# LOOKING GLASS CHILDREN'S CENTER

Celebrating over 20 years of Academic Excellence



# ... A Peek Inside the Looking Glass



Our day is designed to balance free play activities and teacher directed activities. Our littlest citizens, our babies, gets lots of TLC and individual attention. Their needs for food and comfort are met as they grow. There is ample time for songs and fingerplays, stories, and poetry, music and dancing, exercise and fresh air.

As they gain independence and enter toddlerhood, the children begin to work in learning centers. They also have the opportunity to participate in a number of supplemental classes.

Our "big kids", then three to six years old, have all of these activities and more available to them. They also begin more formalized academic study.

We know that when children are happily involved, their parents can go to work/school/home and put in a productive day as well.

# OUR PHILOSOPHY

We believe that children's primary means of learning about our world is through play. When they play, children are imitating and practicing what they have experienced. As adults , we provide the examples they emulate. We have designed our program to provide a maximum of positive experiences, time to explore, and a variety of equipment to stimulate experimentation and consequently growth. This growth occurs throughout many aspects: emotionally, mentally, physically, socially, and intellectually.

# REGISTRATION

We accept registrations at any time of the year provided there is space available for the child. There is a registration fee for enrolling in our program. Some of our supplemental programs have fees as well. You will be informed about this.

A non-refundable \$100.00 registration must accompany the enrollment application for all new enrollees.

# SIBLING DISCOUNTS:

We do provide a 10% discount for a first child in the same immediate family when both children attend full-time. There are NO discounts for part-time or extended family members (such as cousins or friends).

# **TUITION:**

The tuition is based on a specific time period. The tuition amounts for each time period are outlined in the Tuition Rates Sheet.

There are no deductions, refunds and adjustments in tuition for absence due to illness, vacation, holiday, school closing for weather, staff training, withdrawal from school, or any other reasons. Factors within our control are taken into account when annual tuition rates are determined.

# PAYMENT POLICY

Weekly payments are due on the FIRST DAY of attendance each week. We allow for a grace period of until FRIDAY of the same week. There will be a late payment fee of \$5.00 if payment is not made by Friday of the following week. Enrollment will temporarily be suspended and subject to another registration fee.

Monthly payments are due on the first day of the month and subject to 10% late payment fee if not paid by the tenth day of the month. Enrollment may be suspended if payment is not received by the 15th.

If a payment is returned unpayable, the return fee is \$30.00. Repeated returns will require payment in cash.

# **PAYMENT METHODS**

We accept cash, check, or money order as payment for child care fees. In addition, we accept co-payments from the Voucher Corporation, Essex Cares for Kids, and Family Development Program.

# SCHEDULING

No child may be dropped off before 6:30 am or picked up after 6:30pm. Children may attend on their assigned days only; no arbitrary switching is permitted. If a child needs extra hours on occasion, they are considered extra hours, not substitution for missed day.

# SIGN IN/SIGN OUT

Children will be dropped off by the school playground. Pick up area is by the parking lot. We are concerned with the safety and well being of your child. Children are only permitted to be picked up by an adult who has been authorized by the parent. In order to maximize our security, we ask everyone to observe this policy. The pick up process is monitored by the staff. Please inform all pickup persons that they may be asked for identification if not recognized by a particular staff member. Staff will be responsible for signing in and out each student. This is for the safety of your child's departure.

# **GROUP ASSIGNMENT**

Each child is assigned to a group upon enrollment. This will be their group for the year.

# DAYS AND HOURS

We are open from 6:30 am to 6:30 pm, Monday through Friday. Full and half-days of care and education are available. Children may be enrolled two to five half or full days. Children age 20 months through 3 years may join us for a morning session of 9:00 am to 11:30 am, also two to five days per week. Half days can be morning or afternoon.

# **EXTRA HOURS**

Occasionally, a child who attends less than full-time may need additional care hours. Parents are asked to make their needs known in advance and we will try to accommodate them. We cannot guarantee to be able to do this. There is an additional charge for extra hours.

#### **ABSENCE FROM SCHOOL**

If a child is to be absent on a regularly scheduled day, parents are required to call in between 8:00 and 9:00am with the reason of the absence. Notice of planned absence (such as vacation) should be noted in advance. In either case, a date of expected return is requested.

# LATE PICK UP

Part-time: Arrangements may be made for extra hours of care for an additional fee beyond regular hours. Please be clear on the exact hours your child may attend.

Full-time: Our closing time is designed to be considerate and fair. If you find that you will be late, please arrange for alternate pickup and notify us. Please ensure that your child is picked up by our closing time.

Late pick-ups cannot be tolerated. Violations will incur: \$1.00/ minute. If a child is not picked up by 7pm and we have no contact with the family, we are required by law to contact the Division of Youth and Family Services of New Jersey (DYFS).

# POLICY ON THE RELEASE OF CHILDREN:

Each child may be released only to the child's parent(s) or person(s) authorized to take the child from the center and to assume responsibility for the child in an emergency if the parents(s) cannot be reached. If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, the center shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order.

If the parent(s) or person(s) authorized by the parents fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

1. The child is supervised at all times;

2. Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s);

3. An hour or more after closing time, and provided that other arrangements for releasing the child to their parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the Division's 24 hour Child Abuse Hotline (1.800.792.8610) to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick up the child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgement of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:

1. The child may not be released to such an impaired individual

2. Staff members attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s);

3. If the center is unable to make alternative arrangements, a staff member shall call the Division's 24-hour Child Abuse Hotline (1.800.792.8610) to seek assistance in caring for the child.

For school-age child care programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s).

# **RELEASE OF CHILDREN**

Please inform us of your plans for pick-up of your child at the end of the day. We do not release a child except to the person(s) authorized in writing at the time of registration, by the parent. Authorized pick-up persons may be changed at any time. This must be noted in child's file. We will ask for identification of any person not known to us. We may refuse to release a child to anyone who appears to be impaired and unable to provide safe transport.

# SCHOOL CLOSING/SNOW DAYS

In the event of a weather emergency, delayed opening or school closing, please call the school by 5:30 am and listen to the message or check our website. We do our best to limit weather closings, but must consider the safety to travel with small children in vehicles.

NO TUITION CREDIT WILL BE ISSUED in Emergency School Closings

# WITHDRAWAL FROM SCHOOL

Each child is expected to complete the year for which they are registered. When the time comes for your child to move on, a written notice stating the reason for leaving is requested.

# **REASONS FOR DISMISSAL**

The following reasons that our school would be inclined to dismiss your child from our center:

-frequent delinquent non-payment -ongoing behavior problems that

become disruptive to our program. -failure to pick up your child after an

hour of being notified

-frequent late pick-ups

-failure to report communicable illness

# QUESTIONS

We encourage communication between parents and the school. Please do not hesitate to discuss with us any questions or concerns about our policies, programs, or the meaning, application, or alleged violations of licensing standards. You are entitled to report them to the Bureau of Licensing. Of course, we would appreciate your bringing these concerns to our attention as well.

# PRAYER

Our children have a diverse religious background. We say a blessing before meals.

# OUTDOOR PLAY

Playing outdoors in the fresh air during every season is beneficial to the health of the children. We do take the children outdoors daily, except in the most extreme weather. Please assure that your child is prepared everyday with the appropriate outerwear.

Please do not ask us to keep your child indoors because he/she is not well enough. A child who is too ill to spend a period of time playing outdoors is too ill to be in school.

# PERSONAL BELONGINGS

All of a child's personal item must be marked with the child's name. This applies to clothing, bedding and supplies, including bottles.

Every child must have a complete change of clothes at school. Infants need a crib sheet; a full size crib sheet also fits well on a toddler cot stored in a big zip lock bag.

We discourage bringing of personal toys (except security objects) to school. Those which are brought in will be placed in a "safe place" until it is time to go home.

# TOILET TRAINING POLICY

Learning to use the toilet for the bodily functions of urination and defecation is a part of growing and maturing. These functions are in the control of the child, not the outside forces of adults. The child is made aware of the process through casual discussions and observations, both at home and in the diapering process at school. The child is then able to make the decision to stop using diapers and begin using the toilet for these bodily functions. It then becomes the responsibility of the parent to teach the child proper cleansing techniques.

We do not toilet train children at our school. The child makes the decision to switch diapers for underpants. Praise and encouragement are used if and when appropriate.

If a child becomes eligible for the preschool group and has not given up diapers, the child is informed that with the "bigness" of preschool comes the "bigness" of no diapers. The child then decides the course of action.

# METHODS OF PARENTAL NOTIFICATIONS:

Announcements are made through letters, email, our website, and signange.

# **TELEVISION VIEWING POLICY**

Our center provides an activity-focused early learning environment. We believe children learn best through active participation, hands-on experiences, interactive conversation, and exploration.

We follow the recommendations established by the American Pediatrics, which has found that too much television viewing has been linked to poor performance in school, overweight children, and the establishment of poor dietary habits. As such, our students will not have access to television viewing.

# USE OF SOCIAL MEDIA BY STAFF

Employees may be held responsible for any online behavior or content that connects them to the Center or implicates the Center in that behavior. Employees may also be held responsible for any statements, posts, communications, or other online behavior or content that is not consistent with the Center's mission and philosophy. The publication of photos, images, or artwork of students at the Center, whether online or otherwise, is generally prohibited without prior approval from the Director. Some families at the Center have chosen to restrict photograph permissions of their child(ren), and it is expected that all employees will be aware of, and abide, by those restrictions.

Employees must consider and respect the privacy of the students, faculty, staff, and administrators of the Center in all online activity. The posting of confidential and/or identifying information about the children, parents, or staff at the Center on social media (including but not limited to Facebook, Twitter, Instagram, and so forth) is strictly prohibited. In no way does the Center wish to abridge the rights of its employees to engage in critical commentary and observations that may relate to the Center and its operations; however, when such commentary and observations occur within a public forum and contain confidential information, it may result in disciplinary action for the employee.

# MEDICAL INFORMATION

When a child enrolls at Looking Glass, all immunizations must be up to date. The child must also have a physical examination. The result of the examination, along with the immunization record, must be completed by the child's physician on our form. Without our medical form, the child may not enter our school. It is the responsibility of the family to keep immunization records up to date.

When a child is immunized, we must have the specific immunization and full date in writing from the administering physician. If a child is due for an immunization and cannot receive it, the reason must be written, along with a new date for the immunization, signed by the physician. If a review of our records reveals incomplete immunization information, you will be asked to remove your child from school until the information is on file.

# ILLNESS POLICY

If in the last 24 hours, your child has had fever, diarrhea, or vomiting, your child should not be brought to school. Your child must be symptom free 24 hours prior to readmission to school.

If a child becomes ill at school, you will be called to take your child home. Any child who has had a communicable disease must have a note from a physician noting that he/she has recovered, is no longer contagious, and can be admitted into a group setting.

If a child displays any of the symptoms listed below, he/she will be isolated from the other children and the parents will be contacted. If the parents cannot be reached, we will call one of the emergency numbers listed on the application form. Arrangement must be made to have the child picked up within one hour.

Symptoms of special concern are:

- diarrhea (more than one loose stool).
- severe coughing
- difficult or irregular breathing
- yellowish skin or eyes
- pink eye (eye does not necessarily have to be pink but may be discharging mucus)

- sore throat
- unusual rashes or spots
- vomiting
- severe itching of body and scalp
- fever of 100°F or more
- extreme or unusual behavior

Children recovering from an illness may need to continue medication for a period of time after returning to school. We will administer the required medication provided a school-issued Request for Administration of Medication form is fully completed and signed and the medication is brought to school in the original container with the label intact and readable. Liquid medications must be brought in with your own marked measuring spoon. Medication and spoon must be in a "zip-lock" type bag. Children who need medication on a long-term basis need to have this same form completed and updated periodically.

#### NO TUITION CREDIT WILL BE ISSUED IN CASE OF ILLNESS

# POLICY ON THE MANAGEMENT OF COMMUNICABLE DISEASES:

If the following symptoms occur at the center, the child will be removed from the group and parents will be called to take the child home.

-Severe pain or discomfort

- -Acute Diarrhea
- -Episodes of acute vomiting
- -Elevated oral temperature of 101.5 F
- -Lethargy
- -Severe coughing
- -Yellow eyes or jaundice skin
- -Red eyes with discharge
- -Infected, untreated skin patches
- -Difficult or rapid breathing

-Skin rashes in conjunction with fever or behavior changes

- -Skin lesions that are weeping or bleeding -Mouth sores with drooling
- -Stiff neck

Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself/ herself or others, the child may return to the center unless contraindicated by local health department or department of health.

# EXCLUDABLE COMMUNICABLE DISEASES

A child or staff member who contracts an excludable communicable disease may not return to the center without a health care provider's note stating that the child presents no risk to himself/herself or others.

Note: If a child has chicken pox, a note from the parent stating that all sores have dried and crusted is required.

If a child is exposed to any excludable disease at the center, parents will be notified in writing.

# COMMUNICABLE DISEASE REPORTING GUIDELINES

Some excludable communicable diseases must be reported to the health department by the center. The Department of Health's Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at: http://www.nj.gov/health/cd/documents/reporta ble\_disease\_magnet.pdf.

A child who contracts any of the following diseases MAY NOT return to the center without a health care provider's note stating that the child is not contagious any longer.

#### **RESPIRATORY ILLNESSES**

Chicken Pox \*\* German Measles\* Hemophilus Influenzae\* Measles\* Meningococcus\* Mumps\* Strep Throat Tuberculosis\* Whooping cough\* COVID-19 and variants\*

#### GASTROINTESTINAL ILLNESS

Campylobacter\* Escherichia Coli\* Giardia Lamblia\* Hepatitis A\* Salmonella \* Shigella\*

#### CONTACT ILLNESS

Impetigo\* Lice Scabies Shingles Coxsackie virus (hand, foot & mouth disease) \*REPORTABLE DISEASES THAT MUST BE REPORTED TO THE HEALTH DEPARTMENT BY THE CENTER.

\*\*NOTE: IF A CHILD HAS CHICKEN POX, HEALTH CARE PROVIDER'S NOTE IS NOT REQUIRED, STATING EITHER THAT AT LEAST SIX DAYS HAS ELAPSED SINCE THE ONSET OF THE RASH, OR THAT ALL THE SORES HAVE DRIED AND CRUSTED.

#### IF A CHILD IS EXPOSED TO ANY EXCLUDABLE DISEASE AT THE CENTER, PARENTS WILL BE NOTIFIED IN WRITING.

# MEDICAL ADMINISTRATION IN CHILD CARE POLICY

**PURPOSE:** This policy was written to encourage communication between the parent, the child's health care provider, and the child care provider to assure maximum safety in the giving of medication to the child who requires medication to be provided during the time the child is in child care.

**INTENT:** Assuring the health and safety of all children in our Center is a team effort by the child care provider, family, and health care provider. This is particularly true when medication is necessary to the child's participation in child care. Therefore, an understanding of each of our responsibilities, policies and procedures concerning medication administration is critical to meeting that goal.

#### **GUIDING PRINCIPLES and PROCEDURES:**

1. Whenever possible, it is best that medication be given at home. Dosing of medication can frequently be done so that the child receives medication prior to going to child care, and again when returning home and/or at bedtime. The parent/guardian is encouraged to discuss this possibility with the child's health care provider.

2. The first dose of any medication should always be given at home and with sufficient time before the child returns to child care to observe the child's response to the medication given. When a child is ill due to a communicable disease that requires medication as treatment, the health care provider may require that the child be on a particular medication for 24 hours before returning to child care. This is for the protection of the child who is ill as well as the other children in child care.

3. Medication will only be given when ordered by the child's health care provider and with written consent of the child's parent/legal guardian.

# MEDICAL ADMINISTRATION IN CHILD CARE POLICY

A "Permission to Give Medication in Child Care" form is attached to this policy and will hereafter be referred to as "Permission Form."

All information on the Permission Form must be completed before the medication can be given. Copies of this form can be duplicated or requested from the child care provider.

4. "As needed" medications may be given only when the child's health care provider completes a Permission Form that lists specific reasons and times when such medication can be given.

5. Medications given in the Center will be administered by a staff member designated by the Center Director and will have been informed of the child's health needs related to the medication and will have had training in the safe administration of medication.

6. Any prescription or over-the-counter medication brought to the child care center must be specific to the child who is to receive the medication, in its original container, have a child-resistant safety cap, and be labeled with the appropriate information as follows:

-Prescription medication must have the original pharmacist label that includes the pharmacists phone number, the child's full name, name of the health care provider prescribing the medication, name and expiration date of the medication, the date it was prescribed or updated, and dosage, route, frequency, and any special instructions for its administration and/or storage. It is suggested that the parent/guardian ask the pharmacist to provide the medication in two containers, one for home and one for use in child care.

-Over-the-counter (OTC) medication must have the child's full name on the container, and the manufacturer's original label with dosage, route, frequency, and any special instructions for administration and storage, and expiration date must be clearly visible.

-Any OTC without instructions for administration specific to the age of the child receiving the medication must have a complete Permission Form from the health care provider prior to being given in the Center. Special instructions for administration and storage, and expiration date must be clearly visible.

7. Examples of over-the-counter medications that may be given include:

- Antihistamines
- Decongestants, cough suppressants
- Non-aspirin fever reducers/pain relievers
- Topical ointments, such as diaper cream or sunscreen
- 8. All medications will be stored:
  - Inaccessible to children
  - Separate from staff or household medications

- Under proper temperature control

- A small lock box will be used in the refrigerator to hold medications requiring refrigeration.

9. For the child who receives a particular medication on a long-term daily basis, the staff will advise the parent/guardian one week prior to the medication needing to be refilled so that needed doses of medication are not missed.

10. Unused or expired medication will be returned to the parent/guardian when it is no longer needed or be able to be used by the child.

11. Records of all medication given to a child are completed in ink and are signed by the staff designated to give the medication. These records are maintained in the Center. Samples of the forms used are attached to this policy and include:

- Universal Child Health Record
- Emergency Contact Sheet
- Medication Administration Log

12. Information exchange between the parent/guardian and child care provider about medication that a child is receiving should be shared when the child is brought to and pickup from the Center. Parents/guardians should share with the staff any problems, observations, or suggestions that they may have in giving medication to their child at home, and likewise with the staff from the Center to the parent/guardian.

13. Confidentiality related to medications and their administration will be safeguarded by the Director and staff. Parents/guardians may request to see/review their child's medication records maintained at the Center at any time.

14. Parent/guardian will sign all necessary medication related forms that require their signature, and particularly in the case of the Emergency Contact Form, will update the information as necessary to safeguard the health and safety of their child.

15. Parent/guardian will authorize the Director or Asst. Director to contact the pharmacist or health care provider for more information about the medication the child is receiving, and will also authorize the health care provider to speak with the Director or Asst. Director in the event that a situation arises that requires immediate attention to the child's health and safety, particularly if the parent/guardian cannot be reached.

16. Parent/guardian will read and have an opportunity to discuss the content of this policy with the Director or Asst. Director. The parent/guardian's signature on the registration form is an indication that the parent/guardian accepts the guidelines and procedures listed in this policy, and will follow them to safeguard the health and safety of their child.

# SAMPLES OF FORMS USED FOR MEDICATION ADMINISTRATION

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Name Relationshi Cell Phone Home Phone Home Address Employer Nam Employer Phone E-Mail Address to pick up your child and/or contact in case of emergency if neither parent is available to assume responsibility for the child. Contact Name #2: Relationship: Contact Name #3: Relationship Cell Phone: Cell Phone Home Phone: Home Phone Employer Phone: Employer Phone rom picking up your child: n denied access, or granted limited access, to the child by a court order, please submit he center to maintain a copy on file, and to comply with the terms of the court order. rovider: r Phone: Address: ny/Hmo: Group #: ation #: ice Card: lication): Taking: abilities, Medical ORIZATION FOR EMERGENCY MEDICAL TREATMENT over named child, I (we) attest that the information above is correct. I (we) authorize the child care t for my child and understand that I (we) shall be promptly notified. Page 1 of 2 ly our EACHED) \_\_\_\_\_

PARENT/GUARDIAN # 2

#### Department of Children and Families Office of Licensing INFORMATION TO PARENTS

Under provisions of the Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52), every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights. State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member's signature attesting to his/her receipt of the information. Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center. To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at

http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf or obtain a copy by sending a check or money order for \$5 made payable to the "Treasurer, State of New Jersey", and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention, too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the OOL's Inspection/Violation Reports on the center,

which are available soon after every State licensing inspection of our center. If there is a licensing complaint

### **INFORMATION TO PARENTS**

investigation, you are also entitled to review the OOL's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review or you can view them online at https://childcareexplorer.njccis.com/portal/.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it. Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children's products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at https://www.cpsc.gov/Recalls. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772. Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292- 0422 or go to www.state.nj.us/dcf/.

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# **GUIDELINES FOR POSITIVE DISCIPLINE**

Positive discipline is a process of teaching children how to behave appropriately. Positive discipline respects the rights of the individual child, the group, and the adult. Methods of positive discipline shall be consistent with the age and developmental needs of the children, and lead to the ability to develop and maintain self-control.

Positive discipline is different from punishment. Punishment tells children what they should not do; positive discipline tells children what they should do. Punishment teaches fear; positive discipline teaches self-esteem.

#### You can use positive discipline by planning ahead:

- Anticipate and eliminate potential problems.
- Have a few consistent, clear rules that are explained to children and understood by adults.
- Have a well-planned daily schedule.
- Plan for ample elements of fun and humor.
- Include some group decision-making.
- Provide time and space for each child to be alone.
- Make it possible for each child to feel he/she has had some positive impact on the group.
- Provide the structure and support children need to resolve their differences.
- Share ownership and responsibility with the children. Talk about our room, our toys.

#### You can use positive discipline by intervening when necessary:

- Re-direct to a new activity to change the focus of a child's behavior.
- Provide individualized attention to help the child deal with a particular situation.
- Use time-out by removing a child for a few minutes from the area or activity so that he/she may

gain self-control. (One minute for each year of the child's age is a good rule of thumb).

- Divert the child and remove from the area of conflict.
- Provide alternative activities and acceptable ways to release feelings.
- Point out natural or logical consequences of children's behavior.
- Offer a choice only if there are two acceptable options.

• Criticize the behavior, not the child. Don't say "bad boy" or "bad girl." Instead you might say "That is not allowed here."

#### You can use positive discipline by showing love and encouragement:

• Catch the child being good. Respond to and reinforce positive behavior; acknowledge or praise to let the child know you approve of what he/she is doing.

- Provide positive reinforcement through rewards for good behavior.
- Use encouragement rather than competition, comparison or criticism.
- Overlook small annoyances, and deliberately ignore provocations.
- Give hugs and caring to every child every day.
- Appreciate the child's point of view.
- Be loving, but don't confuse loving with license.

#### Positive discipline is NOT:

- Disciplining a child for failing to eat or sleep or for soiling themselves.
- Hitting, shaking, or any other form of corporal punishment.

• Using abusive language, ridicule, harsh, humiliating or frightening treatment or any other form of emotional punishment of children.

- Engaging in or inflicting any form of child abuse and/or neglect.
- Withholding food, emotional responses, stimulation, or opportunities for rest or sleep.
- Requiring a child to remain silent or inactive for an inappropriately long period of time.

Positive discipline takes time, patience, repetition and the willingness to change the way you deal. with children. But it's worth it, because positive discipline works.

# LGCC EXPULSION POLICY

Unfortunately, there are sometimes reasons we have to expel a child from our program either on a short term or permanent basis. We want you to know we will do everything possible to work with the family of the child(ren) in order to prevent this policy from needing to be enforced.

The following are reasons we may have to expel or suspend a child from this center: **IMMEDIATE CAUSES FOR EXPULSION:** 

- The child is at risk of causing serious injury to other children or himself/herself.
- Parent threatens physical or intimidating actions toward staff members.
- Parent exhibits verbal abuse to staff in front of enrolled children

#### PARENTAL ACTIONS FOR CHILD'S EXPULSION:

- Failure to pay/habitual lateness in payments.
- Failure to complete required forms including the child's immunization records.
- Habitual tardiness when picking up your child.
- Verbal abuse to staff.

#### CHILD'S ACTIONS FOR EXPULSION:

- Failure of child to adjust after a reasonable amount of time.
- Uncontrollable tantrums/ angry outbursts.
- Ongoing physical or verbal abuse to staff or other children.
- Excessive biting.

#### SCHEDULE OF EXPULSION:

If after the remedial actions above do not work, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/guardian may work on the child's behavior or to come to an agreement with the center.

The parent/guardian will be informed regarding the length of the expulsion period and the expected behavioral changes required in order for the child or parent to return to the center.

#### A CHILD WILL NOT BE EXPELLED IF A CHILD'S PARENT(S)

• Made a complaint to the Office of Licensing regarding a center's alleged violations of the licensing requirements.

- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.

#### PROACTIVE ACTIONS THAT CAN BE TAKEN IN ORDER TO PREVENT EXPULSION:

- Try to redirect child from negative behavior.
- Reassess classroom environment, appropriateness of activities, supervision.
- Always use positive methods and language while disciplining children.
- Praise appropriate behaviors.
- Consistently apply consequences for rules.
- Give the child verbal warnings.
- Give the child time to regain control.
- Document the child's disruptive behavior and maintain confidentiality.
- Give the parent/guardian written copies of the disruptive behavior that might lead to expulsion.

• Schedule a conference including the director, classroom staff, and parent/guardian to discuss how to promote positive behaviors.

• Recommendation of evaluation by a child development professional.

We reserve the right to expel students at our discretion.