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CHILD DEVELOPMENT LABORATORIES

### FAMILY POLICY HANDBOOK

DEPARTMENT OF HUMAN DEVELOPMENT AND FAMILY SCIENCES

College of Liberal Arts and Sciences

UNIVERSITY OF CONNECTICUT

2019-2020

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# INFORMATION SHEET

CHILD DEVELOPMENT LABORATORIES

HUMAN DEVELOPMENT CENTER

843 BOLTON ROAD, U-1117

STORRS, CONNECTICUT 06269-1117

(860)486-2865

FAX: (860)486-5278

<http://childlabs.uconn.edu>

CDL FEIN# for tax purposes is 06-077-2160

State License #13495 <http://www.dph.state.ct.us/BRS/Day_Care>

Accredited by NAEYC (National Association for the Education of Young Children)

<http://www.naeyc.org>

Executive Director: Anne Bladen, M.A. Room 141

Administrative

Services: Janice Bridge, B.A., Room 140

Professional

Teaching Staff: Kelly Clark Aston, B.S., Infants

Rachel Boltseridge, B.A, Preschool 2

Barb Giardina, M.A., Infants

Heather Leeman, M.S. Preschool 2

Marianne Legassey, M.S Preschool 1

Robin Massicotte, B.S., Toddlers

Ellen Meisterling, B.A., Infants

Deborah Muro, M.S. Preschool 1

Christine Perkins, B.S., Toddlers

Sabira Ramic, B.S. Toddlers

Rachel Skonieczny, B.A, Infant Blue

Teaching Assistants and Student Teachers, Fieldwork Students, Work Support Staff: Study and Student Labor Students

PROGRAMS

INFANTS TODDLER PRESCHOOL 1&2 (Green and Blue Rooms)

Hours Open: 7:30-5:30 7:30-5:30 7:30-5:30

Number of Children 8 12 18-20

***Maximum*** Ratios

Teacher/ Assistant 1:3 1:3 1:7

Teacher to child ratio

**Contact Information:**

University of Connecticut Child Development Laboratories

843 Bolton Rd. U-1117

Storrs, CT 06269

Main Number: 860-486-2865

FAX: 860-486-5278

**Staff**

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Janice Bridge, Administrative Coordinator: [Janice.Bridge@uconn.edu](mailto:Janice.Bridge@uconn.edu)

860-486-2865

**Infant Program:**

**Green Room: 860-486-2491**

Kelly Clark Aston: [Kelly.clark@uconn.edu](mailto:Kelly.clark@uconn.edu)

Barbara Giardina: [Barbara.Giardina@uconn.edu](mailto:Barbara.Giardina@uconn.edu)

**Blue Room: 860-486-2476**

Ellen Meisterling: [Ellen.Meisterling@uconn.edu](mailto:Ellen.Meisterling@uconn.edu)

Rachel Skoneiczny: [Rachel.Skoneiczny@uconn.edu](mailto:Rachel.Skoneiczny@uconn.edu)

**Toddler Room: 860-486-1028**

Robin Massicotte: [Robin.massicotte@uconn.edu](mailto:Robin.massicotte@uconn.edu)

Christine Perkins: [Christine.Perkins@uconn.edu](mailto:Christine.Perkins@uconn.edu)

Sabira Ramic: [Sabira.Ramic@uconn.edu](mailto:Sabira.Ramic@uconn.edu)

**Preschool 1: 860-486-1029**

Marianne Legassey: [Marianne.Toomey@uconn.edu](mailto:Marianne.Toomey@uconn.edu)

Deborah Muro: [Deborah.Muro@uconn.edu](mailto:Deborah.Muro@uconn.edu)

**Preschool 2: 860-486-1030**

Rachel Boltseridge: [Rachel.Boltseridge@uconn.edu](mailto:Rachel.Boltseridge@uconn.edu)

Heather Leeman: [Heather.Leeman@uconn.edu](mailto:Heather.Leeman@uconn.edu)

**HANDBOOK REVISIONS**

No handbook can anticipate every circumstance or question about program policy or procedures. As circumstances, state mandates, or university requirements change, policies must accompany them. The CDL, therefore, reserves the right to revise, supplement, or rescind portions of the handbook when necessary. The handbook is intended as a guide to support successful programming for children and successful partnerships with families.

# **MISSION/PURPOSE**

The University of Connecticut Child Development Laboratories (CDL) serves the Department of Human Development and Family Studies, the University, the community and the state as a model demonstration laboratory center. The primary purpose of the CDL is to teach university students to work with young children and to provide a site for research in the field of child development.

In order to fulfill this mission, the CDL offers programs for young children ages six weeks to five years. The CDL is committed to providing developmentally appropriate curriculum that is based on current research and knowledge of child development. The CDL’s primary goals are to foster the optimal development of children, to set an example for other early childhood programs, and to impart to students high ideals and goals. Each CDL teacher holds a minimum of a Bachelor’s Degree with expertise in the field of early childhood education. Teacher assistants are comprised of CDL professional staff and full-time UCONN students majoring in Human Development and Family Studies.

The Child Development Laboratories (CDL) has three components:

TRAINING STUDENTS – The CDL provides undergraduate and graduate students with supervised experience and training. Besides training Human Development and Family Services students to work in early childhood programs, the CDL serves as a placement site for observations, projects, and field placements for many other departments within the University.

CONDUCTING RESEARCH – One of the primary missions of the CDL is to encourage and facilitate research. The CDL staff is committed to working cooperatively with researchers interested in issues of family, child development and early childhood education. Requests to do research involving young children in CDL programs are screened for their appropriateness to the welfare of the child and CDL programs.

SERVICES FOR CHILDREN – A safe, supportive and nurturing environment is provided together with a commitment to developmentally appropriate programming which promotes the physical, social, emotional, and intellectual development of young children. The CDL (childlabs.uconn.edu) is licensed by the State of Connecticut (http://www.dph.state.ct.us/BRS/Day\_Care), accredited by the National Academy of Early Childhood Programs ([www.naeyc.org](http://www.naeyc.org)), and is a member of the Council of Child Development Laboratory Administrators.

These three components result in a rich experience in which learning occurs on many levels: university students and CDL children are scaffolding their learning in an academically rich, professional learning community.

# **PHILOSOPHY**

The philosophy of the CDL program is to foster development in children that will enable them to take an active part in society, and to support children’s growth emotionally, socially, creatively, intellectually and physically. We firmly believe that children learn through play-based experiences that are meaningful and relevant to their lives. With this in mind, we adhere to several underlying principles of development that guide our thinking and the implementation of this program. Based on the theories of Piaget and Vygotsky, we believe that every child is unique and has his or her own temperament and learning style. The child brings this uniqueness into each new experience and takes an active role in the process of learning through their engagement in these experiences. Children interact with peers, teachers, materials and the environment and relate each new piece of information to their already existing view of the world. These relationships are the basis of learning and as children explore and discover more about the world, these relationships become more refined and sophisticated. These beliefs are at the core of our curriculum for all children.

It is our belief that the construction of relationships in the child’s mind is a prerequisite to the more complex skills of reading, writing and mathematical reasoning. Thus, we believe that giving children a wide variety of opportunities to actively explore, manipulate, question, and discover can best facilitate cognitive development. When you look into our classrooms you will see children engaging in play experiences designed to support social skills, emotional health, and cognitive and physical growth.

Intellectual competence is only one of our missions. We strive to promote optimal development in all aspects of a child’s life. Of primary concern is our desire to help each child develop a healthy self-concept, confidence, curiosity, and motivation to learn, as well as the ability to establish cooperative relationships with other children and adults. We believe that the child’s social and emotional development is primary because all aspects of learning hinge on emotional well-being. Exploring, discovering, and interacting in one’s social world is just as critical to the learning process as is exploring the physical environment. To this end we strive to establish relationships with children and families that are characterized by cooperation, mutual trust, affection, and respect for others’ autonomy.

The following are goals and outcomes that the CDL has for each child and their families:

* To support the expansion of trusting relationships to peers and adults beyond the family.
* To promote the development of autonomy and a healthy self-concept.
* To participate in an inquiry-based environment that facilitates the intellectual, physical, creative and social/emotional development of children.
* To facilitate the increasing development of accepted avenues for expressing and managing excitement, joy, fear, anger, affection, sadness and frustration.
* To foster the growth of cooperative interactions in work and play.
* To guide interpersonal problem-solving skills.
* To nurture and maintain each child’s wonder and exploration of the environment and the capacity for choice and initiative.
* To enhance a subjective sense of mastery and of the power to make an impact on one’s environment.
* To facilitate the development of language and communication skills and a growing awareness of how symbols can be used for personal and interpersonal communication.
* To collaborate with families, teachers and the community to meet the unique needs of each child.

**STATEMENT OF NON-DISCRIMINATION**

The Child Development Laboratories uphold all state and federal anti-discrimination laws that promote equal opportunity and prohibit discrimination. We believe that children, families, staff, students and volunteers benefit from the diverse experiences, perspectives and cultures of those that attend, participate in or visit our center.

**STATEMENT OF CONFIDENTIALITY**

Each family that is enrolled at the CLC has the right to expect confidentiality from the staff. This includes classroom interactions and information related to health, assessment and other sensitive or private information. Children are never discussed outside the center and exchanges of information are not encouraged between parents. Even in a CDL classroom setting, the child's name, gender or description are not used to describe a situation. At no time will a child's name be used in public; not at a soccer game, not at Wal-Mart, not at the grocery store. The goal of all discussions or information seeking must be to serve the child and/or their family. Information shared by parents must be held in the strictest confidence. Confidentiality implies trust and respect. All staff and students are required to sign and follow the Confidentiality Policy.

**COMMITMENT TO DIVERSITY**

Tolerance and understanding are fostered by positive exposure to a variety of ages, genders, lifestyles, family structures, races, cultures, religions, and physical abilities. Therefore, we emphasize an environment that welcomes diversity and challenges bias and discrimination.

**ETHICS**

The University of Connecticut Child Development Laboratories is committed to offering high quality early childhood education predicated on the NAEYC Code of Ethical Conduct and Statement of Commitment. This organization recognizes that any daily decisions required of those who work with young children are of a moral and ethical nature, thus the guidelines identify responsible behavior and provide a common basis for resolving dilemmas encountered in early childhood program. Because of our philosophy and beliefs, the center is committed to:

* Appreciating childhood as a unique and valuable stage of the human life cycle;
* Basing our work with children on a knowledge of child development;
* Appreciating and supporting the close ties between the child

and family;

* Recognizing that children are best understood in the context of family, culture, and society;
* Respecting the dignity, worth, and uniqueness of ach individual (child, family member, and colleague);
* Helping children and adult achieve their full potential in the context of relationships that are based on trust, respect, and positive regard.

A statement from the National Association for the Education of Young Children, 2005, summarizes the intent and outcome of employee conduct:

**Above all, we shall not harm children. We shall not participate in practices that are disrespectful, degrading, dangerous, exploitative, intimidating, emotionally damaging or physically harmful to children**

**LICENSING**

The CDL operates in compliance with building, fire, and health regulation codes for the state of Connecticut Department of Public Health. The license is posted in Room 140 and licensing rules and regulations are available for those who wish to review them.

**COMMITMENT TO SUPPORTING CHILDREN’S SELF-ESTEEM AND**

**SOCIAL SKILLS**

Children require a positive self-image in order to form relationships and be open to learning. Therefore, we respect and appreciate them. Our goal is to have them feel physically and emotionally empowered. We help them develop independence, cooperative behavior, and caring for others.

**SUPPORTING CHILDREN’S GROWING INDEPENDENCE AND**

**BEHAVIOR GUIDANCE**

The basic rules for children are established for their health (including social-emotional well-being) and safety. When appropriate, children participate in the establishment of such rules. We tailor our expectations and requests to fit the developmental levels of the children, therefore minimizing frustration and inappropriate behavior. We try to arrange the environment to anticipate and prevent problem situations. We encourage children to develop their own self-control, management of feelings, and problem-solving abilities and to find their own rewards in appropriate and cooperative behavior.When children act in ways that could be harmful to themselves or others, or destructive ofproperty, we intervene; however, we do not ever use corporal punishment, including spanking, humiliation, or verbal abuse. Children are never denied food, or punished for soiling, wetting, ornot using the toilet.We model a sense of control in our own touch and voice. We are firm about limitations when they are appropriate to the situation and the children’s ability to understand and comply. We are consistent. We work as a team with other teachers and with parents. We analyze possible reasons for the behavior problem and make whatever adjustments in the environment that we can. We offer realistic and appropriate choices, try to redirect activity, offer more appropriate ways to achieve acceptable behaviors, and help the children to problem-solve. We offer frequent hugs and words of encouragement.

We engage in efforts to positively guide children through the day at the Child Labs. A child who does not follow directions is verbally reminded of the correct/accepted behavior. A child who continues to disregard the directions or poses any danger to another person is removed from the situation. This is done by walking the child to another area and discussing the situation. Sometimes a child may be guided to use the “one friend space” or the quiet cubby (located in the classrooms), for a few minutes until they are ready to join the classroom experience again. Hitting, biting, kicking, yelling use of inappropriate language are not allowed by anyone.

Additional information on discipline is found on pages 33 and 34.

# **ENROLLMENT AND TUITION INFORMATION**

The Child Development Laboratories’ admissions policy is different from that of most programs because our purpose is more complex. We strive to provide quality programs for young children and their families while training students, facilitating research and serving the community and state as a model center. Our admissions policy reflects this complex role as we work to maintain a balanced and diverse child population while supporting the involvement of families who most need our services. All children are eligible for enrollment, regardless of race, religion, gender, disability or national origin. Please note that children are not required to be toilet trained in order to attend any program at the Child Labs. All children will be provided a full range of learning opportunities and enrichment activities unless otherwise directed by the express permission of the parent or guardian in accordance with religious beliefs or practices.

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# **WAITING LIST**

# Applications must be completed online at <http://childlabs.uconn.edu>. The CDL maintains a waiting list for all programs from which openings are filled. A cultural and economic cross section of young children is desired in order to provide a diverse population for the students we train, the researchers we support and the community that looks to us for leadership. In addition, the following factors are considered:

Child’s age

Child’s gender

Child’s special need(s)

Priority is given generally to University of Connecticut currently affiliated staff, faculty, and students, to families in need (e.g., single parent families, or families where both parents work full-time or are full-time students), and to siblings of children ***currently*** enrolled. Other families are eligible when space is available.

Children currently in CDL programs register in March for the following year. After this in-house registration is completed, remaining slots are filled from the waiting list by mid-June. September is the usual entrance time. However, occasionally slots may open during other times in the year due to sabbatical leaves, moving, etc. Whenever an opening occurs, the first child on the waiting list who meets the criteria needed to balance the program is called.

# 

# **REGISTRATION**

Registration is held once a year between March and May. Orientation to the program includes an initial tour with the director learn about the program and policies, meetings with the classroom teachers, and an open house. A non-refundable charge of the first month’s tuition AND a non-refundable registration fee of $75.00 per family is due at each annual registration. Appropriate forms and a medical examination are required for each child annually. All forms are available in the CDL on-line at childlabs.uconn.edu. Parents are required to sign a contract stating that they have read the Policy Handbook and agree to abide by all the policies contained therein.

# **FEES**

Tuition fees are based on a monthly charge that is determined by the age of child in the program and family income and the current OEC sliding fee scale. A copy of the CDL sliding fee scale may be obtained from the CDL website Verification of household income is required to apply for a reduced fee below the top fee (cost of care). Those families who are at the top income level are not required to provide household income verification. Documentation used for verification of income is the gross income amount from parents’ most current pay stubs or tax returns. Families unable to provide current paystubs must provide comparable verification of income and ability to pay such as letters of financial support from university departments and/or letters of financial support from country of origin. New families to the program are required to pay the first month’s tuition at the time of registration. **As noted in the previous section, the first month’s tuition and registration fee are non-refundable.**

The yearly tuition amount can be paid in one of the following ways:

* Payroll Deduction (required for all UConn employees)

Newly enrolled families who are employees of the University of Connecticut are required to have their child’s tuition fees deducted directly from their paycheck. The yearly tuition is divided into 16 or18 equal payments that are deducted from the bi-weekly paychecks.

* Equal monthly payments (for non-UConn employees)

The yearly charge is divided into 10 equal payments. The CDL year begins

in September, and the first payment for the year is due June 30 for returning families. Payments are due the 15th of each month thereafter. A late fee of $25.00 will be applied for all payments not received on time.

Checks or money orders should be made payable to “**University of Connecticut – Child Development Labs**”. Payments should be placed in the locked mailbox that is located on the wall outside the main office (Room 140). Checks returned for Insufficient Funds will be assessed a $25.00 fee. Two occurrences will require remaining payments to be in the form of cashier’s check or money order. The CDL FEIN number for tax purposes is 06-077-2160.

**CARE4KIDS and School Readiness**

The Connecticut Department of Social Services provides child care assistance to qualified families through Care4Kids. This is a partnership program for moderate income families in Connecticut to help make childcare affordable. Families and children must live in Connecticut; families must be working or attending a temporary approved education or training activity and meet the program’s income requirements. You may visit their website at <http://ctcare4kids.com> or see the Program Assistant for more information.

The Office of Early Childhood supports a grant to eligible towns to help families provide a high quality preschool program. The grant may significantly reduce the tuition for eligible families. Mansfield has a limited number of slots and the Child Labs is one of the sites in town that offers a small number of slots related to School Readiness. Families must apply for this grant. The application can be found at <http://www.mansfieldct.gov/filestorage/1904/2585/school_readiness_app.pd>

Additional information about the program can be found at http://www.mansfieldct.gov/content/1914/2578/2582.aspx

**WITHDRAWAL**

Parents sign an annual contract. If parents choose to withdraw their child at any point after signing the contract, they are still responsible for the monthly payments for the remainder of their contracted year. **The first month’s tuition and registration fee are non-refundable**. In the event that a replacement can be found, parents will be released from their contract **but the first month’s tuition and registration fee WILL NOT be refunded.** **No replacements will be made after March first.** Families who leave the program during the year without fulfilling their contractual agreement to pay will not be allowed to enroll their children in the future.

It is important for your child to be given an opportunity to say good-bye and have a sense closure when he or she leaves the program. Please let your child and staff know in advance of your child's last day so that the transition can be a positive experience for your child, his or her friends, and teachers.

Since fees are calculated on an annual rather than daily or hourly basis, families pay for the 185 days school, not for the scheduled time we are closed. No refunds are made for illnesses, vacation time taken by parents, or emergency closing. **Full-day snow closures when the University remains open for the entire day are made up at the end of the school year.**

**DISMISSAL POLICY**

The CDL reserves the right to cancel the enrollment of a child for non-payment of fees, frequent tardiness or in special circumstances where it is not possible for the program to meet a particular child’s or parent’s individual needs, or when particular enrollment no longer serves research or training needs. In all instances we will work with parents and strive to find mutually agreeable solutions other than dismissal whenever possible.

Please also see the section on our Discipline Policy

#### **PROGRAMS**

#### **The Infant Center – ages 6 weeks to 17 months**

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The Infant Center has two primary classroom spaces, two nap areas and a covered porch area for outdoor play as well as a common room. Both classroom have two professional staff, along with student teachers, field -work students and student workers who provide the care, nurturing and educational experiences that infants need to build trusting relationships while exploring their environment.

The Infant environment is structured to provide sensory experiences that support active learning. As babies explore with their hands, mouths, eyes, ears and feet, the staff purposefully observes and plays with your baby to see how your child engages with materials, reacts to their surroundings, other children and adults. Using this information, the teachers plan key experiences that support growth in your child’s emotional, social, physical, linguistic, and cognitive areas of learning. These plans are shared with all student staff during their weekly training sessions so children receive consistency and continuity of care.

Much of our day is spent playing, reading, singing and talking with children. Equally important are the “Prime Times” for bonding and building trusting relationships during daily routines. We feel it is important to understand each infant as having an individualized napping, feeding, and diapering routine. These routines are viewed as “Prime Times” for learning and special one on one times for building trusting relationships. Napping, feeding and diapering are not rushed transitions; they are learning experiences where children are encouraged to be a part of these routines, when adults spend time talking and singing to children through these routines, and when children respond to the one on one interactions during these routines. Teachers strive to help children assimilate all experiences, routines included, in their growing concept of the world and of themselves.

As children grow, their individualized routines begin to form a pattern conducive for group feedings and group napping. The classroom schedule on the following page outlines this difference between children ages 6 weeks-9 months and 9 months to 17 months.

ALL CHILDREN UNDER THE AGE OF ONE YEAR SHALL BE PUT TO SLEEP

ON THEIR BACKS.

**INFANT CENTER SCHEDULE**

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The schedules for the youngest infants in the program are individualized and change according to each child’s needs.

**Green and Blue Rooms**

(6 weeks – 17 mos.)

**All children must arrive by 9:30 AM and all families must transition from the classroom before 5:30 for building closure.**

The classrooms in the Infant Centers operate on a very flexible timetable geared to meet the infants’ individual and group needs. Children eat and nap according to their own schedules. Diapering occurs throughout the day as needed and at regularly scheduled times. The time, number, and nature of changes are recorded as is time and amount at feedings and time and length of naps.

Each week, experiences based on observations of the children are planned to provide a daily balance of the following: indoor/outdoor, active/quiet, individual/small group, gross motor/fine motor, child initiated/staff initiated. The curriculum includes play experiences based on the children’s cues that foster growth in the Personal/Social, Cognitive, Sensorimotor and Language/Communication domains. Weather permitting, children play outside every day.

**Over the course of the day, our schedule includes**:

*Arrival in the common room and a variety of explorations including: sensory, gross and fine motor experiences, books, songs, cause and effect, peer and teacher interactions*

*Morning meals, diapering, naptime (individualized schedules)*

*Indoor and outdoor explorations including: sensory, gross and fine motor experiences books, songs, cause and effect, peer and teacher interactions, tummy time*

*Mid day meals and rest time according to children’s needs*

*Indoor and outdoor explorations including: sensory, books, songs, cause and effect, gross and fine motor experiences, peer and teacher interactions, tummy time*

**All children must arrive by 9:30 AM. All families must enter the classroom no later than 5:15 pm for pick up and exit the before 5:30 pm for building closure.**

**The Toddler Program – ages 18 months to 3 years**

The Toddler years are an exciting time of self -discovery and exploration of the world. Growing out of infancy, children actively experiment with how to manipulate their environment to suit their own needs. It is typical for toddlers to want to do things for themselves, yet want help from adults when frustrated. They tend to use their emotions and behaviors in creative ways to show their power and control. This back and forth relationship between doing for one’s self and needing others is embraced in its uniqueness in the Toddler Program.

The Toddler classroom is designed to offer choices and foster independence. Children are free to move about the room engaging in play-based interest areas that support social, emotional, physical, language/communication and cognitive areas of learning. Spaces are divided into areas such as dramatic play, blocks, reading, writing, manipulatives, art, and sensory. The creative use of low shelving, see through panels, and felt boards allows spaces to be separate yet have the feeling of coziness and security that toddlers need to feel safe while playing.

Three professional staff, student teachers, field-work students, and student workers support play with small groups of children (up to 8 children in any one space). This allows toddlers to explore individual interests as well as experiment with social situations. As Toddlers explore, the staff purposefully observes and plays with your child to see how he/she engages with materials, reacts to their surroundings, other children and adults. Using this information, the teachers plan key experiences that support growth in your child’s emotional, social, physical, linguistic and cognitive learning. These plans are shared with all student staff during their weekly training sessions so your child receives consistency and continuity of care. The curriculum is child-focused and driven by the interests, developmental abilities and needs of each individual Toddler.

As Toddlers experiment with social relationships, it is the teacher’s role to support each child’s individuality and help them negotiate in the social world around them. As emerging friendships form, conflict situations become an opportunity for learning. Teachers provide positive redirection and feedback for learning or for social behaviors they hope to facilitate. Further, they attempt to integrate a “choice” situation into as many interactions with children as possible to fulfill the Toddler’s need for autonomy.

Classroom routines such as diapering, toilet learning, lunch, clean-up times, and napping are not rushed transitions. These are those “Prime Times” for learning and building trusting relationships with each other. These routines are an important part of our everyday learning environment.

**TODDLER SCHEDULE**

The pace and flow of the day is based on meeting individual and group needs of the children in the class. Diapering occurs throughout the day as needed and at regularly scheduled times. The time, number, and nature of changes are recorded Each week, experiences based on observations of the children are planned to provide a daily balance of the following: indoor/outdoor, active/quiet, individual/small group, gross motor/fine motor, child initiated/staff initiated. The curriculum includes play experiences based on the children’s cues that foster growth in the Personal/Social, Cognitive, Sensorimotor and Language/Communication domains.

Weather permitting, children play outside every day.

**Over the course of the day, our schedule includes**:

*Arrival time and open snack. A variety of indoor and outdoor explorations that may include: sensory experiences, dramatic play, block play, gross and fine motor experiences, language and literacy, math and science experiences, creative expression, small or large group experiences, reading books together, singing, peer and teacher interactions*

*Lunch, toileting and rest time. Children who have rested for 30 minutes but are not asleep go to quiet experiences in the classroom*

*Open snack time and a variety of indoor and outdoor explorations that may include: sensory experiences, dramatic play, block play, gross and fine motor experiences, language and literacy, math and science experiences, creative expression, small or large group experiences, reading books together, singing, peer and teacher interactions.*

Children have the opportunity to move freely throughout the classroom and activity areas. Due to licensing requirements, there are limits as to the number of children allowed in each activity area at one time.

Sensory Table - 4 children Dramatic Play - 8 children

Block Space - 6 children Book Corner - 4 children

Table Area - 8 children Motor Room - 8 children

Art Center – 2-4 children

**All children must arrive by 9:30 AM. All families must enter the classroom no later than 5:15 pm for pick up and exit the before 5:30 pm for building closure.**

**Preschool Program** – ages 3 yrs. to 4 years 11 months

A preschool age child is developing a strong sense of self and is learning to become a socially competent being. Relationships between children begin to take on a new meaning as friendships and play groups form. Language becomes a tool for negotiation and communication. The intensity of play is more pronounced as ideas are formed into well-developed plans. Social and emotional growth is the underlying goal of the Preschool program.

The CDL offers both Part-Day and Full-Day Preschool programs. Each preschool has two professional teachers and student staff who support and engage with children as they actively explore their environment, solve problems that have meaning for them, and work cooperatively with others. Utilizing play experiences as the foundation from which children learn social and intellectual skills, the classroom space is designed to help children make choices, engage in key experiences, and follow through with their ideas. When looking inside our classroom, you will see interest centers that support areas of learning including literacy, mathematical and scientific thinking, visual arts, music and socio-dramatic play. The materials are at the child’s level to encourage self-direction and exploration. As children engage in these play experiences, the teachers and students support their thoughts, actions and interactions with other children by participating in their play and observing and documenting their interests and growth.

The Preschool curriculum evolves from the observations and documentation of children exploring and engaging in their environment with their peers. Understanding the key experiences preschool children need to challenge their thinking and skills, the Preschool program uses the Connecticut State Department of Education Preschool Curriculum and Assessment Frameworks and Focused Portfolios as tools to guide curriculum planning and assessment. Incorporating these tools with the classroom observations creates a unique curriculum with individual children in mind and ensures consistency with our goals for children. This authentic look at each child across all areas of learning provides teachers with accurate information and supports your child’s growing interests.

As children find themselves in conflicting situations while sharing ideas about their world with other children, teachers and student staff help children find solutions by exploring their feelings about themselves and others. Conflict resolution through respectful listening and conversation helps children to better understand themselves and others in relationship to the world they are exploring. Children learn to think creatively and independently, to be open to inner feelings and emotions and to have a heightened awareness of the world.

## PRESCHOOL DAILY SCHEDULE

The pace and flow of the day is based on meeting individual and group needs of the children in the class.

**Over the course of the day in preschool, our schedule includes:**

*Open snack time and a variety of indoor and outdoor explorations that may include: sensory experiences, dramatic play, block play, gross and fine motor experiences, language and literacy, math and science experiences, social studies, creative expression, small or large group experiences, reading books together, singing, peer and teacher interactions.*

*Lunch, toileting and rest time. Children who have rested for 30 minutes but are not asleep go to quiet experiences in the classroom.*

*Open snack time and a variety of indoor and outdoor explorations that may include: sensory experiences, dramatic play, block play, gross and fine motor experiences, language and literacy, math and science experiences, social studies creative expression, small or large group experiences, reading books together, singing, peer and teacher interactions.*

**Half day children MUST be picked up before 12:30 PM**

**FAMILY INVOLVEMENT: PARENT-PARENT and PARENT-TEACHER PARTNERSHIPS**

**COMMUNICATION**

Open communication among parents/guardians, teachers and administrators is essential in building trusting relationships and to provide for the needs of each child. CDL families, teachers, and administrators share a commitment to create an educational, nurturing and supportive environment where children and families can grow and develop. Ongoing family involvement opportunities help foster parent, teacher, and community partnerships and enhance the quality of our program. We offer opportunities for families to get to know each other, both in individual classrooms and program-wide. Families can be great support systems for each other and CDL staff are happy to help facilitate families getting to know each other. The CDL has an open door policy and parents are welcome to visit at any time and the observation booths are always available. When visiting in the classroom, please keep in mind your child’s temperament and classroom routines; please consult your child’s teacher when planning a classroom visit. There are many different ways to participate. Here are some ways to get involved:

* Attend “Friends of Child Labs” meetings (generally held twice a semester)- this is a great way to have input on program growth and improvement!
* Participate on a field trip
* Contribute to newsletters
* Volunteer in a classroom
* Attend parent workshops
* Help teachers plan classroom experiences
* Take on a leadership role in developing, planning and running center-wide events
* Share an interest or skill
* Volunteer to be a room parent

An integral part of your child’s early care and education experience is based on the partnership between parents/families and teachers. This partnership must be built on mutual respect, trust and understanding. To facilitate this relationship, please take the time to connect with your child’s teachers everyday. **The CDL makes every effort to consider family childrearing practices as part of our daily routines. Please take the time to share your familial practices, interests, and cultural practices with our staff.** Our CDL community celebrates the uniqueness of each and every member, and all families are invited to share their talents, suggestions and time to create a strong bond between home and school.

To further support the home-school connection please keep the following in mind:

* Parents/guardians must notify the Director or Administrative Coordinator any time an address or phone number changes.
* If there is a change in guardianship or legal status of a parent, please let us know as soon as possible and provide legal documentation.
* Parents/guardians will receive written and/or verbal communication daily about their child’s day.
* We are committed to maintaining the confidentiality of information shared with us by parents/guardians. We will not disclose any information about the children in our program without the written consent of parents/guardians.
* We will coordinate services with other providers or outside agencies only with the written permission of the parent/guardians. Staff will have the parent/guardian sign a Release of Information.
* A meeting may be requested with a child’s Teacher and/or Director at any time. Please keep in mind that teachers have a busy schedule with the children in their class and that immediate meetings are not always possible.
* Any concerns or questions regarding the program and program policies should be addressed to the Director.
* Parents/guardians are encouraged to provide their input about the program. Parent Surveys are sent home each year. Also, attendance at parent committee meetings and workshops provide opportunities for dialogue and feedback.
* Parents/guardians will be notified of special activities planned at the center through notes and center updates, and newsletters. Details of community events and activities that may be of interest to families will also be shared through flyers sent home and postings in the classrooms.

**PARENTING WORKSHOPS AND MEETINGS**

The mission of the CDL includes providing parents and families with resources and support. Throughout the year a variety of topics as well as curriculum topics are offered to parents and interested family members. Child and parent workshops may also be offered for children and family members to work together on a project, sing songs or share favorite stories.

**FRIENDS OF CHILD LABS COMMITTEE**

The CDL program is different from most early childhood programs because our purpose is more complex. Early care and education is delivered through the Child Development Laboratories (CDL) as a function of its role as a setting for teaching, training and research in early childhood education and development. This unique collaboration among families, teachers, researchers, administrators and students allows all of us to benefit from shared ideas and responsibilities. The Friends of Child Labs Committee provides a forum for this sharing and you are invited to join. The Friends of Child Labs meets monthly or as needed to help our program grow in the following areas:

* Accreditation process and program development
* Fundraising
* Help plan and implement center wide activities
* Participate and recruit others to be involved on the staff search committee

**Family Literacy Opportunities**

Throughout the course of the school year, we offer experiences to engage children and families in interactive literacy experiences. These experiences may include the following:

* Family Story Nights
* The CDL Lending Library
* Library Card Sign-up/Drive
* Copies of favorite books and songs to read/sing at home
* Book Exchanges
* Newsletters that highlight book reviews, good literacy websites
* Suggestions for making everyday experiences (cooking, grocery shopping, etc) into literacy-rich experiences
* Notice of activities at the local libraries for families and children
* If you have an idea, please let us know!

**PARENT-TEACHER CONFERENCES**

Parent-Teacher conferences are held twice a year, towards the end of each semester and **parents are required to attend as a component of ongoing enrollment.** Though teachers make every effort to connect with parents and families on a daily basis, conferences times are an opportunity to discuss your child’s growth and development in an in-depth manner. Teachers complete detailed narratives and portfolios on all children and UCONN students who are completing their Student Teaching Practicum at the CDL are required to conduct parent-teacher conferences with the support of supervising classroom teachers.

**ENGLISH AS A SECOND LANGUAGE** (**ESL), Multi-Culturalism, and Celebrations**

Frequently we have families whose native language is not English and in fact are non-English speaking upon arriving at the center. We want families to feel comfortable and we can arrange for translation services as needed. We have served children from Japan, Russia, Pakistan, China, India, Puerto Rico, Korea, and Nepal, to name just a few. Families often want children to learn English to meet the academic rigors of public school but they wish to retain their native language. We strongly encourage parents to continue to use their native language at home. Current research shows that very young children acquire language in the context of a relationship, and that children do best if they hear a single language from a single adult, thus the children learn English quite easily through their experiences with English-speaking children and teachers. Because of the great diversity we experience at the CDL, it is not possible for all languages to be spoken here. We do, however, encourage families to share their language and their cultures with us and we strive to incorporate them into our curriculum whenever possible. As a part of our multicultural, anti-bias curriculum, we like to celebrate! Sometimes, we make our own celebrations like Friendship Day. Families are welcome to initiate the ongoing study of their family traditions, customs, languages, and celebrations. Please inform us should we be aware of ethical or religious considerations. Also, we encourage families to share family traditions and holidays that are important to you.

**TRANSITION TO KINDERGARTEN**

The move from Preschool to Kindergarten, though an exciting time for children and families, can be a time of nervousness and questions. To support children and families during this time, the Child Labs has a planned transition process which includes the following:

* We will alert you to dates of Kindergarten Screenings and Registration in your town
* In March, there is a parent support night that specifically addresses transition issues and expectations
* After school ends, with parent permission, we transfer the children’s records to the appropriate school

**CONFLICT RESOLUTION PROCEDURES**

Families are encouraged to voice comments, concerns, or questions regarding the program. The sooner we are aware of a potential problem, the faster we can act on it. If the family/child experiences a major change i.e. a new baby, divorce, death of a relative/pet, please let center staff know as these changes affect your child at home and at school. Should a problem arise related to the child’s program, the following are suggested procedures for a resolution:

* Attempt to resolve the issue directly with the staff member.
* If satisfaction is not reached, bring it to the attention of the CDL Director.
* Every attempt will be made to solve the problem is a positive way for the benefit of children, families, and staff.
* We can arrange for a translator if necessary or desired.

In the case of divorced or separated parents, information about the child will be shared with both parents. Separate parent conferences can also be scheduled. Please notify the director of any legal actions, such as custody agreements or restraining orders, that may affect the child while at the Child Lab. Copies of the legal paperwork must be provided to the CDL.

**LIST OF RESOURCES FOR PARENTS AND FAMILIES**

**Consultation in Child Labs**

The UConn Child Labs works in collaboration with various departments within the university to bring in the expertise of faculty members. Deborah Bubela, a clinical assistant professor in the physical therapy program and certified physical therapy pediatric specialist, provides consultative services to the Child Lab staff. Dr. Bubela is available to work with Child Lab staff to maximize children’s sensory motor through observation, education, and ongoing consultation with staff and parents. Additionally, consultants are available to work with CDL staff and families on questions and concerns related to health, dental health, social services and education.

We are committed to helping families at the CDL reach their full potential. We can help you to find job training and other programs to meet your goals as well as services offered through the public libraries. Please see the Director or Administrative Coordinator for additional resources*.*

Some locations in the area:

Mental Health:

Professional Resource Group PC

207 Storrs Road

Mansfield, CT

860-456-4604

The Humphrey Clinic for Individual, Couple, and Family Therapy:

843 Bolton Rd. U-1117

Storrs, CT 06269

The Humphrey Clinic is part of the family studies department (HDFS) at UCONN, located next door to Child Labs. The Clinic is staffed with advanced graduate student interns in couples and family therapy who are monitored through video recording or one way mirror by licensed faculty supervisors and small consultation teams. Issues for treatment include child and adolescent behavior, marital problems, family transitions such as divorce and remarriage, as well as a wide range of developmental and mental health issues. Payment is on a sliding fee scale based on income and family size and usually ranges from $15-$50. Insurance is not accepted. For further information or intake, call 860-486-3692.

Physical Health:

Mansfield Pediatrics LLC

12A Ledgebrook Drive Unit 2C

Mansfield, CT

860-450-7227

Dental Health:

Tolland Family Dentistry

359 Merrow Road

Tolland, CT

860-875-9000

**Local Public Education**:

Ashford: Superintendent of Schools

860-429-1927

Coventry: Superintendent of Schools

860-742-7317

Mansfield: Superintendent of Schools

860-429-3350

Tolland: Superintendent of Schools

860-870-6850

Willington: Superintendent of Schools

860-429-3130

Windham: Administrative Offices

860-465-2300

**Internet Resources:**

<http://worklife.uconn.edu/>

This web page is offered as a clearinghouse of information and resources to help the University's employee and student community comfortably manage their work, study, and personal obligations.

[www.ct.gov/dss](http://www.ct.gov/dss)

Connecticut Department of Social Services website

Resources through the State of Connecticut:

**Connecticut Birth to Three Program**

Service and Support Office

1344 Silas Deane Highway

Rocky Hill, CT 06067

Toll Free: 866-888-4188

Fax: 860-571-6530

**The Husky Plan**: Health care for uninsured children and youth

To request an application, submit an application or  
 for questions about application processing:

HUSKY Plan  
 P. O. Box 280747  
 East Hartford, CT 06108

For inquiries to the Department of Social Services (administering agency):

HUSKY Plan  
 c/o Department of Social Services  
 25 Sigourney Street  
 Hartford, CT 06106-5033

**State Nutritional Assistance Programs**

Nancy Carrington, Executive Director

Connecticut Food Bank, Inc.,   
 150 Bradley Street,   
 P.O. Box 8686  
 New Haven, CT 06531  
 Tel. (203) 469-5000, Fax (203) 469-4871   
 <http://www.ctfoodbank.org/>

Ms. Gloria McAdam, Executive Director  
 Foodshare, Inc.  
 450 Woodland Avenue   
 Bloomfield, CT 06002-1342  
 Tel: (860)  286-9999, Fax (860) 286-7860   
 <http://www.foodshare.org/>

United Way of Connecticut Info Line

Toll Free: 211

Telephone source for information about community services including child care, referrals to human services and crisis intervention.

WIC – State Nutritional Program for Women, Infants and Children

Call 1-800-741-2142

**CURRICULUM AND ASSESSMENT**

Observation of children is a central component of our program. The program's curriculum is based on observed levels of development over time. This method of program development is known as an emergent curriculum with a child-centered approach. It may be contrasted with a "pre-designed curriculum with an adult-centered approach," that attempts to get the child to conform to programs and activities that de-emphasize individual uniqueness and developmental stages, and that favors adult needs or interests over those of children. Simply, we believe that children's needs and welfare come first.

Children learn best through active exploration and experimentation, so we strongly emphasize child-initiated play in our program and our curriculum development is consistent with our goals and objectives for all children. Children are given choices and allowed the time to explore to their satisfaction whenever possible. We stress the process of learning over any products or facts. We allow for adaptations and modifications to ensure that all children have access to our developmentally appropriate curriculum. We also know children need to experience the world abstractly. Therefore, we introduce

numerals and written language through real life experiences when we feel that children are ready to understand such symbols.

The primary role of the teacher is to support the parent-child relationship and to provide a secure and warm environment for children that is rich in opportunities to explore, question and discover, and develop social relationships. Within this facilitating role, the teacher models mature and competent behavior and provides the love and nurturing necessary for the socio-emotional development of children. A teacher will attempt to balance his/her direct involvement with each child by also spending time simply observing and allowing children to play and work independently. When directly interacting with children, the teacher will encourage problem solving, question thinking processes, and help children explore new perspectives. Children are unique. Therefore, we provide a program of care and education that addresses each of their particular patterns of growth, previous experiences, temperaments and learning styles. We plan experiences to support the diverse physical, cultural, social-emotional, and intellectual needs of the children.

The CDL teaching staff uses the Connecticut Early Learning Development Standards, the Preschool Assessment Frameworks, Focused Portfolios and the Bingham Prosocial Curriculum to integrate curriculum planning and developmental assessments that are consistent with our philosophy and goals for children. Throughout each week, semester and the year, CDL teachers and students observe, collect and analyze children’s’ growth and work in all areas of development. These frameworks and guidelines are tools that, coupled with classroom observations, input and information from parents, provide an accurate and authentic picture of each child. This information guides weekly lesson planning and is the focus of the formal parent conferences that take place at the end of each semester. Assessment occurs within the classroom setting to provide a genuine picture of the child within the classroom context. This intricate observational assessment strategy is a critical piece to our teacher training program as college students use these tools to gain valuable teaching experience.

A variety of assessment strategies such as the use of developmental screening tools, checklists, anecdotal observations, and portfolio collections assist teachers in reflecting on their teaching practices and the learning environment. The assessment and curriculum development process leads to curriculum adaptation with the children’s interests in mind. The assessment process is also useful for referral and diagnostic considerations. The CDL views assessment and curricular planning as an integrative reflective process.

Family participation is integral to the assessment process. We value your input and will work together to ensure that assessment tools and methods meet the needs of your child. This includes being sensitive to family values, culture, identity and home language.

**ASSESMENT OF CHILD PROGRESS**

**Purposes of assessment at the Child Labs include:**

• Documenting and evaluating the overall development of each child.

• Making informed curriculum decisions in the areas of room arrangement, curriculum content, and daily transitions.

• Connecting the families to the school environment.

• Developing an individualized learning plan for each child that will support the child’s learning

• Improving the overall programming for young children whom the Center serves.

**Procedures for assessment methods at the Child Labs include**:

Children are required to have a current health form (ED 191) on record at the Child Labs that also includes information on appropriate health screenings.

• Confidentially of assessment information is extremely important. All staff and UCONN students read and sign a confidentiality agreement.

• Family and child records, as well as written narratives are all kept in a locked

cabinet.

• Children’s portfolios are stored in a locked cabinet in teachers’ offices.

• Only staff and student interns who have had a full orientation into the program have access to any record of a child and on a need-to-know basis.

• Families are involved in the planning and implementation of assessments by identifying interests and needs of their child, helping follow through with

specialized needs and services.

• Daily reports and conferences (formal and informal, verbal and written), are

used to communicate with families about assessment

• To help in sharing data for families that speak a language other than English, the CDL will assist in finding an interpreter when necessary.

* All staff have been trained in how to use the assessment tools and procedure and interpret the results.
* Staff take into consideration the conditions under which a child is assessed, including the time of day, mood of the classroom, mood of the child and ensure that children are familiar with those conducting the assessment.

**Child Portfolios for gathering assessment information may include the following items**:

* Developmental Description
* Child work samples (art, speech, writing)
* Anecdotal recordings
* Digital photos
* Individual Goal Setting Sheet (done at conference time with the family)

**Use of results for assessment information at the Child Development Center:**

* Overall program improvements.
* Weekly curriculum planning to support the individual, cultural interest and needs of the children.
* Communicating with parents/guardians.
* Acquiring specialized services for children with special needs when appropriate and only with written parental permission.

**Use of norm-referenced test and published instruments for evaluation purposes:**

Norm-referenced and standardized tests are used only when seeking information regarding eligibility for special services. Outside agencies such as Child Find conduct such testing. The Child Development Labs collaborates with community agencies by sharing observations, checklists, rating scales, and work samples to create a better picture of the whole child when appropriate and with written parental permission.

**Developmental Screening**

An emerging criterion for accreditation by the National Association for the Education of Young Children (NAEYC) is that children attending an NAEYC accredited center have developmental screenings within 3 months of entering our program. To meet this criterion, we have chosen to use the ***Ages and Stages Questionnaires* and *Ages and Stages Questionnaires: Social-Emotional***and all children attending the CDL will be screened at least once a semester. Use of this screening provides an additional indicator of children’s development as it is used in conjunction with our on-going authentic

assessments of children’s skills, interests and approaches to learning. ***Ages and Stages Questionnaires* and *Ages and Stages Questionnaires: Social-Emotional*** are highly reliable

and valid screening tools designed for use with children ages 1-66 months and 6-60 months for the *Social-Emotional* questionnaire. All CDL staff have received training on this tool by a certified trainer. ***Ages and Stages Questionnaires* and *Ages and Stages Questionnaires: Social-Emotional*** include screening of children’s sensory, language, cognitive, gross-motor, fine motor and social-emotional development. Results of the screening are shared with parents and, if indicated, discussion will include referral options, recommendations and a plan for continuing monitoring. We review our plan for screening on a yearly basis, including reviewing the efficacy of our chosen screening tool. Information on these tools is available to parents at any time.

**REFERRAL POLICY**

There are times when teachers may have concerns about a child’s behavior or development. Sometimes the child’s parents may raise a concern as well. We take these concerns seriously and encourage open and confidential communication between staff and families. Such concerns are addressed in the following manner:

Concerns are brought to the attention of parents and the Director. Program teaching team discusses concerns and develops strategies for observation and additional support for the child. The child is observed and behaviors are documented daily for a minimum of two weeks by the teachers and/or Director. Information is discussed by the team, including parents, and a plan of action considered/implemented with parental consent. The Director will work with children and teachers in the classroom when appropriate. After the observational period and strategies have been implemented, the team, including parents, meet for a follow-up discussion. Next steps, including a possible referral, may be discussed.

If referral is determined to be necessary by members of the team, the Director shall follow appropriate routes for referral with written permission from the parents. Referrals may include but are not limited to evaluation by Birth-to-Three or public school providers, or classroom observation by outside consultants (i.e. the Early Childhood Consultation Partnership). The Director will work with the teaching team and parents to organize and schedule appointments/outside observations. If a child is found to be eligible for services, the CDL staff work with each family and service provider to implement the child’s Individual Family Service Plan (IFSP) or Individualized Education Plan (IEP). **No referrals will be made to outside individuals, specialists or school districts without the knowledge of and written permission from the parents.**

# **CHILDREN WITH SPECIAL NEEDS**

The Child Development Laboratories will provide programs appropriate for children with special needs within the main stream of their existing programs whenever possible. Referrals to outside agencies will be made only with permission from parents. In conjunction with the public school system and/or state agency, an individualized educational plan will be designed and implemented with an interdisciplinary approach. Placement and/or programming will be determined at the Planning and Placement Team meeting (PPT).

**STAFFING AND STUDENT TRAINING**

**PROFESSIONAL STAFF QUALIFICATIONS AND ROLES**

The CDL staff is comprised of full-time professional teachers, student teachers, fieldwork students and student workers. The professional teaching staff are responsible for cooperative teaching and child care; training and supervision of students; program planning and evaluation; administering of developmental assessments; keeping records on each child's progress; providing for contact and involvement with parents; working cooperatively with the school's faculty in the Human Development and Family Studies department (HDFS) on course work and committees; coordinating research in each classroom; and serving as a model/demonstration teacher of young children for the School of Family studies. They serve the community and state as resource persons through active roles as consultants and presenters on issues in early childhood development and education. Many CDL teachers have Masters Degrees in Child Development (or related field). Professionally they strive to keep abreast of current literature and developments in the area of child development. The relationship between the children and their teachers is important, so we provide a safe and nurturing environment where trust, security, and a sense of belonging can develop. Teachers observe with care and respond quickly with respect and affection. They plan stimulating and challenging learning experiences based on the children’s needs and interests. Teachers help children extend their learning by showing interest in their play, making suggestions or adding new materials, or asking questions to stimulate ideas. Teachers celebrate children’s new discoveries and skills.

To fulfill this multifaceted role, CDL professional teachers have scheduled time out of the classrooms, including weekly planning every Friday. During these times, qualified students are placed in charge as part of their training experience. These qualified students are responsible for maintaining classroom routines and activities.

**PROFESSIONALISM**

Staff are appropriately credentialed and professional development is provided throughout the year. Each staff member has an individualized professional development plan and we have center-wide goals as well. Staff are required to complete professional development opportunities equal to at least 1% of their total hours worked (generally at least 13 hours a year). Attendance and participation in events beyond regular program hours i.e., conferences, family nights, is valued and expected. We have 4-5 “early release” days in order for staff to participate in professional development to support the high quality of our program. Records of workshops and professional development experiences are maintained and updated regularly. Professional journal articles are frequently distributed for dialogue and reflection, and action research is conducted in an environment that, in addition to supporting professional growth, supports changed practices that benefit children and families.

**STAFF COVERAGE and SUPERVISION OF CHILDREN**

Teaching staff will stay with in ratio at all times; indoors, outdoors, and on fieldtrips. The CDL ratios typically exceed state licensing requirements. If extra assistance is needed, the teaching staff contact administrative staff to help in providing adequate supervision. Teaching staff are required to position themselves to see as many children as possible both in the classroom and while outside.

**Infants and Toddlers:** Teaching staff supervise infants and toddlers by sight and sound at all times. An adult is in the nap room at all times whenever a child is sleeping. Adequate staff is always present in the classroom.

**Preschool:** Teachers supervise children primarily by sight. Supervision for short intervals by sound is permissible, as long as teachers check frequently on children who are out of sight (e.g. those who can use the toilet independently, those who are in a library area, etc.). An adult is in the nap room at all times whenever a child is sleeping. When a child goes inside to use the restroom, a staff member is designated to accompany him/her. Adequate staff is always present in the classrooms.

# **Supervision of STUDENT STAFF:**

The student staff is comprised of practicum students from the Department of Human Development and Family Studies (student teachers and fieldwork students) who meet the qualifications for assistant teacher. Work study students and student labor students also support the professional staff and facilitate the smooth running of the classrooms. All of these students are critical to the program and make up the excellent staff-child ratio that is offered. Since the primary function of the CDL is to provide training for university students, the following is a description of the roles these students perform and the training process that goes into their experiences.

**Student Teaching**

During the final year of course work in HDFS, a student whose primary career choice is teaching completes two semesters of training in the CDL. Their training consists of teaching experience through their role as supporters of play and learning with young children, curriculum planning responsibilities, parent conferences, and in-depth progress reports on individual children. They are closely supervised by CDL professional teachers and the student/supervisor ratio is such that highly individualized training is possible.

**Field Work**

The CDL serves as a placement site for students interested in working with young children. These students participate in an intensive and ongoing training program. Fieldwork placements come from Human Development and Family Relations, Sociology, Physical Therapy, Education, Communications, Psychology and other child related fields.

**Work Study/Student Labor**

Work-study and student labor students seek job placements in the CDL in order to earn money for their college expenses and because they enjoy young children. Work-study students and student labor students are required to attend a preliminary training session in which the individual program goals and regulations are presented and discussed thoroughly. Expectations for their performance are clarified, and basic concepts of child development are presented to assist them in initial understanding of children. Additionally, students are trained in the classroom and in mandatory weekly training sessions led by the professional teachers of each program. Such topics as first aid, child abuse, behavior management, curriculum planning, and supporting activities for children are presented and discussed at length. Student's work performance is evaluated twice a year.

##### RESEARCH

One of the principal missions of the CDL is to encourage and facilitate research. To this end, the CDL staff is committed to working cooperatively with researchers interested in issues of family, child development, and early childhood education. Dozens of projects - from student observations associated with class projects to large-scale faculty research programs - are supported by the CDL. At the same time, the CDL serves as an advocate for both parents and children who participate in research projects. To ensure that participation in research projects enhances a child’s educational experience at the CDL, prospective projects must receive approval by the Director and prospective researchers must demonstrate competence at working with young children. Prospective projects are reviewed for compliance with professional ethics codes and for the degree of disruption generated for CDL educational programs. We believe that teaching and research programs share a joint interest in improving the lives of families and children, and encourage researchers to distribute their findings to parents and teachers as well as to other researchers. Below are guidelines for research involving the children, parents and staff of the CDL.

**REGISTRATION OF RESEARCH PROJECTS**

The CDL supports both naturalistic, observation-based projects and staged research experiences in which the child interacts with researchers, teachers, peers or materials.

The Child Development Laboratories considers applications for research to be conducted on site. All proposals are reviewed by the Executive Director and the CDL Research Review Committee. The following points are taken into consideration:

* Compliance with professional ethics codes for conducting research
* The degree of disruption to classroom programs
* The number of research projects currently taking place.

Our requirements are slightly different than those of IRB. Please note the following:

--All research sessions must be limited to 20 minutes or less per child (multiple sessions may be permitted).

--No external rewards (i.e. candy, stickers, toys) are allowed.

--Research with infants and toddlers is conducted only within the classroom setting.

**SPECIAL PROJECTS AND TRAINING ACTIVITIES**

The CDL serves as a training ground for students undertaking course related projects involving young children. Some examples of these projects are nursing students learning to administer the Denver Developmental Screening Test, physical education students learning to develop and present motor development activities, and Nutritional Science students learning how to plan, prepare and serve meals to young children. Other training activities include observing and recording speech samples and observing and assessing cognitive skills, social interactions, and motor and language development.

These training activities are a regular part of the CDL program in which all children participate and are not to be confused with formal research projects for which parental permission is required.

**POLICIES AND PROCEDURES**

## SMOKING, FIREARMS AND OTHER SIGNIFICAN HAZARDS

Smoking is not allowed in the Human Development Center, on the playground or outside the entrances that lead directly to the Child Development Labs. No smoking is allowed in the presence of children. Firearms are PROHIBITED at the Child Labs, as are other significant hazards that pose risks to children and adults.

**DISCIPLINE POLICY**

While children are in attendance at the Child Labs, no staff will engage in, nor allow: abusive, neglectful, physical, corporal, humiliating or frightening treatment or punishment **including but not limited to**: spanking, slapping, pinching, shaking, striking children. Staff will not tie nor bind children and shall not physically restrain children except for the protection and safety of the child or others, using least restrictive methods, as appropriate.

The CDL staff believe that praise and encouragement are more effective in promoting desirable behavior than negative or punitive approaches. Our policy is to promote and reinforce self-discipline in children by respecting and recognizing each of them as individuals. The following techniques are **expressly prohibited**:

* Spanking
* Slapping
* Pinching
* Shaking
* Striking

Good discipline involves compassion, caring, sensitivity, respect for children, and helping a child to understand that mistakes are a natural part of growing up. Discipline is learning and it should help a child value him/herself as a human being.

Department of Public Health Child Day Care Regulations state (DPH Section 19a-79-3a):

(2) Discipline

(B) Specifically prohibiting abusive, neglectful, corporal, humiliating, or frightening punishment, and physical restraint, unless such restraint is necessary to protect the health and safety of the child or other people.

This is to be accomplished in some of the following ways:

* Encourage children to accept and express feelings. Acknowledge their feelings before attempting to resolve conflict.
* Create a classroom atmosphere through example and attitude where it is natural and acceptable to express feelings. Reinforce the “use of words” and provide phrases for children to say when handling conflict.
* Maintain a positive approach to classroom climate and control through modeling and telling the children what to do, rather than what not to do.
* Establish rules for a smooth and safe functioning classroom in cooperation with the children at the beginning of the year. Where appropriate and feasible, children shall participate in the establishment of rules, policies and procedures.
* Verbalize rules consistently to children and help children to verbalize the rules.
* Use redirection techniques in providing another opportunity if child’s original choice is not available. Redirection of behaviors may include speaking individually to a child, assisting a child in selecting another activity, and implementing conflict resolution techniques.
* Offer children choices where real choices exist.
* Speak distinctly and in short meaningful sentences when children are involved in conflict which is potentially harmful.
* Minimize instances where children have to wait without anything to do for any length of time by providing well-planned experiences with materials readily available.
* Reinforce self-managing behavior.
* Provide positive reinforcement for expected behaviors as well as those requested.
* Encourage children to recognize and acknowledge each other’s individual differences.
* Continually supervise and provide positive emotional support to children who may need to be separated from the group in order to maintain control.
* No child shall be physically restrained unless it is necessary to protect the safety and health of the child or another child or adult.

Children who are experiencing continual behavior incidents or exhibiting other developmental concerns will be referred to the director.

**Behavior that is chronically disruptive may be an indicator that further support or assessment is needed. This support may include a referral process for further assessment and additional outside services. Behaviors that cannot be managed within the classroom setting are defined as danger to self or others (examples include but are not limited to):**

**Head banging, excessive biting that breaks the skin, hitting, hair pulling, kicking, using objects to inflict bodily harm, etc.:**

**AND/OR**

**Disruptive behavior that creates chronic interferences to classroom activities: (examples include but are not limited to: recurrent and ongoing tantrums, screaming, foul language, severe or chronic non-compliance or defiance).**

**If a child’s behavior or any other individual situation is a persistent source of concern to CDL staff, we will ask parents to meet for a conference. At this time, the concern will be identified and documented observations will be shared. CDL staff may also request the parents’ permission to have an outside consultant observe the child and the classroom situation. Our goal is to work together to look for strategies to support an emotionally healthy and physically safe environment for the child in question and for all the participants in the CDL program. If the combined efforts of CDL staff and the child’s family are not successful in resolving the situation to the satisfaction of the director and staff, or if the parents do not cooperate, the CDL will require a change of service. In this event, parents will be given two weeks’ notice to make alternate arrangements for childcare. After the two week period, the child will no longer be enrolled at the Child Labs and the registration will be terminated. It is our hope that through open communication, parent support and the collaboration with local resources that this is a last resort.**

No referrals will be made to outside individuals, specialists or school districts without the knowledge of and written permission from the parents.

# **HOURS OF OPERATION**

The CDL is open 7:30-5:30 Monday through Friday. The CDL is a five- day a week program to provide continuity of care for children and consistency for our student teachers, observers and researchers. Part week programs are not available. Parents may choose from the following options when openings are available.

Full – time (for all Programs) 7:30-5:30 M-F

Half – time (for Preschool Programs only) 7:30-12:30 M-F

All requests for schedule changes are to be made through the Director. If space is available, a schedule change can be arranged.

**THE CDL WILL BE CLOSED:**

Labor Day

Thanksgiving recess ( 1 week)

Martin Luther King Day

Two weeks in December

Spring break (1 week in March)

Memorial Day

Ten weeks in summer (Mid-June to the beginning of the fall semester).

Parents are not charged for the above holidays and vacation days. See yearly calendar for specific dates. Parents are charged for the 185 days the CDL is open.

**INCLEMENT WEATHER AND EMERGENCY CLOSINGS**

**Full Day Closure**:

* Child Labs follow UConn’s full day closings.

**Delayed Openings**:

* If UConn opens at 11:00am or earlier, the Child Labs open when UConn opens.
* If UConn opens **after** 11:01am, Child Labs remain closed for the day. \*See note below.

**Early Dismissals**:

* The Child Labs follow UConn’s early closing for staff at any time.
* If classes are cancelled and staff is not dismissed, we make every effort to remain open. Please note, though, that if classes are cancelled, student staff is not available to help maintain legally required ratios. Should we be unable to maintain legally required ratios, we are required to close. \*See note below.
* **Late charges apply if child is not picked up at the announced early dismissal time**.

**Extenuating Circumstances requiring closings:**

* In the event of health and safety concerns, we are legally required to follow the mandates of Public Health Codes (no heat, hot water, power outages, etc.)
* In the event of being legally understaffed and unable to shift professional staff to maintain required ratios, we are legally required to close.

\*Please note that all teachers at the Child Development Laboratories are University of Connecticut employees. When the University issues an early dismissal or delayed opening, staff, on an individual basis, may decide that conditions warrant leaving early or not coming to work. In such cases, if the Child Labs are legally understaffed, we must close.

When seeking information listen and look for the following posting: **“UCONN CHILD LABS”** followed by the delay or closure information**.** This information is posted on WFSB and NBC Connecticut.

* If the CDL closes early, parents will be called and postings will appear as listed above. We will make every effort to distribute information on expected inclement weather prior to any anticipated delays or closures. **Late charges apply if child is not picked up at the announced early dismissal time**.

We ask that parents post this information in a convenient location to have it handy when needed. ***Any CDL full day weather- related closures when the University does not close (for some or all of the day) will be made up in June.***

**ARRIVAL, DEPARTURE, ATTENDANCE**

**ARRIVAL**

The Child Labs opens its doors for children at 7:30 each morning. Often a teacher may be here earlier than that taking a few moments of personal time before starting a busy day. Please respect this time and, when you come in at 7:30, we’ll be ready to greet you.

Regular attendance is important in order for children to receive the maximum benefit from the program, to reduce separation anxieties, and to ensure program continuity for students and staff. **All children must arrive at school before 9:30 AM.** All children must be dropped off in their classroom by 9:30. Snack will be available in all classrooms **until 9:30**.

We require that all children arrive by in the classroom by 9:30 for these reasons:

1. Separation from parents and transition to school is much easier for children when they are not rushed through it. If a child is having a difficult transition, teachers are able to support children and families before 9:30, at which point the school day is in full swing. Teachers are more than happy to help you develop a consistent routine for arrival—please ask for their assistance.

2. At 9:30, the teaching teams are fully engaged in supporting children’s experiences as well as coaching the UConn students who are a key part of our mission. When children arrive late, teachers cannot help transition the children without impacting the flow of the routine for other children and UConn students.

3. Teachers are invested in engaging with your children to maximize their learning experiences. If a child is not here by 9:30 and ready to engage in the offered experiences they cannot take full advantage of the program that is offered. Late arrivals also impact the experience of our UConn students, a primary component of our complex mission, as they learn to plan and implement curriculum and engage with children.

**CLASSROOM arrival past 9:30 requires Director consent.** No child will be admitted to the classrooms past 10:00 am as it is too difficult for children to make the transition to school so late in the day. Families that arrive repeatedly past 9:30 will meet with the Director to discuss and address the situation. Please note that this means that doctor, dentist and other appointments should be scheduled, to the greatest extent possible, early enough in the day to ensure arrival at school by 9:30 or in the afternoons.  Please see the CDL Director if other accommodations may be needed.

**Please note that an adult *must* accompany the child into the building and classroom each morning**. Parent(s)/guardian(s) should help their child remove outside clothing/boots/shoes, greetteachers and other children, **sign in,** and make sure the teacher knows anything which mightaffect children’s moods or abilities, such as a change in the child’s routine. All children andfamily members must wash their hands upon entry of the classroom. If your child is in the InfantCenter, you must remove your foot coverings before entering into the classroom or replace with ashoe covering. Parent(s)/guardian(s) of infants need to let the teachers know when the children are due to eat, have a bottle, or nap. Late arrivals on scheduled field trip days are subject to besent home, as there will be no coverage or extra teachers for additional children

During the morning transition, we encourage you to allow your child to be as independent as possible. Security blankets are allowed and eventually children just keep them in their cubbies. As it can be devastating to a child to beak or lose a special toy, toys from home are *NOT* allowed, so please take address this before you leave your house. Please assist your child in transitioning into the classroom by helping them choose an activity or join the group.

**DEPARTURE**

All parents are required **to arrive in their child’s classroom no later than 5:15** and must exit the building prior to 5:30. **Please note that an adult *must* accompany the child out of the classroom and out of the building at pick-up time.**  Please plan accordingly if you have more than one child attending the Child Labs. In these instances, families often find it easier to get the younger child first. Teachers are eager to touch base with you about your child’s day but opportunities for connections are limited after 5:15 as teachers need to close the CDL promptly at 5:30. Teachers may choose to spend a few extra minutes in the classroom at the end of the day to wrap up and to prepare for the next day. Please respect this time, and if you choose to spend some time with other families after closing time, please remember to do so outdoors. **Families who have not exited the classroom by 5:30 are considered late and the following late charges will apply**:

First incident: $25.00/child

Second incident: $50.00/child

Third incident: $100.00/child

Fourth incident: Additional charges and/or dismissal from the program

**Fines are imposed uniformly regardless of the reason for the delay**.

We realize that departure time may be difficult for some children. Your child may rush to meet you on one day and resist leaving the next. Teachers inform children that when parents come, it is time to go home. We recommend a set routine every day as this helps children anticipate the transition home and make the departure easier. Here is an example of a routine that many parents find helpful:

1. You arrive, greet your child and the teachers and give your child a “reminder” that it is almost time to go home. Take this opportunity to ask the teachers any questions that you might have.

2. Go the cubby room and collect your child’s things.

3. Take your child by the hand and get your child’s lunchbox from the refrigerator. If your child cries or refuses to leave, we recommend that you pick him or her up and continue with the routine.

4. Sign your child out and then exit the classroom.

A few days of a consistent routine with your child will help arrival and departure go more smoothly.

**Please also note that:** Once you have entered the classroom/reunited with your child and have begun departure, the teachers are no longer monitoring your child. Parents are responsible for helping their children to follow the classroom expectations during this time. **Please do not allow your child to leave the classroom ahead of you, run down the hallways, or hide in other spaces in the center. ALL CDL staff will enforce these expectations. Please make sure to watch your child carefully as you exit the building; the parking lot is very busy and we want all children and families to be safe!**

We will release your child only to those for whom we have written parental or guardian permission or who is listed on your emergency form as having permission to pick up your child. If someone new will be picking up your child, please talk to your child’s teacher and complete an “Alternate Pick-up form.”

**We will not release a child to anyone who appears to be impaired in any way. In these instances, staff are required to consult with the State Police to determine the best course of action to ensure the child’s safety.**

**LATE PICK-UP POLICY**

If a child is not picked up by closing time (5:30), the parents are called. If parents cannot be reached after attempting to call all available phone numbers on file provided by the parents, the designated emergency person is called. All parents must have on file the name of another person within the local area (within 25 minute driving distance) who can pick up your child in the event that the parents cannot pick up their child at closing time. Teachers will continue to attempt to reach the parents and/or a designated emergency contact person until 6:00. If a parent or designated emergency person is contacted by 6:00, two staff members (over the age of 18) stay with the child until the parent or designated emergency person arrives (by 6:30). If no contact is made with the parent or designated contact person by 6:00, the teacher shall notify the local police department to help locate the parents and to advise on further action.

The clocks at the Center will be used to determine lateness. Parents should set watches accordingly. In the case of an unexpected situation that will cause a delay, parents are expected to call the Center so that staff can explain the delay to the child and make staffing arrangements. Please keep in mind that a late pick-up is emotionally difficult for your child and for staff who are anxious to get home to their own families. **Fines are imposed uniformly, regardless of the reason for the delay.**

**ATTENDANCE**

Though we feel that the continuity that regular attendance provides is in the best interests of children, we also realize it is of equal importance for children to spend as much time with parents and families as work schedules will allow. We support parents’ decision to keep children at home if their work schedule permits or to visit their child’s classroom (i.e., if the parent has a holiday or a day off when the CDL is in session, or if the parent has a partial day at work and would like to pick their child up earlier than usual). **Children who are picked up early may not return to the program later that same day.** If your child will not be coming to school, please notify the main office.

**PARKING**

All families should park ONLY in the “upper” parking area, not in the front circle. CDL families are issued two CDL parking passes per year to be displayed on the left side of the front windshield (driver’s side). Please note that if you should lose your parking permit at any time during the year we are unable to issue an additional permit and your car may be ticketed. Our peak times for drop off are 8:30-9:00 and 4:30-5:30 for pick up. We have very limited parking and under no circumstances should you park in these spaces for an extended period of time (beyond the posted 15 minute limit) as ticketing is strictly enforced.

When parking your vehicles, please adhere to the following in order to keep all children safe:

Park vehicles in designated areas only

Supervise children in the parking lot and in the vehicles

Turn off the engine when leaving a vehicle unattended

Always accompany children in and out of the building.

At arrival, please let the classroom teacher know that your child is present.

Thank you for working with us to help keep all of the children safe!

**Security**

The only point of entry to the CDL is through the double doors by the administrative offices. Families who are affiliated with UConn will have their I.D.’s coded to permit entry through these doors. Families who are not affliated with UConn will receive a key card. Lost key cards must be reported immediately; there is a $10.00 charge for replacement key cards.

**FIELD TRIPS**

Field trips are planned with the interests, needs, and ages of the children in mind and should take the child to experiences which cannot be brought into the classroom. The University of Connecticut offers many interesting field trip opportunities within walking distance from the CDL. At the time of enrollment, parents sign a “Field Trip Permission Form.” Parents are notified in advance of all fieldtrips. Required ratios must be maintained during fieldtrips. Both/all classroom teachers will go on the fieldtrips.

The Master Teacher leading the fieldtrip takes the classroom Emergency Notification File, a first-aid kit and a cell phone. Parents and family members are welcomed and encouraged to join in the field trips.

# **HEALTH AND SAFETY POLICIES/SICK CHILD POLICIES**

* Ensuring that a child is safe and in good health contributes to successful development. We provide child education, parent information, and referrals for needed services in the areas of health, dental care, nutrition, mental wellness, and safety. Professional staff at the CDL are trained yearly in First Aid and CPR. Acceptable certification shall be based on a hands-on demonstration of the individual’s ability.

**HANDWASHING AND DISINFECTING**

Careful hand washing after diapering, toileting, and nose wiping is the single most effective way to prevent the spread of disease among children and staff at the Center. Mouthed toys and dishes are disinfected with each use. Surfaces are disinfected often during the day by staff and daily by custodial services. Proper hand washing is stressed and modeled - especially after using the bathroom, and before eating. To continue promoting health practices, the Center uses 60% alcohol hand sanitizer for trips and during outdoor play until soap and water can be used.

**HAND WASHING POLICY**

The program follows these practices regarding hand washing:

* Staff members and those children who are developmentally able to learn personal hygiene are taught hand-washing procedures and are periodically monitored.
* Hand washing is required by all staff, volunteers, and children when hand washing would reduce the risk of transmission of infectious diseases to themselves and to others.
* Staff assist children with hand washing as needed to successfully complete the task. Children wash either independently or with staff assistance.

Children and adults wash their hands

* on arrival for the day;
* after diapering or using the toilet (use of wet wipes is acceptable for infants);
* after handling body fluids (e.g., blowing or wiping a nose, coughing on a hand, or touching any mucus, blood, or vomit);
* before meals and snacks, before preparing or serving food, or after handling any raw food that requires cooking (e.g., meat, eggs, poultry);
* after playing in water that is shared by two or more people;
* after handling pets and other animals or any materials such as sand, dirt, or surfaces that might be contaminated by contact with animals; and
* when moving from one group to another (e.g., visiting) that involves contact with infants and toddlers/twos.

Adults also wash their hands

* before and after feeding a child;
* before and after administering medication;
* after assisting a child with toileting; and
* after handling garbage or cleaning.
* Proper hand-washing procedures are followed by adults and children and include
* using liquid soap and running water;
* rubbing hands vigorously for at least 10 seconds, including back of hands, wrists, between fingers, under and around any jewelry, and under fingernails; rinsing well; drying hands with a paper towel, a single-use towel, or a dryer; and avoiding touching the faucet with just-washed hands (e.g., by using a paper towel to turn off water ).

Except when handling blood or body fluids that might contain blood (when wearing gloves is required), wearing gloves is an optional supplement, but not a substitute, for hand washing in any required hand-washing situation listed above.

Staff wear gloves when contamination with blood may occur.

Staff do not use hand-washing sinks for bathing children or for removing smeared fecal material.

In situations where sinks are used for both food preparation and other purposes, staff clean and sanitize the sinks before using them to prepare food.

**SPECIAL HEALTH CARE NEEDS**

Special Healthcare plan: When it is necessary that special care be taken or provided while a child is at the child care program, an individual plan of care for a child with special health care needs or disabilities, developed with the child’s parents and the health care provider and updated as necessary. Such a plan shall include appropriate care of the child to prevent and respond to a medical or other emergency and shall be signed by the parents and staff responsible for the care of the child.

**HEALTH INSURANCE, HEALTH FORMS AND PHYSICALS**

Happy, healthy, safe and thriving children are a primary goal of our program. We work with families to help children live and learn in healthy and safe environments, at home and at school. If you are in need of health insurance we can assist you in finding resources to secure appropriate insurance. We can also assist you in find a regular physician or “medical home.” Please let us know if your child has any health or safety needs. We can provide information and resources to support you and your child.

All children are required to have a health form that includes a physical exam and a current immunization record on file before admission to the CDL. Documentation of a yearly physical is mandatory for all children attending CDL programs. All children 12 months and older required to show documentation of a negative tuberculin skin test for admission in CDL programs. Positive reactors will be required to demonstrate absence of disease with a negative chest x-ray, and preventative therapy will be encouraged. Every child attending is required by the State Department of Health to be protected as age-appropriate by adequate immunization against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, hemophilus influenza type b (Hib). Hepatitis B vaccination is required for all children born after December 31, 1993. Varicella (chicken pox) vaccination is required for all children born after December 31, 1996. Files are kept current by being updated on at least a quarterly basis. Files are kept in a central location and are locked to protect confidentiality. Parents and legal guardians consent to let administrators and teaching staff have access to the records. All information is immediately available to parents and legal guardians as well as to those with regulatory authority such as the Connecticut State Department of Public Health.

Screenings are an important way to ensure that children are growing and developing and to identify and prevent health problems. All children are required to be screened for hemoglobin, lead, TB, vision and hearing at the time of their physical exam according to age guidelines as indicated on the health form. The results of these tests and screenings must be documented on the physical exam form by the health care provider.

Our program requires annual dental exams for all children ages 3 and older within 90 days of enrollment. Please see the Director or Program Assistant for information about local dental providers.

A child who is determined homeless may be allowed to attend the program for up to 90 days without a physical examination and immunizations.

**Exemption from immunization for religious beliefs or practices:**

A written statement that immunization is contrary to the religious beliefs and practices of the child or parent shall be signed by the child’s parent and acknowledged, in accordance of CT law, by one of the following:

* A judge of a court of record or a family support magistrate
* A clerk or deputy clerk of a court having a seal
* A town clerk
* A notary public
* A justice of the peace
* An attorney admitted to the CT bar

**INFECTIOUS ILLNESS**

Despite all our efforts, children in group care will inevitably sustain more infectious illness than those children cared for at home. For example, infants and toddlers in group care typically sustain 8-10 respiratory infections per year, compared to an average of 4-6 for those children not attending group care. Preschoolers are at less risk, but still average around 5-6 respiratory illnesses per year. For most infectious illnesses, excluding the ill children from attending the Center makes no difference to the risk of other children acquiring the disease. This is because children shed these viruses and bacteria to others for days before the onset of their symptoms and often long after they have recovered. For these reasons, children with minor illness such as colds are NOT excluded from attending the Center, provided they feel and act well enough to participate in their usual activities.

**EXCLUSION FOR ILLNESS**

The main indicator of whether a child should be in school is their ability to take part in the routines and indoor and outdoor activities that occur throughout the day. Parents will be called to pick up their child if the child is not able to participate in all aspects of the program.

**Children are not allowed into the classroom under the following circumstances:**

1. Temperature of 100 or above and/or symptoms such as lethargy or irritability, excessive tiredness, headache, vomiting, etc. Children need to be **fever free for 24 hours** before returning to the program.

2. Discolored drainage from the eye (in case of diagnosed conjunctivitis, children may return after being on medication for 24 hours and eyes are clear). Some doctors are choosing not to treat conjunctivitis. Children must be **symptom free** to return to school if not treated.

3. Suspicious rash or lesions (does not include food rashes, prickly heat, poison ivy, drug rashes or diaper rash). Children with suspicious rash or lesions must return to school with a note from a physician, clearing child of communicable illness.

Children may not attend school if they have:

1. Chicken Pox – lasts approximately 7 days. All lesions must be crusted and dry.

2. Impetigo

3. Ringworm

4. Scabies

5. Coxsackie Virus

6. Pin Worm – will be excluded from classroom until 48 hours after medication is given.

7. Diarrhea – this does not apply to food or drug allergies if the diarrhea can be contained by the diaper or child is able to successfully use the toilet. If a child is uncomfortable due to the diarrhea and cannot participate in the daily routines, parents will be called to pick up the child. Diarrhea of more than 5 days duration must be evaluated by a physician to determine the cause.

8. Vomiting within 24 hours (does not include spitting up).

9. Strep throat – A throat culture should be done on children with persistent sore throats. Children with diagnosed strep throat must remain at home for a minimum of 24 hours after medication is started.

10. Head lice – Parents of children with head lice infestation are asked to inform the center so that preventative procedures may be employed for children and staff. If a case of lice is confirmed at CDL, the parents of that child will be asked to bring their child home and apply treatment immediately. The CDL has adopted a “No Nits” policy for readmission into school. This means that total treatment must include the removal of lice eggs following the pediculicide application. Although this is a tedious task, it insures thorough treatment, prevents needless retreatment, and contains the spread of head lice to other children in the classroom.

Parents must notify the CDL staff immediately if a child has been diagnosed as having any communicable disease. Children who exhibit signs or symptoms of communicable illnesses must be restricted from the classroom until the symptoms have resolved or, when appropriate, have been treated with antibiotics for at least 24 hours prior to return to the classroom. Children must be free from diarrhea, vomiting, and/or fever for **at least 24 hours** before they may return to the classroom. Your child may, however, be sent home if the staff notes an elevated fever, or if your child has become lethargic, irritable, or is unable to participate in the program. Additionally, the teaching staff in your child’s classroom needs to be informed if the following has occurred:

**If your child has been ill during a weekend** as the staff may be less concerned if they observe that your child has diminished stamina – knowing that it is likely to be related to your child’s recovery.

**If medication has been administered in the morning before coming to school**. This information is important if a situation occurs involving side effects or adverse reactions during school hours.

**Children requiring acetaminophen, ibuprofen, or other antipyretic to maintain functionality throughout the day are considered too ill to be at the Center.**

**WHEN A CHILD BECOMES ILL DURING THE DAY**

Center staff are trained to recognize the symptoms of common childhood illnesses. They will evaluate the health of the children upon arrival at the Center and throughout the day. In the event that children become ill during the day, they may be isolated and cared for away from other children. Parent(s)/guardian(s) will be called and have 30 minutes in which to pick-up. We depend on parent(s)/guardian(s) to be as prompt as possible in responding to these requests. Delays in response can seriously impair the smooth running of the Center and impact children’s health. If the parent(s)/guardian(s) cannot be located we will proceed to the Emergency Contacts. If, after ½ hr. we are unable to reach parents/guardians or designated Emergency Contacts, the Director will make the determination to call 9-1-1 depending on the health situation of the child.

**The CDL Director and staff make the final decision as to when a child needs to be sent home or may return to school. This decision will be based on the best interests of the child and all other children in the program**.

**MEDICATIONS**

CDL professional teaching staff receive medications and injectibles training each year. Oral medication and prescriptive topical medication of any kind will not be given to a child except upon written order by the physician and written permission of the parent. This medication must be in the original container and contain the child’s name. Parents must provide a dosage utensil with the same measurement scale as the prescription notes. Medication Permission Forms, which must be signed, by the doctor and parents before medication can be administered by CDL professional staff, may be obtained from your child’s teachers or the office. These completed forms are given to the Teacher on the day medication is to be administered. In addition, parents need to inform Teachers if they are giving their children medication before coming to school. All paperwork must be completed and approved by the Director before a staff person can administer a medication. If you are going to the doctor’s appointment and expect to have a medication prescribed, please get a medication authorization form before your appointment. We will only accept forms from our center due to licensing requirements. Incomplete, unclear forms will not be approved. **Please note that we are unable to administer homoeopathic remedies.**

The following non-prescriptive topical medications can be administered with a written consent of parents. Physician order is not required:

1. diaper changing ointments

2. medicated powders

3. insect repellant

4. teething medication

5. sun screen (lotions only, no spray or aerosol)

6. Lotion

7. other non-prescriptive topical medications.

Any member of the teaching staff, including the director, are trained and evaluated annually on the practice of the Five Right Practices of Medication Administration:

(1) We will verify that the right child receives the (2)right medication (3)in the right dose (4) at the right time (5) by the right method with documentation of each right each time that the medication is given.

Medications are labeled with the child’s first and last name, the date the prescription was filled or the recommendation was obtained from the child’s doctor, the expiration date of the medication or the ending of the physician’s order.

Parents shall be immediately notified of any medication error and in writing no more than 72 hours after the medication error occurred. Significant medication errors shall also be reported to the OEC by telephone and in writing no longer than the next business day.

**SAFE SLEEP POLICY** (for prevention of Sudden Infant Death Syndrome)

For children under 12 months of age, the Child Development Center follows a safe sleep policy. Each teacher during his/her orientation is made aware of the policy and has to sign an agreement that he/she has read the policy and understands the procedures. The policy states that:

* We will always put infants on their backs to sleep. After falling asleep a child may assume a comfortable sleeping position once he/she can turn on his/her own.
* We will keep the infant’s face and head uncovered at all times
* We will not swaddle infants
* We will place infants at the foot of the crib.
* If using a blanket, we will tuck it along the sides and foot of the crib mattress reaching only as far as the infant’s chest.
* Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are **NOT** allowed in cribs while children are sleeping.
* Only one infant will be in a crib at a time, unless we are evacuating infants in an emergency or in practice drills.
* If there is a medical condition that prohibits an infant 12 months or younger to be placed on his/her back for sleeping, a waiver will be signed by the parent and a licensed physician.
* Cribs are checked regularly for safety and sides are kept up and locked.
* Infants are supervised by sight and sound at all times.

We suggest the use of a sleeper blanket or sleep sack for our youngest infant friends as we are prohibited from swaddling infants.

**OUTDOOR PLAY**

Outdoor play is an important aspect to include in every child’s daily range of activities. Children need fresh air and sunlight in all seasons. Children in all programs will play outdoors daily unless there is rain or extreme cold (below 25 degress for Toddlers and Preschoolers and below 32 degrees for Infants). Weather permitting, preschool children children are typically outside for at least 90-120 minutes every day. Toddlers are typically outside for at least 75-90 minutes a day while infants are outside at least 60 minutes a day,In times of poor air quality as indicated by air quality alerts, children will have limited time outside. Parents are responsible for sending appropriate outdoor clothing for their children. **In the school situation, a child who is too sick to go outside is considered too sick to be in school.** Even in the winter months, when children are recovering from colds, coughs, flu, etc. short periods of outdoor time are vital to restoring health. Illnesses are most often contracted in the close, stuffy, germ-prevalent classroom – not in the cold fresh air.

Our playgrounds and the Infant Center Porch offer shady areas for play. To protect against cold, heat and sun injury, we ask that you dress your child in clothing that is dry and layered for warmth in cold weather. When in the sun, children should be dressed in sun-protective clothing and/or sun applied skin protection (sun-screen). Suncreen or sunblock should include UVB and UVA protection of 15 or higher. We ask that you apply sunscreen in the morning and we will reapply it to exposed skin, with your written permission, at school.

In the event of inclement weather, children are offered opportunities for gross motor development inside. These experience may include dancing, movement experiences parachute play, scooters, obstacle courses and other activities that promote gross motor development. These experiences include safe and appropriate materials and are supervised at the same level as outside play.

#### **SAFETY, ACCIDENTS AND INJURIES**

Throughout childhood it is important to allow children to safely explore and discover both at home and at school. However scratches, bumps, pinches and bites do happen and are all part of growing up. In the event of slight injuries or minor accidents at the CDL, a staff member will administer first aid, and an accident report will be placed in your parent pocket. If a more serious injury occurs, an attempt will be made to notify parents immediately, and necessary steps will be taken to obtain immediate medical attention. Your child’s CDL EMERGENCY RECORD will serve as a guide in case of illness or emergency.

**PLEASE KEEP THIS FORM ACCURATE AND UP TO DATE SO THAT WE LOSE NO TIME IN OBTAINING MEDICAL ATTENTION FOR YOUR CHILD.**

#### Additionally:

* Emergency Plans are listed in the back of this handbook and are posted at the center by the Director’s office and in every classroom.
* All CDL Professional Staff receive training in First Aid & CPR and will provide this care if necessary.
* Staff will complete an Accident Report whenever a child receives a minor injury at school. We ask that the parent/guardian sign this document and give it back to the teacher so we can maintain it on file. A copy will be provided to the family.
* All staff are trained in Universal Precautions. These measures are taken if there is contact with bodily fluids.
* A Site Safety Checklist is completed monthly to ensure the safety of the center.
* First Aid boxes are kept in each classroom out of reach of the children and are checked monthly.

**TELEPHONES**

The Center maintains a working telephone list and posts the following emergency numbers:

* Ambulance Service or Emergency Medical Services
* Police Department
* Fire Department
* Poison Control

**DIAPERING PROCEDURES**

* Diapers are checked at least every 2 hours and changed whenever soiled or wet. The time, number, and nature of changes are recorded. Parents must provide disposable diapers or follow the “Cloth Diaper Protocol” below. Children are washed and dried with individual washing materials, such as single-use disposable wipes (also supplied by parents) during each diaper change.
* Diaper changes are recorded for parent(s)/guardian(s), including information on the number of changes, BM’s and/or any diarrhea.
* The hands of staff and all children, including infants, are washed thoroughly with soap and running water after each changing. Infants’ hands may be cleaned with a wipe. Individual paper towels are used to dry hands.
* The changing table, or diapering surface, is intact, impervious to water, and used for no other purpose. It is adequately covered by a disposable covering. After each use, the surface is disinfected. Soiled, disposable diapers and other contaminated materials are bagged and placed in a “hands-free” waterproof container with a tight-fitting cover and plastic liner. The container is emptied and sanitized at least daily.
* Clothing soiled by feces, urine, vomit, or blood is “double-bagged” in sealed plastic bags and stored apart from other items and usually sent home, since rinsing or laundering these items at the Center could spread germs and disease. However, if any clothing contaminated with body secretions is laundered at the Center, it is done so in hot water with a suitable amount of bleach to disinfect. Parents are asked to **always** have a change of clothing at the Center. Clothing should be clearly marked with names.

**Cloth Diaper Protocol UConn Child Labs**

* Parents will provide a “hands free,” air tight container with a washable liner bag.
* Parents will provide all-in-one diapers that have a waterproof cover and an absorbent inner liner and built in closures (such as BumGenius Brand). They are fastened with Velcro.
* After every change, the soiled diaper will be placed into plastic bags and then into the air tight container.
* Soiled diapers and bag liner will taken home by parents every night.

Staff will sanitize the container every evening

**MAINTAINING A HEALTHY ENVIRONMENT**

* Staff use barriers such as disposable gloves and practice Universal Precautions to reduce the possibility of infectious body fluids coming in contact with an opening in their skin or mucous membranes.
* Spills of body fluids are immediately are immediately cleaned with detergent followed by a water rinsing. When cleaning is complete, staff sanitize surfaces by cleaning with detergent, rinsing with water and then disinfecting.
* All carpets and rugs will be cleaned by blotting, spot cleaning with a detergent-disinfectant and requesting a shampoo or steam cleaning by University of Connecticut Facilities personnel.
* Ventilation and sanitation, rather than sprays, air freshening chemicals, or deodorizers, control odors in inhabited areas of the facility and in custodial closets

**INFANT CENTER SHOE POLICY**

To ensure the cleanliness of the infant rooms at all times the CDL implements **an Infant Center Shoe Policy.** Before walking on surfaces that **infants use specifically for play**, ALL adults (including teachers, students and parents) and children must remove, replace, or cover with clean foot coverings any shoes they have worn outside that play area. If children or staff are barefoot in such areas, their feet must be visibly clean.

**PETS**

Any pets kept by, located in or visiting the CDL are certified by a licensed veterinarian as being free of illness or any other hazards to children. They are handled by children only with close staff supervision. They are cared for in a safe and sanitary manner.

**DAILY TRANSPORTATION**

Daily transportation to and from the Center is the responsibility of the parent (s)/guardian(s). At the time of enrollment and re-contracting, parent(s)/guardian(s) complete a Bringing and Picking-Up Permission Form authorizing others to bring or pick-up their children. A form for updating at other times is available in the office and needs to be signed by all parent(s)/guardian(s). CHILDREN WILL NOT BE RELEASED TO ANYONE NOT DESIGNATED ON THESE FORMS OR TO ANYONE WITHOUT A PHOTO ID.

**CLOTHING**

Children paint, use markers and crayons, play in sand, water and other sensory materials while at school. Although all the art materials are non-toxic and washable, clothing can get stained. For this reason children should come to school dressed in play clothes. Please dress children appropriately for active play. Closed-toe shoes that entirely cover the feet are safest for school use.

**DRESSING FOR OUTDOOR PLAY**

Outdoor play is an integral part of the classroom activities. All children are expected to participate except during inclement weather conditions. Please dress children in non-skid, toe covered shoes for safety (tie shoes are best, no flip flops please). Children should be appropriately dressed for outdoor play during all seasons of the year (Hats, boots, gloves, snow pants, etc.). Dry, layered clothing provides the most warmth during cold weather. All clothing, including boots, should be marked with the child’s name. We ask that parents provide at least one change of clothing to be kept at the center. Infants and Toddlers may need several changes. Wipes and diapers must be provided by parents in adequate supply.

**SUNBLOCK AND INSECT REPELLANT**

Though our playgrounds and porch provide shady spots for play during warm months, parents may wish to provide sunscreen or sunblock with UVB and UVA protection of SPF 15 or higher to be applied only to exposed skin. When public health authorities recommend the use of insect repellents due to a high risk of insect borne disease, current accreditation standards require that the repellent contain DEET unless written approval is provided by your child’s physician or a public heath authority recommends the use of an alternative insect repellent registered with the Environmental Protection Agency. Products containing DEET may only be applied once a day and only to children older than two months. Please ask your child’s teacher for a form giving us your written permission to apply sunscreen or insect repellent.

**FOOD**

In order to ensure the safety of all of the children at the Child Labs, including those with life-threatening food allergies, the Child Labs is committed to being a “nut free” center.

**The following foods CANNOT be sent for lunches or snacks:**

* **Peanut butter, peanuts, anything with peanuts or peanut butter flavoring**
* **All other nuts: walnuts, almonds, cashews, soy nuts, hazel nuts, etc.**
* **All other nut butters including soy nut butter. Sunflower butter is OK.**
* **Some granola bars: please read ingredients carefully.**
* **Some cereals**
* **Some breads**
* **Especially note if foods are processed in a facility that also processes peanuts or tree nuts**

**Should any of these foods be in the child’s lunch, we are unable to offer them to your child**.

The Center strives to promote a healthy attitude toward food. We do not ever use food to calm children or encourage appropriate behavior. We teach the children about good eating habits, healthy reasons to eat, why variety is important since different foods help us in different ways, and why foods prepared or eaten in certain ways are not healthy. We include both planned and informal nutrition education for children. Teachers sit with children at snack and lunch and model healthy eating practices. As is best practice, we allow (and encourage) children to choose the order in which they eat their food. Parents are in charge of what is sent for lunch while children are in charge of what and how much they eat. **Lunch is not provided by the CDL**. Parents must provide a bag lunch plus milk or juice, preferably 100% juice that has been watered down. We ask parents to join us in our efforts to promote good eating habits by sending nutritionally sound lunches. The Center lists ideas that parents may wish to incorporate in their children’s lunches. **SODA, CANDY, COLAS and SOFT DRINKS** are not permitted at the CDL except as prescribed by a physician for specific conditions. Please make sure to name and date each item in your child’s lunch. Food for infants under 12 months will be warmed only in a crockpot; children over 12 months may bring in food to be warmed in a microwave. Each classroom has a refrigerator where lunch boxes should be place in the morning. Getting lunch ready for groups of children can be a time-consuming operation. Please help us by preparing foods by cutting sandwiches into quarters, paring fruits for infants and toddlers, pitting fruits, steaming vegetables for infants and toddlers, cutting meats into mouth size-morsels.

Parents with children under a year are required to provide their own snacks, foods and juices (100% juice only). We will not offer solid foods or fruit juices to children younger than six months without documentation from the child’s physician and approval from parents. Juice is limited to no more than 4 ounces per child each day. Juice cans/jars/boxes of formula and baby food must be brought in the original, factory sealed containers to be prepared by staff. Please remember to bring the empty bottles! Bottle feedings must not contain solid foods unless the child's health care provider supplies written instructions and a medical reason for this practice. Staff discard after one hour any formula or human milk that is served but not completely consumed or is not refrigerated. If staff warm formula or human milk, the milk is warmed in water at no more than 120 degrees Fahrenheit for no more than five minutes. No milk, including human milk, and no other infant foods are warmed in a microwave oven. All infants are held while having a bottle. Children will be offered fluids from a cup as soon as families and teachers feel they are developmentally ready use one.

LIST OF NUTRITIOUS LUNCH SUGGESTIONS

The following is a short list of lunch suggestions that you may find helpful:

Leftovers: Pasta with or without sauce/cheese/meat

Steamed vegetables

Rice or beans

Soups or Stews

Sandwiches: Whole grain breads, biscuits, muffins, pitas, and bagels.

Cheese (plain or grilled)

Tuna, meats (without nitrates or nitrites)

Bean spreads

Banana, applesauce or other thin fruit

Lettuce, tomato, sprouts

Small containers: Cottage cheese or yogurt with applesauce or fruits.

Hotdogs and grapes must be cut into **very** small pieces (diced).

**When preparing your child’s lunch please ensure the following: food served to infants must be no larger than 1/4 –inch square and toddlers/two must not be served food larger than ½-inch square**.

**LIST OF FOODS THAT MAY NOT BE SENT TO SCHOOL**

**We are not able to allow children to eat the following foods at school**:

* Any kind of nut
* Raw peas
* Hard pretzels
* Chunks of raw carrots or meat larger than can be swallowed whole.

**SNACKS AT THE CDL**

The CDL provides two snacks per day for those children on regular table food. We offer snack as an open choice, rather than having everyone eat at the same time, in order to help children recognize when they are hungry. As children are developmentally able, they serve themselves snack with adult support. Snack menus are prepared at least two weeks in advance and are posted by the Director’s office and in each classroom. Staff ensures the safety of the food offered by the CDL by promptly discarding foods with expired dates. Whole milk is provided for children ages 12 to 24 months and older children have 2% milk. These menus represent suggested food groups as required by USDA and Connecticut Licensing Guidelines.

Foods offered at snack times include:

* Fruit (either fresh or canned in juice) is offered at least one snack time each day.
* Fresh (raw) vegetables. We regularly include dark green, orange, red, and deep yellow vegetables.
* High fiber, whole grain foods such as whole wheat crackers, wheat breads, waffles and cereals (such as Cheerios).
* Dairy products such as cheese and yogurt.

**Drinking Water**: Drinking water shall be available and accessible to children at all times including at meals and snacks.

**Breast Feeding and Breast Milk:**

Quiet space is available for mothers who wish to breastfeed their infants and we work with breastfeeding mothers whenever possible to coordinate feedings. This space is also available for mothers wishing to pump breast milk.

Breast milk may be brought to the Child Labs in ready-to-feed sanitary containers. The containers must be labeled with the child’s name and the date. We will store the milk in the refrigerator for no longer than 48 hours (no more than 24 hours if the breast milk was previously frozen) or in the freezer at 0 degrees Fahrenheit or below for up to three months.

Staff will gently mix, not shake, the breast milk before feeding to preserve all components of the milk.

**BIRTHDAYS**

We know that birthdays are special milestones in the life of child. As we have children in our center who have serious, life-threatening food allergies, we request that “birthday foods” such as cupcakes, cakes, etc. be kept for your celebrations at home. We feel this policy is also in keeping with current research on early childhood nutrition and our focus on healthy snacks/foods. We will celebrate your child’s important day at school by singing happy birthday and giving them a special card.

## PARENT INVOLVEMENT AND NUTRITION

We welcome and encourage family participation in all areas of the program. We value your suggestions and input regarding snack planning. One way to be involved in snack planning is to submit recipes that represent your family traditions or culture. You can talk to your child’s teacher about coming to volunteer to demonstrate a cooking activity in the classroom. Please feel free to talk with your child’s teacher or the director about any nutrition concerns that you may have; we have many resources to share.

**NAP POLICY**

**Toddlers and Preschoolers**

Nap is an integral part of program routine and all children are required to nap or rest. Children are welcome to bring a blanket, pillow and soft toy from home. Books or other quiet materials/activities are provided for children who rest. Nap time for the Toddlers and Preschoolers is approximately two hours. No child is awakened before this time. Children may get up after 1/2 hour if they awaken on their own or have rested for an hour. Children who have been ill will not be awakened. Children are separated by a solid barrier (cot dividers) or are placed at least a foot apart. **An adult is present in the nap room at all times.**

“Scheduling adequate rest for children in the day care setting is important in teaching them to make a smooth transition from one activity to another. A quiet time between periods of strenuous play may make all the difference in the child’s ability to keep up.” American Academy of Pediatrics, Health in Day Care: A Manual for Health Professionals

**Infants**

Children in the Infant Center, especially those in the Younger Infant Room, are on individual schedules. Infants who require two naps a day tend to nap mid-morning and mid-afternoon. Regular sleep is important to the growth and development of infants and we strive to create an atmosphere that is conducive to sleep for all children. Due to the group care setting, we are not able to let children “cry it out” as this impacts the sleep of all the infants. No child in the Infant Center will be awakened from a nap.

See also: SAFE SLEEP POLICY

# **CHILD ABUSE AND NEGLECT REPORTING POLICY**

In accordance with state law and regulations, as well as early childhood education practices, it is the policy of the Child Development Laboratories to report all instances of child abuse and/or neglect as soon as there is reasonable cause to believe that abuse or neglect may have occurred.

Once a staff person believes that abuse/neglect may have occurred, this staff person conveys this belief immediately to the Director and reports this belief in the following manner as prescribed by the State of Connecticut Department of Children and Families (DCF)

1*.* An oral report must be made within 12 hour*s* to the Commissioner of DCF or his representatives or to the local police or state police. [17-38a©] (The phone number for the Willimantic office is 450-2000; Hot Line 1-800-842-2288)

2. A written report must follow within 48 hours. It can be submitted to a DCF regional office (Tyler Square, 1320 Main Street, Willimantic, Connecticut 06226) or directly to the Commissioner at the Central Office. [17-38a©]

3. If a person is making the report as a member of the staff of a hospital, school, social agent or other institution, the reporter must also notify the CDL Director or her designee that such a report has been made. [17-38a(b)]

4. All information as noted on the DCF reporting form, if known by the reporter, must be reported. [17-38a©]

5. Agencies or institutions receiving reports must transfer such information to the Commissioner of DCF or his agent within 24 hours. [17-38a(e)]

It is also the Child Development Laboratories’ policy to:

* Ensure that all staff are informed of this policy and of their duty, as mandated reporters, to report abuse or neglect, as well as the fact that failure to report can result in a fine between $500-$2,500.
* Submit required information for background check, including fingerprints, to the Office of Early Childhood prior to employment.
* Following background check, any staff that have a record that renders them unsuitable shall not be employed.
* Provide staff with training as to the prevention and identification of abuse or neglect. Staff participate in Mandated Reporting Training every 2 years as required by state law.

Cooperate with the Department of Children and Families and the State Police in any investigation involving the center’s families and/or its personnel.

Take immediate action to safeguard children, up to and including suspension from duty, should an allegation of abuse or neglect be made against a staff person.

Take immediate action to safeguard children, up to and including dismissal from duty, should a staff person be found to have perpetrated abuse or neglect.

The following is a summary of Connecticut’s legal requirements concerning child abuse/neglect.

Public Policy of the State of Connecticut

To protect children whose health and welfare may be adversely affected through injury and neglect; to strengthen the family and to make the home safe for children by enhancing the parental capacity for good child care; to provide a temporary or permanent nurturing and safe environment for children when necessary; and for these purposes to require the reporting of suspected child abuse, investigation of such reports by a social agency, and provision of services, where needed.

Who is Mandated to Report Child Abuse/Neglect?

* Licensed physicians, surgeons & physician assistants
* Resident physicians and interns in any hospital located in the state
* Registered and licensed practical nurses
* Medical examiners
* Dentists and dental hygienists
* Psychologists, social workers, and other mental health professionals
* School teachers, principals, guidance counselors, paraprofessionals, school coaches
* Police officers
* Members of the clergy
* Pharmacists, Physical therapists, Optometrists, Chiropractors, Podiatrists
* Licensed or certified alcohol and drug counselors
* Licensed marital and family therapists
* Sexual assault and battered women’s counselors
* Paid child caregivers in a licensed public and private child day care centers, family day care homes, and group day care homes
* The Child Advocate and employees of the Office of the Child Advocate
* Licensed or certified emergency medical services providers
* Licensed professional counselors
* Public health employees responsible for licensing child day care centers, family and group day care homes, and youth camps
* Department of Children and Families employees
* Juvenile and adult probation and parole officers [17-38a(b)]

Do Those Mandated to Report Incur Liability?

No. Any person, institution, or agency reporting in good faith is immune from any liability, civil or criminal. [17-38a(h)]

Is There a Penalty for Not Reporting?

Yes. A person required to report who fails to do so shall be *fined between $500-$2,500*. [17-38a(b)]

**What Must Be Reported?**

* Child Abuse: Defined as any child under the age of eighteen who has had physical injury or injuries inflicted upon him by a person responsible for the health, welfare or care or by a person given access to the child by the responsible person other than by accidental means or has injuries which are at variance with the history given of them, or is in a condition which is the result of maltreatment such as, but not limited to, malnutrition, sexual molestation, deprivation of necessities, emotional maltreatment or cruel punishment or has been neglected. [17-38a(b) and 17-53]
* Child Neglect: Defined as child under 18 who has been abandoned, or is being denied proper care and attention, physically, emotionally or morally or is being permitted to live under conditions, circumstances or associations injurious to his well being or has been abused. [17-53**] Exception**: The treatment of any child by an accredited Christian Science practitioner shall not of itself constitute neglect or maltreatment. [17-53]
* Child at Risk: Reasonable cause to believe or suspect a child is in danger of being abused as opposed to belief that the abuse has actually occurred. [17-38(b)]
* Child under 13 with VD: A physician or facility must report to the Commissioner of DCF on the consultation, examination and treatment for venereal disease of any child not more than twelve years old. [19-89a]

Do Private Citizens Have a Responsibility for Reporting?

Yes. A separate section of the law indicates that any person in addition to those specifically mandated, shall give an oral or written report to DCF when there is reasonable cause to suspect child abuse/neglect. Such a person making the report in good faith is also immune from any liability, civil or criminal. There is however no penalty for not reporting. [17-38c]

\*Specific citations from the Connecticut General Statutes are noted in brackets.

Mandated reporters are under no legal obligation to inform parents that they have made a report to DCF about their child. In cases of abuse, reporters should not talk with parents before DCF investigates the allegations. ([www.state.ct.us/DCF/reptlaws.htm](http://www.state.ct.us/DCF/reptlaws.htm))

EMERGENCIES

**EMERGENCY PREPAREDNESS PLAN**

**Evacuation**: In the event of a true emergency, including fire, and our building becomes untenable for any reason, the staff has been trained to:

* Evacuate the children from the building, as practiced in monthly drills. During evacuation and/or immediately after determining all staff, students and children are present; appoint responsible staff to call University Emergency Personnel at 911 or 486-4925. All classrooms report to their designated place as practiced, to wait for further instructions from University Emergency Personnel.

Upon instructions from University Emergency Personnel, that children and staff can not re-enter the building, children will be transported on foot to the Nathan Hale Inn located across the street at 855 Bolton Road. If the University Emergency Personnel deems that the Nathan Hale Inn untenable, Von der Mehden Auditorium in the Fine Arts Building at 875 Coventry Road will be the alternate evacuation site. If the children need to be evacuated off campus or to a site not within walking distance, the University will provide transportation to an alternative site.

In case of evacuations, contact parents or their designated emergency person as soon as possible. A separate file with parents contact numbers will be compiled in advance by classroom teachers to take with them.

**Weather or other Emergency**:

In the event that an unforeseen weather occurrence or other emergency that necessitates keeping the children in the building, the staff is trained to:

* Shelter children away from picture windows. Teachers will pull down all window shades to provide extra protection from falling glass. Children will be sheltered in the motor rooms where there are few or no windows.
* Keep in close contact with University Emergency Personnel for instructions particular to the emergency.
* Keep on hand blankets, flashlights, food and water.
* Contact parents or their designated emergency person as soon as possible with status reports.

**Weather Emergency with prior notice**:

Staff are trained to:

* Contact the University Emergency Personnel (as in A2 and B4).
* Contact parents or their designated emergency person with early closing information as soon as possible.

\* If parents and staff are at home, they have been instructed to listen to local radio and TV broadcasts for school postponements, cancellations, or early closings.

**EMERGENCY PROCEDURES ILLNESS OR INJURY TO CHILD EMERGENCY PROCEDURES ILLNESS OR INJURY TO CHILD**

I. **INJURY**

1. Find supervising teacher OR
2. Supervising teacher applies appropriate first aid and comforts child

C. Another staff member calls:

1) 911, if applicable

2) Parents

II. **ILLNESS**

1. Remove child from group. Set up cot if necessary
2. Make child comfortable
3. Call Parents
4. Staff must remain with child until parent arrives
5. If parents cannot be reached, advice and/or treatment will be obtained on an emergency basis. If on campus, the University Emergency Services will be called at “911”. If necessary, the child will be transported to Windham Community Memorial Hospital following the advice of the emergency service professionals, either by car, or if necessary, by ambulance. If off-campus, the local emergency services (“911”) will be called. The child will be transported at the advice of the emergency services personnel by car, or if necessary, by ambulance to the nearest hospital.

**FIRE DRILL PROCEDURES INFANT CENTER – PINK ROOM**

EXIT: Exit classroom door into Infant Center main corridor, turn right. Exit outside door, down ramp to parking lot. Meet on grassy area adjacent to parking lot.

ALTERNATE EXIT IF MAIN CORRIDOR IS BLOCKED:

Exit doors to porch, turn left to parking lot. Meet on grassy area adjacent to parking lot.

ALTERNATE EXIT IF PORCH DOORS ARE BLOCKED:

Exit classroom doors into Infant Center main corridor. Turn left. Exit to playground. Meet in farthest left corner.

FROM ANY LOCATION IN BUILDING OTHER THAN IN CLASSROOM:

Exit through nearest outside door and rejoin class group.

STAFF RESPONSIBILITIES:

* Supervising teacher checks all areas of classroom (bathrooms, cubby rooms, nap rooms) and is last out the door making sure door is closed.
* Supervising teacher carries out attendance sign in sheet and Emergency Contact book.
* Supervising teacher takes head count of children.

STAFF BE SURE TO:

* Take each fire drill seriously.
* Use calm, firm voice.
* Do not stop to coax children - pick up reluctant child.
* Do not stop for shoes or coats.
* Do not return to the building until the “All Clear” signal has been given.

IF THERE IS A TRUE EMERGENCY:

All teachers will be given further instructions by University Emergency Personnel.

**FIRE DRILL PROCEDURES INFANT CENTER - BLUE ROOM**

EXIT: Exit classroom door into Infant Center main corridor, turn right. Exit outside door, down ramp to parking lot. Meet on grassy area adjacent to parking lot.

ALTERNATE EXIT IF MAIN CORRIDOR IS BLOCKED:

Exit doors to porch, turn left to parking lot. Meet on grassy area adjacent to parking lot.

ALTERNATE EXIT IF PORCH DOORS ARE BLOCKED:

Exit classroom doors into Infant Center main corridor. Turn left. Exit to playground. Meet in farthest left corner.

FROM ANY LOCATION IN BUILDING OTHER THAN IN CLASSROOM:

Exit through nearest outside door and rejoin class group.

STAFF RESPONSIBILITIES:

* Supervising teacher checks all areas of classroom (bathrooms, cubby rooms, nap rooms) and is last out the door making sure door is closed.
* Supervising teacher carries out attendance sign in sheet and Emergency Contact book.
* Supervising teacher takes head count of children.

STAFF BE SURE TO:

* Take each fire drill seriously.
* Use calm, firm voice.
* Do not stop to coax children - pick up reluctant child.
* Do not stop for shoes or coats.
* Do not return to the building until the “All Clear” signal has been given.

IF THERE IS A TRUE EMERGENCY:

All teachers will be given further instructions by University Emergency Personnel.

**FIRE DRILL PROCEDURES INFANT CENTER - GREEN ROOM**

EXIT: Exit classroom door into Infant Center main corridor, turn right. Exit outside door, down ramp to parking lot. Meet on grassy area adjacent to parking lot.

ALTERNATE EXIT IF MAIN CORRIDOR IS BLOCKED:

Exit doors to porch, turn left to parking lot. Meet on grassy area adjacent to parking lot.

ALTERNATE EXIT IF PORCH DOORS ARE BLOCKED:

Exit classroom doors into Infant Center main corridor. Turn left. Exit to playground. Meet in farthest left corner.

FROM ANY LOCATION IN BUILDING OTHER THAN IN CLASSROOM:

Exit through nearest outside door and rejoin class group.

STAFF RESPONSIBILITIES:

* Supervising teacher checks all areas of classroom (bathrooms, cubby rooms, nap rooms) and is last out the door making sure door is closed.
* Supervising teacher carries out attendance sign in sheet and Emergency Contact book.
* Supervising teacher takes head count of children.

STAFF BE SURE TO:

* Take each fire drill seriously.
* Use calm, firm voice.
* Do not stop to coax children - pick up reluctant child.
* Do not stop for shoes or coats.
* Do not return to the building until the “All Clear” signal has been given.

IF THERE IS A TRUE EMERGENCY:

All teachers will be given further instructions by University Emergency Personnel.

**FIRE DRILL PROCEDURES TODDLER ROOM**

EXIT: Use playground door - meet at the bench.

ALTERNATE EXIT IF PLAYGROUND DOOR IS BLOCKED:

Exit main classroom door, turning right. Exit door at end of hallway to parking lot. Meet at grassy area to left of lot.

STAFF RESPONSIBILITIES:

* Supervising teacher checks all areas of classroom (bathrooms, cubby rooms, nap rooms) and is last out the door making sure door is closed.
* Supervising teacher carries out attendance sign in sheet and Emergency Contact book.
* Supervising teacher takes head count of children. Immediately after determining all children are accounted for, will send extra staff to help Infants and Toddlers.

STAFF BE SURE TO:

* Take each fire drill seriously.
* Use calm, firm voice.
* Do not stop to coax children - pick up reluctant child.
* Do not stop for shoes or coats.
* Do not return to the building until the “All Clear” signal has been given.

IF THERE IS A TRUE EMERGENCY:

All teachers will be given further instructions by University Emergency Personnel.

**FIRE DRILL PROCEDURES PRESCHOOL #1 (ROOM 122)**

EXIT: Use playground door - meet at play house.

ALTERNATE EXIT IF PLAYGROUND DOOR IS BLOCKED:

Exit main classroom door, turn right, then left, then right through double doors. Exit on right to parking lot. Meet in grassy area on left of lot.

STAFF RESPONSIBILITIES:

* Supervising teacher checks all areas of classroom (bathrooms, cubby rooms, nap rooms) and is last out the door making sure door is closed.
* Supervising teacher carries out attendance sign in sheet and Emergency Contact book.
* Supervising teacher takes head count of children. Immediately after determining all children are accounted for, will send extra staff to help Infants and Toddlers.

STAFF BE SURE TO:

* Take each fire drill seriously.
* Use calm, firm voice.
* Do not stop to coax children - pick up reluctant child.
* Do not stop for shoes or coats.
* Do not return to the building until the “All Clear” signal has been given.

IF THERE IS A TRUE EMERGENCY:

All teachers will be given further instructions by University Emergency Personnel.

**FIRE DRILL PROCEDURES PRESCHOOL #2 (ROOM 134)**

EXIT: Use playground door - meet against the fence in the rear right corner of playground.

ALTERNATE EXIT IF PLAYGROUND DOOR IS BLOCKED:

Exit main classroom door, turn left, then right, then immediate left through black double doors. Exit on right to parking lot.

STAFF RESPONSIBILITIES:

* Supervising teacher checks all areas of classroom (bathrooms, cubby rooms, nap rooms) and is last out the door making sure door is closed.
* Supervising teacher carries out attendance sign in sheet and Emergency Contact book.
* Supervising teacher takes head count of children. Immediately after determining all children are accounted for, will send extra staff to help Infants and Toddlers.

STAFF BE SURE TO:

* Take each fire drill seriously.
* Use calm, firm voice.
* Do not stop to coax children - pick up reluctant child.
* Do not stop for shoes or coats.
* Do not return to the building until the “All Clear” signal has been given.

IF THERE IS A TRUE EMERGENCY:

All teachers will be given further instructions by University Emergency Personnel.