
- Take the child for a ride in a stroller.
- Turn on music or white noise.
- In addition, the facility:
- Allows for staff who feel they may lose control to have a short, but relatively immediate break away from the children⁶.
- Provides support when parents/guardians are trying to calm a crying child and encourage parents to take a calming break if needed.

Prohibited behaviors

Behaviors that are prohibited include (but are not limited to):

- shaking or jerking a child
- tossing a child into the air or into a crib, chair, or car seat
- pushing a child into walls, doors, or furniture

Strategies to assist staff members understand how to care for infants

Staff reviews and discusses:

- The five goals and developmental indicators in the 2013 North Carolina Foundations for Early Learning and Development, ncchildcare.nc.gov/PDF_forms/NC_Foundations.pdf
- How to Care for Infants and Toddlers in Groups, the National Center for Infants, Toddlers and Families, www.zerotothree.org/resources/77-how-to-care-for-infants-and-toddlers-in-groups
- Including Relationship-Based Care Practices in Infant-Toddler Care: Implications for Practice and Policy, the Network of Infant/Toddler Researchers, pages 7-9, www.acf.hhs.gov/sites/default/files/opre/nitr_inquire_may_2016_070616_b508compliant.pdf

Strategies to ensure staff members understand the brain development of children up to five years of age

All staff take training on SBS/AHT within first two weeks of employment. Training includes recognizing, responding to, and reporting child abuse, neglect, or maltreatment as well as the brain development of children up to five years of age. Staff review and discuss:

- Brain Development from Birth video, the National Center for Infants, Toddlers and Families, www.zerotothree.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth
- The Science of Early Childhood Development, Center on the Developing Child, developingchild.harvard.edu/resources/inbrief-science-of-eed/

Resources

Parent web resources

- The American Academy of Pediatrics: www.healthychildren.org/English/safety-prevention/at-home/Pages/Abusive-Head-Trauma-Shaken-Baby-Syndrome.aspx
- The National Center on Shaken Baby Syndrome: <http://dontshake.org/family-resources>
- The Period of Purple Crying: <http://purplecrying.info/>

Facility web resources

- Caring for Our Children, Standard 3.4.4.3 Preventing and Identifying Shaken Baby Syndrome/Abusive Head Trauma, <http://cfoc.nrckids.org/StandardView.cfm?StdNum=3.4.4.3&=+>
- Preventing Shaken Baby Syndrome, the Centers for Disease Control and Prevention, http://centerforchildwelfare.fmhi.usf.edu/kb/trprev/Preventing_SBS_508-a.pdf
- Early Development & Well-Being, Zero to Three, www.zerotothree.org/early-development

References

1. The National Center on Shaken Baby Syndrome, www.dontshake.org
2. NC DCDEE, ncchildcare.dhhs.state.nc.us/general/mb_ccrulespublic.asp
3. Shaken baby syndrome, the Mayo Clinic, www.mayoclinic.org/diseases-conditions/shaken-baby-syndrome/basics/symptoms/con-20034461
4. Pediatric First Aid/CPR/AED, American Red Cross, www.redcross.org/images/MEDIA_CustomProductCatalog/m4240175_Pediatric_ready_reference.pdf
5. Calming Techniques for a Crying Baby, Children's Hospital Colorado, www.childrenscolorado.org/conditions-and-advice/calm-a-crying-baby/calming-techniques
6. Caring for Our Children, Standard 1.7.0.5: Stress <http://cfoc.nrckids.org/StandardView/1.7.0.5>

Application

This policy applies to children up to five years of age and their families, operators, early educators, substitute providers, and uncompensated providers.

Communication

Staff*

- Within 30 days of adopting this policy, the child care facility shall review the policy with all staff who provide care for children up to five years of age.
- All current staff members and newly hired staff will be trained in SBS/AHT before providing care for children up to five years of age.
- Staff will sign an acknowledgement form that includes the individual's name, the date the center's policy was given and explained to the individual, the individual's signature, and the date the individual signed the acknowledgment
- The child care facility shall keep the signed SBS/AHT staff acknowledgement form in the staff member's file.

Parents/Guardians

- Within 30 days of adopting this policy, the child care facility shall review the policy with parents/guardians of currently enrolled children up to five years of age.
- A copy of the policy will be given and explained to the parents/guardians of newly enrolled children up to five years of age on or before the first day the child receives care at the facility.
- Parents/guardians will sign an acknowledgement form that includes the child's name, date the child first attended the facility, date the operator's policy was given and explained to the parent, parent's name, parent's signature, and the date the parent signed the acknowledgement
- The child care facility shall keep the signed SBS/AHT parent acknowledgement form in the child's file.

* For purposes of this policy, "staff" includes the operator and other administration staff who may be counted in ratio, additional caregivers, substitute providers, and uncompensated providers.

Effective Date 02/10/2022

COMMUNITY CONTACTS

There are many services designed to help children and families. However, many times in need, people are unable to seek appropriate help. The following list should help you if you are in need. Please seek additional information on the parent bulletin board and corresponding hanging files.

Glenshaw Presbyterian Church 412-486-8400 www.glenshawchurch.org

Shaler Police: 412-492-2222

For fire and police emergency dial 9-1-1

Shaler/North Hills Library 412-486-0211 www.shalerlibrary.org

North Hills Community Outreach: 412-307-0069

Resource Book: A Directory of Health, Welfare, and Community Services in Allegheny County

Shaler Area School District 412-492-1200 www.sasd.k12.pa.us

Burchfield Primary School: ext. 4500

Scott Primary School: ext.5800

Marzolf Primary School: ext. 6500

Reserve Primary School: ext. 7500

Shaler Borough 412-486-9700

Pennsylvania Department of Human Services: 1-800-692-7462

Child Care Information Services (CCIS): 412-261-2273

Pennsylvania Department of Health: 1-877-724-3258

Pennsylvania Keystone Stars to Quality Child Care – Southwest Regional Key: 412-255-1175

Pennsylvania Child Care Association (PACCA): 717-657-9000

Warmline (non-medical questions about children): 800-641-4546

Allegheny Intermediate Unit: 412-394-5700

For Information on Early Intervention Referral in Allegheny County:

Birth through 3 years: 412-885-6000

3 years through Kindergarten: 412-394-5904

Birth through Kindergarten: 800-692-7288

*To arrange a free screening/evaluation to determine whether your child has a special need and is eligible for early intervention services (early intervention services may include professional education of ELC staff members to provide optimal care for your child while attending ELC or a

variety of individualized additional services) call 412-394-5736 or 412-394-5816 or E-mail susan.sams@aiu3.net

TEACH Early Childhood Scholarship Program: 717-657-9000 or email; info@pacca.org

Family Links: 412-661-1800

For Information concerning Child Protection in Allegheny County:

Child Protection Service: 412-473-2000

Children's Hospital Child Abuse Screening: 412-692-8664

Family Resources: 412-363-1702

Parental Stress Center: 412-361-4800

CONTACTING THE EARLY LEARNING CENTER

Glenshaw Presbyterian Church

Early Learning Center

300 Glenn Avenue

Glenshaw, PA 15116

Phone: 412-487-5490

fawn@glenshawchurch.org