

# **Using This Childcare Center Policy & Procedure Handbook Template**

## **Introduction**

This template is designed to help childcare center directors, owners, and administrators create a comprehensive, professional policy and procedure handbook. A well-crafted handbook serves multiple purposes:

1. **Communication Tool**: Clearly conveys your policies, expectations, and procedures to families
2. **Legal Protection**: Documents your policies and helps ensure consistent application
3. **Regulatory Compliance**: Addresses requirements from licensing agencies
4. **Marketing Asset**: Showcases your professionalism and program quality
5. **Operational Guide**: Provides a reference for staff and families on daily operations

## **How to Use This Template**

### **Customization Instructions**

1. **Read through the entire template** first to understand all sections before beginning to customize
2. **Replace all bracketed text** [like this] with information specific to your center
3. **Delete any sections** that don't apply to your program
4. **Add additional sections** as needed for your unique situation
5. **Maintain consistent formatting** throughout the document for a professional appearance
6. **Include your center's branding** (logo, colors, fonts) for a personalized touch
7. **Have multiple people review** the draft for clarity, completeness, and accuracy
8. **Consult legal counsel** to ensure the handbook complies with applicable laws and regulations

### **Important Considerations**

* **State Licensing Requirements**: Ensure your handbook addresses all policies required by your state's licensing regulations
* **Family-Friendly Language**: Use clear, straightforward language avoiding jargon and legalese when possible
* **Tone and Voice**: Strike a balance between professionalism and warmth that reflects your center's culture
* **Consistency**: Ensure policies are consistent throughout the document (e.g., don't state different late fees in different sections)
* **Updates**: Plan to review and update your handbook annually or when significant policy changes occur
* **Distribution**: Decide how you'll distribute the handbook (print, digital, or both) and have families acknowledge receipt
* **Translations**: Consider whether you need to provide translations for families who speak languages other than English

## **Key Sections to Customize Carefully**

Pay special attention to these sections that often require detailed customization:

1. **Tuition and Fees**: Clearly outline all costs, payment schedules, and financial policies
2. **Health and Illness**: Update to reflect current best practices and any pandemic-related protocols
3. **Behavior Guidance**: Ensure approach aligns with your philosophy and meets regulatory requirements
4. **Arrival/Departure**: Detail security procedures and authorized pick-up policies
5. **Emergency Procedures**: Include specific evacuation locations and communication protocols
6. **Staff Qualifications**: Highlight the qualifications and ongoing training of your team

## **Implementation Tips**

1. **Orientation Process**: Develop a process for reviewing key handbook policies with new families
2. **Acknowledgment Form**: Create a form for families to sign indicating they've read and agree to follow handbook policies
3. **Highlight Changes**: When updating, highlight changes to draw attention to new or revised policies
4. **Staff Training**: Ensure all staff are familiar with handbook policies and apply them consistently
5. **Quick Reference Guide**: Consider creating a one-page summary of the most important or frequently referenced policies
6. **Digital Access**: If possible, make the handbook available online for easy reference
7. **Review Committee**: Form a committee of staff and parent representatives to provide input on policy changes

## **Legal Considerations**

This template provides a framework but should be adapted to comply with:

* State and local licensing regulations
* Employment laws
* Health department requirements
* ADA and inclusion standards
* Privacy regulations
* Insurance requirements

It is strongly recommended that your final handbook be reviewed by an attorney familiar with childcare regulations in your state before distribution to families.

## **Final Checklist Before Distribution**

* All bracketed text has been replaced with center-specific information
* Contact information, hours, and dates are accurate and consistent
* Policies comply with current licensing regulations
* Language is clear, professional, and free of errors
* Legal review has been completed
* Staff have been trained on all policies
* Distribution plan is in place
* Acknowledgment form is ready
* Digital and/or print copies are prepared
* Update schedule has been established

Remember that your handbook is often a family's first detailed look at your program's operations. A thoughtful, well-organized handbook reflects the quality and professionalism of your center.

# **Section 1: Welcome and Introduction**

## **Welcome Letter**

Dear Families,

On behalf of the staff at **[Insert Center Name -- e.g., Bright Futures Childcare Center]**, I would like to welcome you to our center. We are honored that you have chosen us to care for your child during these important early years.

**[Insert personal welcome from Director -- e.g., As the Director of Bright Futures, I believe that each child deserves a nurturing environment where they can grow, learn, and thrive. Our dedicated team is committed to providing exceptional care that supports your child's unique development.]**

This handbook outlines our policies and procedures. Please read it carefully and keep it for future reference. If you have any questions, please feel free to contact me at **[Insert contact information -- e.g.,** [**director@brightfutures.com**](mailto:director@brightfutures.com) **or (555) 123-4567]**.

Sincerely,

**[Insert Director's Name -- e.g., Maria Johnson]**

Director, **[Insert Center Name]**

## **About Our Center**

**[Insert Center Name]** was established in **[Insert Year -- e.g., 2010]** and is licensed by **[Insert Licensing Agency -- e.g., the Department of Early Education and Care]**. We are located at **[Insert Address -- e.g., 123 Main Street, Anytown, USA]**.

### **Our Mission**

**[Insert Mission Statement -- e.g., At Bright Futures Childcare Center, our mission is to provide a safe, stimulating, and nurturing environment where children can develop socially, emotionally, physically, and intellectually. We are committed to supporting each child's unique journey and partnering with families to ensure the best possible care.]**

### **Contact Information**

* **Center Phone:** **[Insert Phone Number -- e.g., (555) 123-4567]**
* **Emergency Phone:** **[Insert Emergency Number -- e.g., (555) 987-6543]**
* **Email:** **[Insert Email -- e.g.,** [**info@brightfutures.com**](mailto:info@brightfutures.com)**]**
* **Website:** **[Insert Website -- e.g.,** [**www.brightfutureschildcare.com**](http://www.brightfutureschildcare.com/)**]**
* **Tax ID Number:** **[Insert Tax ID -- e.g., 12-3456789]**

### **Hours of Operation**

**[Insert Hours -- e.g., Monday through Friday, 7:00 AM to 6:00 PM]**

### **Center Leadership**

* **Director:** **[Insert Director's Name -- e.g., Maria Johnson]**
* **Assistant Director:** **[Insert Assistant Director's Name -- e.g., Robert Smith]**
* **Owner/Operator:** **[Insert Owner's Name -- e.g., Bright Futures, LLC]**

## **Non-Discrimination Statement**

**[Insert Center Name]** does not discriminate based on race, color, national origin, religion, sex, gender identity, disability, age, or any other protected status in its admission policies, educational programs, activities, or employment practices.

Would you like to continue to Section 2: Philosophy and Curriculum?

# **Section 2: Philosophy and Curriculum**

## **Educational Philosophy**

**[Insert Educational Philosophy -- e.g., At Bright Futures Childcare Center, we believe that children learn best through play and exploration in a supportive environment. Our approach combines elements of Reggio Emilia, Montessori, and developmentally appropriate practices. We view each child as capable, curious, and full of potential. Our teachers serve as guides who observe, document, and extend children's learning through thoughtful interactions and engaging materials.]**

## **Curriculum Approach**

**[Insert Curriculum Description -- e.g., Our curriculum is designed to support the whole child across all developmental domains: cognitive, social-emotional, physical, and language development. Rather than focusing solely on academic skills, we emphasize building a foundation of curiosity, critical thinking, and social competence that will serve children throughout their lives.]**

### **Learning Centers**

Our classrooms are arranged into the following learning centers to promote exploration and skill development:

* **[Insert Learning Center -- e.g., Art Studio: Where children express creativity through various media]**
* **[Insert Learning Center -- e.g., Block Area: For engineering, spatial reasoning, and cooperative play]**
* **[Insert Learning Center -- e.g., Dramatic Play: For role-playing, language development, and social skills]**
* **[Insert Learning Center -- e.g., Science and Discovery: For exploration, observation, and inquiry]**
* **[Insert Learning Center -- e.g., Literacy Center: For developing language, reading, and writing skills]**
* **[Insert Learning Center -- e.g., Math and Manipulatives: For developing logical thinking and problem-solving]**
* **[Insert Learning Center -- e.g., Sensory Area: For tactile exploration and sensory development]**
* **[Insert Learning Center -- e.g., Outdoor Classroom: For gross motor skills, nature exploration, and fresh air]**

## **Age-Specific Programs**

### **Infant Program (Ages [Insert Age Range -- e.g., 6 weeks to 14 months])**

**[Insert Infant Program Description -- e.g., Our infant program focuses on creating a nurturing, responsive environment where babies can form secure attachments with caregivers. We follow each infant's natural rhythms for feeding, sleeping, and play. Teachers engage infants through singing, talking, reading, and sensory experiences that support their developing brains.]**

### **Toddler Program (Ages [Insert Age Range -- e.g., 15 months to 2.5 years])**

**[Insert Toddler Program Description -- e.g., Our toddler program supports children's growing independence, language acquisition, and social development. We provide opportunities for sensory exploration, movement, early literacy, and self-help skills. Teachers guide toddlers through transitions and help them develop emotional regulation through consistent routines and responsive interactions.]**

### **Preschool Program (Ages [Insert Age Range -- e.g., 2.5 to 5 years])**

**[Insert Preschool Program Description -- e.g., Our preschool program builds on children's natural curiosity through project-based learning and intentional teaching. Activities support early literacy, math concepts, scientific inquiry, creative arts, and social skills. Children develop school readiness within the context of play and meaningful experiences. Teachers document children's learning and share observations with families regularly.]**

## **Daily Schedule**

Below is a general framework for our daily schedule. Each classroom posts their specific schedule, which may vary slightly based on the age group and the children's needs.

[Insert Sample Schedule -- e.g.,

* 7:00-8:30 AM: Arrival and Free Choice Activities
* 8:30-9:00 AM: Morning Snack
* 9:00-9:30 AM: Morning Meeting/Circle Time
* 9:30-10:45 AM: Learning Centers/Small Group Activities
* 10:45-11:45 AM: Outdoor Play
* 11:45 AM-12:30 PM: Lunch
* 12:30-2:30 PM: Rest Time
* 2:30-3:00 PM: Afternoon Snack
* 3:00-4:00 PM: Learning Centers/Small Group Activities
* 4:00-5:00 PM: Outdoor Play
* 5:00-6:00 PM: Free Choice Activities and Departure]

## **Assessment and Documentation**

**[Insert Assessment Approach -- e.g., Our teachers observe and document children's development using anecdotal notes, photographs, work samples, and developmental checklists. This documentation helps us understand each child's progress, plan appropriate activities, and share meaningful information with families. We conduct formal assessments twice yearly and hold parent-teacher conferences to discuss your child's growth and development.]**

Would you like to continue to Section 3: Enrollment and Admission Policies?

# **Section 3: Enrollment and Admission Policies**

## **Eligibility Requirements**

**[Insert Center Name]** accepts children between the ages of **[Insert Age Range -- e.g., 6 weeks and 5 years]**. All children must meet the following eligibility criteria:

* **[Insert Eligibility Requirement -- e.g., Age-appropriate for the program they are entering]**
* **[Insert Eligibility Requirement -- e.g., Up to date on required immunizations according to state regulations, unless medically exempt]**
* **[Insert Eligibility Requirement -- e.g., Able to participate in the program with reasonable accommodations if needed]**

## **Admission Process**

### **1. Initial Inquiry and Tour**

Families interested in enrolling their child should:

* **[Insert First Step -- e.g., Contact the center to schedule a tour]**
* **[Insert Second Step -- e.g., Complete a pre-enrollment information form]**
* **[Insert Third Step -- e.g., Meet with the Director to discuss the program and family needs]**

### **2. Waitlist Policy**

**[Insert Waitlist Policy -- e.g., If space is not immediately available, families may join our waitlist by submitting a waitlist application and a non-refundable fee of $50. Priority is given to siblings of currently enrolled children and children of staff members. Families are contacted when a space becomes available that matches their requested schedule and program.]**

### **3. Enrollment Requirements**

To secure enrollment, families must submit the following completed forms:

* **[Insert Required Form -- e.g., Enrollment Application]**
* **[Insert Required Form -- e.g., Emergency Contact Information]**
* **[Insert Required Form -- e.g., Child Health Assessment Form (completed by healthcare provider)]**
* **[Insert Required Form -- e.g., Immunization Record]**
* **[Insert Required Form -- e.g., Authorization for Emergency Medical Treatment]**
* **[Insert Required Form -- e.g., Pick-up Authorization Form]**
* **[Insert Required Form -- e.g., Media Release Form]**
* **[Insert Required Form -- e.g., Family Handbook Acknowledgment]**
* **[Insert Required Form -- e.g., Financial Agreement]**

### **4. Enrollment Fee and Deposit**

**[Insert Enrollment Fee and Deposit Information -- e.g., A non-refundable enrollment fee of $150 and a deposit equal to two weeks' tuition are required to secure your child's placement. The deposit will be applied to your child's last two weeks of care, provided a two-week written notice of withdrawal is given.]**

## **Required Documentation**

### **Health Records**

All children must have the following health documentation on file:

* **[Insert Health Requirement -- e.g., A current physical examination (completed within the past 12 months) signed by a licensed healthcare provider]**
* **[Insert Health Requirement -- e.g., Complete immunization record as required by state regulations]**
* **[Insert Health Requirement -- e.g., Completed health history form]**
* **[Insert Health Requirement -- e.g., Special care plans for children with allergies, asthma, or other health concerns]**

### **Family Documentation**

Families must provide:

* **[Insert Family Documentation -- e.g., Proof of identity for the parent/guardian enrolling the child (government-issued photo ID)]**
* **[Insert Family Documentation -- e.g., Legal custody documents, if applicable]**
* **[Insert Family Documentation -- e.g., Proof of residence]**

## **Trial Period**

**[Insert Trial Period Policy -- e.g., All new enrollments are subject to a two-week trial period to ensure that the placement is a good fit for the child, family, and center. During this period, either the family or the center may terminate care with 24 hours' notice without penalty. After the trial period, our standard withdrawal policy applies.]**

## **Ages and Stages of Programs**

Our center offers programs for the following age groups:

* **Infant Room:** **[Insert Age Range -- e.g., 6 weeks to 14 months]**
* **Toddler Room:** **[Insert Age Range -- e.g., 15 months to 2.5 years]**
* **Preschool Room:** **[Insert Age Range -- e.g., 2.5 to 4 years]**
* **Pre-Kindergarten Room:** **[Insert Age Range -- e.g., 4 to 5 years]**

## **Transitions Between Classrooms**

**[Insert Transition Policy -- e.g., Children typically transition to the next age group based on their developmental readiness, available space, and age. Before any transition, teachers from both classrooms will meet with parents to discuss the process. Children will have opportunities to visit their new classroom gradually over a two-week period to ensure a smooth adjustment. Families will receive written notice at least two weeks before a planned transition.]**

## **Children with Special Needs**

**[Insert Special Needs Policy -- e.g., Our center is committed to providing inclusive care for all children. We will make reasonable accommodations for children with special needs in compliance with the Americans with Disabilities Act. Families should discuss their child's specific needs with the Director during the enrollment process to ensure we can provide appropriate support. We may request that families provide additional documentation, such as individualized education plans or recommendations from therapists, to help us better serve their child.]**

# **Section 4: Tuition and Fees**

## **Tuition Rates**

Effective **[Insert Date -- e.g., January 1, 2025]**, our tuition rates are as follows:

### **Infant Program (Ages [Insert Age Range -- e.g., 6 weeks to 14 months])**

* **Full-time (5 days):** **[Insert Rate -- e.g., $400 per week]**
* **Part-time (3 days):** **[Insert Rate -- e.g., $270 per week]**
* **Part-time (2 days):** **[Insert Rate -- e.g., $190 per week]**

### **Toddler Program (Ages [Insert Age Range -- e.g., 15 months to 2.5 years])**

* **Full-time (5 days):** **[Insert Rate -- e.g., $375 per week]**
* **Part-time (3 days):** **[Insert Rate -- e.g., $250 per week]**
* **Part-time (2 days):** **[Insert Rate -- e.g., $175 per week]**

### **Preschool Program (Ages [Insert Age Range -- e.g., 2.5 to 4 years])**

* **Full-time (5 days):** **[Insert Rate -- e.g., $350 per week]**
* **Part-time (3 days):** **[Insert Rate -- e.g., $230 per week]**
* **Part-time (2 days):** **[Insert Rate -- e.g., $160 per week]**

### **Pre-Kindergarten Program (Ages [Insert Age Range -- e.g., 4 to 5 years])**

* **Full-time (5 days):** **[Insert Rate -- e.g., $325 per week]**
* **Part-time (3 days):** **[Insert Rate -- e.g., $210 per week]**
* **Part-time (2 days):** **[Insert Rate -- e.g., $150 per week]**

## **Payment Schedule**

**[Insert Payment Schedule -- e.g., Tuition is due every Monday for the current week of care. Monthly payments may be arranged and are due by the 1st of each month for that month's care.]**

## **Payment Methods**

We accept the following payment methods:

* **[Insert Payment Method -- e.g., Automatic bank draft (preferred)]**
* **[Insert Payment Method -- e.g., Credit/debit card (subject to a 3% processing fee)]**
* **[Insert Payment Method -- e.g., Check or money order made payable to "[Center Name]"]**
* **[Insert Payment Method -- e.g., Cash (receipt provided)]**
* **[Insert Payment Method -- e.g., Online payment through our parent portal]**

## **Additional Fees**

### **Registration Fee**

**[Insert Registration Fee Policy -- e.g., A non-refundable annual registration fee of $150 per child or $200 per family is due at enrollment and every September thereafter.]**

### **Deposit**

**[Insert Deposit Policy -- e.g., A deposit equal to two weeks' tuition is required at enrollment. This deposit will be applied to your child's final two weeks of care, provided a two-week written notice of withdrawal is given.]**

### **Late Payment Fee**

**[Insert Late Payment Fee -- e.g., A late fee of $25 will be charged for payments received after Wednesday of the week due. An additional $10 per day will be charged for each day payment is late thereafter.]**

### **Returned Check Fee**

**[Insert Returned Check Fee -- e.g., A $35 fee will be charged for any returned checks or failed automatic payments. After two returned checks, only cash, money order, or credit card payments will be accepted.]**

### **Late Pick-up Fee**

**[Insert Late Pick-up Fee -- e.g., Our center closes promptly at 6:00 PM. A late fee of $1 per minute will be charged for pick-ups after closing time. This fee is payable directly to the teachers who stay late. Excessive late pick-ups (more than three times in a month) may result in termination of care.]**

### **Supply Fee**

**[Insert Supply Fee -- e.g., A supply fee of $75 per child is due twice yearly (September and January) to cover classroom materials and special activities.]**

## **Sibling Discount**

**[Insert Sibling Discount -- e.g., Families with more than one child enrolled full-time receive a 10% discount on the lower tuition rate. This discount applies to tuition only and not to registration, supply fees, or other charges.]**

## **Subsidized Care**

[Insert Subsidy Information -- e.g., We accept state childcare subsidies. Families are responsible for:

* Completing all required paperwork with the subsidy agency
* Maintaining eligibility
* Paying the difference between the subsidy amount and our tuition rate
* Paying any co-payments assigned by the subsidy agency]

## **Absences and Vacation Policy**

### **Sick Days/Absences**

**[Insert Absence Policy -- e.g., Full tuition is due regardless of absences due to illness or other reasons. We cannot offer make-up days or credit for missed days.]**

### **Vacation Credit**

[Insert Vacation Policy -- e.g., After six months of enrollment, families are eligible for one week of vacation credit per calendar year (January-December). To receive this credit, families must:

* Provide at least two weeks' written notice
* Take all vacation days in the same week (consecutive days)
* Not use the center during the vacation week]

## **Holiday Closures**

**[Insert Holiday Policy -- e.g., Full tuition is due during weeks with holiday closures. Our tuition is calculated as an annual rate and divided into equal weekly or monthly payments, taking into account these scheduled closures.]**

## **Rate Increases**

**[Insert Rate Increase Policy -- e.g., Tuition rates are subject to increase once per year, typically in September. Families will receive at least 30 days' written notice before any rate change takes effect.]**

## **Withdrawal Policy**

**[Insert Withdrawal Policy -- e.g., A two-week written notice is required before withdrawing your child from our program. Full tuition is due during this two-week period regardless of whether your child attends. The security deposit will be applied to this final two-week period.]**

## **Financial Assistance**

**[Insert Financial Assistance Information -- e.g., Limited scholarship funds may be available for families experiencing temporary financial hardship. Please speak with the Director for more information and an application.]**

Would you like to continue to Section 5: Hours of Operation and Closures?

# **Section 5: Hours of Operation and Closures**

## **Regular Hours of Operation**

**[Insert Center Name]** is open **[Insert Days of Operation -- e.g., Monday through Friday]** from **[Insert Opening Time -- e.g., 7:00 AM]** to **[Insert Closing Time -- e.g., 6:00 PM]**.

### **Core Program Hours**

Our core educational program operates from **[Insert Core Hours -- e.g., 9:00 AM to 4:00 PM]**. We encourage all children to arrive by **[Insert Time -- e.g., 9:00 AM]** to participate fully in our curriculum and daily activities.

### **Extended Care Hours**

Extended care is available during the following times:

* **Morning Extended Care:** **[Insert Morning Hours -- e.g., 7:00 AM to 9:00 AM]**
* **Afternoon Extended Care:** **[Insert Afternoon Hours -- e.g., 4:00 PM to 6:00 PM]**

## **Holiday Closures**

Our center is closed on the following holidays:

* **[Insert Holiday -- e.g., New Year's Day (January 1)]**
* **[Insert Holiday -- e.g., Martin Luther King Jr. Day (Third Monday in January)]**
* **[Insert Holiday -- e.g., President's Day (Third Monday in February)]**
* **[Insert Holiday -- e.g., Memorial Day (Last Monday in May)]**
* **[Insert Holiday -- e.g., Independence Day (July 4)]**
* **[Insert Holiday -- e.g., Labor Day (First Monday in September)]**
* **[Insert Holiday -- e.g., Thanksgiving Day (Fourth Thursday in November)]**
* **[Insert Holiday -- e.g., Day after Thanksgiving (Fourth Friday in November)]**
* **[Insert Holiday -- e.g., Christmas Eve (December 24)]**
* **[Insert Holiday -- e.g., Christmas Day (December 25)]**
* **[Insert Holiday -- e.g., New Year's Eve - Early Closure at 3:00 PM (December 31)]**

When a holiday falls on a Saturday, we will typically close on the preceding Friday. When a holiday falls on a Sunday, we will typically close on the following Monday.

## **Professional Development Closures**

Our center will be closed for staff professional development on the following dates:

* **[Insert Professional Day -- e.g., President's Day (Staff Training Day)]**
* **[Insert Professional Day -- e.g., Columbus Day/Indigenous Peoples' Day (Staff Training Day)]**
* **[Insert Professional Day -- e.g., The Friday before the new school year begins in August/September]**

## **Annual Closure Period**

**[Insert Annual Closure Information -- e.g., Our center closes for one week each year during the last week of August for deep cleaning, facility maintenance, and staff preparation for the new school year. No tuition is charged during this week. Specific dates will be announced by January each year.]**

## **Weather-Related and Emergency Closures**

### **Weather Closures**

**[Insert Weather Closure Policy -- e.g., In cases of severe weather, our center follows the closure decisions of the [Local School District Name] School District. When the school district closes, our center will be closed. When the school district has a delayed opening, our center will open at 9:00 AM. Families should check local news stations, our website, and their email for closure information.]**

### **Emergency Closures**

**[Insert Emergency Closure Policy -- e.g., In the event of an emergency such as a power outage, water main break, or building damage that prevents safe operation, we may need to close with limited notice. We will contact families by phone, text message, and email as soon as a closure decision is made. Families will be responsible for arranging pickup of their children as soon as possible, and within 1 hour of notification.]**

### **Tuition During Unplanned Closures**

**[Insert Tuition During Closures Policy -- e.g., Full tuition is due for the first three days of weather or emergency closures in a calendar year. After three days, tuition will be prorated for extended closure periods. For closures lasting more than one week, families will be charged 50% of their regular tuition to maintain their child's spot and continue staff compensation.]**

## **Early Closure Days**

Our center will close early (at **[Insert Early Closure Time -- e.g., 3:00 PM]**) on the following days:

* **[Insert Early Closure Day -- e.g., New Year's Eve (December 31)]**
* **[Insert Early Closure Day -- e.g., The day before Thanksgiving]**
* **[Insert Early Closure Day -- e.g., The day of our Spring Family Event (date to be announced)]**

## **Drop-off and Pick-up Times**

### **Morning Drop-off**

* Children may be dropped off between **[Insert Drop-off Window -- e.g., 7:00 AM and 9:30 AM]**.
* After **[Insert Cut-off Time -- e.g., 9:30 AM]**, please notify the center if your child will be arriving late.

### **Afternoon Pick-up**

* Children must be picked up by **[Insert Closing Time -- e.g., 6:00 PM]**.
* A late fee of **[Insert Late Fee -- e.g., $1 per minute]** will be charged for pick-ups after closing time.

## **Calendar**

A complete annual calendar listing all closures and special events will be provided to families upon enrollment and at the beginning of each calendar year. The calendar is also available on our website and parent communication app.

**[Insert Calendar Information -- e.g., Please refer to our annual calendar, which is distributed each January, for specific closure dates for the current year. The calendar is also posted on our parent bulletin board and available on our website.]**

Would you like to continue to Section 6: Arrival, Departure, and Security?

# **Section 6: Arrival, Departure, and Security**

## **Sign-In and Sign-Out Procedures**

### **Daily Sign-In**

[Insert Sign-In Procedure -- e.g., All children must be signed in daily by an adult (18 years or older). Our center uses a digital check-in system located in the main entrance. Parents/guardians must:

* Use their unique PIN to access the system
* Select their child's name
* Confirm check-in
* Escort their child to their classroom and make direct contact with a teacher]

### **Daily Sign-Out**

[Insert Sign-Out Procedure -- e.g., Children must be signed out before leaving the center by an authorized adult using the same digital system. After signing out:

* Collect your child's belongings
* Check their cubby for any communications
* Make direct contact with a teacher to inform them you are taking your child]

## **Authorized Pick-Up Persons**

### **Authorized Individuals**

[Insert Authorized Pick-Up Policy -- e.g., Children will only be released to individuals listed on the Authorized Pick-Up form. All authorized individuals must:

* Be at least 18 years of age
* Present a valid photo ID until they are known to staff
* Know the family password (if applicable)
* Be listed in our system as an authorized pick-up person]

### **Adding or Removing Authorized Individuals**

[Insert Procedure for Changing Authorization -- e.g., To add or remove someone from your authorized pick-up list:

* Submit changes in writing (email is acceptable)
* Complete an updated Authorized Pick-Up form
* Changes must be made by a legal guardian
* Changes cannot be made over the phone]

### **Emergency Pick-Up Authorization**

[Insert Emergency Authorization Policy -- e.g., In an emergency where an unauthorized person must pick up your child:

* Call the center and speak with the Director or Assistant Director
* Provide the name, phone number, and description of the person
* Be prepared to answer security questions to verify your identity
* The person must present a valid photo ID upon arrival]

## **Custody Arrangements**

[Insert Custody Policy -- e.g., If parents share custody or have custody arrangements:

* Provide the center with a copy of the current court order or custody agreement
* We can only enforce legal custody documentation that is on file
* Without legal documentation, we cannot prevent a parent from picking up their child
* The center will follow the most recent court order on file]

## **Security Procedures**

### **Building Access**

[Insert Building Access Information -- e.g., Our building is secured with a keypad entry system. Upon enrollment, each family will receive a unique door code. This code should not be shared with anyone who is not authorized to pick up your child. Visitors without a code must use the video intercom to request entry.]

### **Visitor Policy**

[Insert Visitor Policy -- e.g., All visitors must:

* Sign in at the front desk
* Present a valid photo ID
* Always wear a visitor badge
* Be escorted by staff when in child areas
* Sign out when leaving

Visitors may include prospective families, maintenance workers, licensing representatives, or special program providers.]

### **ID Verification**

[Insert ID Policy -- e.g., Staff will request photo identification from any person they do not recognize, even if the person is on the authorized pick-up list. This policy is strictly enforced for the safety of the children.]

## **Late Arrival Procedures**

[Insert Late Arrival Procedure -- e.g., If you will arrive after 9:30 AM:

* Call the center to notify staff
* Let us know if your child needs breakfast or lunch
* Be aware that your child's group may be involved in activities or away from their classroom (e.g., on the playground)
* A staff member will escort your child to their group]

## **Late Pick-Up Procedures**

[Insert Late Pick-Up Procedure -- e.g., If you will be late picking up your child:

* Call the center as soon as possible
* Arrange for an authorized person to pick up your child if possible
* Be aware that late fees will apply ($1 per minute after closing time)
* After 30 minutes, if we have not heard from you and cannot reach any emergency contacts, we are legally required to contact local authorities]

## **Transition Times**

[Insert Transition Information -- e.g., Drop-off and pick-up can be emotional times for children. To help:

* Establish a consistent goodbye routine with your child
* Keep goodbyes brief but nurturing
* Inform your child's teacher if there are any special circumstances that might affect your child's day
* Allow extra time at pick-up for your child to finish activities and transition home]

## **Parking and Traffic Flow**

[Insert Parking Information -- e.g., Our parking lot has designated spaces for drop-off and pick-up. Please:

* Drive slowly (5 mph or less) in the parking lot
* Turn off your vehicle when parked
* Do not leave children unattended in vehicles
* Use only marked parking spaces
* Follow the one-way traffic flow indicators
* Limit parking to 10 minutes during peak times]

## **Emergency Evacuation Pick-Up**

[Insert Emergency Pick-Up Information -- e.g., In case of evacuation, children will be taken to our designated emergency location at [Emergency Location with Address]. Families will be notified through our emergency text alert system, email, and phone calls. Photo ID will be required for pick-up at the emergency location.]

Would you like to continue to Section 7: Health and Safety Policies?

# **Section 7: Health and Safety Policies**

## **Illness Policy**

### **When to Keep Your Child Home**

Children should remain home when they have any of the following symptoms or illnesses:

* [Insert Symptom -- e.g., Fever of 100.4°F (38°C) or higher]
* [Insert Symptom -- e.g., Vomiting (two or more episodes in 24 hours)]
* [Insert Symptom -- e.g., Diarrhea (three or more loose stools in 24 hours)]
* [Insert Symptom -- e.g., Eye discharge or pink eye (conjunctivitis)]
* [Insert Symptom -- e.g., Undiagnosed rash or open sores]
* [Insert Symptom -- e.g., Severe cough or difficulty breathing]
* [Insert Symptom -- e.g., Head lice or scabies (until treated)]
* [Insert Symptom -- e.g., Strep throat (until 24 hours after antibiotics have begun)]
* [Insert Symptom -- e.g., Any contagious illness such as measles, chicken pox, mumps, whooping cough, etc.]
* [Insert Symptom -- e.g., Lethargy, irritability, persistent crying, or other signs of possible severe illness]

### **Return to Center After Illness**

Children may return to the center when:

* [Insert Return Policy -- e.g., They have been fever-free for 24 hours without fever-reducing medication]
* [Insert Return Policy -- e.g., They have been free of vomiting or diarrhea for 24 hours]
* [Insert Return Policy -- e.g., They have completed at least 24 hours of antibiotic treatment for bacterial infections]
* [Insert Return Policy -- e.g., A physician's note states they are no longer contagious (required for certain illnesses)]
* [Insert Return Policy -- e.g., They can participate comfortably in all routine activities]

### **Illness at the Center**

[Insert Illness at Center Policy -- e.g., If your child develops symptoms of illness while at the center:

* You will be contacted immediately and asked to pick up your child within one hour
* Your child will be monitored and kept comfortable in a quiet area away from other children
* If you cannot be reached, we will call the emergency contacts listed on your child's enrollment form
* If symptoms worsen before you arrive, we may contact emergency medical services]

### **Notification of Communicable Disease**

[Insert Notification Policy -- e.g., Parents must notify the center within 24 hours if their child has been diagnosed with a communicable disease. The center will notify all families (maintaining confidentiality) when children have been exposed to a communicable disease. For certain reportable diseases, we are required to notify the local health department.]

## **Medication Administration**

### **Prescription Medication**

[Insert Prescription Medication Policy -- e.g., We will administer prescription medication only when:

* A completed Medication Authorization Form is on file
* Medication is in its original container with the pharmacy label
* Label includes the child's name, medication name, dosage, and prescribing physician
* Medication has not expired
* A measuring device is provided for liquid medications]

### **Non-Prescription Medication**

[Insert Non-Prescription Medication Policy -- e.g., Non-prescription (over the counter) medications require:

* A completed Medication Authorization Form
* Written instructions from a licensed healthcare provider for any medication given for more than three consecutive days
* Medication in its original container with manufacturer's label
* Child's full name written on the container
* Proper measuring device
* Non-expired medication]

### **Medication Storage**

[Insert Medication Storage Policy -- e.g., All medications are stored in a locked cabinet or locked box in the refrigerator, inaccessible to children. Emergency medications such as EpiPens or inhalers may be stored in an unlocked cabinet that is inaccessible to children but quickly accessible to staff.]

### **Sunscreen and Insect Repellent**

[Insert Sunscreen Policy -- e.g., Parents must provide sunscreen and/or insect repellent labeled with their child's name and complete an authorization form. Staff will apply sunscreen before outdoor activities. Sunscreen should be SPF 30 or higher and broad-spectrum. Insect repellent should contain DEET concentrations of 30% or less.]

## **Allergies and Special Health Needs**

### **Allergy Management**

[Insert Allergy Management Policy -- e.g., For children with allergies:

* Parents must complete an Allergy Action Plan signed by a healthcare provider
* The plan must detail the specific allergens, recognition of symptoms, and treatment
* If medication is required (such as an EpiPen), it must be provided according to our medication policy
* Staff are trained in allergy recognition and emergency response
* Allergy information is posted in the classroom (with parent permission) and in food preparation areas]

### **Special Health Care Needs**

[Insert Special Health Needs Policy -- e.g., Children with special health needs require:

* A Special Care Plan completed by a healthcare provider
* Staff training specific to the child's condition
* Regular updates as the child's condition or needs change
* Medication or specialized equipment as needed
* Regular communication between parents, healthcare providers, and center staff]

## **Medical Emergencies**

[Insert Medical Emergency Policy -- e.g., In case of a medical emergency:

* First aid will be administered by trained staff
* Emergency medical services (911) will be called if necessary
* Parents will be contacted immediately
* If parents cannot be reached, emergency contacts will be called
* A staff member will accompany the child to the hospital with the child's medical forms if parents have not arrived
* An incident report will be completed and provided to parents]

## **Injury Procedures**

### **Minor Injuries**

[Insert Minor Injury Policy -- e.g., For minor injuries (small cuts, scrapes, bruises):

* First aid will be administered by trained staff
* An "Ouch Report" will be completed and given to parents at pick-up
* Staff will monitor the child for any changes in condition]

### **Serious Injuries**

[Insert Serious Injury Policy -- e.g., For more serious injuries (large cuts, possible sprains, bumps to the head):

* First aid will be administered by trained staff
* Parents will be contacted immediately
* An incident report will be completed
* Depending on severity, we may recommend medical attention]

## **Emergency Preparedness**

[Insert Emergency Preparedness Information -- e.g., Our center conducts regular emergency drills for:

* Fire (monthly)
* Tornado/severe weather (quarterly)
* Lockdown (quarterly)
* Evacuation (twice yearly)

Emergency plans are posted in each classroom. Our emergency evacuation location is [Location Name and Address]. In case of emergency, parents will be notified through our emergency alert system.]

## **Required Health Records**

[Insert Health Record Requirements -- e.g., All children must have the following on file:

* Complete immunization record meeting state requirements (or valid exemption)
* Health assessment signed by a healthcare provider (updated annually)
* Emergency medical information and release form
* Special care plans for children with chronic health conditions]

## **Staff Health and Safety Training**

[Insert Staff Training Information -- e.g., All staff members are trained in:

* Pediatric First Aid and CPR
* Prevention and control of infectious diseases
* Administration of medication
* Prevention of and response to food and allergic reactions
* Building and physical premises safety
* Emergency preparedness and response
* Prevention of sudden infant death syndrome and safe sleep practices (infant staff)
* Recognition and reporting of child abuse and neglect]

## **Handwashing**

[Insert Handwashing Policy -- e.g., Proper handwashing is required for staff and children:

* Upon arrival at the center
* Before and after handling food
* Before and after eating
* After diapering or using the toilet
* After playing outdoors
* After handling pets or animals
* After wiping noses or assisting with other bodily fluids
* After cleaning or handling garbage

Hand sanitizer may be used for adults and older children when soap and water are not available.]

# **Section 7: Health and Safety Policies**

## **Child Health Requirements**

### **Immunizations**

[Insert Immunization Policy -- e.g., All children must be immunized according to the schedule recommended by the American Academy of Pediatrics and the Centers for Disease Control, unless they have a medical exemption. A current immunization record must be on file before a child can attend. Families must provide updated records as new immunizations are received.]

### **Physical Examinations**

[Insert Physical Exam Requirements -- e.g., A physical examination record signed by a healthcare provider is required:

* Upon enrollment
* Updated annually for children under 2 years
* Updated every two years for children over 2 years

Forms must include a statement that the child is physically able to participate in childcare activities.]

## **Illness Policy**

### **Symptoms Requiring Exclusion**

Children will not be admitted to the center or will be sent home if they exhibit any of the following symptoms:

* [Insert Exclusion Symptom -- e.g., Fever of 100.4°F (38°C) or higher]
* [Insert Exclusion Symptom -- e.g., Vomiting (two or more episodes in 24 hours)]
* [Insert Exclusion Symptom -- e.g., Diarrhea (three or more loose stools in 24 hours)]
* [Insert Exclusion Symptom -- e.g., Rash with fever or behavior change]
* [Insert Exclusion Symptom -- e.g., Severe coughing]
* [Insert Exclusion Symptom -- e.g., Difficulty breathing or rapid breathing]
* [Insert Exclusion Symptom -- e.g., Yellowish skin or eyes (jaundice)]
* [Insert Exclusion Symptom -- e.g., Pink eye with eye discharge]
* [Insert Exclusion Symptom -- e.g., Mouth sores with drooling]
* [Insert Exclusion Symptom -- e.g., Head lice or nits]
* [Insert Exclusion Symptom -- e.g., Scabies, ringworm, or other contagious skin condition]
* [Insert Exclusion Symptom -- e.g., Lethargy that prevents participation in regular activities]

### **Return to Care Guidelines**

Children may return to the center when:

* [Insert Return Guideline -- e.g., They have been fever-free without fever-reducing medication for 24 hours]
* [Insert Return Guideline -- e.g., They have been free from vomiting or diarrhea for 24 hours]
* [Insert Return Guideline -- e.g., They have been on antibiotics for at least 24 hours, if prescribed]
* [Insert Return Guideline -- e.g., A physician's note states they are no longer contagious]
* [Insert Return Guideline -- e.g., In the case of lice, after appropriate treatment and removal of all nits]
* [Insert Return Guideline -- e.g., They can participate comfortably in all program activities]

### **Notification of Illness**

[Insert Notification Policy -- e.g., Parents must notify the center within 24 hours if their child has been diagnosed with a communicable disease. The center will notify all families when a child in the program has been diagnosed with a communicable disease, while maintaining the confidentiality of the affected child.]

## **Medication Administration**

### **Prescription Medications**

[Insert Prescription Medication Policy -- e.g., The center will administer prescription medications that are:

* In the original container with the pharmacy label
* Labeled with the child's full name
* Accompanied by a completed Medication Authorization Form signed by the parent/guardian
* Within the expiration date
* Accompanied by specific written instructions for administration

Medications will be stored in a locked container out of children's reach.]

### **Over-the-Counter Medications**

[Insert OTC Medication Policy -- e.g., Over-the-counter medications will only be administered:

* With a completed Medication Authorization Form
* In the original container with dosage instructions
* For no longer than the manufacturer's recommended duration
* When labeled with the child's full name

We do not administer fever-reducing medications to mask symptoms of illness.]

### **Special Medical Conditions**

[Insert Special Medical Conditions Policy -- e.g., For children with chronic medical conditions (asthma, severe allergies, seizures, diabetes, etc.):

* An Individual Health Plan must be completed by the child's healthcare provider
* All necessary emergency medications must be provided and kept at the center
* Staff will be trained on specific procedures for the child's condition
* Plans must be updated annually or when changes occur]

## **Allergies**

[Insert Allergy Policy -- e.g., Parents must inform the center of all allergies on enrollment forms. For diagnosed allergies:

* An Allergy Action Plan completed by a healthcare provider is required
* Emergency medications (such as EpiPens) must be provided and kept at the center
* Staff will be trained on allergy response procedures
* Allergies will be posted in classrooms (with parent permission)
* Menu accommodations will be made when possible]

## **Incident and Accident Procedures**

### **Minor Injuries**

[Insert Minor Injury Procedure -- e.g., For minor injuries (small cuts, scrapes, bumps):

* First aid will be administered by trained staff
* An incident report will be completed and shared with parents at pick-up
* A copy of the report will be kept in the child's file
* Parents will be contacted by phone for any head injuries, even if minor]

### **Medical Emergencies**

[Insert Emergency Procedure -- e.g., In case of a medical emergency:

1. Staff will assess the situation and administer first aid as appropriate
2. If necessary, 911 will be called
3. Parents/guardians will be contacted immediately
4. If parents cannot be reached, emergency contacts will be called
5. A staff member will accompany the child if transported to a medical facility
6. The child's medical forms will be brought along with the child
7. An incident report will be completed and provided to parents
8. The incident will be reported to licensing authorities as required]

## **Emergency Preparedness**

### **Fire Drills**

[Insert Fire Drill Procedure -- e.g., Fire drills are conducted monthly. Staff and children practice evacuating the building quickly and safely, following posted evacuation routes. Records of all drills are maintained.]

### **Shelter-in-Place**

[Insert Shelter-in-Place Procedure -- e.g., Shelter-in-place drills are conducted quarterly for scenarios such as severe weather or environmental hazards. Children and staff practice moving to designated safe areas within the building.]

### **Lockdown Procedures**

[Insert Lockdown Procedure -- e.g., Lockdown drills are conducted quarterly to prepare for potential security threats. During these drills, children and staff practice moving to secure areas away from doors and windows and remaining quiet until the all-clear is given.]

### **Evacuation Plan**

[Insert Evacuation Plan -- e.g., In case evacuation is necessary:

* Children will be taken to our designated evacuation site: [Insert Location with Address]
* Parents will be notified through our emergency notification system
* Staff will bring attendance records, emergency contact information, and emergency supplies
* Children will remain with their assigned teachers until picked up by authorized persons]

## **Mandatory Reporting**

[Insert Mandatory Reporting Policy -- e.g., All staff members are mandated reporters and are legally required to report any reasonable suspicion of child abuse or neglect to Child Protective Services. The center will cooperate fully with any investigation and will maintain confidentiality to the extent permitted by law.]

## **Cleaning and Sanitizing**

[Insert Cleaning Policy -- e.g., Our center follows a comprehensive cleaning and sanitizing schedule that includes:

* Daily cleaning and sanitizing of all surfaces, toys, and equipment
* Weekly deep cleaning of shelves, dramatic play items, and furniture
* Use of EPA-approved disinfectants
* Regular professional cleaning services
* Enhanced cleaning protocols during illness outbreaks]

# **Section 8: Nutrition and Meals**

## **Meal Program**

[Insert Center Name] provides the following meals and snacks:

* [Insert Meal -- e.g., Breakfast: 8:00-8:30 AM]
* [Insert Meal -- e.g., Morning Snack: 10:00-10:30 AM]
* [Insert Meal -- e.g., Lunch: 11:30 AM-12:30 PM (varies by age group)]
* [Insert Meal -- e.g., Afternoon Snack: 3:00-3:30 PM]

[Insert Food Service Information -- e.g., All meals are prepared on-site in our licensed kitchen by our food service staff. OR Meals are catered by [Catering Company Name], a licensed food service provider that specializes in child nutrition.]

## **Nutritional Guidelines**

[Insert Nutritional Guidelines -- e.g., Our menus are developed to meet or exceed the nutritional requirements of the Child and Adult Care Food Program (CACFP). We emphasize:

* Whole grains
* Fresh fruits and vegetables
* Lean proteins
* Limited added sugars and processed foods
* Age-appropriate portions
* Varied flavors and textures to expand children's palates]

## **Sample Menu**

Below is a sample weekly menu. Complete monthly menus are posted in each classroom and on our parent communication app.

[Insert Sample Menu -- e.g.,

**Monday:**

* Breakfast: Whole grain cereal, banana slices, milk
* Snack: Cheese cubes and apple slices
* Lunch: Baked chicken, brown rice, steamed broccoli, fruit cup, milk
* Afternoon Snack: Whole grain crackers with hummus

**Tuesday:**

* Breakfast: Yogurt with granola, berries, milk
* Snack: Cucumber slices with ranch dip
* Lunch: Bean and cheese quesadilla, corn, mixed green salad, orange wedges, milk
* Afternoon Snack: Banana bread and milk.]

## **Special Diets and Food Allergies**

### **Allergies and Restrictions**

[Insert Allergy Policy -- e.g., Our center can accommodate many food allergies and dietary restrictions. Parents must:

* Document all food allergies and restrictions on enrollment forms
* Provide a written care plan from a physician for severe allergies
* Update information immediately if new allergies develop

Severe allergy information is posted in food preparation areas and classrooms (with parent permission).]

### **Religious or Cultural Food Preferences**

[Insert Cultural Food Policy -- e.g., We respect families' religious and cultural food preferences. Please discuss specific dietary needs with the Director upon enrollment. We will make reasonable accommodations whenever possible.]

### **Severe or Multiple Allergies**

[Insert Severe Allergy Policy -- e.g., For children with severe or multiple allergies that cannot be reasonably accommodated within our food program, parents may be asked to provide some or all meals and snacks. These must:

* Be nutritionally balanced
* Meet our nut-free policy
* Be properly labeled with the child's name and date
* Not require extensive preparation]

## **Food from Home**

### **Meals from Home**

[Insert Home Food Policy -- e.g., Children are generally expected to eat the meals provided by our center. If meals must be brought from home due to documented medical needs or severe allergies:

* Send food in insulated containers to maintain proper temperature
* Include all necessary utensils
* Label all items with your child's name
* Do not send foods that need to be heated or refrigerated, as we cannot accommodate this
* Follow our allergy restrictions (see below)]

### **Special Occasion Treats**

[Insert Special Occasion Policy -- e.g., For birthdays and special occasions:

* Store-bought, commercially prepared items in sealed packages are permitted
* Items must be nut-free and made in a nut-free facility
* Provide enough for all children in the class
* Coordinate with your child's teacher at least 48 hours in advance
* Consider healthy options or non-food celebrations (special book, craft, etc.)]

## **Food Allergies and Restrictions**

### **Nut-Free Policy**

[Insert Nut Policy -- e.g., Our center is completely nut-free. No peanuts, tree nuts, or nut products are permitted in the building. This includes items manufactured in facilities that process nuts. Always check labels carefully before bringing any food items into the center.]

### **Additional Food Restrictions**

[Insert Additional Restrictions -- e.g., Depending on the allergies present in your child's classroom, additional food restrictions may be necessary. These will be communicated to all families in the affected classroom and may change during the year if a new child with allergies enrolls.]

## **Infant Feeding**

### **Breast Milk**

[Insert Breast Milk Policy -- e.g., We support breastfeeding mothers by:

* Providing a private, comfortable space for nursing
* Properly storing and serving expressed breast milk
* Working with mothers to maintain feeding schedules

Expressed breast milk must be:

* Labeled with the child's name, date expressed, and date brought to center
* Stored in ready-to-feed bottles or storage bags
* Fresh (not previously frozen) or thawed]

### **Formula**

[Insert Formula Policy -- e.g., Parents must provide formula for infants. Formula must be:

* Factory-sealed, ready-to-feed bottles OR
* Prepared bottles of powdered formula mixed at home
* Clearly labeled with child's name and date

We cannot mix formula on-site due to the risk of errors in preparation.]

### **Baby Food**

[Insert Baby Food Policy -- e.g., For infants eating solid foods:

* Commercial baby food must be in unopened containers
* Homemade baby food must be labeled with the contents, date prepared, and child's name
* We will feed according to the schedule and instructions you provide
* We follow infant feeding guidelines from the American Academy of Pediatrics]

### **Infant Feeding Schedule**

[Insert Infant Schedule Policy -- e.g., Parents of infants must complete and regularly update an Infant Feeding Schedule that includes:

* Types of food and formula/breast milk
* Amounts
* Feeding times
* Introduction of new foods (which should be introduced at home first)

This schedule will be posted in the infant room and updated as needed.]

## **Food Program Participation**

[Insert Food Program Information -- e.g., Our center participates in the Child and Adult Care Food Program (CACFP), a federal program that provides financial assistance for serving nutritious meals. All families, regardless of income, must complete a CACFP enrollment form upon registration. The information provided determines our reimbursement rate but does not affect the meals served to children.]

## **Mealtime Environment**

[Insert Mealtime Environment Information -- e.g., Meals are served family-style when developmentally appropriate. Teachers sit with children during meals to:

* Model healthy eating habits
* Encourage trying new foods
* Facilitate conversation
* Support the development of self-help skills
* Create a pleasant social atmosphere

Children are encouraged, but never forced, to try new foods.]

# **Section 9: Behavior Guidance and Discipline**

## **Guidance Philosophy**

**[Insert Guidance Philosophy -- e.g., At [Center Name], we believe that behavior guidance should be positive, respectful, and focused on teaching children the skills they need to regulate their emotions and interact successfully with others. Our approach is based on the understanding that young children are still developing self-control and social skills. We view challenging behaviors as learning opportunities and teaching moments rather than infractions requiring punishment.]**

## **Positive Guidance Techniques**

Our teachers use the following positive guidance strategies:

* [Insert Guidance Technique -- e.g., Modeling appropriate behavior and language]
* [Insert Guidance Technique -- e.g., Setting clear, consistent, and developmentally appropriate expectations]
* [Insert Guidance Technique -- e.g., Giving specific, positive feedback for desirable behaviors]
* [Insert Guidance Technique -- e.g., Redirecting children to acceptable activities]
* [Insert Guidance Technique -- e.g., Offering choices within necessary limits]
* [Insert Guidance Technique -- e.g., Teaching problem-solving skills and conflict resolution]
* [Insert Guidance Technique -- e.g., Using natural and logical consequences]
* [Insert Guidance Technique -- e.g., Providing a calm-down space for children to regulate emotions]
* [Insert Guidance Technique -- e.g., Planning environments that minimize conflicts and promote positive interactions]

## **Prohibited Disciplinary Methods**

The following disciplinary methods are strictly prohibited at our center:

* [Insert Prohibited Method -- e.g., Corporal punishment of any kind]
* [Insert Prohibited Method -- e.g., Verbal abuse, threats, or derogatory remarks]
* [Insert Prohibited Method -- e.g., Withholding or forcing food, rest, or bathroom use]
* [Insert Prohibited Method -- e.g., Punishment for toileting accidents]
* [Insert Prohibited Method -- e.g., Public or private humiliation]
* [Insert Prohibited Method -- e.g., Isolation without supervision]
* [Insert Prohibited Method -- e.g., Binding or restricting movement]
* [Insert Prohibited Method -- e.g., Using food as a reward or punishment]

## **Approach to Challenging Behaviors**

[Insert Challenging Behavior Approach -- e.g., When children exhibit challenging behaviors, our staff:

1. Observe to identify patterns and potential triggers
2. Consider developmental appropriateness of expectations
3. Assess whether the environment or schedule needs modification
4. Teach alternative behaviors and skills
5. Provide consistent, appropriate consequences
6. Partner with families to ensure consistent approaches
7. Develop individualized behavior support plans when needed]

## **Biting Policy**

[Insert Biting Policy -- e.g., Biting is a common developmental behavior, particularly for toddlers who are still developing language skills. When biting occurs:

* First aid is provided to the child who was bitten
* Both sets of parents are notified (maintaining confidentiality)
* Staff document the incident and implement prevention strategies
* For repeated incidents, we develop an individualized plan that may include:
  + Shadowing the child who bites
  + Teaching alternative communication skills
  + Identifying triggers and patterns
  + Working closely with parents
  + Consulting with specialists if needed]

## **Addressing Persistent Challenging Behaviors**

[Insert Persistent Behavior Policy -- e.g., For persistent challenging behaviors that impact the safety or learning of the child or others:

1. Teachers document behaviors, interventions attempted, and outcomes
2. Parents are invited to a conference to develop a collaborative action plan
3. Classroom adaptations or individualized strategies may be implemented
4. With parent permission, we may consult with early childhood behavior specialists
5. Referrals to outside resources may be provided if appropriate
6. Regular check-ins will be scheduled to monitor progress]

## **Communication with Families**

[Insert Family Communication Policy -- e.g., Open communication between staff and families is essential for addressing behavioral concerns:

* Minor behavior issues are communicated through daily reports or brief conversations
* Significant or recurring behaviors will be discussed in private, not at drop-off or pick-up
* Parents will be notified the same day about any serious behavioral incidents
* Regular conferences provide opportunities to discuss behavioral progress
* Staff will share both challenges and successes observed in the classroom
* Families are encouraged to share relevant information that may affect behavior]

## **Suspension and Expulsion Policy**

[Insert Suspension/Expulsion Policy -- e.g., We are committed to significantly limiting the use of suspension and expulsion. Before considering these measures:

1. We will exhaust all possible interventions and support strategies
2. We will work with families to access appropriate community resources
3. We will consider whether additional staff training or resources could address the issue
4. We will ensure all actions comply with federal and state civil rights laws

Suspension or expulsion may be considered only when:

* A child presents a serious safety threat to themselves or others
* Reasonable accommodations would cause undue burden to our program
* After multiple documented intervention attempts with family involvement

If a child must be disenrolled, we will assist the family in finding a more suitable placement.]

## **Bullying Prevention**

[Insert Bullying Prevention Policy -- e.g., While true bullying behavior is rare in early childhood, we take proactive steps to prevent the development of bullying behaviors:

* Teaching empathy and perspective-taking
* Promoting inclusive behaviors and friendships
* Addressing exclusionary behaviors immediately
* Reading books and facilitating discussions about kindness and inclusion
* Modeling respectful interactions
* Teaching children to recognize and report hurtful behaviors]

## **Staff Training on Behavior Guidance**

[Insert Staff Training Information -- e.g., All staff receive ongoing training on positive behavior guidance, including:

* Child development and age-appropriate expectations
* Preventive classroom management strategies
* De-escalation techniques
* Trauma-informed care
* Recognition of bias in discipline
* Cultural competence in behavior guidance
* Supporting children with special behavioral needs]

## **Partnership with Families**

[Insert Family Partnership Information -- e.g., We believe that consistent approaches between home and school are most effective in supporting children's positive behavior. We encourage families to:

* Share information about what works at home
* Inform us of any significant changes at home that might affect behavior
* Reinforce similar expectations and consequences
* Participate in conferences and collaborative planning
* Ask questions about our guidance approaches
* Share concerns openly with staff]

# **Section 10: Parent Involvement and Communication**

## **Communication Philosophy**

**[Insert Communication Philosophy -- e.g., At [Center Name], we believe that strong partnerships between families and educators create the best environment for children's development and learning. Open, respectful, and regular communication is the foundation of this partnership. We are committed to keeping families informed about their child's experiences, our program activities, and opportunities for involvement.]**

## **Methods of Communication**

### **Daily Communications**

[Insert Daily Communication Methods -- e.g., We use multiple methods to keep families informed about their child's day:

* Digital communication app ([App Name]) with daily updates, photos, and activity reports
* Communication notebooks for infants and toddlers with feeding, diapering, and napping information
* Brief check-ins at drop-off and pick-up
* Daily or weekly activity displays in each classroom
* Bulletin boards with curriculum information and daily schedules]

### **Formal Communications**

[Insert Formal Communication Methods -- e.g., The center communicates important information through:

* Monthly newsletter (emailed and posted on parent board)
* Parent handbook (updated annually)
* Email notifications for important announcements
* Text alerts for emergencies or urgent information
* Scheduled parent-teacher conferences (twice yearly)
* Center website with calendar and program information
* Social media accounts for center events and updates]

## **Parent-Teacher Conferences**

[Insert Conference Information -- e.g., Formal parent-teacher conferences are scheduled twice per year (typically October and April). These 30-minute meetings provide an opportunity to:

* Review your child's development and progress
* Share observations from both home and school
* Set goals collaboratively
* Address any questions or concerns

Additional conferences can be scheduled as needed throughout the year at the request of either parents or teachers.]

## **Family Involvement Opportunities**

### **Classroom Participation**

[Insert Classroom Participation Information -- e.g., Families are welcome in our classrooms and may participate in various ways:

* Volunteering during special activities or projects
* Sharing cultural traditions, occupations, or special skills
* Reading stories or leading small group activities
* Joining us for lunch or special events
* Accompanying classes on field trips (after background check completion)]

### **Center-Wide Involvement**

[Insert Center-Wide Involvement Information -- e.g., Families can be involved in our broader program through:

* Parent Advisory Committee (meets quarterly)
* Fundraising committee
* Event planning teams
* Workdays for playground or facility improvements
* Participating in program evaluation surveys
* Attending family education workshops and events]

## **Family Events**

[Insert Family Events Information -- e.g., Our center hosts several family events throughout the year:

* Fall Open House (September)
* Harvest Festival (October)
* Winter Celebration (December)
* Family Literacy Night (February)
* Spring Picnic (May)
* Pre-K Graduation (June)
* Summer Potluck (July/August)

These events provide opportunities for families to build community while celebrating children's learning.]

## **Parent Resources**

[Insert Parent Resources Information -- e.g., We offer resources to support families:

* Lending library with parenting books and children's literature
* Monthly parent education workshops on child development topics
* Resource referrals for community services
* Translation services for non-English speaking families
* Parent bulletin board with community events and resources
* Educational materials related to curriculum and child development]

## **Communicating Concerns**

[Insert Concern Communication Protocol -- e.g., We encourage open communication about any questions or concerns:

1. For classroom concerns, first speak directly with your child's teacher
2. If the concern isn't resolved, contact the Director or Assistant Director
3. Concerns about center policies or operations should be directed to the Director
4. Written concerns can be submitted via email or using our comment box
5. Urgent concerns should be communicated by phone or in person

We are committed to addressing all concerns promptly and finding collaborative solutions.]

## **Parent Surveys and Feedback**

[Insert Survey Information -- e.g., We value parent feedback and conduct formal surveys:

* Annual program evaluation survey (Spring)
* New family experience survey (after first month of enrollment)
* Transition surveys (when moving to a new classroom)
* Event feedback forms
* Exit surveys (when leaving the program)

Survey results are used to inform program improvements and are shared with families through newsletters and parent meetings.]

## **Expectations for Families**

[Insert Family Expectations -- e.g., To support effective communication and partnership, we ask families to:

* Read all communications from the center and classroom
* Check the parent communication app/email daily
* Attend scheduled parent-teacher conferences
* Update contact information promptly
* Inform teachers of significant changes that might affect your child
* Respond to requests for information or permissions in a timely manner
* Participate in at least two-family events per year
* Complete annual program surveys]

## **Custody and Communication**

[Insert Custody Communication Policy -- e.g., In cases of shared custody or separated/divorced parents:

* Both legal parents/guardians have equal access to information about their child unless limited by court order
* Copies of custody agreements must be provided and kept on file
* We can provide duplicate communications to both parents upon request
* Parent-teacher conferences can be scheduled separately if necessary
* We remain neutral in family matters and focus on the child's well-being]

## **Family Support During Transitions**

[Insert Transition Support Information -- e.g., We provide additional communication and support during transitions:

* Detailed information before moving to a new classroom
* Introduction meetings with new teachers
* Transition visit schedule
* Written transition plans
* Follow-up check-ins after transitions are complete
* Resources to support transitions at home
* Special support for families transitioning to kindergarten]

# **Section 11: Curriculum and Learning**

## **Educational Philosophy**

[Insert Educational Philosophy -- e.g., At [Center Name], we believe that children learn best through play and active exploration in a supportive, stimulating environment. Our educational approach is guided by the following principles:

* Children are capable, curious learners with unique strengths and interests
* Development occurs across interconnected domains (social-emotional, cognitive, physical, language)
* Relationships are the foundation for learning
* Play is the primary vehicle for learning in early childhood
* Learning should be meaningful, engaging, and joyful
* Children construct knowledge through hands-on experiences
* Each child develops at their own pace and in their own way]

## **Curriculum Approach**

[Insert Curriculum Approach -- e.g., Our program uses the [Curriculum Name] approach, which is research-based and aligned with state early learning standards. This curriculum:

* Is developmentally appropriate for each age group
* Provides a balance of child-initiated and teacher-facilitated activities
* Incorporates learning centers that allow for exploration and discovery
* Integrates learning across multiple domains
* Includes both planned activities and emergent curriculum based on children's interests
* Emphasizes process over product
* Respects and incorporates diverse cultures and perspectives]

## **Learning Areas and Development**

### **Social-Emotional Development**

[Insert Social-Emotional Approach -- e.g., We prioritize social-emotional development as the foundation for all learning. Our program helps children:

* Develop a positive sense of self and identity
* Regulate emotions and express feelings appropriately
* Build relationships with peers and adults
* Develop empathy and respect for others
* Practice problem-solving and conflict resolution
* Build independence and self-help skills
* Develop resilience and persistence

These skills are embedded throughout our daily routines and activities.]

### **Language and Literacy Development**

[Insert Language and Literacy Approach -- e.g., Our language and literacy curriculum nurtures:

* Receptive and expressive language skills
* Phonological awareness and pre-reading skills
* Print awareness and letter recognition
* Vocabulary development
* Storytelling and comprehension
* Early writing experiences
* A love of books and reading

We provide a language-rich environment with daily read-aloud, storytelling, songs, rhymes, and meaningful conversations.]

### **Cognitive Development**

[Insert Cognitive Approach -- e.g., Cognitive development is supported through activities that encourage:

* Critical thinking and problem-solving
* Observation and questioning
* Classification and patterning
* Number sense and early math concepts
* Scientific exploration and inquiry
* Memory and attention skills
* Creativity and innovation

Children engage with materials that promote curiosity, experimentation, and discovery.]

### **Physical Development**

[Insert Physical Development Approach -- e.g., Our program supports physical development through:

* Daily outdoor play (weather permitting)
* Fine motor activities (drawing, manipulatives, threading, etc.)
* Gross motor activities (climbing, running, throwing, catching, balancing)
* Music and movement experiences
* Sensory exploration
* Health and nutrition education
* Body awareness and spatial relationships

We provide appropriate challenges for children at different developmental stages.]

### **Creative Arts**

[Insert Creative Arts Approach -- e.g., Creative expression is encouraged through:

* Open-ended art experiences with various materials
* Music and rhythm activities
* Dramatic play and pretending
* Dance and creative movement
* Exposure to diverse artistic styles and cultural traditions

We emphasize process over product, allowing children to explore materials and express themselves freely.]

## **Assessment and Documentation**

[Insert Assessment Approach -- e.g., Children's development and learning is assessed through:

* Ongoing observation and documentation
* Developmental checklists completed quarterly
* Portfolio collections of children's work
* Photographs and videos of learning in action
* Anecdotal records of significant moments
* [Assessment Tool Name] conducted twice yearly

These assessments inform our curriculum planning and are shared with families during conferences.]

## **Curriculum by Age Group**

### **Infant Program (Ages [Insert Age Range])**

[Insert Infant Curriculum -- e.g., Our infant curriculum focuses on:

* Responsive caregiving that builds secure attachments
* Language-rich interactions during routines
* Sensory experiences that support brain development
* Safe exploration of the environment
* Introduction to simple books, songs, and finger plays
* Development of early motor skills

Each infant follows their own schedule for feeding, sleeping, and play, while being gently introduced to classroom routines.]

### **Toddler Program (Ages [Insert Age Range])**

[Insert Toddler Curriculum -- e.g., Our toddler curriculum supports:

* Emerging independence and self-help skills
* Language development through books, songs, and conversation
* Social skills including turn-taking and peer awareness
* Sensory and tactile exploration
* Large motor development through climbing and movement
* Introduction to art materials and creative expression
* Simple routines and predictable schedules

Activities are brief, engaging, and allow for movement and choice.]

### **Preschool Program (Ages [Insert Age Range])**

[Insert Preschool Curriculum -- e.g., Our preschool curriculum includes:

* Learning centers for independent exploration (blocks, dramatic play, art, science, etc.)
* Small group activities focused on specific skills
* Large group gatherings for stories, music, and discussions
* Project-based learning that follows children's interests
* Early literacy and math experiences integrated throughout the day
* Social skills development and conflict resolution
* Outdoor exploration and nature-based learning

Children have significant choice within a structured framework of routines.]

### **Pre-Kindergarten Program (Ages [Insert Age Range])**

[Insert Pre-K Curriculum -- e.g., Our pre-kindergarten curriculum prepares children for school success through:

* More focused small group instruction
* Expanded literacy activities including letter-sound relationships
* Mathematical thinking and problem-solving
* Scientific inquiry and investigation
* Social studies explorations of community and world
* Advanced fine motor activities to support writing readiness
* Self-regulation and attention skills
* Collaborative project work

While maintaining a play-based approach, activities include more complex concepts and skills that align with kindergarten expectations.]

## **Special Programs and Enrichment**

[Insert Special Programs -- e.g., Our core curriculum is enhanced by:

* Weekly music classes led by a specialist
* Monthly visits from community helpers and experts
* Gardening program in our outdoor classroom
* Intergenerational activities with our senior center partners
* Cultural celebrations throughout the year
* Field trips for preschool and pre-K children (3 times yearly)
* Nature-based learning in our outdoor classroom]

## **Technology Use**

[Insert Technology Policy -- e.g., We take a balanced approach to technology:

* Screen time is limited and always interactive and educational
* Children under 2 have no screen time
* Preschool and pre-K children may use tablets for documentation, research, or specific educational games (limited to 15 minutes per day)
* Technology is used as a tool for learning, not as a substitute for hands-on experiences
* Staff model appropriate technology use]

# **Section 12: Daily Routines and What to Bring**

## **Daily Schedules**

While each classroom has a schedule tailored to the age group's developmental needs, the following sample schedules provide an overview of daily routines:

### **Infant Schedule (Ages [Insert Age Range])**

[Insert Infant Schedule -- e.g.,

* 7:00-9:00 AM: Arrival, breakfast, individual play
* 9:00-9:30 AM: Morning diaper changes
* 9:30-10:30 AM: Indoor activities/floor time
* 10:30-11:15 AM: Outdoor time (weather permitting) or sensory play
* 11:15-12:00 PM: Lunch, diaper changes
* 12:00-2:30 PM: Nap time (individual schedules honored)
* 2:30-3:00 PM: Wake up, diaper changes
* 3:00-3:30 PM: Afternoon snack
* 3:30-4:15 PM: Indoor activities/one-on-one time
* 4:15-5:00 PM: Outdoor time (weather permitting)
* 5:00-6:00 PM: Quiet activities, departure

*Note: Infants are fed and changed according to their individual needs throughout the day in addition to the scheduled times listed above.]*

### **Toddler Schedule (Ages [Insert Age Range])**

[Insert Toddler Schedule -- e.g.,

* 7:00-8:30 AM: Arrival, breakfast, free play
* 8:30-9:00 AM: Diaper changes/toileting, handwashing
* 9:00-9:20 AM: Morning circle time (songs, stories)
* 9:20-10:30 AM: Learning centers and small group activities
* 10:30-11:15 AM: Outdoor play
* 11:15-11:30 AM: Handwashing, prepare for lunch
* 11:30-12:00 PM: Lunch
* 12:00-12:30 PM: Diaper changes/toileting, prepare for nap
* 12:30-2:30 PM: Nap/rest time
* 2:30-3:00 PM: Wake up, diaper changes/toileting
* 3:00-3:30 PM: Afternoon snack
* 3:30-4:30 PM: Learning centers/art activities
* 4:30-5:30 PM: Outdoor play (weather permitting)
* 5:30-6:00 PM: Quiet activities, departure] \*\*

### **Preschool Schedule (Ages [Insert Age Range])**

[Insert Preschool Schedule -- e.g.,

* 7:00-8:30 AM: Arrival, breakfast, free play
* 8:30-9:00 AM: Bathroom break, handwashing
* 9:00-9:30 AM: Morning meeting (calendar, weather, daily plan)
* 9:30-10:45 AM: Learning centers and small group activities
* 10:45-11:00 AM: Clean up, bathroom break
* 11:00-11:45 AM: Outdoor play
* 11:45-12:30 PM: Handwashing, lunch
* 12:30-1:00 PM: Story time, prepare for rest
* 1:00-2:30 PM: Rest time
* 2:30-3:00 PM: Wake up, bathroom break
* 3:00-3:30 PM: Afternoon snack
* 3:30-4:30 PM: Theme-based activities and projects
* 4:30-5:30 PM: Outdoor play or gym activities
* 5:30-6:00 PM: Quiet activities, departure]

### **Pre-Kindergarten Schedule (Ages [Insert Age Range])**

[Insert Pre-K Schedule -- e.g.,

* 7:00-8:30 AM: Arrival, breakfast, morning activities
* 8:30-9:00 AM: Bathroom break, handwashing
* 9:00-9:30 AM: Morning meeting (calendar, weather, journaling)
* 9:30-10:45 AM: Learning centers and small group instruction
* 10:45-11:00 AM: Clean up, bathroom break
* 11:00-11:45 AM: Outdoor learning and physical activities
* 11:45-12:30 PM: Handwashing, lunch
* 12:30-1:00 PM: Read-aloud and literacy activities
* 1:00-2:30 PM: Rest time/quiet activities for non-nappers
* 2:30-3:00 PM: Wake up, bathroom break
* 3:00-3:30 PM: Afternoon snack
* 3:30-4:30 PM: Project work and enrichment activities
* 4:30-5:30 PM: Outdoor play or special activities
* 5:30-6:00 PM: Story time, departure]

## **What to Bring**

### **Items for All Children**

All children should bring the following items labeled with their full name:

* [Insert Required Item -- e.g., Backpack or bag for transporting items]
* [Insert Required Item -- e.g., Complete change of seasonally appropriate clothing (2 sets for younger children)]
* [Insert Required Item -- e.g., Water bottle (for children over 12 months)]
* [Insert Required Item -- e.g., Appropriate outdoor clothing (snow gear, rain boots, sun hat, etc.)]
* [Insert Required Item -- e.g., Family photo for classroom display]
* [Insert Required Item -- e.g., Sunscreen and insect repellent (with signed permission form)]

### **Items for Infants (Ages [Insert Age Range])**

[Insert Infant Items -- e.g., Infants need the following additional items:

* Prepared bottles for the day (labeled with name and date)
* Breast milk or formula (labeled with name and date)
* Baby food (if applicable)
* Diapers (at least 6-8 per day)
* Wipes
* Diaper cream (with signed medication form)
* 2-3 complete changes of clothes
* Sleep sack or wearable blanket for nap (no loose blankets)
* Pacifier (if used)
* Comfort item (if needed)]

### **Items for Toddlers (Ages [Insert Age Range])**

[Insert Toddler Items -- e.g., Toddlers need the following additional items:

* Diapers or pull-ups (at least 5-6 per day)
* Wipes
* Diaper cream (with signed medication form)
* 2 complete changes of clothes
* Comfort item for nap time
* Small blanket for nap time (sent home weekly for washing)
* Sippy cup or regular cup based on development]

### **Items for Preschool/Pre-K (Ages [Insert Age Range])**

[Insert Preschool Items -- e.g., Preschool and Pre-K children need:

* One complete change of clothes
* Small blanket for rest time (sent home weekly for washing)
* Small pillow (optional)
* Comfort item for rest time (if needed)
* Weather-appropriate outdoor clothing]

## **Clothing Guidelines**

[Insert Clothing Guidelines -- e.g., Please dress your child in comfortable, washable play clothes appropriate for active and sometimes messy play. Children should wear:

* Closed-toe shoes with rubber soles for safe play
* Clothing that children can manage independently for toileting
* Layered clothing that can be adjusted for temperature changes
* Clothing that can get dirty (art, outdoor play, and sensory activities are part of our daily program)

Please avoid:

* Flip-flops or loose sandals
* Jewelry (except medical alert items)
* Clothing with drawstrings that could pose a strangulation hazard
* Valuable clothing that should not get stained]

## **Naptime/Rest Time**

[Insert Naptime Information -- e.g., All children are provided with a rest period each day:

* Infants sleep according to their individual schedules
* Toddlers and preschoolers have a scheduled naptime after lunch (approximately 1:00-2:30 PM)
* Children who do not sleep after 30 minutes will be offered quiet activities
* Pre-K children have a shorter rest period with books or quiet activities available for non-nappers
* Each child is provided with a labeled cot or crib
* Sheets are provided by the center and laundered weekly
* Personal blankets and comfort items should be taken home weekly for washing]

## **Outdoor Play**

[Insert Outdoor Play Information -- e.g., Outdoor play is an essential part of our daily schedule. Children go outside twice daily, weather permitting. We follow these outdoor play guidelines:

* Children go outside when the temperature is between 25°F and 90°F, adjusted for wind chill and heat index
* All children need appropriate outerwear for the season
* In winter: snow pants, boots, warm coat, hat, and waterproof mittens
* In spring/fall: light jacket or sweater, rain boots as needed
* In summer: sun hat, lightweight clothing
* We apply sunscreen (provided by parents) before outdoor play when the UV index is moderate or higher
* Children who are well enough to attend school are expected to participate in outdoor activities]

## **Personal Belongings**

[Insert Personal Belongings Policy -- e.g., Please note the following regarding personal items:

* All personal items must be clearly labeled with your child's full name
* Toys from home should remain at home except for scheduled "show and share" days
* Books to share with the class are always welcome
* The center cannot be responsible for lost or damaged personal items
* Items found in the center will be placed in the lost and found box near the front entrance
* Lost and found items are donated to charity at the end of each month if unclaimed]

## **Special Events and Birthdays**

[Insert Special Events Information -- e.g., For special events and birthdays:

* Birthday celebrations are simple and integrated into the regular day
* Parents may send store-bought treats if they meet our allergy guidelines
* Party invitations may only be distributed at school if every child in the class is invited
* If you wish to visit for your child's birthday, please arrange this with the teacher at least one week in advance
* Alternative celebration ideas include donating a book to the classroom or bringing a special activity instead of food]

# **Section 13: Safety and Supervision**

## **Supervision Policies**

### **General Supervision**

[Insert General Supervision Policy -- e.g., Children are always under direct supervision by qualified staff. Our supervision practices include:

* Always maintaining appropriate staff-to-child ratios
* Positioning staff to see all areas where children are playing
* Conducting regular head counts, especially during transitions
* Implementing name-to-face tracking during arrivals, departures, and transitions
* Ensuring all children are within sight and sound of staff members
* Increasing supervision for high-risk activities (water play, woodworking, cooking)]

### **Staff-to-Child Ratios**

Our center maintains the following staff-to-child ratios, which meet or exceed state licensing requirements:

* Infants (Ages [Insert Age Range]): [Insert Ratio -- e.g., 1:4 (one staff member for every four infants)]
* Toddlers (Ages [Insert Age Range]): [Insert Ratio -- e.g., 1:6 (one staff member for every six toddlers)]
* Preschool (Ages [Insert Age Range]): [Insert Ratio -- e.g., 1:8 (one staff member for every eight preschoolers)]
* Pre-Kindergarten (Ages [Insert Age Range]): [Insert Ratio -- e.g., 1:10 (one staff member for every ten pre-K children)]

### **Playground/Outdoor Supervision**

[Insert Outdoor Supervision Policy -- e.g., During outdoor play:

* Staff position themselves strategically to observe all areas of the playground
* Staff actively monitor children rather than congregating together
* Equipment is checked daily for safety before children use it
* Staff-to-child ratios are maintained or enhanced
* Zones are established for different activities
* Staff regularly scan all areas and conduct frequent head counts
* The playground is fully fenced with self-closing, latching gates]

## **Facility Security**

### **Building Access**

[Insert Building Access Policy -- e.g., To maintain a secure environment:

* All exterior doors remain locked at all times
* Access to the building is via keypad entry or buzzer system
* Each family receives a unique entry code that should not be shared
* All visitors must sign in and show identification
* Delivery personnel and maintenance workers must check in at the office
* Security cameras monitor all entrances and common areas
* Emergency exits are alarmed and for emergency use only]

### **Classroom Security**

[Insert Classroom Security Policy -- e.g., Each classroom maintains security through:

* Attendance records updated throughout the day
* Sign-in/out procedures at classroom entrance
* Staff awareness of authorized pick-up persons
* Protocols for transitions between classrooms or activities
* Regular practice of emergency procedures with children
* Staff positioned to monitor entrance/exit points
* Clear procedures for bathroom use and supervision]

## **Emergency Procedures**

### **Fire Emergency**

[Insert Fire Procedure -- e.g., In case of fire:

1. Alarm will sound
2. Staff will lead children to nearest exit following posted evacuation routes
3. Designated staff will check bathrooms and hidden areas
4. Classes will meet at designated assembly areas outside the building
5. Staff will account for all children using attendance records
6. Director/designee will ensure all rooms are evacuated
7. No one will re-enter the building until cleared by fire officials
8. Parents will be notified through emergency alert system
9. Monthly fire drills are conducted to practice this procedure]

### **Severe Weather/Tornado**

[Insert Severe Weather Procedure -- e.g., During severe weather warnings:

1. Staff will move children to designated shelter areas (interior rooms away from windows)
2. Children will assume protective positions if necessary (crouched, head covered)
3. Staff will bring emergency contact information and first aid supplies
4. Activities and comfort items will be provided to maintain calm
5. Staff will maintain supervision and ratios
6. Director will monitor weather conditions via weather radio
7. Children will remain in shelter until the warning expires
8. Quarterly drills are conducted to practice this procedure]

### **Lockdown/Intruder Emergency**

[Insert Lockdown Procedure -- e.g., In case of a lockdown situation:

1. Announcement will be made "[Code Word/Phrase]"
2. Staff will quickly gather children into the classroom away from windows and doors
3. Classroom doors will be locked, lights turned off
4. Windows will be covered if possible
5. Children will be kept quiet and calm
6. No one will enter or exit the building until an all-clear is given
7. Director or designee will contact emergency services
8. Parents will be notified according to the situation
9. Quarterly drills are conducted to practice this procedure]

### **Missing Child Protocol**

[Insert Missing Child Protocol -- e.g., In the unlikely event a child is missing:

1. Staff will immediately notify the Director
2. A rapid search of the immediate area will be conducted
3. If the child is not found quickly, the building will be locked down
4. All available staff will conduct a thorough search of the entire facility and grounds
5. If the child is not located within [Time Frame], police will be called
6. Parents will be notified immediately
7. Staff will provide a description and photo of the child
8. Documentation of the incident will be prepared
9. Licensing authorities will be notified as required]

## **Emergency Preparedness**

### **Emergency Supplies**

[Insert Emergency Supplies Information -- e.g., Our center maintains emergency supplies including:

* First aid kits in each classroom and outdoor play area
* Emergency contact information for all children
* Three-day supply of water and non-perishable food
* Battery-powered radio and extra batteries
* Flashlights and emergency lighting
* Emergency blankets
* Cell phone chargers
* Children's comfort items/activities

These supplies are checked monthly and replenished as needed.]

### **Emergency Contacts and Medical Information**

[Insert Emergency Contact Policy -- e.g., For each child, we maintain:

* Current emergency contact information for parents/guardians
* At least two additional emergency contacts
* Medical information including allergies and medications
* Authorization for emergency medical treatment
* Physician contact information
* Preferred hospital

It is essential that families update this information whenever changes occur.]

### **Evacuation Plan**

[Insert Evacuation Plan -- e.g., In case evacuation beyond our property is necessary:

* Primary evacuation site: [Primary Site Name and Address]
* Secondary evacuation site: [Secondary Site Name and Address]
* Transportation will be provided by [Transportation Method]
* Staff will bring emergency contact information and supplies
* Families will be notified through our emergency alert system
* Children will only be released to authorized individuals with ID
* Staff will remain with children until all are picked up]

## **Accident Prevention and Response**

### **Prevention Measures**

[Insert Prevention Measures -- e.g., We maintain a safe environment through:

* Daily safety checks of indoor and outdoor environments
* Regular maintenance of equipment and facilities
* Age-appropriate toys and materials
* Proper storage of hazardous materials
* Ongoing staff training on safety practices
* Clear procedures for high-risk activities
* Regular review and updating of safety policies]

### **Accident Response**

[Insert Accident Response -- e.g., If an accident occurs:

1. Staff will assess the situation and provide appropriate first aid
2. Additional staff will supervise other children while the injured child is attended to
3. Parents will be notified of all injuries beyond minor scratches
4. For serious injuries, emergency medical services will be called
5. An accident report will be completed and signed by staff and parents
6. The Director will review all accident reports to identify patterns or needed changes
7. Serious injuries will be reported to licensing authorities as required]

## **Transportation Safety**

[Insert Transportation Safety Policy -- e.g., If transportation is provided for field trips or other activities:

* Only licensed, insured vehicles will be used
* All vehicles are equipped with first aid kits and emergency information
* Drivers have valid licenses and clean driving records
* Child restraints appropriate for age and size are used
* Staff-to-child ratios are enhanced during transportation
* Children are never left unattended in vehicles
* Loading and unloading procedures include name-to-face checks
* Written permission is obtained for all off-site transportation]

## **Staff Safety Training**

[Insert Staff Safety Training -- e.g., All staff receive training in:

* Pediatric First Aid and CPR (renewed every two years)
* Emergency response procedures
* Recognition and reporting of child abuse and neglect
* Proper lifting and carrying techniques
* Playground safety supervision
* Safe sleep practices (infant staff)
* Food safety and allergy management
* Bloodborne pathogen precautions
* Building security procedures]

# **Section 14: Health and Illness Policies**

## **Health Requirements**

### **Immunization Records**

[Insert Immunization Policy -- e.g., Prior to enrollment, all children must provide current immunization records that comply with state requirements. These include:

* Records must be updated as new immunizations are received
* Medical exemptions require documentation from a licensed healthcare provider
* Religious exemptions must follow state guidelines for documentation
* Children without required immunizations may be excluded during disease outbreaks
* Immunization records are reviewed annually and must be kept current]

### **Physical Examination**

[Insert Physical Exam Requirements -- e.g., All children must have a physical examination:

* Within 30 days before enrollment or within 30 days after enrollment
* Updated annually for children under age 2
* Updated every two years for children ages 2 and older
* Conducted by a licensed physician, nurse practitioner, or physician's assistant
* Documented on the state-approved health assessment form  
   Forms are available from the Director or on our website.]

### **Health History**

[Insert Health History Requirements -- e.g., Parents must provide a complete health history including:

* Allergies and sensitivities (food, medication, environmental)
* Chronic health conditions requiring monitoring
* Previous serious illnesses or injuries
* Developmental concerns or diagnoses
* Current medications
* Special dietary needs  
   This information must be updated whenever significant changes occur.]

## **Illness Policies**

### **When to Keep Your Child Home**

Children should remain at home when they have the following symptoms or conditions:

[Insert Stay Home Guidelines -- e.g.,

* Fever of 100.4°F or higher (must be fever-free without medication for 24 hours before returning)
* Vomiting (two or more episodes in 24 hours, or one episode with other symptoms)
* Diarrhea (two or more loose stools in 24 hours)
* Undiagnosed rash or skin condition
* Severe coughing
* Eye discharge or pink eye
* Yellowish skin or eyes
* Sore throat with fever
* Head lice or nits (until after first treatment)
* Too ill to participate in regular activities
* Contagious disease (until no longer contagious)
* If antibiotics are prescribed, child must have completed 24 hours of treatment before returning]

### **Illness at the Center**

[Insert Illness at Center Protocol -- e.g., If a child becomes ill while at the center:

1. Staff will separate the child from other children while maintaining supervision
2. Parent/guardian will be contacted immediately to pick up the child
3. If parent/guardian cannot be reached, we will call emergency contacts
4. Child must be picked up within one hour of notification
5. While waiting, the child will be made comfortable and monitored by staff
6. Staff will complete an illness report documenting symptoms and actions taken
7. The child's belongings will be gathered and any soiled items bagged
8. Areas used by the ill child will be cleaned and sanitized]

### **Return After Illness**

[Insert Return Policy -- e.g., Children may return to the center when:

* They have been fever-free without medication for 24 hours
* They have been free from vomiting and diarrhea for 24 hours
* They have completed 24 hours of antibiotic treatment (if prescribed)
* They can participate comfortably in all program activities
* They are no longer contagious (doctor's note may be required)
* Head lice/nits: after first treatment and no visible nits
* Specific conditions may have different return criteria as advised by health authorities

A doctor's note may be required to return after:

* Contagious diseases
* Extended absences due to illness (3 or more days)
* Hospitalizations
* Surgeries or significant medical treatments]

### **Communicable Disease Notification**

[Insert Notification Protocol -- e.g., If a child or staff member contracts a communicable disease:

1. The center will notify all families in writing within 24 hours
2. The notification will include symptoms to watch for and incubation periods
3. The identity of the ill person will remain confidential
4. The center will consult with health authorities regarding additional precautions
5. Additional cleaning and sanitizing procedures will be implemented
6. In some cases, we may need to temporarily exclude unimmunized children
7. The center will report cases to health authorities as required by law]

## **Medication Administration**

### **Prescription Medications**

[Insert Prescription Med Policy -- e.g., For prescription medications:

1. Parents must complete a medication authorization form
2. Medication must be in original container with pharmacy label
3. Label must include child's name, medication name, dosage, and doctor's name
4. Medication will only be given according to label instructions
5. Staff giving medications must be trained in medication administration
6. Each dose given will be documented on medication log
7. Medication authorization forms must be updated every [Time Period]
8. Expired medications will not be administered]

### **Non-Prescription Medications**

[Insert Non-Prescription Med Policy -- e.g., For over-the-counter medications:

1. Parents must complete a medication authorization form
2. Medication must be in original container with manufacturer's label
3. Label must include dosage instructions for the child's age/weight
4. Written instructions must not exceed manufacturer's recommendations
5. We will not administer medication on an "as needed" basis without specific criteria
6. A doctor's note is required for:
   1. Any medication to be given for more than 3 consecutive days
   2. Medication for children younger than label recommendations
   3. Dosages that differ from label recommendations]

### **Emergency Medications**

[Insert Emergency Med Policy -- e.g., For emergency medications (e.g., EpiPens, inhalers):

1. Emergency action plan must be completed by healthcare provider
2. Staff will be trained on proper administration and signs/symptoms
3. Medication will be stored in a location quickly accessible to staff but secure from children
4. Parents are responsible for ensuring medication is current and not expired
5. If emergency medication is administered, 911 will be called immediately
6. Parents will be notified immediately after calling emergency services
7. Staff will document the incident and medication administration]

### **Medication Storage**

[Insert Medication Storage Policy -- e.g., All medications are stored:

* In locked cabinets or boxes inaccessible to children
* Separated by child
* According to temperature requirements (refrigerated if needed)
* Emergency medications are stored in a secure but readily accessible location
* Expired medications will be returned to parents
* Staff are trained on proper storage procedures  
   Medications should never be stored in children's bags or cubbies.]

## **Preventive Health Practices**

### **Handwashing**

[Insert Handwashing Policy -- e.g., Proper handwashing is our first line of defense against illness. Children and staff wash hands:

* Upon arrival at the center
* Before and after eating or handling food
* After diapering or using the toilet
* After playing outdoors
* After handling pets or animals
* After nose blowing or sneezing
* Before and after water or sensory play
* After contact with bodily fluids
* Before and after administering medication
* When hands are visibly dirty

Our handwashing procedure follows CDC guidelines: wet hands, apply soap, scrub for 20 seconds, rinse, and dry with paper towel.]

### **Cleaning and Sanitizing**

[Insert Cleaning Policy -- e.g., Our center maintains rigorous cleaning protocols:

* Daily cleaning of all surfaces, toys, and equipment
* Sanitizing of eating surfaces before and after meals
* Sanitizing of bathroom fixtures throughout the day
* Immediate cleaning of bodily fluid spills with appropriate disinfectants
* Weekly deep cleaning of all toys and equipment
* Regular professional cleaning of carpets and upholstery
* EPA-approved disinfectants used according to manufacturer instructions
* Enhanced cleaning during illness outbreaks  
   Cleaning and sanitizing schedules are posted in each classroom.]

### **Diapering and Toileting**

[Insert Diapering/Toileting Policy -- e.g., Our diapering and toileting procedures include:

* Separate areas for diapering with hands-free disposal systems
* Fresh paper liner for each diaper change
* Staff wear gloves for all diaper changes
* Thorough handwashing (staff and child) after each diaper change
* Sanitizing of changing surface after each use
* Regular bathroom cleaning throughout the day
* Age-appropriate assistance with toileting as needed
* Respect for children's privacy during toileting
* Positive reinforcement of toilet learning efforts]

## **Special Health Considerations**

### **Allergies**

[Insert Allergy Policy -- e.g., Our center accommodates children with allergies:

1. Parents must document allergies on health forms and provide an allergy action plan
2. For food allergies, a Food Allergy Action Plan completed by a healthcare provider is required
3. Staff are trained on each child's specific allergies and emergency response
4. Allergy lists are posted in classrooms (out of children's view but visible to staff)
5. Food substitutions will be provided according to our nutrition policy
6. We may restrict certain foods in classrooms with severe allergies
7. Families are notified of restricted foods in affected classrooms
8. Emergency medications (e.g., EpiPens) must be provided for severe allergies]

### **Children with Special Health Needs**

[Insert Special Health Needs Policy -- e.g., For children with chronic health conditions:

1. Parents must provide a care plan completed by a healthcare provider
2. Staff will receive specific training on implementing the care plan
3. Regular communication between parents and staff regarding the child's condition
4. Accommodations will be made to ensure full participation when possible
5. Medications and special equipment will be stored and maintained properly
6. Emergency protocols will be established and practiced
7. Regular review and updates of care plans as needed  
    We work collaboratively with families and healthcare providers to support each child's needs.]

### **Sun Safety**

[Insert Sun Safety Policy -- e.g., To protect children from harmful sun exposure:

* Parents provide sunscreen (SPF 30+ and broad spectrum) labeled with child's name
* Written permission is required for staff to apply sunscreen
* Sunscreen is applied 30 minutes before outdoor play
* Reapplication occurs every 2 hours or after water play
* Children wear hats and protective clothing when possible
* Outdoor play is limited during peak sun hours (10 AM-2 PM)
* Shaded areas are available for outdoor activities
* Staff model sun safety practices
* Children without sunscreen may have restricted outdoor access]

### **Air Quality and Outdoor Play**

[Insert Air Quality Policy -- e.g., We monitor air quality for safe outdoor play:

* Outdoor play may be limited when air quality index exceeds 100
* Alternative indoor large motor activities are provided when outdoor play is restricted
* Staff monitor weather conditions and alerts throughout the day
* Indoor temperature is maintained between 68-82°F
* Appropriate ventilation is maintained in all indoor spaces
* Children with respiratory conditions may have additional restrictions based on their healthcare plan]

# **Section 15: Behavior Guidance and Discipline**

## **Guidance Philosophy**

[Insert Guidance Philosophy -- e.g., At [Center Name], we believe in a positive approach to guiding children's behavior that:

* Respects the dignity and worth of each child
* Focuses on teaching rather than punishing
* Helps children develop self-regulation and problem-solving skills
* Recognizes behavior as communication and opportunity for learning
* Builds strong, trusting relationships between children and caregivers
* Creates an environment where children feel safe, valued, and heard
* Considers the developmental stage and individual needs of each child
* Partners with families to ensure consistent approaches

Our goal is to help children develop internal controls, make appropriate choices, and learn from their experiences.]

## **Preventive Strategies**

[Insert Preventive Strategies -- e.g., We believe most challenging behaviors can be prevented through thoughtful practices:

* Creating well-designed environments with defined spaces and adequate materials
* Establishing consistent, predictable routines
* Setting clear, age-appropriate expectations
* Providing warning before transitions
* Offering meaningful choices when appropriate
* Modeling respectful communication and problem-solving
* Planning engaging activities that meet developmental needs
* Maintaining appropriate staff-to-child ratios
* Being aware of and responding to children's needs before behavior escalates
* Recognizing and accommodating individual temperaments and needs]

## **Positive Guidance Techniques**

[Insert Guidance Techniques -- e.g., Our staff use the following positive guidance strategies:

* Redirection: Guiding children to acceptable activities and behaviors
* Positive reinforcement: Acknowledging and encouraging appropriate behavior
* Natural and logical consequences: Helping children understand the results of their actions
* Problem-solving: Working with children to find solutions
* Reflective listening: Acknowledging feelings and restating children's concerns
* Conflict resolution: Teaching the children skills to resolve disagreements
* Setting limits: Providing clear, consistent boundaries
* Modeling: Demonstrating appropriate behavior and social skills
* Offering choices: Providing appropriate options within necessary limits
* Taking breaks: Providing space and support for children to regain control]

## **Addressing Challenging Behaviors**

[Insert Challenging Behavior Protocol -- e.g., When challenging behaviors persist, our approach includes:

1. Observation and documentation to identify patterns and triggers
2. Consulting with team members for additional perspectives
3. Meeting with parents to share observations and gather information
4. Developing individualized behavior support plans when needed
5. Implementing consistent strategies across all settings
6. Regular communication with families about progress
7. Adjusting the environment or routine as needed
8. Considering referrals for additional assessment or support if appropriate
9. Regularly reviewing and updating approaches based on the child's response

We recognize that challenging behaviors often communicate unmet needs or developing skills, and we approach them with patience and understanding.]

## **Biting Policy**

[Insert Biting Policy -- e.g., Biting is a common developmental behavior, particularly among toddlers. Our approach to biting includes:

* Close supervision to prevent incidents
* Immediate response that focuses attention primarily on the child who was bitten
* Clear, firm communication with the child who bit: "No biting. Biting hurts."
* Teaching appropriate alternatives for expression
* Documentation of incidents to identify patterns
* Confidential communication with parents of both children
* Developing a specific plan if biting becomes recurrent
* Avoiding labeling a child as a "biter"

If biting becomes frequent (defined as [insert number] incidents within [insert time period]), we will schedule a conference with the parents to develop a consistent response plan.]

## **Prohibited Disciplinary Methods**

[Insert Prohibited Methods -- e.g., The following disciplinary methods are strictly prohibited at our center:

* Corporal punishment of any kind
* Harsh, belittling, or degrading language
* Withholding food, rest, or bathroom use
* Punishment for toileting accidents
* Public or private humiliation
* Isolation without supervision
* Binding or tying to restrict movement
* Confining a child to an enclosed area
* Excessive time-outs (time-outs, if used, are brief and appropriate to age)
* Any form of emotional abuse
* Using or threatening any of the above

Any staff member observed using these methods will be subject to immediate disciplinary action.]

## **Supporting Emotional Development**

[Insert Emotional Development Support -- e.g., We support children's emotional development by:

* Helping children identify and name their feelings
* Validating emotions while setting limits on actions
* Teaching calming strategies (deep breathing, counting, using a quiet space)
* Reading books about feelings and emotional regulation
* Using puppets and role-play to practice social scenarios
* Providing tools like feeling charts, calm-down kits, and sensory materials
* Creating safe spaces where children can regain control
* Acknowledging and celebrating emotional growth and self-regulation
* Maintaining an emotionally safe environment where all feelings are accepted

We recognize that emotional regulation is a skill that develops over time with support and practice.]

## **Bullying Prevention**

[Insert Bullying Prevention -- e.g., While true bullying (repeated, intentional harmful behavior with a power imbalance) is rare in early childhood, we are proactive in preventing pre-bullying behaviors through:

* Teaching and modeling respect, empathy, and kindness
* Addressing exclusionary behavior immediately
* Helping children understand the impact of their words and actions
* Supporting children who may be targets of unkind behavior
* Actively teaching friendship and social skills
* Encouraging inclusive play
* Incorporating anti-bias materials and activities
* Working with all involved children to develop better interaction patterns
* Partnering with families when concerning patterns emerge]

## **Communication with Families**

[Insert Family Communication -- e.g., We believe in open communication with families about children's behavior:

* Minor behavioral challenges are communicated informally at pick-up time
* Repeated or significant concerns will be shared through scheduled conversations
* Parents are notified on the same day when serious incidents occur
* Written incident reports are provided for significant behavioral incidents
* All communications respect the privacy and dignity of all children involved
* We focus on behaviors rather than labeling children
* Families are encouraged to share relevant information that may affect behavior
* Regular conferences provide opportunities to discuss development and behavior
* Parents are invited to participate in creating consistent strategies between home and school]

## **Partnership for Consistent Guidance**

[Insert Partnership Approach -- e.g., Effective guidance requires partnership between home and school:

* We encourage families to share their guidance practices at home
* Staff can provide resources on developmental expectations and guidance techniques
* Consistent approaches between home and school help children develop clear expectations
* Regular two-way communication helps identify strategies that work
* We respect cultural differences while ensuring all guidance meets our program standards
* When significant behavioral concerns arise, we work together to develop a consistent plan
* We may suggest resources or referrals when additional support could benefit the child]

## **Staff Training and Support**

[Insert Staff Training -- e.g., Our staff receive ongoing training in positive guidance:

* All staff complete initial training in our guidance philosophy and techniques
* Regular professional development on child development and behavior guidance
* Mentoring from experienced staff members
* Access to resources on addressing challenging behaviors
* Training on recognizing and responding to trauma and stress
* Support from directors in addressing complex situations
* Regular team discussions about guidance challenges and successes
* Reflective supervision to examine personal reactions and improve practices]

## **Referrals and Additional Support**

[Insert Referral Process -- e.g., When children need additional support beyond what we can provide:

1. We document observations and share concerns with families
2. We may suggest developmental screening or assessment
3. With parental permission, we can contact early intervention services
4. We can provide referrals to appropriate community resources
5. We collaborate with outside specialists supporting the child
6. We implement recommended strategies within our setting when possible
7. We develop individualized plans to support the child's success
8. We maintain ongoing communication about progress

Our goal is always to support each child's success in our program, but we recognize that sometimes additional specialized support is beneficial.]

## **Termination Due to Behavioral Concerns**

[Insert Termination Policy -- e.g., In rare situations, a child's behavior may exceed our ability to meet their needs while maintaining a safe, quality program for all children. Termination of enrollment due to behavior will be considered only when:

1. A child's behavior poses a significant safety risk to themselves or others
2. We have exhausted available strategies and resources
3. The family has declined referrals or refused to collaborate on behavior plans
4. Required accommodations would fundamentally alter our program or create an undue burden

Before termination is considered, we will:

* Document all incidents and interventions
* Hold multiple conferences with the family
* Develop and implement behavior intervention plans
* Suggest appropriate referrals
* Consider all reasonable accommodations
* Provide written warnings about the possibility of termination

Our goal is always to maintain enrollment and support each child's success.]

# **Section 16: Nutrition and Food Service**

## **Nutrition Philosophy**

[Insert Nutrition Philosophy -- e.g., At [Center Name], we believe that nutritious food is essential for children's growth, development, and learning. Our nutrition program aims to:

* Provide well-balanced, nutritious meals and snacks
* Introduce children to a variety of healthy foods
* Create positive mealtime experiences that foster social skills
* Teach children about nutrition and healthy food choices
* Respect cultural preferences and dietary requirements
* Establish healthy eating habits that can last a lifetime
* Partner with families to meet each child's nutritional needs

We follow the Child and Adult Care Food Program (CACFP) guidelines to ensure meals and snacks meet children's nutritional needs.]

## **Meals and Snacks Provided**

[Insert Meals Provided -- e.g., Our center provides the following meals and snacks:

* Breakfast: 7:30-8:30 AM
* Morning Snack: 10:00-10:30 AM
* Lunch: 11:30 AM-12:30 PM (staggered by age group)
* Afternoon Snack: 3:00-3:30 PM

All meals and snacks are prepared [on-site by our kitchen staff/by our catering service/etc.] and meet or exceed CACFP nutritional guidelines. Sample menus are available on our website and posted in the lobby each week.]

## **Menu Planning**

[Insert Menu Planning -- e.g., Our menus are:

* Planned on a [4-week/monthly] rotation
* Seasonally adjusted to include fresh, in-season produce
* Reviewed by a nutritionist or dietitian
* Designed to introduce children to diverse foods and flavors
* Inclusive of whole grains, fresh fruits and vegetables, and lean proteins
* Low in added sugars, salt, and processed ingredients
* Created to accommodate common allergies and dietary restrictions
* Posted in advance for parent review

Menus may occasionally change due to food availability or other circumstances. Changes will be noted on the posted menu.]

## **Special Diets and Food Allergies**

[Insert Special Diet Policy -- e.g., We accommodate special dietary needs:

* Medical dietary restrictions require documentation from a healthcare provider
* Religious or philosophical food restrictions require written notification from parents
* Detailed food allergy plans must be completed for children with food allergies
* Staff are trained on food allergies and appropriate responses
* Lists of children with food restrictions are posted in food preparation and serving areas
* Appropriate substitutions will be provided whenever possible
* In cases of severe or multiple allergies, parents may be asked to provide supplemental foods
* We maintain a [peanut-free/nut-free/etc.] environment due to the prevalence and severity of these allergies]

## **Infant Feeding**

[Insert Infant Feeding -- e.g., For infants (under 12 months):

* Parents provide breast milk or formula labeled with the child's name and date
* Bottles are refrigerated and warmed in water (never microwaved)
* Feeding schedules follow each infant's individual needs
* Parents complete daily feeding instructions
* Infants are held during bottle feeding
* Introduction of solid foods begins in consultation with parents, typically around 6 months
* Parents provide initial solid foods until the infant is established on table foods
* Written feeding plans are updated regularly as infants' needs change
* Breastfeeding mothers are welcome to visit and nurse their babies at any time]

## **Mealtime Environment**

[Insert Mealtime Environment -- e.g., Meals and snacks are served in a relaxed, positive environment:

* Children and staff eat together family-style when developmentally appropriate
* Staff model healthy eating habits and pleasant conversation
* Children are encouraged, but never forced, to try new foods
* Self-help skills are promoted based on developmental readiness
* Child-sized utensils and serving equipment are provided
* Sufficient time is allowed for eating without rushing
* Food is never used as a reward or punishment
* Children practice table manners and social skills
* Mealtimes are learning opportunities for language, math, science, and social development]

## **Food from Home**

[Insert Food from Home Policy -- e.g., Our policy on food from home:

* Outside food is generally not permitted except in specific circumstances
* Birthday celebrations: Store-bought, commercially packaged treats that meet our allergy restrictions are permitted with advance notice
* Children with extensive dietary restrictions may bring supplemental foods as arranged with the Director
* Breakfast may be brought from home if arriving before 7:30 AM
* Food from home must be labeled with the child's name and date
* No sharing of food from home is permitted
* Homemade foods are not permitted for sharing due to allergy concerns
* Food brought from home should support our nutrition philosophy]

## **Food Allergies and Safety**

[Insert Food Allergy Protocol -- e.g., To ensure safety for children with food allergies:

1. All food allergies must be documented by a healthcare provider
2. Food Allergy Action Plans are posted in classrooms and food preparation areas
3. Staff receive training on preventing exposure and responding to allergic reactions
4. Tables are cleaned with separate cloths to prevent cross-contamination
5. Children wash hands before and after eating
6. Children with allergies may be seated strategically to minimize exposure risk
7. Parents of all children in a class are notified of significant allergies (without identifying the child)
8. Substitute foods of comparable nutritional value are provided
9. Emergency medications are readily available, and staff are trained in their use
10. In case of allergic reaction, our emergency protocol is immediately implemented]

## **Nutrition Education**

[Insert Nutrition Education -- e.g., Nutrition education is integrated into our curriculum:

* Age-appropriate activities that teach about healthy food choices
* Gardening projects where children grow vegetables and herbs
* Cooking activities that allow children to prepare simple foods
* Stories, songs, and games about nutrition
* Exploration of foods from diverse cultures
* Field trips or virtual visits to farms, gardens, or markets
* Discussions about food groups and balanced meals
* Family resources and workshops on child nutrition

These experiences help children develop positive attitudes about nutritious foods and understand how food helps their bodies grow and stay healthy.]

## **Food Program Participation**

[Insert Food Program Info -- e.g., Our center participates in the Child and Adult Care Food Program (CACFP), a federal program that provides reimbursements for nutritious meals and snacks served to children in care. As participants, we:

* Follow CACFP meal patterns and portion guidelines
* Maintain detailed records of meals served
* Receive regular training on nutrition and food safety
* Undergo periodic reviews and inspections
* Provide meals at no additional charge to families

All families, regardless of income, must complete a CACFP enrollment form at registration. Income information helps determine our reimbursement rate but does not affect your child's participation.]

## **Food Safety and Sanitation**

[Insert Food Safety -- e.g., We maintain strict food safety standards:

* All kitchen staff have current food handler certifications
* Food is stored, prepared, and served according to health department guidelines
* Kitchen facilities are regularly inspected by health authorities
* Proper hand washing procedures are followed before food handling
* Food preparation surfaces are sanitized before and after use
* Refrigerator and freezer temperatures are monitored and logged daily
* Foods are served at safe temperatures
* Leftover food is properly stored or discarded
* Staff are trained in preventing cross-contamination
* Dishes and utensils are properly sanitized after each use]

## **Celebrations and Special Occasions**

[Insert Celebration Policy -- e.g., For birthdays and special celebrations:

* Parents may provide a special snack with advance notice ([Time Frame])
* All foods must be store-bought with ingredients clearly labeled
* Foods must comply with our allergy restrictions
* We encourage healthier celebration alternatives like fruit platters, whole-grain muffins, or yogurt parfaits
* Non-food celebrations are encouraged (special games, activities, etc.)
* Birthday children may choose a book to donate to our library
* Cultural celebrations involving food will be planned in consultation with families
* Staff will ensure that celebrations are inclusive for all children]

## **Food Program Communication**

[Insert Food Communication -- e.g., We communicate about our food program through:

* Weekly menus posted in the lobby and on our website
* Daily updates about infant feedings
* Notes about new foods tried or special food activities
* Information about nutrition education activities
* Periodic newsletters with nutrition tips and recipes
* Annual survey for parent feedback on our food program
* Resources on child nutrition and healthy eating at home
* Photos of food activities shared through our communication app
* Notification of any significant menu changes]

## **Parent Resources and Support**

[Insert Parent Resources -- e.g., We support families in promoting healthy nutrition:

* Quarterly nutrition newsletters with tips and recipes
* Lending library with books on child nutrition
* Workshops on topics such as picky eating, food allergies, and family meals
* Recipes for foods children enjoy at the center
* Information about local farmers markets and food resources
* Guidance on introducing new foods and managing food challenges
* Consultation with our food service director or nutritionist as needed
* Resources in multiple languages when available

We recognize that families are children's first and most important teachers about food and nutrition, and we strive to be supportive partners in this important area.]

# **Section 17: Rest Time Policies**

## **Rest Time Philosophy**

[Insert Rest Philosophy -- e.g., At [Center Name], we recognize that adequate rest is essential for children's health, development, and learning. Our rest time policies balance the need for:

* Regular periods of rest during the day
* Individual differences in sleep needs and patterns
* A calm, soothing environment conducive to relaxation
* Appropriate alternatives for children who do not sleep
* Continuity between home and center sleep routines when possible
* Gradual transitions to rest and back to active play
* Respect for each child's comfort and security needs
* Close supervision and attention to safety

We work with families to understand each child's rest patterns and preferences.]

## **Rest Time Schedule**

[Insert Rest Schedule -- e.g., Rest periods are scheduled as follows:

* Infants (ages [range]): Sleep according to individual needs throughout the day
* Toddlers (ages [range]): One nap period from approximately 12:30-2:30 PM
* Preschool (ages [range]): Rest period from approximately 1:00-2:30 PM
* Pre-K (ages [range]): Quiet time from approximately 1:00-2:00 PM

These times may vary slightly by classroom to accommodate lunch schedules and other activities. Children are never forced to sleep but are encouraged to rest quietly during scheduled rest periods.]

## **Rest Time Environment**

[Insert Environment Description -- e.g., We create a restful environment through:

* Dimmed lighting
* Soft background music or white noise
* Consistent rest time locations for each child
* Adequate space between sleeping surfaces
* Individual bedding for each child
* Temperature monitoring for comfort
* Minimal disruptions during rest period
* Quiet visual supervision by staff
* Gentle back rubs or comfort measures as needed (with parental permission)
* Gradual wake-up with low lighting and quiet activities]

## **Sleep Equipment and Bedding**

[Insert Equipment Information -- e.g., Rest time equipment includes:

* Infants: Individual cribs that meet federal safety standards
* Toddlers through Pre-K: Individual cots or mats labeled with child's name
* Center-provided sheets washed weekly or when soiled
* Family-provided blankets or comfort items (sent home weekly for washing)
* No pillows for children under age 2
* Small pillows optional for older children (provided by families)

All sleep surfaces are sanitized weekly and whenever soiled. Bedding is stored separately to prevent cross-contamination.]

## **Infant Sleep Safety**

[Insert Infant Sleep Policy -- e.g., For infant safety, we follow the American Academy of Pediatrics safe sleep recommendations:

* Infants are always placed on their backs to sleep
* Cribs have firm mattresses with fitted sheets only
* No pillows, bumpers, blankets, toys, or positioning devices in cribs
* Sleep sacks or wearable blankets may be used instead of loose blankets
* Room temperature is monitored to prevent overheating
* Infants who fall asleep in swings, bouncers, or other equipment are moved to cribs
* Staff visually check sleeping infants every 10 minutes
* Cribs are placed away from window blinds, cords, and heating sources
* Infants who can roll are initially placed on their backs but allowed to assume preferred position
* Physician documentation is required for any alternative sleep positioning]

## **Non-Nappers and Early Risers**

[Insert non-Napper Policy -- e.g., We recognize that not all children need the same amount of sleep:

* Children who do not fall asleep after 30 minutes of rest are offered quiet activities
* Quiet activities may include books, puzzles, or other non-disruptive options
* Activities are conducted in a designated area to avoid disturbing sleeping children
* Children who wake early join the quiet activity area
* Staff ensure that non-sleeping children have opportunities for both quiet time and appropriate activity
* As children outgrow naps, we work with families to determine appropriate rest time expectations
* Pre-K children who consistently do not nap may have a shortened rest period with quiet activities

All children are required to have at least a brief period of rest/quiet time for physiological and emotional regulation.]

## **Transition to Rest Time**

[Insert Transition Description -- e.g., To help children prepare for rest:

* Energetic activities are scheduled earlier in the day
* Lunch is followed by a calming transition period
* Children use the bathroom and wash hands before rest
* A consistent pre-rest routine may include story time or soft music
* Children retrieve their own bedding and find their rest space
* Personal comfort items from home are made available
* Lights are dimmed gradually
* Staff help children settle with gentle touches or sitting nearby (as appropriate)
* Calming techniques are used for children who have difficulty settling]

## **Transition from Rest Time**

[Insert Wake-Up Transition -- e.g., As children wake from rest:

* Lights are gradually increased
* Soft music may signal the end of rest time
* Children wake at their own pace when possible
* Quiet activities are available for early risers
* Staff help children put away bedding and comfort items
* Children use the bathroom and wash hands after rest
* Snack is served as children transition back to activity
* Energetic activities are reintroduced gradually
* Children who need more sleep are allowed to continue resting when possible
* Afternoon schedules may be adjusted based on how children rested]

## **Communication About Rest**

[Insert Rest Communication -- e.g., We communicate with families about rest through:

* Daily reports of nap times and sleep quality
* Updates about changing sleep patterns
* Discussion of sleep challenges and solutions
* Sharing of effective settling techniques
* Information about developmental changes in sleep needs
* Notification if sleep patterns change significantly
* Consultation about consistent approaches between home and center
* Respectful dialogue about different cultural approaches to sleep

Families are encouraged to share information about their child's current sleep routines, preferences, and any changes at home that might affect rest at the center.]

## **Comfort Items from Home**

[Insert Comfort Item Policy -- e.g., We welcome comfort items from home to help children feel secure during rest time:

* Small stuffed animals, blankets, or other security objects are permitted
* Items should be labeled with the child's name
* Items are stored in cubbies or personal spaces when not in use
* Center staff will make every effort to keep track of comfort items, but we cannot be responsible for lost or damaged items
* Very large items or items that make noise may not be suitable
* For infant rooms, comfort items are not placed in cribs during sleep
* Comfort items should be taken home regularly for cleaning]

## **Special Considerations**

[Insert Special Considerations -- e.g., We accommodate special rest time needs:

* Children with medical conditions affecting sleep will have individualized plans developed with healthcare providers
* Children experiencing transitions or stress may receive extra support during rest time
* Cultural preferences are respected whenever possible within our safety guidelines
* Children who have recently transitioned from home to the center may need additional comfort measures
* Staff will work with families to develop consistent approaches for children with sleep challenges
* Accommodations are made for children with sensory sensitivities (e.g., noise-canceling headphones, specific textures)
* The daily schedule may be adjusted when special events or circumstances affect rest time]

## **Staff Responsibilities During Rest Time**

[Insert Staff Responsibilities -- e.g., During rest time, staff members:

* Always maintain required staff-to-child ratios
* Position themselves to see and hear all children
* Conduct regular visual checks of sleeping children
* Document sleep times for daily reports
* Provide supervision for non-sleeping children
* Complete necessary classroom tasks quietly (planning, preparation, documentation)
* Avoid disruptive activities such as loud conversations or noisy cleaning
* Ensure all children's comfort and security needs are met
* Monitor room temperature, lighting, and noise levels
* Respond promptly to children who wake distressed or need assistance]

# **Section 18: Toilet Learning and Diapering**

## **Diapering Procedures**

[Insert Diapering Procedures -- e.g., Our diapering procedures follow health department guidelines and best practices:

* Diapers are checked at least every two hours and changed promptly when wet or soiled
* Additional checks and changes occur as needed between regular times
* Staff use a fresh pair of gloves for each diaper change
* Each child has a designated changing area with a paper liner changed after each use
* Staff maintain physical contact with the child throughout the diapering process
* Changing surfaces are sanitized after each use
* Staff and children wash hands thoroughly after each diaper change
* Soiled diapers are disposed of in hands-free, covered containers
* Diaper changes are documented for infants and toddlers
* Diapering areas are separate from food preparation and eating areas]

## **Diapering Supplies**

[Insert Diapering Supplies -- e.g., Parents provide the following diapering supplies:

* Disposable diapers or approved cloth diapering system
* Wipes appropriate for your child's skin
* Diaper cream or ointment (with signed medication authorization)
* At least one complete change of clothing
* Plastic bags for soiled clothing (optional)

Please label all items with your child's name. Staff will notify you when supplies are running low. We maintain a small emergency supply of diapers and wipes for occasional use, but families are expected to promptly replenish their child's regular supplies.]

## **Cloth Diapering**

[Insert Cloth Diaper Policy -- e.g., We accommodate cloth diapers with the following requirements:

* Parents must provide a wet bag or sealed container for soiled diapers
* Soiled diapers will be placed (unrinsed) in the wet bag/container
* Parents must take home and launder soiled diapers daily
* All-in-one systems or pre-folded diapers with covers are required (no pins)
* Extra covers and inserts must be provided
* Detailed written instructions must be provided for staff
* If cloth diapering causes excessive staff time or sanitation concerns, we may request disposable diapers be used instead]

## **Toilet Learning Philosophy**

[Insert Toilet Learning Philosophy -- e.g., At [Center Name], we view toilet learning as a developmental process that occurs when children are physically and emotionally ready. Our approach is:

* Child-centered and developmentally appropriate
* Supportive rather than pressured
* Consistent with home approaches when possible
* Positive and encouraging
* Matter of fact and relaxed
* Free from shame or punishment
* Respectful of each child's individual timing
* Based on partnership with families

We recognize that children generally develop toilet independence between 2-4 years of age, with wide variation in individual readiness.]

## **Recognizing Readiness**

[Insert Readiness Signs -- e.g., Signs that your child may be ready for toilet learning include:

* Staying dry for longer periods (2 hours or more)
* Awareness of bodily functions (recognizing when they are wet/soiled)
* Interest in the bathroom and toilet
* Ability to follow simple directions
* Communication skills to express needs
* Physical ability to manage clothing independently
* Desire for independence
* Discomfort with wet or soiled diapers
* Regular and predictable bowel movements
* Ability to sit still for short periods

When you notice several of these signs, please discuss toilet learning with your child's teacher so we can develop a consistent approach.]

## **Toilet Learning Process**

[Insert Toilet Learning Process -- e.g., Our toilet learning process typically includes:

1. Introduction to the bathroom environment and vocabulary
2. Encouraging sitting on the toilet at regular intervals without pressure
3. Celebrating successes without overreaction to accidents
4. Gradual transition from diapers to training pants or underwear
5. Consistent reminders and opportunities throughout the day
6. Positive reinforcement for attempts and successes
7. Matter-of-fact response to accidents
8. Regular communication with families about progress
9. Adjustments to the approach based on the child's response

Children generally begin wearing underwear at the center when they can stay dry for most of the day with reminders.]

## **Parent-Teacher Partnership**

[Insert Partnership Approach -- e.g., Successful toilet learning requires partnership between home and school:

* We encourage beginning toilet learning at home during a weekend or break
* Parents and teachers meet to discuss readiness and approaches
* Consistent methods and language are used in both settings
* Regular communication about progress and challenges
* Shared decision-making about transitions between diapers, training pants, and underwear
* Parent provides multiple changes of clothing during the process
* Both parties maintain a positive, patient attitude
* Agreement about when to pause if the child shows resistance or stress]

## **Clothing for Toilet Learning**

[Insert Clothing Guidelines -- e.g., To support independence during toilet learning:

* Dress children in easy-to-manage clothing (elastic waistbands, no overalls or belts)
* Avoid one-piece outfits, tight buttons, or snaps
* Provide at least three complete changes of clothes including socks and shoes
* Consider training pants or pull-ups during the transition
* Label all clothing with your child's name
* Send clothes appropriate for the season
* Replace soiled clothing promptly
* Avoid special outfits during this learning period
* Consider slip-on shoes that can be easily changed if wet]

## **Handling Accidents**

[Insert Accident Protocol -- e.g., When accidents occur:

* Staff respond calmly without shame or punishment
* The child is changed promptly in the bathroom area
* Soiled clothing is placed in a sealed plastic bag for home laundering
* The child is encouraged to assist in the changing process as developmentally appropriate
* The area is cleaned and sanitized according to health protocols
* The accident is viewed as part of the learning process
* Staff may adjust reminder schedules based on accident patterns
* Accidents are communicated to parents matter-of-factly at pickup
* Multiple accidents may indicate a need to temporarily return to diapers or pull-ups]

## **Special Considerations**

[Insert Special Considerations -- e.g., We recognize that special circumstances may affect toilet learning:

* Children with developmental delays or special needs may follow different timelines
* Medical conditions affecting elimination may require individualized plans
* Cultural differences in toilet learning approaches are respected when possible
* Stress or major life changes may cause temporary regression
* Children transitioning between home and school may need additional support
* Medication may affect toileting patterns

Please inform us of any circumstances that might impact your child's toilet learning process so we can provide appropriate support.]

## **Toilet Learning Resources**

[Insert Resources -- e.g., We offer the following resources for families:

* Children's books about toilet learning (available in our lending library)
* Handouts on recognizing readiness and supporting the process
* Staff experienced in guiding many children through this milestone
* Parent workshops on toilet learning (offered twice yearly)
* Individual consultation with teachers or directors
* Recommendations for specific products or approaches based on your child's needs
* Community referrals if challenges persist

Our goal is to make toilet learning a positive developmental milestone for your child.]

# **Section 19: Clothing and Personal Belongings**

## **Appropriate Clothing**

[Insert Clothing Guidelines -- e.g., Children should wear comfortable, washable play clothes appropriate for active, sometimes messy play and learning. Appropriate clothing includes:

* Clothes that fit properly (not too tight or too loose)
* Weather-appropriate items for outdoor play in all seasons
* Layers that can be added or removed for comfort
* Items that children can manage independently or are learning to manage
* Clothes that can get dirty from art, sensory experiences, and outdoor play
* Closed-toe shoes with non-slip soles for safe active play
* Clothing free from offensive language or images

Please avoid:

* Flip-flops, loose sandals, or dress shoes with slippery soles
* Jewelry (except medical alert items)
* Clothing with drawstrings at the neck (strangulation hazard)
* Items too valuable or special to risk getting stained]

## **Required Clothing Items**

[Insert Required Items -- e.g., Each child needs the following clothing items at the center:

* At least one complete change of seasonally appropriate clothing (more for younger children)
* Extra underwear and socks
* Indoor shoes or slippers (if center has a shoe-free policy)
* Weather-appropriate outdoor clothing:
  + Winter: Snow pants, boots, warm coat, hat, waterproof mittens
  + Spring/Fall: Light jacket, rain boots, hat
  + Summer: Sun hat, lightweight clothing, closed-toe sandals
* Appropriate sleepwear or rest clothes if different from play clothes

All clothing should be clearly labeled with your child's name.]

## **Clothing Storage**

[Insert Storage Information -- e.g., Each child has designated storage space for their belongings:

* Individual cubby for coats, backpacks, and extra clothing
* Separate storage for naptime items
* Labeled bins for art and other projects
* Space for boots/outdoor shoes outside the classroom

Please check your child's cubby regularly to ensure appropriate and properly sized clothing is available. Take home soiled clothing promptly and replace extra clothes as needed.]

## **Extra Clothing**

[Insert Extra Clothing Policy -- e.g., Each child must have always at least one complete change of clothing at the center:

* Infants and toddlers need 2-3 complete changes
* Preschoolers need at least 1-2 complete changes
* School-age children need at least 1 complete change
* Extra clothing should be updated seasonally and as children grow
* Staff will notify you when extra clothing has been used
* The center maintains a limited supply of extra clothing for emergencies
* Borrowed center clothing should be washed and returned promptly]

## **Personal Belongings from Home**

[Insert Personal Belongings Policy -- e.g., We have the following policies regarding items from home:

* Essential comfort items for naptime are welcome (small stuffed animals, blankets)
* Books to share with the class are always welcome
* Toys from home should remain at home except for scheduled "share days"
* Electronic devices and screens are not permitted
* Money, candy, gum, or other small items that could be choking hazards should not be brought
* Toy weapons of any kind are not allowed
* The center cannot be responsible for lost, damaged, or stolen items
* All personal items should be clearly labeled with the child's name]

## **Share Days/Show and Tell**

[Insert Share Day Policy -- e.g., To allow children to bring special items from home in an organized way:

* Each classroom has designated share days (typically once per [week/month])
* Teachers will communicate the schedule and any special themes
* Items brought should be appropriate for school (non-violent, size-appropriate)
* Valuable or irreplaceable items should remain at home
* Items related to curriculum themes are encouraged
* Children will have the opportunity to share about their item with the group
* Items will be stored in a special location when not being shared
* Families are encouraged to help children select appropriate items]

## **Lost and Found**

[Insert Lost and Found Policy -- e.g., Despite our best efforts, items occasionally get misplaced:

* A lost and found container is located [specific location]
* Items found without names will be placed in the lost and found
* Small or valuable items (jewelry, glasses) will be kept in the office
* The lost and found is cleared and donated to charity at the end of each month
* Check the lost and found regularly if items are missing
* The center is not responsible for lost or damaged items
* Labeling all belongings significantly reduces lost items]

## **Soiled Clothing**

[Insert Soiled Clothing Protocol -- e.g., When clothing becomes soiled:

* Wet or soiled clothing will be placed in a sealed plastic bag
* Bags will be labeled with the child's name and stored in their cubby
* For health reasons, we do not rinse or wash soiled underwear or clothing
* Heavily soiled items should be taken home the same day
* Please replace extra clothing promptly when soiled items go home
* If clothing is soiled by a communicable condition, special handling instructions may apply]

## **Prohibited Items**

[Insert Prohibited Items -- e.g., The following items are not permitted at the center:

* Medication of any kind (must be given directly to staff with proper authorization)
* Toxic substances (including hand sanitizer)
* Sharp objects
* Toy weapons or violent toys
* Electronic devices (unless part of an approved adaptive plan)
* Money (except for specific approved purposes)
* Chewing gum or hard candy
* Balloons (choking hazard)
* Glass containers
* Any items that promote violence or inappropriate content for children]

## **Labeling of Personal Items**

[Insert Labeling Guidelines -- e.g., All personal items must be clearly labeled with your child's first and last name:

* Permanent marker on clothing tags
* Label tape for containers and non-clothing items
* Name tags sewn into fabric items
* Labels on the bottoms of shoes
* Waterproof labels for water bottles and containers
* Labeled bags for pacifiers and small items

Proper labeling helps prevent loss, reduces conflicts over similar items, and ensures children receive their own belongings. The center is not responsible for unlabeled items.]

## **Seasonal Clothing Updates**

[Insert Seasonal Updates -- e.g., As seasons change, please update your child's extra clothing and outdoor wear:

* Fall: Light jacket, long pants, closed-toe shoes
* Winter: Snow pants, boots, warm coat, hat, mittens, warm socks
* Spring: Rain boots, raincoat, light jacket, sun hat
* Summer: Lightweight clothing, sun hat, closed-toe sandals

Staff will send home seasonal clothing reminders, but it is the family's responsibility to ensure appropriate clothing is available for their child each day. Children without appropriate outdoor clothing may have limited outdoor time.]

# **Section 20: Center Policies and Procedures Review/Updates**

## **Policy Review Process**

[Insert Review Process -- e.g., At [Center Name], we regularly review and update our policies and procedures to ensure they:

* Comply with current licensing regulations and laws
* Reflect best practices in early childhood education
* Address the evolving needs of enrolled families
* Support our program philosophy and goals
* Remain practical and implementable

Our formal review process includes:

* Annual comprehensive review by the director and leadership team
* Staff input on practical implementation of policies
* Parent Advisory Committee consultation on family impact
* Legal review of significant changes
* Board approval of major policy revisions (if applicable)]

## **Update Schedule**

[Insert Update Schedule -- e.g., Our standard schedule for policy updates includes:

* Comprehensive review conducted each [Month/Season]
* Minor updates implemented as needed throughout the year
* Immediate updates for health, safety, or regulatory changes
* Scheduled review of specific policy sections on a rotating basis
* Special review after significant incidents or identified concerns
* Consideration of parent and staff feedback year-round]

## **Notification of Policy Changes**

[Insert Notification Process -- e.g., Families will be notified of policy changes through:

* Written notification at least [Time Period] before implementation of major changes
* Email announcements with summary of changes
* Updated handbook pages or complete revised handbook
* Highlighted changes in newsletter or parent communication app
* Posted notices in the center for significant policy updates
* Individual communication for changes affecting specific children or families
* Annual re-signing of handbook acknowledgment

Emergency policy changes related to health or safety may be implemented immediately with concurrent notification.]

## **Parent Input on Policies**

[Insert Parent Input Process -- e.g., We value family input on our policies and procedures:

* Annual survey includes questions about handbook policies
* Parent Advisory Committee reviews proposed major changes
* Suggestion box available for ongoing feedback
* Open door policy for discussing concerns with director
* Family meetings to discuss significant proposed changes
* Opportunity to provide written feedback before major revisions
* Exit interviews include questions about policy effectiveness

While we cannot accommodate every suggestion, we carefully consider all family input in our review process.]

## **Regulatory Compliance**

[Insert Regulatory Compliance -- e.g., Our policies and procedures are designed to comply with:

* State licensing regulations
* Local health department requirements
* Fire safety codes
* ADA and inclusion requirements
* Child care food program guidelines (if applicable)
* Employment laws
* Privacy regulations

When regulatory requirements change, our policies will be updated accordingly. These updates may occur outside our regular review schedule and may be implemented with limited notice when required by law.]

## **Policy Exceptions**

[Insert Exception Policy -- e.g., Requests for exceptions to center policies:

* Must be submitted in writing to the director
* Will be considered on a case-by-case basis
* Must not conflict with licensing regulations or laws
* Cannot compromise health or safety standards
* May require documentation (e.g., medical necessity)
* Will be documented in writing if approved
* May be temporary or conditional
* Will not set precedent for other families

The center reserves the right to decline exception requests that conflict with program philosophy, compromise quality, or create undue burden.]

## **Handbook Acknowledgment**

[Insert Acknowledgment Process -- e.g., All families are required to acknowledge receipt and review of the handbook:

* Initial acknowledgment signed at enrollment
* Annual re-acknowledgment with each handbook update
* Acknowledgment form kept in child's file
* Electronic acknowledgment option available
* Opportunity to ask questions about policies before signing
* Translation or explanation provided as needed
* Signed acknowledgment indicates agreement to follow all policies

Continued enrollment is contingent upon adherence to center policies as outlined in the handbook.]

## **Resolving Policy Concerns**

[Insert Resolution Process -- e.g., If families have concerns about specific policies:

1. First discuss the concern with your child's teacher if classroom-related
2. For broader concerns, schedule a meeting with the director
3. Put significant concerns in writing for formal consideration
4. Be specific about the policy and proposed alternative
5. Understand that some policies are non-negotiable due to regulatory requirements
6. Allow reasonable time for consideration and response
7. Respect the final decision of center leadership

We strive to maintain policies that serve the best interests of all children, families, and staff while maintaining program quality and sustainability.]

## **Policy Resources**

[Insert Resources -- e.g., To support understanding and implementation of our policies:

* Staff are trained on all policies during orientation and receive regular updates
* Leadership team members are available to explain rationale behind policies
* Reference copies of licensing regulations are available in the office
* Resources related to specific policies (health, curriculum, etc.) may be provided
* Clarification of policies is available upon request
* Parent handbook is available in digital format for easy reference
* FAQ document addresses common policy questions]

## **Final Note**

Thank you for taking the time to review our center's policies and procedures. These guidelines help us provide a safe, nurturing, and high-quality program for all children. We view our relationship with families as a partnership, and clear communication about expectations is essential to that partnership.

We welcome your questions and feedback as we continuously strive to improve our program while maintaining consistent standards.

The [Center Name] Team]

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