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INTRODUCTION

The Hamilton-White Child Development Center is a part of the Division of Family and Consumer Sciences, a unit of the College of Education. The Center provides a curriculum to maximize the cognitive, social, emotional and physical development of children birth to school entry.

This document is a description of the policies and procedures that enable the Hamilton-White Child Development Center to function successfully. This success is measured in terms of the benefit received by the children enrolled in the program. Evaluations of the program will be ongoing, and changes and improvements will be made as progress and/or needs demand.

The Child Development Center reserves the right to change policy when necessary for the best interests of the center, the families we serve, and the University. Whenever possible we will give advance notice of such changes.

Contact Information
Mailing address:
Hamilton-White Child Development Center
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DSU Box 3273
Cleveland, MS 38733
Phone Numbers:
Mrs. Laura Abraham, Director of Preschool Programs: 662-846-4320
Division of Family and Consumer Sciences: 662-846-4315
Dr. Cheryl Cummins, Director of Field Experiences: 662-846-4405
Bailey Hall: 662-846-4141
Website:
www.deltastate.edu/pages/3534.asp
Facebook:
Delta State University Child Development Center
https://www.facebook.com/DSUCDC

Center-Description
The Hamilton-White Child Development enrolls children from six weeks to five years old and operates on a 12-month basis in accordance with the university calendar. The Center is administered by a Director, who is supported by thirteen staff members.

The center employs five teachers. The support staff includes six assistant teachers and two part time cooks who prepare breakfast, lunch and snacks. A teacher and an assistant are assigned to each group of children. The infant/toddler class has one additional assistant. All staff members participate in workshops and in-service training sessions throughout the school year to complete 25 hours of staff development per year as required by law. We consider all of our workers as teachers and encourage each of them to design and follow an individual plan of study to gain knowledge and improve teaching practices. Lab students in Child Development, work study students, and graduate assistants also may be assigned to work with groups of children for short periods of time in the day. Students are never left alone to supervise children.
Children are placed according to chronological age and developmental level. Infants, toddlers, and two-year-olds are housed on the first floor of Ewing Hall. Preschoolers ages three to five are housed in Bailey Hall, using a three-room suite for activities. The room numbers for each class are listed below.

| Infants   | Ewing 132 |
| Toddlers  | Ewing 132A |
| Two-year-olds | Ewing 136 |
| Three-year-olds | Bailey 174 |
| Four-year-olds | Bailey 175 |

**License**

The DSU Child Development Center is licensed by the Mississippi State Department of Health. Periodic inspections are made by the Health Department to ensure compliance with all health regulations and standards. An operator's license is posted in the hallways of Ewing and Bailey in compliance with guidelines from the licensing agency.

**PURPOSE AND PHILOSOPHY**

**Purpose**

The purpose of the center is:

- to serve as a laboratory experience for students majoring in Child Development and other disciplines to enhance their understanding of children
- to provide quality care to children of students, faculty, and staff of the university and the community
- to provide a caring, secure, and accepting environment to meet the full range of needs for every child in accordance with their developmental level

**Philosophy**

The Hamilton-White Child Development Center believes:

- That all children are special and unique and come to us with a wide range of experiences, abilities, interests and needs
  Thus, we consider children as a group and as individuals when planning their learning environment.

- That all children develop best, and are more receptive to learning experiences in a comfortable, safe, secure, and supportive environment
  Thus, we design our classroom environments to insure the health and safety of the children, to encourage participation and exploration, to provide aesthetic experiences, which encourage creative responses and activities to promote and support social interactions with adults and peers, and to provide emotional support from an understanding, loving, caring, and patient staff of professionals.

- That all children develop in four developmental areas: physical, intellectual or cognitive, social, and emotional
  Thus, we provide an integrative curriculum, rich in experiences and opportunities in
all four areas to help each child reach his fullest potential. The needs and interests of
the child are always considered in planning activities for his/her participation.

- That parents and center personnel have the responsibility to help the child become
  independent, self-controlled, confident and self-motivated to be prepared for formal
  education
  Thus, we encourage children to do what they can for themselves, help them develop
  and practice self-help skills, support their attempts and understand their shortcomings,
  use positive reinforcement and guidance techniques to help them control behavior,
  and provide them with appropriate praise and encouragement to show them that they
  can succeed and have fun learning.

- That children learn rapidly when the environment provides an abundance of language
  opportunities
  Thus, we encourage a child's first attempts at language and continue to support their
  need to communicate with adults and other children, and to offer opportunities for
  children to ask questions, tell stories, respond to stories and participate in a language-
  friendly environment.

- That regular communication between parents and staff is important for consistency
  with home experiences, and for staff to effectively understand and respond
  appropriately to a child's behavior
  Thus, we encourage parents to participate whenever possible in their child's activities,
  encourage open dialogue between parents and director, parents and teachers; offer
  two parent-teacher conferences per year to discuss the child's progress; and welcome
  suggestions and constructive criticism for improving our program.

A crisis at home affects a child's behavior at school. Please share with your child's teacher
and/or director the joyous happenings, such as the birth of a new baby; the upsetting experiences,
such as the death of a relative or separation/divorce of parents or any important changes to the
child's environment. We respect the privacy of families. Any information given to us is kept
confidential and used solely to help us understand the child's behavior and help the child cope
with feelings and/or problems related to the crisis.

The specific objectives supporting these beliefs are:
I. For the child:
   • to help decrease dependence on parents and to strengthen relationships with peers
     (reducing separation anxiety in the process)
   • to help acquire a positive self-concept as a result of autonomy and independence
   • to help acquire cognitive concepts appropriate for her age
   • to help improve oral communication skills
   • to help develop physical skills, both large and small motor
   • to help enjoy creative activities and feel comfortable expressing herself with art media
   • to help acquire an appreciation for the learning process
II. For the Family:

- to provide quality care and supervision of children so mothers and/or fathers can continue to improve the quality of life for the family unit
- to help children and parents by providing experiences at school that may not be provided at home, i.e., large choice of playmates, contact with a wide variety of learning media

We consider our center as a "work in progress". Using various methods of evaluation, including comments and suggestions from parents and staff, and considering current trends, research and technology, we make changes and improvements as needed.

APPLICATIONS AND ADMISSION

Application Process
Applications for enrollment of children ages six weeks to five years are submitted to the Director of the Child Development Center. When applications are received, a designation of student, faculty/staff, or community status is noted on the application. To be considered a student, a parent must be enrolled at DSU for a minimum of 12 semester hours of undergraduate courses or 9 hours of graduate courses. To be considered DSU faculty or staff, a parent must be employed at DSU on a full-time basis. As long as a child is continuously enrolled, he/she may remain in the center even though the parents may no longer be considered students, faculty, or staff.

Applications will be kept on file for one year. After the one-year time limit, a new application must be filed with the program director. It is the responsibility of the applicant to follow this policy and to provide the center with accurate information. An incomplete application or one with incorrect information nullifies the application for enrollment purposes.

Upon receipt, applications are categorized by the five room designations. Within each age category, applications are prioritized by priority status and the date of receipt.

Priority Policy
Priority for enrollment is given in the following order (1) Siblings of current Center students and dependent children of current Center teachers and staff and (2) the date the application is received. In the infant and toddler rooms, consideration is also given to the age of the child. Since the center serves as a lab for DSU students, we want to provide the opportunity for students to observe and interact with children at various stages of development. Thus, a goal is to balance classroom composition to provide DSU students with real experiences with children of all developmental levels, and various cultural, economic, and experiential backgrounds.

Discrimination
Delta State University is committed to a policy of equal employment and educational opportunities for all persons without regard to race, color, religion, national origin, sex, physical or mental handicap, status as to disabled veteran or Vietnam era veteran, or age as specified by applicable law and regulations. This policy extends to all programs and activities supported by the university.
ENROLLMENT AND ATTENDING

Tuition/Fees

A $75 deposit is required when a child is first enrolled in our program. This is a one-time deposit, which is nonrefundable. The deposit secures the child's place in the center. The $75 deposit will be applied toward the first supply fee payment.

Each semester a $125 supply fee is required. This fee will cover all school supplies, wipes, etc. for the semester. You can choose to have this fee automatically drafted with tuition each semester or pay it in person twice a year.

Tuition for children of full-time DSU students is $473.33/month, for children of full-time DSU faculty members is $497.98/month, and for children community members is $547.21/month.

Payment Policy

The Hamilton-White Child Development Center adopted a draft policy in August 2014. All accounts must be set up on automatic draft by August 1st. Delta State University will draft your monthly tuition from your account by the 10th of each month. If we receive notice of nonsufficient funds (NSF), a $30 service charge will be assessed to your account. If tuition is not met by the 15th of the month that delinquent account will be turned over to the GRC collection agency. Three months of nonpayment or nonsufficient funds will result in termination of contract.

Each semester a $125 supply fee is required. You can choose to have this fee automatically drafted with tuition each semester or pay it in person twice a year. A 10% late fee will be assessed after the 10th of each month if payment is not made. Failure to pay the fall or spring supply fee within three months (end of October and March) will result in termination of contract and the child will be removed from the Child Development Center.

There are no refunds for withdrawals from the program. Participation or withdrawal from the program must be given 2 weeks in advanced to the Director and does not change the payment plan. Tuition will not be reduced in the event of a child's illness. In the event the University closes unexpectedly, forcing the Center to close, tuition is not compensated or reimbursed.

Collection of fees and account balances are done in the office of Student Business Services (SBS), Kent Wyatt Hall 131. Should you have any questions regarding your account or payments, please visit or call SBS at 662-846-4697.

Infants/Toddlers

The infant room consists of children ages 6 weeks (with immunizations) to one year. When accepting new children to the Center, we must look at the date of birth to ensure that we follow guidelines set by the MS Department of Health and our accrediting institution. Children who turn one before November 1st will not be eligible to enter the infant classroom in August.

When openings occur in the Toddler Room, children in the Infant Room who are the appropriate age and are developmentally ready will be moved before new applications are reviewed. Usually the younger infants from the previous fall return to the Toddler Room. Our goal is to provide a developmentally appropriate environment for each child to be challenged, not frustrated; to be successful in his attempts to learn about his world, and to feel safe and secure with the adults and children who interact with him in his environment. The best interests of the child are always considered when making selections for enrollment in the center.
**All Children**

Within each age group, applications are filed by the date of receipt. Children are accepted into the program according to their priority designation with applications filed by the date received in each age group category. In the event that two or more applications are equal in other aspects, the date of application will be the deciding factor. If an applicant declines a position, the applicant will be removed from the wait list. If interested in reapplying at a later date, the new application will be accepted and placed on the wait list according to the date received.

Applicants in the infant room will be unable to hold a spot for longer than four months without their child being in the center. Thus, for example, when a child is due in September and their spot is not needed until the end of October, an applicant will have the option to pay for their child’s spot for up to four months before the child begins attending.

If a spot becomes available in a classroom and no child in the class below is ready to advance, the spot will be filled from the applicable age group waiting list based on date of application.

**Promotions**

Promotion from one classroom to another is usually made as a part of the fall enrollment process. Occasionally the opportunity for promotion arises at the end of the fall semester. When openings occur during a semester, and there is a child in the center who we feel is developmentally ready to move to the next classroom, we will discuss the possibility of promotion with the child’s parents. This will be done before going to applications to fill the vacancy. Age is not always the determining factor.

**Attendance**

At the beginning of the semester, parents will receive a center calendar noting all center closings. Please keep this calendar in a convenient place for future reference.

Consistent attendance and prompt arrival are important. Very young children need routines for security. If your child is absent, please call us so the staff can make the proper notation on the sign in/out sheet. **All children who are attending for the day are required to be present by 8:30 a.m., unless the child has a doctor or dentist appointment. Classroom doors lock at 8:30 a.m. and parents are not allowed to drop children off after this time. If the child has a doctor or dentist appointment, the child will be allowed to return to Center if they are back by 10:45 a.m. Children will not be allowed to return to the Center without a written doctor/dentist excuse. (Please notify us in advance of scheduled appointments).** We ask that you schedule other appointments such as haircuts, lunch dates, grandparent visits, etc. in the afternoon. Changes in schedules are disruptive to the classroom.

Frequent lateness and/or numerous absences, which are not health related, may result in a termination of service. The Child Development Center is NOT a babysitting service providing drop-in service, or accommodating individual family schedules or plans. Successful management of a center serving nearly 70 families relies on keeping to schedules and routines. Food preparation, field trips, children's behavior, and the routine operation of the classroom are affected. We hope that our parents will understand and acknowledge the importance of helping their child establish the daily routine of coming to school by 8:30. Children beginning their formal education make a faster and easier transition, if they have formed good routines and habits as preschoolers. One of our goals is to help children establish lifelong routines and habits so that they may be successful and productive.
**Dismissal Policy**
Any child may be dismissed if:
- The child threatens the safety, health and/or well-being of others
- Tuition is not received or consistently late
- It is advised by a physician or child psychologist
- Enrollment was under fraudulent circumstances
- Parents/Guardians ignore center guidelines and policies
- Parents/Guardians cause undue stress to center staff or operations
- Enrollment/immunization records are incomplete and/or not updated
- Parent/Guardian threatens the safety of the children and/or staff

**Communication**
Ongoing communication is the key to quality family/school relationships. Regular communication is encouraged between families and CDC employees. A written program of communication includes:
- Hamilton-White Child Development Center Handbook
- Monthly program newsletters
- Monthly classroom calendars
- Weekly classroom newsletter
- Daily notes
- Notes concerning special events or concerns
- Hamilton-White Child Development Center Facebook Page
- Text messaging service

Bulletin boards are located in classrooms with parent information. Lesson plans and menus are posted weekly. Written information will be placed in your child’s cubby and/or at the sign-in area. Please check these two locations daily.

Parent resource centers located in the hallways of both Ewing and Bailey. You can find the Center’s monthly newsletter, calendar and menu.

Parenting books are also available for check out in both resource centers. If you would like additional information on a parenting subject, please ask and we will try to locate items for you.

Language translation services for conferences or for interpretation of key documents are available. Please contact the office, 662-846-4320, if you would like to have these services provided.

**Concerns or Complaints**
One of the most important aspects of teaching young children is communication among parents and staff. The Child Development Center staff encourages parents to share questions or concerns about their child at any time. We request, however, that a phone call or conference be scheduled to address serious concerns or complaints. The classroom environment does not lend itself to discussion of sensitive matters. Efforts will be made to schedule needed conferences within a 24-hour period. Conferences may be scheduled with the director or your child’s teacher.
Fundraising Efforts
The DSU Child Development Center will depend upon the parent community to spearhead fundraising efforts in order to help subsidize our program. Tuition will not cover the total cost of materials and extra projects. Money raised through fundraising activities may go toward upgrading inside/outside environment and contributing to professional development of the staff. Fundraising activities will be coordinated by the Parent Advisory Board.

Children’s Records
The following records must be kept on each child and updated annually:
1. Enrollment forms
2. Developmental history
3. Emergency information
4. Health and immunizations records
5. Media release form
6. Permission to transport child
7. Employer letter for parents working until 5:00
8. Class schedule for all parents that are students at DSU

Children will not be allowed to attend without the above mentioned records being on file. Failure to complete and return all forms could result in termination of contract.

A written release from the parent or legal caregiver will be obtained prior to the disclosure of the identity of any child by photograph, film, news article, or other written or verbal means. The Child Development Center staff will not include children in political or controversial activities, such as lobbying, demonstrations, riots, wearing or displaying political signs or buttons, attending political rallies and meetings, campaigns and ordinances, etc.

Confidentiality
Children’s records are considered confidential. Children’s records are available to the director, teachers and parents. In accordance with Health Insurance Portability and Accountability Act (HIPAA) guidelines, children’s school records are kept in a locked file and released only to designated parties and parents. The parent with a written permission form must approve additional access to a file. Legal request for children’s records will be handled by the DSU Legal Services.

Emergency Contacts
A list of emergency contacts must be kept on file at all times. The list must include at least two emergency contacts that are located in Cleveland in case the child needs to be picked up for any reason. Please make sure we have working phone numbers for all emergency contacts at all times. It is the parents’ responsibility to notify the teacher and director if any information changes. Our emergency forms must be current at all times. We cannot notify you of an emergency, or provide you with information, if we cannot find you.

Class Schedules of Parents
Parents who are DSU students are asked to provide a class schedule for each semester so the center can contact you if an emergency arises. Please notify your child's teacher of any changes.
Updating Records

Parents are asked to notify the center of any changes including but not limited to address, phone numbers, or change of tuition status. Please help us best serve you and your child by ensuring that we have the most up-to-date information for our records.

Delivery and Pick Up of Children

1. Doors unlock and teachers begin accepting children into the center at 7:40 a.m.
2. Parents are required to bring their child into the center each morning. The child should be picked up from inside the center or from the play yard by a parent or other designated adult. When bringing a child into the center in the morning and when picking up the child in the afternoon, the adult should sign his name and time of arrival or departure on the sign-in sheet provided every day.
3. The center closes at 5:00 P.M. Parents are expected to pick up children at or before 5:00 P.M. so staff working until 5:00 may leave on time. If a parent works until 5:00, they have until 5:10 to pick up children. We must have a letter on file from the employer stating that the parent works until 5:00 p.m. Parents that are Delta State students are required to have a class schedule on file.
4. Parents do not work or have a class after 4:00 p.m. are expected to pick children up on or before 4:30 P.M. Our staff is reduced to half at 4:30. We MUST keep within ratio regulations.
5. Please be attentive to the teachers when dropping off and picking up children. Please DO NOT be on your cell phone. The teacher needs to be able to speak to you about your child’s needs.
6. Siblings over 14 years old will not be allowed to pick up the child unless their name appears on the pick-up form. No siblings under the age of 14 will be allowed to pick up a child.
7. Parents should not leave children unattended in the hallway or classrooms if staff members are temporarily unavailable. When parents/guardians have signed the pick-up form, they assume sole responsibility for the safety of the child.
8. Our teachers have commitments and responsibilities in the morning and at the end of the day, just as you do. Please respect the pick-up and drop-off times.

The Child Development Center will be giving parking passes similar to the University. Each family will receive two passes. All persons dropping off or picking up children must have a pass on their vehicle. The passes are to be placed on the rear left side of your vehicle.

Permission to Pick up Form

All children must have a permission to pick up form on file. This form will enable the staff to know who has your permission to pick your child up if you cannot. All persons you allow to do this service must be listed on the form. The staff will not allow a child to leave with anyone who is not designated on the form as a pick up person. The Director must be informed of any changes you wish to make on this form.
Drop off Procedure for Ewing

Parents of children attending the infant, toddler, or two-year-old programs in Ewing are asked to use the drive-thru located on the 4th Avenue side of the building. Parents may park there temporarily to drop off or pick up a child. Please limit the time spent in your child's room, since many children are being transported at about the same time and other parents need access. Traffic congestion and parking problems can occur if everyone is not following these procedures. The drive-thru is used by University personnel for pick up and deliveries of equipment and materials. Because there may be times when the drive is temporarily blocked, please understand that parking directly in the driveway may not be possible. We are sharing this space, so please be patient and tolerant.

Parents dropping off in Ewing are urged to follow the above rules and the following:

1. Enter the drive-thru from the north side and exit from the south side.
2. **DO NOT double park.** Parking should be done in the lane closest to the building, allowing for cars to pull out and leave through the outside lane.

Drop off Procedure for Bailey

Parents of children at Bailey are asked to park in the four spaces designated by yellow hash marks for childcare in the front of the center. **Please DO NOT park facing traffic when dropping off or picking up. University police will give tickets!** If these spaces are occupied, drive around to the back of the center and park in one of the yellow spaces next to the play yard and enter the center through the back gate and rear classroom doors. These spaces are only for temporary parking.

Parents in Bailey are urged to abide by the following rules when parking at the center:

1. Pull into the parking space so that adequate space is available for another parent to park in an adjacent space.
2. **DO NOT double park.**
3. Do not park facing traffic.
4. Do not park in the street next to an empty slot.
5. Do not cross lanes to park in reserved slots.

**NOTE:** Students cannot park in spaces designated for Center parking to attend classes. After you drop off your child, you must find student parking for the purpose of attending class.

Pick-up

The Center’s staff is reduced to half at 4:30 p.m. **All children must be picked up by 4:30 p.m. unless the center has a letter from parents’ employers stating that they work until 5:00 p.m.**

Letters from Employer

When both parents, or a parent in a single parent home, are required by their employer to work until 5:00 p.m., the parent(s) **MUST** submit to the teacher a request in writing from their employer to be later than 5:00 p.m. in picking up their child. This request, which will be kept on file, will extend pick up time to no later than 5:10 p.m. In a two parent home, if one of the parents is off work before 4:30 p.m. the child’s pick up time will be 4:30 p.m.
Late Fees

A late fee will be charged when the child is picked up late except on rare occasions such as an emergency, involvement in a traffic accident or inclement weather. A late fee will be charged to all parents/students after 4:30 if they do not letter from their employer or a class schedule on file. A late fee of $5.00 will be charged at 4:31 and $1.00 for every minute thereafter. Parents with a filed letter from their employer will be charged a late fee of $5.00 at 5:11 and $1.00 for each minute thereafter. Payment is required by the end of the week to the caregiver who is in attendance. Termination of services may result if parents are consistently late.

After 5:15, persons listed on emergency forms will be contacted to pick up your child. If a child has not been picked up by 5:30 and all attempts have failed to reach parents or individuals listed for pick up, the staff member in charge will notify the Director. A $25.00 late fee will be charged in addition to the fee that accrued from 5:00 p.m. to 5:30 p.m.

CURRICULUM AND DAILY OPERATIONS

The curriculum, a planned set of experiences, is designed to be developmentally appropriate and to consider the interests and needs of children as a group and individually. The center recognizes and supports the importance of play as the ideal learning environment for young children. Play is fundamental to a child's development and learning. The learning environment in all rooms is designed to give children opportunities to explore, investigate, and manipulate equipment and materials. Children also are given many opportunities to make choices, learn to solve problems, practice new skills, and work cooperatively with their peers.

A theme approach is used as an avenue for implementing the curriculum. Teachers use a child-centered approach as outlined in the Creative Curriculum.

Five Components of the Creative Curriculum:

1. **How Children Develop and Learn**: what children are like in terms of their social/emotional, physical, cognitive and language development, and the characteristics and experiences that make each child unique
2. **The Learning Environment**: the structure of the classroom that makes it possible for teachers to teach and children to learn
3. **What Children Learn**: how children acquire and learn skills through daily experiences
4. **The Teacher’s Role**: how careful observations of children lead to a variety of instructional strategies to guide children’s learning
5. **The Family’s Role**: the benefits of developing a partnership with every family and working together to support children’s development and learning

Along with the Creative Curriculum, we use Mississippi Early Learning Guidelines in the infant to two-year-old classrooms and Mississippi Early Learning Standards in the three and four-year-old classrooms.

The goals for this curriculum are:

- to help the children develop a positive self-concept
- to help the child achieve intellectual growth
- to help the child enlarge his/her world of people, experiences, ideas and things
• to help the child increase competence and skills in reading, writing, listening, thinking, and speaking
• to help the child increase the skills involved in physical coordination
• to help the child increase competence in dealing with emotional feelings and social situations
• to help the child increase competence in self-direction and independence.
• to help the child develop cooperative, trusting relationships
• to help the child develop his/her natural curiosity and his/her creative potential

**Learning Centers**

Each classroom (except the infant classroom) is set up with learning centers. Learning centers provide the students with opportunities for participation and social development as they explore each center together. Children are encouraged to visit each area daily.

- **Art Center:** Provides opportunities for students to work with different media such as, paper, paint, markers, crayon, glue, scissors, pencils, etc. The process of working with the materials is what’s important, not the finished product. Teacher-directed and student-directed art activities are done daily. Art supplies are readily available each day for children to explore.

- **Manipulative Center:** Includes games, table toys, puzzles, etc. This helps to improve fine motor skills. Controlled movements of the fingers and hands help children to strengthen the muscles necessary for writing.

- **Dramatic Play Center:** Allows children to role-play and explore through imagination. Helps children build vocabulary, as well as social skills needed for life.

- **Literacy Center:** This early exposure to books will help with pre-reading, vocabulary, and language skills.

- **Block Center:** This area helps children develop and control small muscles, fingers and hands. Children can learn to think, plan and solve problems.

- **Science Center:** Provides opportunities for cause and effect learning. Students can make observations, predictions, and try out possible causes. This area includes class pets, plants, sand/water and science manipulatives.

With the Director's guidance, teachers use their knowledge of developmental levels to plan developmentally appropriate experiences to meet the interests and needs of the children. Not all children will be on the same developmental level. We accept each child where he is and build from that point. Lesson plans will be posted in each classroom.
Assessments
Formal assessments of children include the following:
- Creative Curriculum Individual Child Profile (Formative)
- Mississippi Early Learning Guidelines 3 Year-Old Checklist (Formative)
- Mississippi Early Learning Standards 4 Year-Old Checklist (Formative)
- Portfolios of acquired work
- Two Parent Conferences

Beginning screenings (45 days from start date) are used to determine the need for additional screening and needs for referral for professional assessment and services. Formative assessments are used as a basis for parent conferences. Assessment tools are adapted to respect diversity. When using the Creative Curriculum Assessment, efforts are made to eliminate or adapt questions or directions that could be misunderstood or misinterpreted by children with limited English proficiency.

Informal assessments are integrated into the course of each day. Ongoing observation of group behaviors and individual development is used by the teaching staff to adapt classroom environment, develop teaching themes, and focus on individual needs of children.
Individual portfolios are used to collect examples of children’s work to be used to assess and document developmental progress.

Assessment Plan
Assessments are naturally integrated into the course of every day as ongoing teacher observation of group patterns and individual development is used to adjust the program to better support group and individual progress. Teaching staff meet weekly to identify and discuss the group’s current interests and needs and then plan accordingly. At times, these reflections indicate the need for altering the classroom environment, shifting the unit focus, trying new teaching strategies, etc. If concerns about individual children’s development arise and are not readily remedied via classroom adaptations, teachers initiate a dialogue with colleagues and parents to plan approaches to try at both home and school.
Parent conferences are held twice a year to review the results of all assessments. Occasionally, staff and/or parents identify the need for additional screening and referrals for professional diagnostic assessment. In those cases, staff and parents typically include the Director in the diagnosis and to review the resources available to children and families in our community.

Uses of Assessment Results
Results of the assessments are primarily used to shape the current year’s program planning and to discuss individual children’s developmental progress with parents so that we can work together to best support each child’s growth.
Conferences

The Child Development Center is concerned with the happiness and well being of all of our children. Any concern about your child's behavior and development can be discussed with the director. Teachers are not free during operating hours for lengthy conferences. You may schedule a conference with your child's teacher to discuss concerns or questions.

The center will offer two scheduled conferences, one each semester, for discussing results of your child's formative evaluation. Child assessments address the areas of:

- Social skills and behaviors
- Self-help skills
- Cognitive skills
- School environment skills
- Motor skills

Daily Schedules

A planned academic program begins each day at 8:30. We believe that schedules and closely followed routines give children a feeling of security, because they know what to expect. A daily schedule is posted in each classroom. Field trips and/or unexpected learning experiences may alter the schedule slightly; however, we attempt to minimize these changes in schedule.

With infants and toddlers, schedules are often difficult to compose and adhere to because these children are often unpredictable; they make their own schedules. Effective management of the center requires us to schedule certain routines such as meals and naptime for specific time periods. Whenever possible, we adjust to the needs of individual children, if doing so does not hamper the scheduled operation of the classroom. For example: Not all infants need a nap at noon. Some may require a nap earlier at 11:00 or later at 1:00. The staff will try to meet the sleep patterns of individual children, while maintaining the planned schedule for the group.

The importance, however, of regularity and routine for young children is acknowledged and the schedule is followed as closely as possible. The importance of play is stressed throughout the curriculum with the realization that the child learns through play. Therefore, the program offers children a wide range of play experiences that promote all areas of child development. Children are offered opportunity for large and small group play as well as time for individual activity. Music, art, movement, and literature experiences will be offered. Teacher-directed, as well as self-directed, activities are included.

Classrooms offer the children a structured program, which means a specific framework exists so that activities take place according to an overall plan. We believe a planned environment is a prepared environment. Within this "structured" framework, adults provide children with great freedom to make choices, move about, express themselves in various ways, explore the use of materials and equipment, and relate to others spontaneously; special goals and objectives underlie the program.

A day at the Child Development Center may include:
- self-exploration
- hands on experiences
- teacher-directed activities
- language, math
- and science activities
- large and small group discussions
- sharing time
- free choice play
- story time
- outside play
- field trips
- nature walk
- class visitors
**Outside Play**

Fresh air and exercise are important to the health and development of children. Time is scheduled for active outdoor play each morning and afternoon. Trust the center staff to use good judgment about whether your child should play outside. **Children do not go out on rainy days, or on days when the temperature is below freezing.**

On cold days, please send gloves or mittens and a cap (the hood of a jacket is often inadequate to protect the head). During seasons when the weather may change, send a light jacket.

Please do not ask that your child remain inside. If he/she isn't well enough to go outside to play when the others do, he/she needs to stay at home that day.

**Nap Policy**

Experts on child development indicate that all children need to rest during the day. Thus, children are put down to nap between 11:30 and 12:00. Infants who take two or more naps a day will observe a slightly different schedule.

Infants nap in safety approved cribs. Children in the toddler room and up nap on nap mats provided by the parents. Children may bring one blanket or stuffed animal to sleep with during nap. All blankets, stuffed animals and nap mat covers must be taken home at the end of each week to be washed.

Obviously, children have different sleep and rest needs. When possible, children who are not sleeping and have rested for a reasonable length of time may participate quietly in individualized activities, if circumstances will provide this arrangement without disturbing the naptime of other children. Some children sleep until 2:30. It takes about a week or two to establish a nap routine, but most children do nap. Regulations require that all children must rest for a time not to exceed 2 1/2 hours. Parents that are interested in picking up their children during naptime should talk to their child’s teacher so that limited distractions are made.

**General Infant Safety Information:**

In order to help prevent SIDS (Sudden Infant Death Syndrome), the Child Development Center follows the guidelines listed below:

- Infants are placed on their backs on a firm sleeping surface.
- The space around a sleeping infant is kept clear with no fuzzy blankets, pillows or stuffed toys.
- The temperature in the room is kept cool.
- No smoking is allowed on campus.

**Bringing Items to the Center**

The center is well equipped with learning materials for all of our children. **Please leave all toys, candy, cups, money, ect. at home.** Children are invited to bring books or collectibles, such as shells, or nature items to share with their classmates. Sometimes children are asked to bring a favorite toy to share. Teachers will post or send home a note when this is planned. Children may bring one blanket and stuffed animal to sleep with during naptime (nothing very large, please). Children in the two year old room, who still carry a pacifier, will be helped to
gradually cut back using it until he no longer requires it as a security object.

**Field Trips**

Field trips provide an excellent way to extend learning experiences outside the classroom environment. During the school year our teachers will plan small excursions on campus. When possible the children in the center may take field trips. Stringent seat belt laws dictate how we can travel with children. Parents sign a standard permission form at registration in August; however, parents will be notified in advance of any upcoming trips and may be asked to sign an additional permission slip. Parents are invited at any time to accompany classes on these field trips.

**Transportation Policy**

When transporting children for field trips or other educational experiences the Child Development Center will adhere to the following guidelines:

1. Any vehicle transporting children shall meet safety standards as prescribed by Mississippi statutes to include:
   a. current vehicle license plate
   b. all vehicle operators must have in their possession a current motor vehicle operator's license and must comply with restriction(s) placed on that license.
2. A vehicle transporting children under the age of three years shall maintain a ratio of one adult for every three children. No less than two adults will be in each vehicle. At least one adult in each vehicle must be CPR/first aid certified.
3. An approved child safety seat with proper restraints shall be used for each child.
4. The driver or designated center staff member shall insure that:
   a. All children exit the vehicle upon arrival.
   b. A head count is taken immediately after exiting the vehicle and before reboarding the vehicle.
   c. A person responsible for the children is present in the center upon arrival back at the center.
   d. Children board and exit the vehicle from the curbside of the street.
   e. Children are safely conducted across all streets when boarding or exiting a vehicle.
   f. Order is maintained and seat belts are securely fastened as directed by the manufacturer.

**Classroom Visits by Parents**

The center maintains an open door policy and invites parents to visit. Please remember that the staff's first responsibility is to the children. Arrival and dismissal times are not good times for serious discussions with staff. We advise against parents discussing their child in his presence. Feel free to make appointments with teachers or the director when a conference is desired.

Most children make a better adjustment to the classroom environment if the parents bring them to the classroom, assure them that they will return later to pick them up, and leave promptly during the first few days. Children make positive adjustments to changes in their lives, when they are prepared. Parents can help children with this new "school" experience, by establishing a
consistent morning routine with the child. When a child knows what to expect, he is not as likely to become upset when the parent leaves him in the classroom. Staff members are trained to comfort and help children make the transition from home to school. Two to three weeks is a reasonable amount of time to wait before visiting the classroom. When most children have adjusted to the center environment, we welcome parent visits and participation in our program. Parents who wish to actively participate in their child's activities are encouraged to talk with teachers about scheduling times.

**Classroom Visits by Students and Outside Parties**

As a laboratory school, the Child Development Center has regular visits by students enrolled in college courses including child development, nursing, and social work. Lab students and interns are in and out of the classrooms on a regular basis. These students participate in daily activities, perform observations, conduct lessons and activities, give assessments and write journal entries as part of their course requirements. All lab students and interns are required to pass a background check and file a 121 form of immunization compliance.

Frequent visits are also made by groups enrolled in high school vocational tech programs across the state. Students and outside parties must contact the Director to schedule a visit or observation. All students and visitors must adhere to all policies and procedures of the Child Development Center. Failure to comply with the Center’s rules and regulations could result in removal of visitation rights or more serious action if deemed appropriate.

**Language**

Children are encouraged to use words to express their feelings as well as to work out difficulties. Even the very youngest children are exposed to verbal problem-solving. Teachers try to help the child put his or her feelings into words. “You are angry because ___ took your toy,” “That makes you sad,” et cetera. It is important to show how physical acts can be expressed verbally. Teachers will model good communication skills. It is important to allow children to express their feelings verbally, no matter how negative they sound.

**Classroom Rules**

- Use an inside voice
- Hands are for helping, not hurting
- Use walking feet inside
- Use listening ears
- Use good manners by saying
  
  *Please, Thank You, Yes or No Ma’am, Yes or No Sir, Excuse Me*
- Don’t talk with food in your mouth
- Keep both feet on the floor
- Keep your bottom in the chair
- Share with others
- Ask for something the correct way
  
  o *May I have ________________?*
- Wait your turn
- Work and play materials should be put away before new things are taken out.
**Discipline at the Child Development Center**

Discipline at the Child Development Center is developed with support and encouragement of positive behavior through a planned environment which provides a variety of activities from which the children may choose. Methods include reinforcement such as verbal praise, smiles and pleasant attention for appropriate stated alternatives when a conflict situation occurs.

All parents, staff, volunteers, student workers and student trainees are provided with a copy of our Child Guidance and Discipline Policy. The following methods of discipline are prohibited by anyone on the premises of the Child Development Center; any use of the described practices shall be grounds for immediate termination of staff, volunteers, student workers or student trainees.

- No child shall be subject to physical punishment, corporal punishment, verbal abuse or threats by neither staff, volunteers, or parents while on Center property.
- No child or group of children shall be allowed to discipline another child.
- No child shall be subjected to abusive or profane language
- Unsupervised isolation of a child is never allowed.
- The withholding of food, water, a nap or rest, or bathroom facilities is not to be used as punishment for a child.
- A child is never to be physically restricted in any way unless his or her actions would bring harm to self or others.
- An adult shall never address a child harshly, with intimidation or ridicule.
- Adults are never to discuss a child’s behavior with another adult in the presence of other children or parents. Written or verbal reports to parents regarding conflicts or disagreements between children shall not include the name of the child who hit, bit, or pushed their child.

The Child Development Center staff maintains a safe, non-threatening environment. Child Development Center staff fosters creativity, encourages children to explore, and allows them to make discoveries. When inappropriate behavior occurs, it is dealt with immediately. Teachers individualize responses to the children’s behavior, in relation to the particular child and the situation. They try to identify the cause of the inappropriate behavior and recognize that repeated problem behavior may be the child’s way of signaling that he/she needs help in dealing with a certain task or situation. Teachers can then modify the learning environment and/or activities to help resolve the situation. We set limits and encourage self discipline, because boundaries reassure young children and because order and stability are as important to a child as freedom.

To enforce the boundaries and rules at the Center, the adults use the following techniques with the children:

- Clear statement of the limit. (“Blocks are for building, balls are for throwing.”)
- Stating expectations positively. (“The blocks are for building.”)
- Redirection. (“Let’s go see what Eric is cooking in the kitchen.”)
- Supporting problem-solving and negotiation between the children. (“How could you use your words to tell John that you would like to have a turn with that truck.”)
- Logical consequences or choices. (“You are having a hard time playing with the blocks without throwing: You need to make another choice: do you want to play with the play dough, or to paint at the easel?”)
• Modeling effective ways to express feelings and emotions. (“I do not like it when you grab the book from my hands. Which words can you use to let me know that you need something that I have?”; with toddlers, give the appropriate script such as “Leah, say, Can I have the book, please?”)

There are times when all of the above mentioned techniques have been used and the problem persists. It is at these times that we might ask a child to sit quietly by himself/herself until that child can return to play appropriately. We do not have a “time-out” place and this alone time is not seen as punishment. It is seen as a time to regroup. Even as adults, we sometimes need time alone to “pull ourselves together.” Children also need this, especially when they have been in a group situation most of the day.

If a child repeated displays inappropriate behavior and shows little progress toward changing that behavior, the teachers may call upon the child’s parent(s) to work cooperatively in developing strategies that will meet the child’s needs. Any disciplinarian action that warrants calling the parent(s) will be documented and kept in the respective child’s file.

**Steps for Recurring and/or Severe Misbehavior**

When inappropriate behavior becomes persistent, the following steps will be taken:

1. A written form (describing the behavior) will be completed and sent home to parents for signature. These forms will be kept on file.
2. The teacher will notify the director when persistent inappropriate behavior continues.
3. A parent conference will be requested by the teacher. The Director will be present if teacher or parents deem necessary. Suggestions for improvements will be made. Parents are expected to work with the staff to improve or modify behavior.
4. If improvements are not seen within a time period specified by the teacher and parents, a second conference will be requested.
5. Additional support services may be required. Parents are expected to seek these services within a specified time period. An action plan will be
6. Termination from the center may occur if changes are not observed or if other children are considered to be at risk from a child’s behavior.
7. Termination from the center may be at the discretion of the director.

**BITING**

Children biting other children are unavoidable occurrences in group child care settings, especially with toddlers. It is a common happening in any childcare program. When it happens, and sometimes continues, it can be scary, very frustrating, and very stressful for children, parents, and staff. *Every child in the Infant and Toddler classrooms is a potential biter or will potentially be bitten.* It is important to understand that because a child bites, it does not mean that the child is “mean” or “bad” or that the parents of the child who bites are “bad” parents or they are not doing their job as parents to make this stop happening. **Biting is purely a sign of the developmental age of the child.** It is a developmental phenomena—it often happens at predictable times for predictable reasons tied to children’s ages and stages.

**Why do they bite?**

Every child is different. Some bite more than others; or some may not bite at all. The group care setting is where the biting derives its significance. If a child has not really been
around other children very much, he probably would not bite because neither the cause for biting nor the opportunity has presented itself. There is always the possibility that any child, including your own, can be either a biter or be bitten. Group care presents challenges and opportunities that are unique from home. The children are surrounded by many other children for hours at a time. Even though there are plenty of toys and materials available for all the children, two or three children may want that one particular toy. The children are learning how to live in a community setting. Sometimes that is not easy. **Biting is not something to blame on the child, parents, or caregivers.** Confidentiality is also practiced with biting. We cannot tell a parent who bit their child. There are many possible reasons as to why an infant or toddler may bite:

1. **Teething.**
2. Impulsiveness and lack of control. Babies sometimes bite just because there is something there to bite. It is not intentional to hurt, but rather exploring their world.
3. Making an impact. Sometimes children will bite to see what reactions happen.
4. Excitement and overstimulation. Simply being very excited, even happily so, can be a reason a child may bite. Very young children don’t have the same control over their emotions and behaviors as some preschoolers.
5. Frustration. There can be frustrations for a variety of reasons—wanting a toy someone else has, not having the skills needed to do something, or wanting the attention of a caregiver. Infants and toddlers simply lack the language and social skills necessary to express all their needs, desires, and problems. Biting is often the quickest and easiest way of communicating.

What do teachers do in response to children who bite? It is our job to provide a safe setting in which no child needs to hurt another to achieve his or her ends, and in which the normal range of behavior is managed (and biting is normal in group care). Again, the name of the child who bites will not be released because it serves no useful purpose and can make a difficult situation even more difficult. Punishment does not work to change a child who bites: should there be punishment at home, which a child will not understand, nor punishment at the center, which will not be used and would make the situation worse.

There are several things the teachers do to assess the biting situation and identify steps that can be done to prevent it from reoccurring. Teachers can try to minimize the behavior by:

- Letting the biting child know in words and manner that biting is unacceptable.
- Avoiding any immediate response that reinforces the biting, including dramatic negative attention. The teachers will tell the child that “Biting hurts” and the focus of caring attention is on the bitten child. The biter is talked to on a level that he/she can understand. The teacher will help the child who is biting work on resolving conflict or frustration in a more appropriate manner, including using language if the child is able.
- Examining the context in which the biting occurred and looking for patterns. Was it covered? Too many toys? Was the biting child getting hungry/tired/frustrated?
- Not casually attributing willfulness or maliciousness to the child. Infants explore anything that interests them with their mouths, and that includes others’ bodies and limbs!

When biting changes from a relatively unusual occurrence (a couple times a week) to
frequent and expected occurrences, it will be addressed with added precautions.

- The teachers will keep track of every occurrence, including attempted bites, and note location, time, participants, and circumstances.
- A childcare staff member or intern will “shadow” children who indicate a tendency to bite. This teacher would be able to then anticipate biting situations and to teach non-biting responses to situations and reinforce appropriate behavior in potential biting situations.
- The teachers may consider changes to the room environment that may minimize congestion, commotion, competition for toys and materials, or child frustration.

**Biting Policy**
The following procedure shall be followed regarding bites:

**If a child has been bitten:**
1. Wash the wound with soap and water.
2. Apply ice.
3. If the bite breaks the skin, notify the director or director designee and the parent will be called.
4. Write accident report.
5. Give attention to the bitten child.
   - For toddlers: Remind the biter that biting hurts and that we do not bite our friends. Give the toddler something to bite on like a teether or a rubber ring.
   - For preschoolers: Have the child who did the biting help to care for the injured child (e.g. hold ice, comfort). Remind the child that we do not bite our friends and that we use words to express frustration.

**How will we handle the biting child?**
1. We will look for the causes of the behavior and try to take a preventive approach.
2. We will shadow the biter in situations where we think the child might bite.
3. We will be consistent in our interventions, realizing it is a temporary part of normal development.
4. We will communicate to parents about the incident. However, information about the “bitten” is confidential.
5. If a child has bitten three times in one day, the child will be sent home from the Center for one day.
6. In persistent cases and following consultation and notice to parents, persistent biters may be removed from the program.

**Health and Safety**

Staff member are responsible for maintaining a healthful environment. All full-time staff members submit criminal record and child abuse clearances as part of employment process. All staff members participate in annual pediatric first aid/ CPR classes and review the emergency procedures.

The University is a smoke-free campus with a safe water supply and heating, ventilation, and cooling systems maintained in accordance with national standards.

With the help of the university cleaning staff, we follow out frequency table for cleaning
and sanitation throughout the school, including toys and water play areas. All staff members follow standard precautions to minimize spread of infectious disease and store any hazardous materials in locked cabinets.

Because hand washing is the #1 preventive measure to avoid the spread of disease, we specifically teach, scaffold and monitor hand washing procedures that involve the use of liquid soap and running water, with vigorous and thorough rubbing for at least 10 seconds (the length of Row, Row, Row Your Boat), followed by paper towel drying and faucet contact. We and the children wash our hands upon entry, before snacks and meals, before and after food preparation, after toileting and diapers, after contact with bodily fluids, as well as after any messy activities. Adults also wash their hands after assisting with toileting, handling garbage or cleaning, and before and after feeding a child or administering medication.

We accept only children who are well. We depend on parents to help us enforce this policy. Small children can become ill very quickly. Should your child become ill while at the center, you will be notified immediately to pick him/her up or make arrangements with another family member to do so as quickly as possible. If the child is not responding, is having trouble breathing, or is having a seizure or convulsion, the center staff will call 911.

**Immunization Compliance**

A health history is to be provided before the child enters the Center. A Certificate of Immunization Compliance (form 121) is required to be on file before a child can be admitted into the program. This certificate can be obtained at the physician's office or local Health Department. Parents should notify the center when the child receives a new immunization, so the record can be updated. We are required by licensing regulations to maintain and update all records. An updated Certificate of Immunization Compliance (form 121 must be filed within two weeks of the current record’s expiration. A notice and reminder will be sent home prior to the expiration. Failure to comply with providing an up-to-date Certificate of Immunization Compliance (form 121 will cause the child not to be able to return to the Center until updated records are received. Repeat offenses of failure to comply could result in termination of contract.

**Exclusion**

Any child with symptoms of illness and/or a temperature of 101 degrees or more will not be allowed to stay at the center while the symptoms continue. If you take your child to the doctor who determines that the child does not have a contagious illness, you MUST ask the doctor to give you a note stating that the child may come back to the center when he is free of fever for at least 24 hours. Also, the director has the right to override a doctor’s excuse. If you child has been given a doctor’s excuse to return to the Center, the director along with a nurse practitioner can require the child to remain at home. This is for everyone’s health and safety.

Giving a fever reducing medication, such as Tylenol, does not constitute fever free. The child must be fever free (including a low-grade fever) for at least 24 hours before returning to the center. If a child returns and is found to have a low grade fever, he will be sent back home until completely fever free.

Symptoms that are reasons for keeping your child home are: fever, a bad cold, earache, pink-eye, chills, diarrhea, nausea and vomiting, skin eruptions or unexplained rashes, sore throat, or anything contagious.
Exclusion Criteria

*According to the Regulations Governing Licensure of Child Care Facilities (Revised July 11, 2001) the following conditions require exclusion from child care:

**Fever:** Defined as 100 degrees F or higher taken under the arm, 101 degrees F taken orally, or 102 degrees F taken rectally. For children 4 months or younger, the lower rectal temperature of 101 degrees F is considered a fever threshold.

**Diarrhea:** Frequent (3 or more episodes in a 24 hour period) runny, watery, or bloody stools. **According to CDC recommendations, a child who is not toilet trained and has diarrhea should be excluded from childcare settings regardless of the cause.**

**Vomiting:** One time in a 24 hour period

**Rash:** Body rash with a fever

**Sore Throat:** Sore throat with fever and swollen glands

**Severe coughing:** The child gets red or blue in the face or makes high-pitched whooping sound after coughing.

**Eye discharge:** Thick mucus or pus draining from the eye

**Jaundice:** Yellow eyes and skin

**Irritability:** Continuous irritability and crying

Mississippi State Department of Health, (July 11, 2001). Regulations governing licensure of child care facilities. Appendix-I Communicable diseases/conditions and return to child are guidelines.

If the child is unable to go outside because of illness, he/she should be kept home. We do not have adequate staff to supervise one child inside while others are outside.

Sick children will be kept isolated from other children, if possible, until a parent or other adult arrives. Parents need to pick up the child for observation and to determine if a visit is needed to a physician for diagnosis and treatment.

A child with a contagious disease may not attend the center during the incubation period of the disease. The requirements for readmission will be a certificate from the Health Department or the child's physician.
The following is a listing of some of the most common diseases or conditions for which a child should not attend the center until the parent presents a physician's certificate stating that the danger of communicability has passed or proper treatment has been provided. A detailed listing and discussion of diseases is kept in Bailey and Ewing. This listing/discussion is provided in Appendix I of the Regulations Governing Licensure of Child Care Facilities published by the Mississippi Department of Health. This document governs the procedure followed by the staff of the Child Development Center.

<table>
<thead>
<tr>
<th>Disease</th>
<th>Exclusion from school</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chicken pox (if all lesions are crusted &amp; dry)</td>
<td>6 days after eruption appears</td>
</tr>
<tr>
<td>German measles</td>
<td>4 days after onset of rash</td>
</tr>
<tr>
<td>Red measles</td>
<td>7 days after onset of rash if free of fever and rash is fading</td>
</tr>
<tr>
<td>Mumps</td>
<td>9 days after glands swell</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>One week after onset of jaundice or other signs and symptoms if no jaundice present or clearance by doctor</td>
</tr>
<tr>
<td>Mononucleosis</td>
<td>Clearance by doctor</td>
</tr>
<tr>
<td>Conjunctivitis (pink-eye)</td>
<td>Until properly treated</td>
</tr>
<tr>
<td>Impetigo</td>
<td>24 hours after treatment started, free of fever, and lesions not draining</td>
</tr>
<tr>
<td>Pediculosis (head lice)</td>
<td>Until properly treated</td>
</tr>
<tr>
<td>Ringworm</td>
<td>Until properly treated</td>
</tr>
<tr>
<td>Scabies</td>
<td>24 hours after treatment completed</td>
</tr>
<tr>
<td>Fifth Disease</td>
<td>Until free of fever</td>
</tr>
<tr>
<td>Hand-Foot-and-Mouth Disease</td>
<td>Until free of fever and lesions are crusted and dry</td>
</tr>
</tbody>
</table>

On occasion, children with mild cases may be able to return before the stated days of exclusion. The director will determine such cases after receiving a physician's note stating that the child is no longer contagious and may return to the center.

We must consider the health and safety of all of our children. We do all we can to prevent spread of illness in the center. All children will be kept away from other students until they can be picked up from school. We ask for your cooperation.

REPORT COMMUNICABLE DISEASES IMMEDIATELY!

Please inform teachers and/or director when your child is diagnosed with a contagious illness so other parents can be alerted to watch for symptoms in their children.
Dispensing Medication

If it is necessary to send medicine of any kind for your child to take during the day, you must sign a medication permit requesting that this medicine be given and stating the time and dose that it should be administered. Please administer the medicine at home in the morning before you come if possible. The medication form must be completed each day the medicine is to be given. Medication forms can be obtained from staff in each of the classrooms.

- The staff will not administer any medication without written orders from a duly licensed physician or written consent of the parent.
- Medicine must be specifically prescribed for the child, not his brother, sister, or other person.
- All medication will be administered after lunch (approximately 11:30 to 12:00). Please comply with this time when signing the medication permission form.
- You must bring the medicine in a container with both the child's name and the dosage instructions clearly written on it. You must also supply the appropriate syringe or dosing device.
- The staff is not permitted to administer more than one dose per day. This is for your child's health and safety.

Parents will be asked to sign a permission form for administering Tylenol, or other fever reducing medication brought by parents, if necessary. The staff is instructed to administer a fever reducing medication if your child has a fever of 103°F or more and we cannot reach you or the person you have designated to pick up your child in an emergency. We will continue to try to contact you while trying to reduce the fever. Parents must make arrangements to pick up a child with high fever, even if Tylenol has been given.

The staff may only administer Tylenol or designated medication for fever only in emergency situations, unless written doctor’s instruction is filed. Tylenol or other pain medication will be given at noon only with a doctor’s written instruction.

Clothing Policy
1. Children must be fully dressed when brought to the center. Infants may be dressed in nightwear but should have a morning diaper change before coming to the center.
2. All clothing should be marked plainly with the child's name, especially training pants and jackets.
3. Two complete changes of clothes (except shoes) should be left at the center in case of accident. This is very important.
4. If your child is in diapers, please keep the center supplied. If a child is wearing training pants or regular underwear, send 4 extra pairs that are marked with the child's name. All rooms have adequate storage for diapers and pull-ups. Parents may bring a package to the center. Staff will post notes informing parents to restock the child's supply.
5. Generally wet and soiled clothes are placed in plastic bags to go home with the child at the end of the day. If the child has no extra clothing at the center, and a parent cannot be reached to bring clothing, the staff will attempt to use donated clothing for the child, while his clothing is being washed. We wash children's clothing only in emergency situations.
6. Leave a light jacket or sweater at the center at all times. An old one is fine. The weather is unpredictable.
7. Comfortable play clothes and shoes allow children to play freely and move about in their
environment safely. Children will be involved in numerous creative projects such as painting and water play. Please dress your child appropriately to enable him to participate fully in all activities. **Cowboy boots, flip-flops and crocs are prohibited** because they limit play and may contribute to or cause accidents.

8. Children are not permitted to go barefoot unless a particular activity makes it necessary.

9. **The Center is not responsible for lost clothing, which has not been labeled. The Center is not responsible for stained clothing.** We do use smocks to protect clothing during messy activities.

**Custody Policy**

When parents are divorced, the parent who has custody **must** submit to the Director a copy of the custody decree; this copy will be kept on file. Please notify the Director of any changes to family status occurring during the year. We require this information simply for the protection of all parties, especially the child's.

**Birthdays and other Holidays**

The center recognizes the importance of birthdays in a young child's life. We understand that parents often want their child to share this happy occasion with classmates. We do not expect to be a substitute for a family celebration, but will be delighted to recognize the child's special day with a special snack in the afternoon. **Decorations, favors, balloons, and gifts should be reserved for planned parties outside of the center.** If you wish to send birthday party invitations to the Center, you may do so ONLY if there are enough invitations for **EVERY child in your child’s class.**

Classrooms generally observe typical holidays, such as Thanksgiving, Christmas, Valentine's Day, and Easter. Christmas and Valentine's Day are celebrated with small parties in the classrooms. We try to keep plans very simple and inexpensive for our staff and parents. Parents will be informed in advanced and asked to participate in planning/hosting parties and events.

**FOOD POLICY**

The Hamilton-White Child Development Center is licensed by the State of Mississippi and follows the nutritional guidelines set forth by the state. All meals and snacks served in the center are approved by the Mississippi Department of Health.

Daily meals are provided. Adults sit with the children at meal times. Gum, candy and other foods/drinks are not to be brought to school. Snacks provided by parents on special occasions such as birthdays or holiday parties are welcomed but must be “store bought” rather than homemade. Foods in individual serving size are preferred. Please make arrangements with your child’s teacher before bringing food items to school.

Food will never be used as punishment. Each child shall be encouraged, but not forced to eat or taste his or her food. Sufficient time shall be allowed for each child to eat. As developmentally appropriate, opportunity will be provided for the involvement of children in food related activities.

**Food/drink brought from home for breakfast or lunch is NOT permitted.** Home sent meals will only be permitted with a written medical prescription from the child’s physician in the case of severe food restrictions.
Meal Times
- The children are served breakfast, lunch, and afternoon snack.
- No breakfast will be served for a child arriving after their group has eaten.
- At the center, mealtime is regarded as a social situation. It is considered a part of the total learning experience for the children. The teachers will encourage the children to eat and engage in conversation.
- Children may bring birthday treats to the center to celebrate their birthday with their friends. Please make arrangements with the teacher. All treats brought into the center must be commercially prepared.
- Parents of children with food allergies should discuss meal arrangements with the director. The center is responsible for providing adequate meals for a child with extreme or unusual food allergies.
- Parents are encouraged to assist staff in teaching and modeling a sound nutrition lifestyle.
- For infants:
  - Please send prepared bottles for babies still on formula. All bottles should be labeled with the child’s name in bold lettering.
  - Please send baby food when the baby begins eating solid food. Discuss with the teacher, the schedule the infant is on, both initially and as the infant progresses to additional foods.
  - Notify staff if your child has started drinking from a cup so the staff can cooperate with this development.

Food Allergies
If your child should have a food allergy or a food intolerance, please notify your child’s teacher immediately. A doctor’s note must be given to the director stating exactly what foods cannot be given to the child. If a doctor’s note is not provided, we must provide the child with all food we are serving for that meal.

Infants
Young infants will be fed according to their own schedule. As they grow and start eating solids foods, their eating needs will change and the eating times will be adjusted toward the group schedule. During lunch, infants not yet eating table food will be served cereals and jarred foods provided by the parents. As your infant grows and becomes more adept at eating, he/she will be using their fingers for eating “finger-foods” and working on using infant utensils. As infants gradually start to eat cereals, jarred foods, and table foods, parents should inform the teachers in the classroom as to what their child can eat. It is recommended that infants try new foods at home first, then parents can add the new food to the classroom list.

Breastfeeding
Breastfeeding mothers are welcome to do so within the center setting. The program shall support breast-feeding mothers by making a comfortable, quiet corner for them to be with their babies while feeding and to help minimize interruptions. The caregiver shall support the practice by willingly accepting bottles of breast milk, by allowing, even encouraging, the mother to drop by for feedings, and by providing a comfortable place for mother and baby to sit and nurse.

Pumped breast milk sent to the center must be dated and have your child’s name on it.
Fresh breast milk can be stored for 24 hours in the refrigerator or up to two weeks in the freezer. Milk that exceeds this time frame will be discarded.

If your child is breast fed and a parent forgets to bring in breast milk or the frozen supply is depleted, the parent will be called immediately.

**Bottles**

Bottle-fed babies shall receive the same personalized attention as the baby who is breast-fed by his or her own mother. Babies will be held for bottle-feeding. Bottles will never be propped. The feeding schedule will be individualized for each infant and flexible enough to accommodate the child’s daily needs. Infants will be fed when hungry, not when the clock or schedule dictates.

Parents of bottle-fed babies will need to provide the center with prepared labeled bottles with nipples, and lids each day. Contents remaining in any bottle must be discarded within one hour. Only breast milk, formula, or water will be placed in your child’s bottle. **No bottles will be served with cereal or any other food product in them.** Juice can only be served from a sippy cup. Bottles are not heated in the microwave, as this will produce “hot spots” in the formula or breast milk. Bottles are warmed by a bottle warmer.

**Older Infants and Toddlers**

Children who are 12 months and older will be given only the lunches and snacks that are being served by the center and whole milk. The older infants will be sitting in chairs with trays or a small table with chairs and toddlers will be at tables to eat their meals. Children in the toddler room will be using sippy cups and using utensils. Depending on the age grouping of children in the room in the Toddler room, bottle drinking may or may not be a practice. For example, if a young toddler, around 12 months is in this room, then considering this child’s use of a bottle, it may be comforting or helpful in the transition to a sippy cup for the bottle to be used at times. It is our goal to work cooperatively with the families and their child’s routine; however, bottles are not the common practice as the toddlers get older.

**Preschoolers**

Mealtime is a vital part of the curriculum and is designed with nutritional and social needs of children in mind. Children are encouraged to serve and feed themselves. The staff is present to assist the children, as well as model appropriate behavior for these times of the day. Preschool will use regular cups and utensils at meal times. Breakfast, lunch and an afternoon snack will be served family-style in the children’s rooms.
Other Health and Safety Procedures

Toilet Training

Toilet training is begun after consultation with parents. Toilet training should be considered only when children reach a certain stage of physical and emotional maturity. There is no definite age at which toilet training should be begun. Parents should confer with their child's teacher when they wish to begin toilet training. A summary of this conference will be kept on file. Teachers and parents need to compare notes when a toddler is being trained to avoid confusing the child with different expectations.

The center has a policy, based upon research studies, for appropriate toilet training practices. This policy will be shared with parents during the conference. Whenever possible we will acknowledge and accept parent's wishes as long as they do not compromise our policies.

Inclement Weather Policy

DSU has a policy of remaining open during inclement weather. In case of severe weather conditions such as ice and/or snow, closings will be announced via email and text message alert system as well as posted to the Center’s Facebook page. As a general rule, the Center follows the University’s business operations. If the University is open for business operations, then the Center will also be open. If, however, center staff members are unable to come into work and substitute help cannot be found to correct the adult:child ratio, we reserve the right to close the center and call parents to pick up their children.

Drills

Monthly tornado and fire drills are held to prepare the children and staff for such disasters. A written plan for these drills is posted in each classroom. A local civil defense unit and fire department are available for service and response to a natural disaster.

Evacuation

No one wants to think about planning for the possibility of a disaster requiring evacuation of the center, but we must have a plan in place in the event that we do need to move children. We will follow the following procedure if circumstances allow us to. The Director or person in authority will communicate with law enforcement and emergency leadership to follow appropriate and safe procedures to insure the safety and protection of the children, and to alert and inform parents/guardians of where the children have been moved.

In an emergency situation requiring evacuation from one or both sites, children will be relocated to the DSU State room, located in the H.L. Nowell Union. Parents will be notified by phone if possible. DSU Police Department (846-4155) will be informed of the relocation of the children, and can inform parents or relatives who call.

If there is a major disaster and campus buildings cannot be used to house the children, center staff will follow the directions of Civil Defense personnel. Center staff will alert the DSU Police Department, local radio stations, and/or the Cleveland Police Department and Bolivar County Sheriff’s Department. Parents can obtain information from any of these sources.
Reporting Child Abuse

By law it is the duty and responsibility of the staff in our center to report any suspected incidents of child neglect or abuse. A copy of the entire regulations addressing this issue is on file in each center.

If any staff member or person from the child’s family, while in the vicinity of the Child Development Center, engages in a practice prohibited by the program, the Director will take necessary steps to assure that there is no reoccurrence of the practice.

All observations or suspicions of child abuse or neglect will be immediately reported to the child protective services agency no matter where the abuse might have occurred.

The Director will report all suspected cases of abuse or neglect will contact the Mississippi Department of Human Services at 1-800-345-6347. The Director will follow the direction of the child protective services agency regarding completion of written reports.

A staff member who is accused of child abuse may be suspended or given leave without pay pending investigation of the accusation. However, no accusations or affirmation of guilt will be made until the investigation is complete. Caregivers found guilty of child abuse will be immediately dismissed and relieved of their duties.

Actions not permitted on the CDC premises include:

- Corporal punishment or any type of physical punishment including hitting, spanking, beating, shaking, pinching, or other measures that produce physical pain
- Withdrawal or the threat of withdrawal of food, rest, or bathroom opportunities
- Abusive, profane or derogatory language, including yelling and belittling
- Any form of public or private humiliation, including threats or physical punishment
- Any form of emotional abuse, including rejecting, terrorizing, isolating, or corrupting a child

Additional Resources

How Parents Can Enrich Their Children's Learning At Home:

- Sing and recite nursery rhymes with your child
- Get a library card and take him/her to the library frequently
- Read a story to your child each day and talk about what is happening in the story
- Have your child tell you a story; write it down, and then read it back to your child
- Arrange to take your child to story hours at the library or local bookstores
- Take your child on excursions to increase his/her experiences and vocabulary
- Encourage your child to draw; use scissors, glue, tape, and create
- Give books to your child for birthdays and holidays and let your child have his/her own bookshelf
- Provide opportunities for sensory play
- Have your child participate in simple tasks like setting the table, pouring juice, or cleaning up a spill
- Talk with your child
- Listen to your child
- Cook with your child
- Allow your child to dress himself/herself
- Offer your child choices when appropriate
• Provide your child with FREE time
• Take your child to the Parent and Teacher Resource Center
• READ!!

**Discipline**

Discipline is a multifaceted term. Parents and teachers frequently talk about and are concerned about discipline, the hows, whys and whens of setting limits and helping children learn to become self-disciplined. All these terms are interrelated, and the Child Development Center has a few guidelines for dealing with negative behavior that are in keeping with both our understanding of child development and our philosophy.

Things to consider:

- Decide where you stand on important issues and stick to it. Consistency is a key to positive discipline:
  1. Choose your issues;
  2. Set clear, consistent and reasonable rules
  3. Help children gain self-control;
  4. Don’t expect them to behave like adults or even older children.
- Children do need to learn about boundaries, what is safe, what is allowed or not allowed and why. They need help learning to organize their time and energy.
- Some strategies: distracting (re-direction), negotiating, ignoring, anticipating, setting rituals, and advance preparation.
- Offer limited choices. “Do you want me to help with your coat or do you want to do it yourself?” (Phrase the choice so that the one you want the child to pick is last after the word “OR”).
- Take advantage of children’s ritualistic tendencies and behaviors. Setting up rituals around activities gives children a sense of control since they know what to expect.
- Avoid ultimatums (e.g., “You have to do _______ before I _______.”).
- Avoid carrying on a futile, frustrating or ridiculous argument. It will only result in you feeling awkward at times.
- Prepare the child in advance for what will happen next (“We will read one book, then we will get our coats on.”) It often helps to avoid conflict.
- Motivation: “Where does your coat go?”, rather than “Hang up your coat.” Pretending you forgot the coat goes often thrills young children.
- Sometimes picking up the child and removing him/her from the situation is the only remedy.

Discipline is deciding which things you are going to insist on. Discipline helps children cope with the challenges of daily living, to interpret their world and learn social skills.
Separation Guide

Many of us have very powerful, vivid memories connected with our school experiences. School was a major influence in our lives. Outside of our families, it was our major opportunity to socialize, develop and emerge as thinking, feeling people.

Now, as parents, you have considered school/child care for your child. In choosing our center, you want to extend to your child the chance to have contact with peers in an environment that is specifically designed to meet your child’s needs. Many of you have read or heard about changing trends in education. There is greater emphasis on sending children to pre-school as a result of research that says that children develop rapidly between birth and age five. Whatever your reasons for sending your child to school/child care center, it is time to consider the first major issue which will affect both you and your child – that of separation.

Before children enter school, the majority of their time has been spent with family or familiar caretakers. Your child has formed bonds with you. You are important in your child’s eyes. Your child looks to you for both sustenance and support. Although coming to school may be an exciting time for children, it is also a new experience full of unknowns. School is a novel place – full of new people, new materials and new rules. Beyond this, school may be the very first experience some children have in leaving their parents and becoming a member of a group other than family.

Saying Good-Bye

Although you may be very excited about your child’s first school experience, you may also be very surprised at your reaction(s) when it is actually time to say good-bye. Separation from your child (even if it is positive) may arouse a whole range of intense feelings. Leaving your child at school with unfamiliar teachers and children is a major event. It signifies that your child is really growing up and that school will be playing an important role in your child’s life.

What Separation Will Mean For Your Child

The first days, weeks or months may be a difficult time for your child. School affords children the opportunity to explore his/her autonomy in a safe, monitored environment. The key, however, is that you will not be there to pick your child up after the bumps and spills. Potentially, this is unsettling for your child until she/he trusts the teachers. We recognize that you, the parents, play the central role in your child’s life and we are prepared to help children when they tell us that only mommies put their coats on! It is important to remember that your child is flexible and adaptable. No matter what your child’s initial reaction to school may be, he/she will settle into the routine over time.

Some Examples of Reactions

Separation is an issue for every child, and each child will react differently to saying good-bye. Nonetheless, some patterns of behavior are common. In isolation, the following descriptions of typical reactions may sound alarming; however, reactions such as these are actually positive evidence that children are working through their feelings about separation.

- **Sadness** – When your child sees you leave, it is often perceived as a loss: “Mommy’s leaving” versus “Mommy’s leaving but she’s coming back to get me at the end of the day.” Your child may react to your leave-taking by looking sad or crying. Complaints about being sick, tired, or not wanting to stay in school are often heard. These behaviors
often make it very difficult for parents to leave with a clear conscience. Although your
child may be sad, there will come a time when you will need to leave the room. Teachers
can help if your child shows strong feelings when you are saying good-bye.

- **Fear** – Some children become afraid when they are not in familiar surroundings,
especially when they are alone. When a child first enters school, she/he may be unsure if
teachers will keep him/her safe.

- **Anger** – Although this may seem to be a puzzling reaction to separation, some children
react by being angry when they are “left” at school. They may refuse to participate in
activities or refuse to be helped by teachers. More curiously, when you arrive at school to
pick your child up, you may be surprised to find that your supposedly unwilling child
refuses to leave school. Your child will make you wait, just as you made your child wait
at school.

- **Other Reactions** – Some children come to school in body, but not in spirit. Your child
may be quiet, observant or reluctant to get involved with activities, although at home,
he/she may be very energetic and verbal. Often, it takes time for children to realize that
school is a safe, predictable place. And what about the child who cheerfully says good-
bye each day without looking back? If your child does not show signs of working out
separation in school, you may see changes in your child’s behavior at home. Alterations
in well-established sleeping, eating or toileting routines may be disrupted. Sometimes
these changes are a result of your child’s dealing with his/her feelings around separation.
Home may be the safest place for your child express him/herself.

When parents unwittingly convey ambivalent or tentative feelings about school to their
children, school may seem a less happy and secure place. When parents find it difficult to
leave, it is even harder for children to want to stay at school.

- **Parental Reactions** – When we talk about separation, we often emphasize children’s
experiences. However, it is also vital to examine your feelings. Many parents feel very
sad, guilty or unsure about how their child will adapt to school. Recognizing your
feelings is an important part of your child’s successful school adjustment.

**What You Can Do to Help**

1. Prepare your child for the visit to school. Younger children have not developed a
sense of time, so preparation very close to the actual event will be most meaningful.
If possible, be specific about what your child will be able to do at school. If you know
the teachers’ name, share them with your child. Also, your genuine enthusiasm and
approval of school will be contagious!

2. Answer all questions honestly that the child may pose about school and give him/her
an understanding about what to expect – when he/she goes to school, who will take
him, when he/she will be picked up, what he/she will do at school – paint, read books,
play blocks, sand table, water table, go on the playground, etc.

3. Try and establish a normal routine atmosphere at home the first few days the child
attends school.

4. If your child has a “transitional object” (blanket, stuffed toy, etc) encourage your
child to bring it to school to keep it in the cubby, to be “visited” periodically as
needed.

5. When you are ready to depart, give your child a warning (“I’ll be leaving in a few
minutes”) and a stated time of return (“I’ll be back to get you after lunch”).

6. NEVER try to sneak out of the classroom while your child is busy playing in the classroom. ALWAYS SAY GOOD-BYE TO YOUR CHILD BEFORE YOU LEAVE! This is crucial in establishing a bond of trust between the parent, teacher and child.

7. Consistency is important when you say good-bye. If you say you will leave in two minutes, then leave. It may be painful to see your child cry, but teachers will be there to comfort your child.

8. If your child begins to cry or complain of not feeling well, parents should try and smile, reassure the child you’ll see them in a few hours, and wave good-bye. Most likely once the moment of separation actually occurs the child recovers quickly – usually by the time the parent has turned the corner!

9. Don’t push for exuberance on the child’s part about the new experience – as it is natural for him/her not to be ecstatic about leaving a comfortable and safe situation at home.

10. Don’t assume that all anxiety is the child’s. It is very common for parents also to feel anxiety over “separation”. Please share these feelings with a partner and/or a friend – not the child.

11. Occasionally, a child has prolonged difficulty with separation. When this is the case, special plans are developed. It is very important for parents to participate in this process! If the plan is confusing or uncomfortable to you, please share this with teachers. When parents and teachers work together, the results are often quicker and more satisfying for everyone.

12. Remember, separation is a gradual and very normal process for everyone to go through. Some adjustments take longer than others, but everyone does adjust.

13. Sharing information with teachers is helpful particularly if there are changes in your child’s behavior after he/she has started school. Changes in the home may also influence your child’s reaction to school. This information will help the teacher better know your child.

How Teachers Help With Separation in the Classroom

Each room is designed with a combination of quiet areas and more active areas. For the younger children, there is a dramatic play area, complete with dolls and telephones so that the children can phone home! Book corners have pillows where children can sit for some special time with teachers. Books are an integral part of the classroom. Several favorites are chosen with the children’s interests in mind. Here are some books which either deal with separation or are comforting to children:

- Goodnight Moon (Margaret Wise Brown);
- The Runaway Bunny (Margaret Wise Brown);
- Are you my mother? (P.D. Eastman);
- Goodnight Gorilla (Peggy Rathmann);
- The Kissing Hand (Audrey Penn).

When a child is sad or frightened, teachers spend time on a one-on-one basis. Teachers may choose to do a child’s favorite activity with him/her or suggest soothing activities. Children often talk to teachers about their parents and families. Teachers help greatly by acknowledging feelings and by encouraging children to express their feelings. Teachers also
help children remember that parents will come to get them at the end of the day.

**How Do You Know When Your Child Has Made The Adjustment To School?**

When children feel safe and confident about coming to school they will participate enthusiastically in activities. It is normal for this process to take anywhere from one day to several months. Teachers try to develop solid relationships with all the children so that each child can come to the teacher for support and comfort.