

24/25 Handbook for Families

APP STATE CHILD DEVELOPMENT CENTER

Nurture Hearts • Inspire Minds



Family Handbook
Division of Student Affairs
August 2025

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APPALACHIAN STATE UNIVERSITY CHILD DEVELOPMENT CENTER

Welcome to the App State Child Development Center

Welcome to the Appalachian State University Child Development Center (CDC), an extension of the Division of Student Affairs. The CDC was designed to provide high quality care and education to young children and families with current, full-time affiliation with App State (student/faculty/staff parents). We are an early care center providing a safe and nurturing environment which supports the developmental needs of young children and allows families to more fully engage in campus life and academic success.

The needs of children and families are best met through developing collaborative partnerships with the student workers, teachers and Director of the CDC. Thank you for entrusting us with the important task of caring for and educating your child. We value families as the child's first teacher and understand our role, as the child's first school experience, to be responsible for setting the foundation for developing excitement for school and life-long learning. We look forward to taking this journey together!

The *Handbook for Families* describes the policies and procedures of the App State CDC. Please read it carefully and refer back to it periodically during the year. This document is essential to understanding the responsibilities, relationships and expectations of the Center and families. Families are required to complete and turn in the *Statement of Understanding and Agreement with Center Policies* with their enrollment forms.

Introduction / Contact Information

The App State Child Development Center was originally founded in 1975 to serve App State student families with young children and is a department in the Division of Student Affairs. The original enrollment of the Center was only 15 children. Almost 50 years later we are now serving over 100 children and have expanded our services to include children from student/faculty/staff and occasionally non-App State affiliated families.

Location:

Our mailing address is:

ASU Box 32048
Boone, NC 28608

Our physical address is:

538 & 540 Poplar Grove Rd.
Boone, NC 28607

Phone Numbers:

Office: 828-262-2183

Cardinal: 828-262-8520

Chickadees: 828-262-8067

Dandelion: 828-262-8053

Dogwood: 828-262-8525

Honeysuckle: 828-262-8044

Hummingbirds: 828-262-8045

Juniper: 828-262-8521

Pine: 828-262-8565

Sunflowers: 828-262-8048

Willow: 828-262-8522

Please do not call the classrooms during nap time unless it's an emergency as our teachers are helping your children rest!

App State CDC fax number is: 828-262-7516

App State CDC website is: www.childdevelopment.appstate.edu

License

The App State CDC is licensed by the North Carolina Division of Child Development and Early Education (DCDEE). The license number is 9555061. The CDC's licensing consultant is Lee Marshall:

mobile - (828) 434-0236; fax - (919) 715-1013; email - lee.marshall@dhhs.nc.gov

Five Star Rating

The Center participates in enhanced standards for the star rated license. This designation allows us to provide services to families who qualify for financial assistance through county vouchers. The star rated license is based on a combination of environmental rating scales and teacher education. The environmental rating scales provide very specific information on curriculum materials, room arrangement, children's activities, daily schedules and other indicators of quality for early childhood programs. Infant/Toddler and Preschool rooms utilize different standards that are age-appropriate.

The rated license is conducted by the North Carolina Rated License Assessment Project (NCRLAP) and childcare licensing. The Center will be assessed every three years. The star rating is identified on our license which is posted in the lobby.

The CDC also complies with the Department of Health and Human Services-Environmental Health Division regulations for the operation of childcare centers.

The current Center license and health inspection reports are located in the Center's foyers.

The App State CDC is a five star center as of 2/9/2021. This voluntary rating scale is a compilation of environmental ratings scales and teacher education levels. The North Carolina Rated License Assessment Project (NCRLAP) conducts the environmental evaluation and DCDEE conducts the teacher evaluations and assessment of quality points. This rating is good for a period of three years. It assesses one infant/toddler and one preschool room for a total of two rooms.

Organization

The App State CDC is a division of Student Affairs. There are ten classrooms that serve approximately 125 children. We have mixed age infant/toddler classrooms for children 6 weeks to three years old and mixed age preschool rooms for children 2.5 years until ready for kindergarten. Mixed age classroom groupings allow children to learn from and guide their peers as well as provide a continuity of care between teachers and children.

All classrooms are designed to serve families with full time affiliation with App State. Enrollment is intended to be balanced with 50% student families and 50% faculty/staff families. Classroom slots may be offered to children in the community on a special case by case basis. The App State CDC is an inclusive program, serving children who are typically developing and children with special needs. The individual needs and abilities of all children are valued and respected. All children are contributing members of the classroom.

Most classrooms have two or three co-teachers, with the addition of a few student workers who serve to assist with lunch, napping, providing teacher breaks and curriculum coverage.

Mission and Philosophy

Mission

Our mission is to lay a foundation for growth by facilitating learning, modeling positive behavior, and communicating with dignity and respect for all to create a nurturing and safe environment for our community of children, parents, student support staff, teachers, and the greater Appalachian community.

Vision

To create an early learning environment that nurtures the hearts and inspires the minds of young children, their families, and their professional caregivers to positively impact our community and beyond.

Philosophy

The philosophy of the App State CDC is that children learn through play. Teachers are to facilitate learning by intentionally planning environments that engage children's individual interests. Teachers are to be observers and partners in children's play. Learning is extended for children when they interact with their teachers and peers. This occurs during free play in centers and in large and small group instruction. Observation is essential in identifying the interests of children. Curriculum planning is based on these observations. Children's development is documented through formal and informal observations that guide the support provided by teachers to challenge and reinforce learning with children.

Goals

The App State CDC works to support the following goals for children:

- Providing high quality childcare for children and families.
- Ensuring children are cared for in a safe and nurturing environment.
- Valuing early childhood as a unique period of development that should be supported and not rushed.
- Fostering a love of learning through play and exploration.
- Supporting the social and emotional growth of children.
- Providing a balanced curriculum that supports: Approaches to Play and Learning; Emotional and Social Development; Health and Physical Development; Language Development and Communication; Cognitive Development.
- Establishing reciprocal relationships founded on respect, communication, and joy.
- Sharing knowledge with families on a variety of early childhood topics.
- Linking real-world problems to multiple perspectives and children's individual and collective experiences.
- Support student families by providing quality early childcare.

Educational Partnerships

Student Workers

Each classroom of the App State CDC utilizes student workers to meet the goals of caring for and educating young children. These students work in rotating teams during the week, with up to 12 students in a classroom per week. The Center provides practical experience and paid positions for students who serve as Teacher Aides. Student workers come from a variety of educational programs including: early childhood and elementary education,

sociology, and other studies. All student workers are subject to background checks and all mandated training requirements of the NC Department of Health and Human Services.

Staff Development

All teachers receive certification in First Aid, CPR and SIDS (Sudden Infant Death Syndrome) within their first 6 weeks of employment. A large block of health and safety training are also completed during their first two months of employment. Additionally, based on the number of hours worked, all teachers are held to a specific number of continuing education hours. These hours are primarily met through qualifying App State classes and professional early childhood conferences. The CDC will be closed 15 days during the year for the purpose of staff professional development. This time will be dedicated to the acquisition and application of new knowledge of early childhood practices, classroom preparation, team-building and the individual needs of teachers.

Curriculum and Classroom Support

There are many professional resources available to our center through the support of state/federal funds, private donors, and grants. These include the Children's Council of Watauga County (known state-wide as Smart Start), Regional Infant/Toddler Specialists, and Regional Behavioral Specialists, to name a few. The App State CDC will request consultation from these agencies when a need for teacher support is identified.

Early Childhood Educational support is also found right here in our own backyard on campus. App State Human Resources and the Reich College of Education work in collaboration with the App State CDC to provide professional development. This includes assisting our staff in pursuing degrees in early childhood education and being co-participants in mutual educational workshops during professional development days.

We strive to operate as one early childhood community to support children and families through improving teaching practices that impact positive outcomes for children.

Enrollment Process

Application

Families interested in enrolling at the CDC must complete a Request for childcare Services. The form is found on our website:

www.childdevelopment.appstate.edu. There is no application fee. Applications will only be accepted after the time of conception. Potential adoptive families may make an application at the time they officially begin the adoption process.

The Request Form is received via an online system where it is time-stamped. At that time you will be placed on the waiting list. The waiting list consists of three categories: (1) Student Families, (2) Faculty/Staff Families, (3) Community. Requests Forms may be submitted by Community Families, but enrollment for these limited spaces are only considered in special circumstances and on a limited basis.

Student Families:

1. Student slots are reserved for families with a primary relationship to App State as a student. Student parents must be enrolled in at least twelve undergraduate hours (or six graduate hours) per semester at App State and be degree-seeking.
2. Student schedules will be reviewed during the semester to ensure qualification for student status.
3. One semester of "grace" may be allowed for student families who, for the following reasons, do not have half-time student status for one semester: employment, fulfilling educational responsibilities, maternity leave or documented health reasons. *A grace semester is not guaranteed.*
4. Annual re-enrollment paperwork must be fully completed and returned to the Director for a child's position to be considered each year.
5. Fees are based on a sliding fee scale. Annual proof of adjusted gross income is required.
6. The Center accepts subsidy payments from the Department of Health and Human Services and other social service organizations.

Faculty / Staff Families:

1. Families must furnish documentation of full-time App State employment.
2. Annual re-enrollment paperwork must be fully completed and returned to the Director for a child's position to be considered each year.
3. Fees are based on a sliding fee scale. Annual proof of adjusted gross income is required.
4. The Center accepts subsidy payments from the Department of Health and Human Services and other social service organizations.

Community Families:

1. Families must pay non-affiliated rates.
2. Annual re-enrollment paperwork must be fully completed and returned to the Director for a child's position to be considered each year.
3. The Center accepts subsidy payments from the Department of Health and Human Services and other social service organizations.

Waiting List

The demand for quality childcare is high in Boone. All of the Center's classrooms have a waiting list. Priority is given on the waiting list with the following considerations:

- Children of degree-seeking, full-time App State students actively enrolled in programs.
- Currently enrolled children changing classrooms of full-time App State employees.
- Full-time teachers/aides employed by the Center who become pregnant or have children who require childcare services.
- Families with children currently enrolled at the Center get "sibling priority."
- Families that adopt or foster.

Once a family has been identified for potential enrollment, the Director or Master Teacher will notify the family of the opening and they will have 48 hours to respond. If the family does not respond within the allotted time, the space will be offered to another child on the waiting list.

A non-refundable registration fee of \$100.00 is due upon initial enrollment of each child in order to secure the space. Slots are not held for children without tuition payment. Families may opt for a later time to start their child's participation in the classroom, but in such a case, they must pay tuition in order to hold the slot.

Enrollment

An initial conference between the family and an administrator will be held prior to the child's entry into the Center. Program policies, personal information about the child and an introduction to the Center will be given prior to the child's start date of enrollment.

Re-Enrollment

In April/May, families are given the opportunity to indicate whether they wish to re-enroll in the program for the following year or provide a withdrawal date for the summer. This form must be returned within two weeks. While it is intended to give already enrolled families priority to maintain consistency for their child and family, *we reserve the right to decline re-enrollment based on the needs of the program or based on the goodness of "fit" with the program.*

Welcoming a New Child

Families are encouraged to visit their child's classroom 3-5 times before the child's regular attendance begins. Time spent in the classroom starts the process of developing a trusting relationship for children, families and teachers. It is important that children meet their teacher prior to starting in a classroom and see that their family is accepting of this new person. Families are the experts on the care and needs of their child and it is important for

families to share this knowledge with the classroom teachers. Young children often can't verbalize what they need and parents are the key to understanding a child's behavior, likes/dislikes, and other individual cues. Good communication between teachers and families is an integral part of providing high quality care for children.

The following forms and procedures must be completed and/or discussed prior to the start of enrollment:

1. Request for childcare Services Form
2. Child's Application and Emergency Contacts- *must be updated each semester*
3. Payment Contract and most recent 1040-A Tax Form to determine the rate of pay on the sliding fee scale
4. Child's Medical Form and Shot Record- *must update center with new record after immunizations are completed*
5. App State CDC Parent Handbook

Each child is given a three month period of trial enrollment to ensure the program, child, and family are well suited for one another.

Tuition

All tuition questions and payments are processed through the Division of Student Affairs. Contact earlycarebilling@appstate.edu

Tuition rates are posted on the App State CDC website, listed below, are listed on individual contracts for enrollment with families, and are available through contacting the Division of Student Affairs. Tuition is determined upon a sliding fee scale with income eligibility determined by current tax forms for families who have an AGI of \$60,000 or below and who apply.

Infant & Toddler Classrooms	Adjusted Gross Income (AGI)	24/25 Annual Tuition WITH lunch	24/25 Monthly Installment WITH lunch	24/25 Annual Tuition WITHOUT lunch	24/25 Monthly Installment WITHOUT lunch
	At/under \$60,000	\$10,200	\$850	\$9,780	\$815
	At/above \$60,001	\$10,872	\$906	\$10,444	\$870
	Unaffiliated Rate	\$11,556	\$963	\$11,136	\$928
Preschool Classrooms	Adjusted Gross Income (AGI)	24/25 Annual Tuition WITH lunch	24/25 Monthly Installment WITH lunch	24/25 Annual Tuition WITHOUT lunch	24/25 Monthly Installment WITHOUT lunch
	At/under \$60,000	\$9,276	\$773	\$8,856	\$738
	At/above \$60,001	\$10,200	\$850	\$9,780	\$815
	Unaffiliated Rate	\$10,877	\$906	\$10,440	\$870

Tuition is an annual fee. For the convenience of families, tuition can be paid in 12 monthly installments over the course of a year. Tuition is based on having a secured slot for enrollment in the program and ***not on a child's attendance***. The Center does not refund paid tuition for holidays, staff development days, illness, vacation, discontinuation of childcare services or delay in the openings or early closings due to inclement weather.

Payment Method

The App State CDC does not accept cash or credit card payments through Procure at this time. Should credit card payments become available through Procure, families will be notified via newsletter. Checks should be made out to FAppalachian State University. Please include your child's first and last name on the check's memo line. Families may choose to participate in payroll deduction. Payroll deduction occurs monthly until the University is notified by the family to stop payment. *Parents are responsible for notifying Human Resources of all changes to their payroll deduction plan.*

Some families may receive childcare subsidy from DHHS DSS. Payment of the monthly parent fee, established by DSS, is due on or before the 1st day of each month for services provided that same month. The subsidy amount provided by DSS plus the monthly parent fee must equal the established monthly childcare service fee, as listed in the Tuition & Agreement Acknowledgement Form. You remain responsible for the difference. Families receiving DHHS childcare Subsidy will be billed at the AGI \$60,000+ rate. If DSS reduces their

payment amount to the Center for any reason, the family remains responsible for the difference.

Late Payments

The operation of the Center is dependent upon tuition received from families; thus, timely payments are essential. If an emergency does happen, the problem needs to be brought to the Director's attention BEFORE payments become delinquent in order to avoid any break in services. The key to avoiding problems is maintaining clear communication with the Director. Referral to resources that provide assistance with childcare costs may be a possibility.

In cases of late or non-payment of fees, the following procedure will be followed: on the 11th of each month, a late fee of \$25.00 will be added and a reminder will be sent to the family who has neither paid nor made other arrangements. If fees are not paid within five business days after that reminder is sent, the Director will contact by telephone or in person to inform the family that services will be discontinued until payment is received or satisfactory arrangements are made. Consistent or repeated late payment of fees will be grounds for discontinuation of services (i.e., removal of the child from the program). *Consistent or repeated late payment is defined as more than two within a calendar year.*

According to University policy, a fee of \$25.00 will be charged for checks that are returned due to insufficient funds.

Discontinuation of Services Policies

Withdrawal

A ***minimum*** of a thirty (30) day written notice of discontinuation of childcare is required from the parent or legal guardian prior to removing a child from enrollment in the Center. You will remain responsible for paying the Childcare Services Fee for the full 30 days after you provide notice regardless of the spot being filled with a new child. This is non-negotiable.

If your child attends the Child Development Center any day between the 1st through the 15th of the month, you will be billed for half a month. Children attending the 16th through the end of the month will be billed for a full month's tuition

Termination

The Center has the right to cancel or not extend a contract for future terms for any of the following reasons:

- Non-payment of childcare services fee, late payment fee, or late pick-up fee.

- A balance greater than \$0 at the end of an academic term (December 15, April 30 and July 31).
- Three cumulative late payments or returned checks.
- Failure to adhere to the policies and procedures of the Center included within this Handbook.
- More than three late departures in a contract term.
- Continued late arrivals or absences.
- Immunizations and physical records are not kept current.
- Failure to work with the program regarding developmental concerns.
- If the Center is unable to meet the individual needs of a child without jeopardizing the learning community and safety of the children and/or staff.
- Inappropriate behavior by the parent (as documented by the Director and/or teachers).

The Office of Student Affairs will issue a written notice of cancellation or non-extension of contract to families.

Calendar and Hours of Operation

Arrival and Departure

The Center operates from 7:30am-5:30pm Monday through Friday during the academic year and from 8:00am-5:00pm Monday- Friday during academic breaks as designated on page 15.

Families are required to sign their child in and out of the Center via their Procure app, wash their child's hands, AND be acknowledged both visually and verbally by a staff member at this time. All children 12 and under must be supervised by their family at all times when on CDC property. No child 12 and under may be left in a vehicle alone at any time.

All children should be dropped off at the Center, hands washed and ready to be engaged in activity/routines in their personal classroom by 9:00 am. This is important as it allows children to be able to follow the routine of the day with consistency.

If there is a need to arrive at the Center after 9 am, but before 11 am, for a medical or developmental reason (doctor's appointments, dentist, speech therapy.), permission must be obtained by an Administrator the business day before the late arrival.

Children may not arrive at school after 11 am as it is disruptive to the classroom.

If your child has medications (or other items that say “keep out of reach of children”) that need to be exchanged between partners while at the Center, they **MUST** be taken to the Director’s Office to be appropriately locked up for the safety of all children. If the Director is not present, any Lead Teacher may take possession of these items for the purpose of proper and safe storage.

There is no smoking cigarettes or vaping permitted on the premises of the CDC, including in the parking lot and vehicles on the CDC property.

Child Security

To create a more secure environment, children and families should enter the classrooms using the main entryway. Parents should connect with a Lead Teacher in each classroom to confirm drop-off or pick-up. Each family is given two free key cards to access the building. Additional and/or replacement cards are available to families for a cost of \$15 per card.

Adults are the only persons who should open doors or use key cards when entering, leaving, or moving about the Center. It is important that children are not allowed to handle the doors or exit the building without an adult. Families who allow their children to open doors will be first given a verbal reminder. If a second instance occurs, a written warning will come from the Director. If there is a third instance, the Center may terminate childcare services.

Only a parent or authorized person will be permitted to take your child from the Center. If someone other than authorized persons is picking up your child, please notify the Center by note or telephone. Please inform that person that picture identification will be required and checked.

Late Pick-Up

The CDC closes promptly at 5:00 p.m. during academic breaks or 5:30 p.m. during the academic year.

Families are expected to pick up their children and have **exited** the building no later than the closing times listed above. Families are required to notify the Center by Procure if they are not able to pick up their child before closing. The Center will charge a late pick-up fee of \$10.00 per child if an App State Staff member is required to be in the building after the closing hour for the first late offense. A second late pick up will result in a \$20.00 fee, and third late pick up will result in a \$30.00 fee. Invoices for late pick-up will be sent to families and payment should be remitted within a calendar week. If a family is late three times within a calendar year, the Center may terminate childcare services.

For children who are left at the Center 30 minutes after closing time, we will call the Department of Social Services if we cannot locate or communicate with the child's family or emergency contacts. To avoid this, please make sure you have placed an emergency contact or more than one phone number for yourself on your child's contact form and stay in contact with the Center should you find yourself running late.

The Center will Observe Break Hours (8:00 a.m. until 5:00p.m.) for the Following Dates:

- August 9-16, 2024 (Excluding August 12-13 which are closures)
- December 16-21 2024
- January 6-10, 2025
- May 9 - 26, 2024 (Excluding May 22-23 which are closures)
- July 1, 2025

Holidays

The CDC will observe the same Holiday Schedule as the University. The list of closure dates can be found on the University website under Human Resources within the University resources section. In addition, the Center will also observe a winter break closure. This break is typically two weeks. These dates are subject to change each year and will be posted in the annual contract for childcare services.

Staff Development Days

The Center will be closed for ten days to accommodate Professional Development Days. The dates will be listed in the Contract and posted on the App State CDC website. Reminders will be listed in Procure messages.

- August 12-13, 2024 Professional Development
- September 2, 2024 State Holiday
- October 14-15, 2024 Professional Development
- November 27, 2024 Professional Development
- November 28-29, 2024 State Holiday
- December 23 - 31, 2024 Winter Closure
- January 1, 2025 State Holiday
- January 2-3, 2025 Professional Development

- January 20, 2025 State Holiday
- March 10-14, 2025 Spring Break & Professional Development/ Staff Vacation
- April 18, 2025 State Holiday
- May 22-23, 2025 Professional Development
- May 26, 2025 State Holiday
- July 4, 2025 State Holiday
- July 5, 2025 Staff vacation; next calendar cycle

Emergency Preparedness Plan

Child Safety

In preparation for responding to an emergency, teachers practice monthly fire drills and quarterly weather and intruder drills. Infant staff practice non-responsive baby drills at least twice a year. All rooms are equipped with emergency backpacks that include family contact information and simple first-aid kits.

Vehicles must be parked and turned off if on the property during an evacuation drill.

Minor Accidents or Injuries

Minor accidents are those that fall in the range between “needing a band-aid” to “needing medical attention.” Each classroom is equipped with first aid supplies. The teachers in each classroom are trained in First Aid and CPR and will respond to minor cuts, scrapes, bumps, and bruises appropriately. The teacher will put an accident report in the child’s cubby when such injuries occur and parents need to sign and return the form. If the accident appears minor, but has potentially serious consequences (such as a fall and bump on the head), a teacher will call the parent and monitor the child for possible effects during the remainder of the day. Teachers are also trained to use universal precautions, including gloves and proper cleaning and disposal procedures, for any accident or illness that involves bodily fluids (blood, urine, feces, and vomit).

Major Accidents or Injuries

All teachers have certifications in CPR and First Aid and these certifications are maintained. In the event of any injury involving possible concussion, severe bleeding, stopped breathing, broken limb, ingestion of poisonous substance,

electric shock, or severe allergic reaction, the following procedures will be followed:

1. The teacher in charge will attend to the injured child and follow necessary emergency first aid procedures as appropriate.
2. A co-teacher will dial 911 to request assistance. The co-teacher (or a student employee) will then speak with an Administrator to let them know what is happening. The Administrator will contact the child's family.
3. Remaining staff will attend to the other children.
4. The staff member who witnessed the accident will complete an accident report for the Director to review, file in the Incident Report Log and submit an email summary to the NC Division of Child Development licensing consultant.

Emergency Preparedness

An extensive Emergency Preparedness Plan has been developed to comply with licensing regulations. All teachers are trained on this plan at the beginning of the fall and spring semesters. This plan includes how to assess emergencies, the process and location for evacuating and transporting children in an emergency, collaboration with App State Emergency Management when informing families and the process for planning the reunification of the family after an emergency. It is important that parents do not come to the Center during an emergency situation for their safety and the safety of others. App State Emergency Management will assist in clarifying the procedures to observe during an emergency. There are designated evacuation locations on our campus, in our neighborhood, and out of town. Children will be transported to these locations by the App State Safe Ride Vans when deployed by App State Emergency Services.

Severe Weather

[When App State is closed for severe weather the CDC is also closed. App State closures will be posted on the main App State website \[www.appstate.edu\]\(http://www.appstate.edu\). We wish we could give families as much notice as possible, but the timing of closures and release of this information is beyond our control. The safety of children is our number one priority. During times of delayed openings the CDC may open 30 minutes prior to the University opening to allow families to drop off their children and report to campus on time for classes. In cases of early releases the Center will stay open 30 minutes past campus closure times.](#)

Parent Communication

Every effort will be made to keep parents up to date in a timely manner in all emergencies. We will follow University protocol at all times. Parents will be notified by either the Center Directors, App State Emergency Management or

the division of Student Affairs Family Assistance Center based on the type of emergency encountered.

**** Please DO NOT attempt to reach CDC staff during an emergency! ****

It is imperative that staff be able to supervise the children and coordinate with emergency personnel. Distracting staff during an emergency adds to the chaos and can be another potential threat to the children's safety.

Reporting Child Abuse and Neglect

All employees of the App State Child Development Center are considered mandated reporters of the suspicion of child abuse or neglect by North Carolina law. We will comply with all state requirements when advocating for the safety of children. Reporting such cases to the Department of Social Services is not made as an accusation, but rather a request that the appropriate agency check on a child. In most cases, concerns would be discussed with parents before (or at the time of) making such a report. We want to support a healthy and safe community for children by helping families access the support they need.

Tobacco Free Policy

Purpose / Belief Statement

We, the App State Child Development Center, understand that the use of tobacco products on childcare premises, in vehicles used to transport children, or during any off-premise activities is an environmental hazard and detrimental to the health and safety of children, staff, and visitors.

Background

Exposure of children to environmental tobacco smoke is associated with increased rates of lower respiratory illness and increased rates of middle ear effusion, asthma, and sudden infant death syndrome. Exposure during childhood may also be associated with the development of cancer during adulthood.

Applicable NC childcare Laws / Rules

N.C. child care Rule 10A NCAC 09 .0604 (h)(i)(j) Safety Requirements for childcare Centers states that:

- Children shall be in a smoke-free and tobacco-free environment. Smoking and the use of any product containing, made, or derived from tobacco, including but not limited to e-cigarettes, cigars, little cigars, smokeless tobacco, and hookah is not permitted on the premises of the

childcare facility, in vehicles used to transport children or during off-premise activities. All smoking materials shall be kept in locked storage.

- Signage regarding the smoking and tobacco restrictions shall be posted at each entrance to the facility and in vehicles used to transport children.
- The operator shall notify the parent of each child enrolled in the facility, in writing, of the smoking and tobacco restrictions.

Application

This policy applies to all children, families, visitors, volunteers, and staff of the App State Child Development Center.

Procedures / Practice

Smoking and the use of tobacco products are prohibited at all times:

- On the premises of the childcare facility.
- In vehicles used to transport children.
- During any off-premise activities sponsored by our facility.

Signs are posted at each entrance to the facility and in vehicles used to transport children. The signs are posted in a manner and location that adequately notifies families, visitors, volunteers, and staff of the tobacco-free childcare facility policy.

Communication

Our facility will review this policy with parents/guardians, volunteers, and staff in writing and verbally at childcare-sponsored or related events. Copies of the policy are in the handbook. We may provide materials and information provided by the local health department.

*Staff**

- All current staff members and newly hired staff will review the Tobacco-Free Policy before providing care for children.
- Staff will sign an acknowledgement form that includes the individual's name, the date the facility's policy was given and explained to the individual, the individual's signature, and the date the individual signed the acknowledgment.
- The childcare facility shall keep the signed Tobacco-Free Policy staff acknowledgement form in the staff member's file.

Parents / Guardians

- A copy of the policy will be given and explained to the parents/guardians of newly enrolled children on or before the first day the child receives care at the facility.
- Parents/guardians will sign an acknowledgement form that includes the child's name, date the child first attended the facility, date the operator's

policy was given and explained to the parent, parent's name, parent's signature, and the date the parent signed the acknowledgement

- The childcare facility shall keep the signed Tobacco-Free Policy parent acknowledgement form in the child's file.

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

Enforcement

Parents and visitors using tobacco products will be asked to refrain while on the childcare premises or to leave the premises.

Consequences for employees who violate the tobacco use policy will be in accordance with personnel policies.

Definitions

- "Premises" – the entire childcare building and grounds including but not limited to natural areas, outbuildings, dwellings, vehicles, parking lots, driveways, and other structures located on the property.
- "E-cigarette" – Any electronic oral device that employs a mechanical heating element, battery, or electronic circuit regardless of shape or size and that can be used to heat a liquid nicotine solution or any other substance, and the use or inhalation of which simulates smoking. The term shall include any such device, whether manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, e-pipe, or under any other product name or descriptor.
- "Off-premise activity" – any event sponsored by our facility that is not on the childcare facility premises, including but not limited to field trips and educational or entertainment activities.
- "Smoking" – The use or possession of a lighted or heated cigarette, e-cigarette, cigar, little cigar, pipe, hookah or any other lighted or heated tobacco product containing, made, or derived from tobacco and intended for inhalation in any manner or in any form.
- "Tobacco product" – Any product containing, made or derived from tobacco that is intended for human consumption, whether chewed, smoked, absorbed, dissolved, inhaled, or ingested by any other means, including but not limited to cigarettes, e-cigarettes, cigars; little cigars, hookah, snuff, snus, and chewing tobacco. A tobacco product excludes any product approved by the United States Food and Drug Administration for sale as a tobacco cessation product, as a tobacco

dependence product, or for other medical purposes and is being marketed and sold solely for such an approved purpose.

Tobacco Cessation Resources

Our facility will consult with the local health department or other appropriate health and community-based organizations to provide staff and administrators with information and access to treatment programs and services to support them in complying with this policy. The North Carolina Quitline 1-800-QUIT-NOW (1-800-784-8669) offers free coaching sessions, helps develop a plan to quit, provides reading materials, and offers counseling. See <http://www.quitlinenc.com>.

References

- NC DHHS Tobacco Prevention and Control Branch, <http://tobaccopreventionandcontrol.ncdhhs.gov/smokefreenc/>
- Caring for Our Children 3rd Edition, Standard 3.4.1.1: Use of Tobacco, Electronic Cigarettes, Alcohol, and Drugs <http://cfoc.nrckids.org/StandardView/3.4.1.1>
- Caring for Our Children 3rd Edition, Standard 9.2.3.15: Policies Prohibiting Smoking, Tobacco, Alcohol, Illegal Drugs, and Toxic Substances <http://cfoc.nrckids.org/StandardView/9.2.3.15>

This policy is reviewed at the beginning of each contract cycle.

Parking

Location

Parking for parents is located in front of the building. Please drive slowly and use caution when entering and leaving the driveway. Small children are very hard to see from behind the wheel.

Child Safety

No child under 12 may be left unsupervised in a vehicle during drop-off or pick-up time. As a licensed center for children 12 and under, any child 12 and under must be seen and heard at all times by an appropriate adult when on CDC property. Please call the Center if you need assistance getting to and from your vehicle. Temperatures inside a car can rise to dangerous levels when the outside air temperature is only 70 degrees. **Do not leave your motor running when not in the vehicle; cars must be put in park and turned off if an adult is not sitting in the driver's seat.**

In North Carolina, children are required to use a car seat or booster seat until they are at least 8 years old or 80 pounds. Children being transported to school in a vehicle must arrive secured in a car seat. Children will not be permitted to leave the premises in a vehicle without a secured car seat.

Drivers who speed, appear reckless, or leave their car running will be issued one warning from the Director. Drivers who exhibit a second driving concern will be asked to park in the lower parking lot for the continued safety of children, families, and staff.

Curriculum

Creative Curriculum

The Creative Curriculum is a state-approved curriculum that allows for the flexibility of children's learning to be tailored to their individual interests. The creativity of teachers is captured across developmental areas to ensure a balanced offering of activities for young children. The lesson plan format used in our twos-through preschool room comes from Creative Curriculum.

Emergent Curriculum

Emergent Curriculum occurs in a play-based environment that includes the individual interests of children and teachers. Learning is co-constructed by children and adults throughout the day. This engagement during self-directed play allows for authentic learning experiences. Helping children become lifelong learners starts with increasing their intrinsic motivation by observing and responding to their ideas. Curriculum is not left to unknown experts outside of the classroom who present ideas in a box.

Sources of exploration for children occur when teachers intentionally plan their classroom and activities around what children are interested in (which changes on a daily/weekly/monthly basis). Ideas come from the interests of children and teachers in response to things that happen during the day or changes to their environment. We respect that children are curious about the things they need to know and learning is self-directed and open-ended.

Supporting children's approaches to learning and their need to act on and understand the world around them is essential to developing the education of young children. This style of teaching goes beyond rote memorization and the narrow scope of academics and school readiness. Learning is the active engagement of a child's mind. These are 21st century learning skills for young children.

North Carolina Foundations for Early Learning

Commonly referred to as *Foundations*, this document was developed by the NC Foundations Task Force, compiled of an inter-agency team from the

Division of Child Development and Early Education, NC Department of Health and Human Services, the Office of Early Learning/NC Department of Public Instruction, the Human Development and Family Studies Department of UNC-Greensboro, and Frank Porter Graham Child Development Institute UNC-Chapel Hill. Foundations was revised in 2011 as a single document that describes children's development and learning from birth to age five.

The guiding principles of Foundations revolve around the premise that learning happens on a continuum, each child is unique, and there are predictable patterns of development. All children are active learners. Learning is culturally-based and rooted in relationships. The domains of development are integrated and there are many influences on development.

Foundations presents five domains of development that include:

1. Cognitive Development
2. Approaches to Play and Learning
3. Emotional and Social Development
4. Health and Physical Development
5. Language Development and Communication.

The App State CDC uses Foundations to improve teachers' knowledge of child development, guide teachers' plans for implementing curriculum, establish goals for children's development and learning that are shared across programs and services and inform families of age-appropriate expectations for children's development and learning.

This document is available online at

http://ncchildcare.nc.gov/pdf_forms/NC_foundations.pdf

Developmentally Appropriate Practice

The National Association for the Education of Young Children (NAEYC) is the largest professional organization in early childhood education. It is the leader in research and education in our profession. NAEYC defines Developmentally Appropriate Practice as "an approach to teaching that is grounded in the research of how young children develop and learn and what is known about effective early education. Its framework is designed to promote young children's optimal learning and development."

There are three core considerations with developmentally appropriate practice.

1. Knowing about child development and learning. Knowing what is typical at each age and stage of early development is crucial. This knowledge, based on research, helps us decide which experiences are best for children's learning and development.
2. Knowing what is individually appropriate. What we learn about specific children helps us teach and care for each child as an individual. By

continually observing children's play and interaction with the physical environment and others, we learn about each child's interests, abilities, and developmental progress.

3. Knowing what is culturally appropriate. We must make an effort to get to know the children's families and learn about the values, expectations, and factors that shape their lives at home and in their communities. This background information helps us provide meaningful, relevant, and respectful learning experiences for each child and family.

The App State CDC uses the research and publications of NAEYC to inform its teaching practices and support of children and families. For more information on NAEYC please visit www.naeyc.org

Primary Caregiving

Primary Caregiving is an approach to care that values the needs of our youngest children to develop secure attachments. Each infant or toddler will be assigned a full-time primary caregiver. This teacher will be responsible for meeting the primary needs of the child and family. It is much more effective for a teacher to intimately learn and understand the needs of a few children than a large group. It is more beneficial for a child to be valued and understood as an individual and have continuity of care. The primary caregiver will feed, change diapers/potty, learn, comfort, play with and intimately care for their primary care children. This is never to the exclusion of the needs of other children, rather assistance is given under the guidance of the knowledge of the primary caregiver.

Meals and Snacks

Bottles and Breastfeeding

Fed is best! All parents are welcome to come to the Center to feed their children. This can be done in the classroom or library, whichever is most comfortable to you. All bottles need to be premade and all components of the bottle (lid, base, etc.) need to be labeled with your child's name. Each bottle must be dated. All bottles and food items are sent home at the end of the day. Breast milk may be stored in the freezer. The Center uses electronic bottle warmers to heat bottles. Once a bottle has been set out for use it is discarded after one hour. Unused bottles may not be refrigerated because of the risk of contamination. It is important that families provide written feeding schedules for the teachers and keep them updated regularly as infants progress to larger quantities of feedings, adjusted times for feedings, move from bottles to foods, and expand into table foods. Children who are younger than six months of age and are eating solid foods need to have a note of approval from their child's pediatrician on file.

For more information on breastfeeding and childcare please review the following documents [Breastfeeding: Making it Work](#) and [Breastfeeding and childcare: What Moms Can Do](#)

AM & PM Snacks (and lunch in the **KNOLL** building)

The Haven building does not have a commercial kitchen or cook on staff. For this reason, all families must sign a Nutritional Opt Out Form. The Center provides morning and afternoon snacks for children. Menus are posted on the Parent Information Board, on each refrigerator, in each classroom and on ProCare. Efforts are made to ensure they are healthy and water is served for drinking. Families may pack their own snacks if they prefer (allergies, illness, preference) and need to inform the teacher each day when providing such snacks. Please clearly label the container AM or PM Snack so there is no confusion as to which foods are meant to be served at which times.

Lunch in the **HAVEN** building

Each classroom has its own designated refrigerator to store lunchboxes. Children are not allowed access to any kitchen spaces in the center. Please drop your child off in their classroom prior to dropping off the lunch in the kitchen. *Every lunch box and water bottle must be clearly labeled with your child's first/last name and the date every day* (luggage tags work well for this application).

Please do not send foods that need to be heated in microwaves. *We do not heat up food for children 16 months and older or heat food in plastic containers.* If you would like your child to eat a warm lunch, please heat it up at home and pack it in a thermos. Warmed foods labeled in a thermos can be stored in your child's cubby. Heated food from home must be in a container that is able to maintain the food's temperature until lunch time. Families will also be required to sign a waiver for hot foods as required by the health department.

Families must pack a nutritious lunch for your child which meets USDA Meal Patterns for children in childcare. This includes:

- either water or milk to drink
- a protein
- a vegetable
- a grain/carbohydrate
- and a second vegetable OR a fruit.

Avoid cookies, chips, chocolate, or other sugary foods as *they will not be served to the children*. All foods need to be packed with already cut up, bite-sized pieces. Some foods are considered to present a high choking risk and need to be cut, especially whole grapes, cherry tomatoes and hotdogs (cut lengthwise).

Avoid packing foods that have high potentials for choking for children under three (dried fruits, popcorn, uncut grapes). Eating these foods at home, in a smaller environment, where supervision is more individualized is a better place to enjoy these items.

Teachers are required to sit at the tables and eat with children while providing close supervision. Meal times are a social time where we want to model good eating habits and manners while talking quietly with children. We do not force children to eat or use food as a reward or punishment.

USDA Nondiscrimination Statement

For all other FNS nutrition assistance programs, state or local agencies, and their subrecipients, must post the following Nondiscrimination Statement:

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at:

<https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

2. fax:
(833) 256-1665 or (202) 690-7442; or
3. email:
program.intake@usda.gov

This institution is an equal opportunity provider.

Special Occasion Treats

A birthday is a special time to celebrate! If you would like to share a treat with your child's class during a special occasion *you need to discuss this with the Lead Teacher at least three days in advance*. All foods must be store bought, **nutritiously dense**, and include the ingredients list on the label. We choose to serve nutritious items at school to help fuel healthy minds and healthy bodies. The American Academy of Pediatrics recommends limited sugar intake for young children. By serving nutritious foods at school, families are afforded flexibility for if and when they share sugary treats with their children.

Allergies

Families must notify the Center if a child has or develops food allergies. We will request an Allergy Action Plan be completed by the child's pediatrician and allergy information will be posted in the kitchen and the classroom. If your child requires rescue medications (epi-pens, asthma inhalers, etc.) they will need to be provided to the Center and a written authorization to administer medication must be completed on center-prescribed forms. *Parents are responsible for reviewing the weekly menu and providing food substitutes as needed.*

Toileting

Communication

You must talk with your child's teacher first before bringing in underwear for a child to wear instead of diapers. Begin the toilet-learning process at home (a long weekend or vacation is a good time to start!). We want to support each other as children learn this process. This is a natural step in a child's development. Children are encouraged, but not forced, to use the potty. The goal is for the child to develop control of their body and not for adults to time the bodily functions of the child and catch them in the act.

Individual Readiness

Learning to use the potty involves multiple steps that a child has to master. Are they able to stay dry for long periods of time? Do they recognize when they are going? Do they prefer to wear a dry diaper? Are they able to manage taking off and putting on their own clothes with little support? Do they show a desire to use the potty and imitate others?

We encourage the wearing of cotton underwear. Pants should have elastic waists that a child can easily manage. Please send in several full changes of clothing for your child. We must be careful to follow superior sanitation regulations and once you begin this process we want to be as accurate as possible. Soiled clothing will be kept in a bag that is not accessible to children and sent home for laundering. *If your child has two accidents during the day, we may ask that we stop the process and try again at a later date.* There are many factors to take into consideration that might affect the success and timing of this process (moving into a new house, arrival of a sibling, relationships at home, etc.).

A child who can do the following is a child ready to begin the potty learning process:

- ❖ Stay dry for an hour or longer at a time.
- ❖ Be able to tell or sign to the adult they have to go potty BEFORE urination or defecation.
- ❖ Be able to pull down their underwear and pants and pull them back up without assistance.
- ❖ Be able to wipe themselves after using the toilet; teachers will assist for additional cleanliness.
- ❖ Be able to resume pre-potty activity without additional direction.
- ❖ Be able to postpone going momentarily if they must wait for someone who is in the bathroom or if we are outside.

How we support potty learning

- ❖ We read books about potty learning and hygiene with children.
- ❖ We encourage children to sit on the potty during natural transition times.
- ❖ We encourage self-help skills with dressing and hand washing.
- ❖ We communicate frequently with families about their child's potty progress.

Expectations

Potty learning has the potential to become a stressful time for children, families, and professional caregivers. Based on nationally recognized best practices for early care classrooms and sanitation regulations, there are some things that we do not engage in during potty learning at the center. Teachers are caring for a group of children and must have the time and attention to focus on the group as a whole. Teachers are unable to solely focus on potty learning a child as it is detrimental to the needs of the classroom.

- ❖ We do not use rewards for using the toilet.
- ❖ We do not use timers to prompt children to potty. Children are asked to potty when it is natural for the classroom schedule and not according to a clock.
- ❖ Children who refuse to sit are not forced to sit as we respect children's autonomy.
- ❖ We don't limit food or drinks to only be given at certain times.
- ❖ We are unable to clean out poopy underwear. We will bag pee-soaked underwear and return it to the parent at the end of the day but we will not do this with soiled underwear. We must dispose of that immediately into the garbage. We don't do laundry of any soaked or soaked or soiled clothes. They are bagged, put outside, and returned to the parents at the end of the day.

Naptime

Infant Safe Sleep Policy

Sudden Infant Death Syndrome (SIDS) is the unexpected death of a seemingly healthy baby for whom no cause of death can be determined based on an autopsy, an investigation of the place where the baby died and a review of the baby's medical history.

childcare providers can maintain safer sleep environments for babies that help lower the chances of SIDS. North Carolina law requires that childcare providers caring for children 12 months of age or younger, implement a safe sleep policy, share this information with parents and participate in training.

In the belief that proactive steps can be taken to lower the risks of SIDS in childcare and that parents and childcare providers can work together to keep babies safe while they sleep, this facility will practice the following safe sleep policy:

Safe Sleep Practices

1. All childcare staff working in this room, or other childcare staff who may potentially work in this room will receive training on our Safe Sleep Policy.
2. Infants will always be placed on their backs to sleep, unless there is a signed sleep position medical waiver on file. In that case, a waiver notice will be posted at the infant's crib and filed in the infant's file.
3. The American Academy of Pediatrics recommends that babies are placed on their back to sleep, but when babies can easily turn over from the back to stomach, they can be allowed to adopt whatever position they prefer for sleep.

4. We will follow this recommendation by the American Academy of Pediatrics. However, childcare staff can further discuss with parents how to address circumstances when the baby turns onto their stomach or side.
5. Visual checking sleeping infants. Sleeping infants will be checked daily, every 15 minutes, by assigned staff. The sleep information will be recorded on a Sleep Chart. The Sleep Chart will be kept on file for one month after the reporting month. We will be especially alert to monitoring sleeping infants during the first weeks the infant is in childcare. We will check to see if the infant's skin color is normal, watch the rise and fall of the chest to observe breathing and look to see if the infant is sleeping soundly. We will check the infant for signs of overheating including flushed skin color, body temperature by touch and restlessness.
6. Steps will be taken to keep babies from getting too warm or overheating by regulating the room temperature, avoiding excess bedding and not over-dressing or over-wrapping the baby.

Safe Sleep Environment

1. Room temperature will be kept between 68-72 degrees and a thermometer will be kept in the infant room.
2. Infants' heads will not be covered by blankets or bedding. Infants' cribs will not be covered with blankets or bedding. We may use a sleep sack instead of a blanket.
3. No bedding, pillow, bumper pads, toys, stuffed animals, etc. will be used in cribs.
4. Pacifiers will be allowed in infants' cribs while they sleep.
5. A safety-approved crib with a firm mattress and tight fitting sheet will be used.
6. Only one infant will be in a crib at a time, unless we are evacuating infants in an emergency.
7. No smoking is permitted in the infant room or on the premises.
8. All parents/guardians of infants cared for in the infant room will receive a written copy of our Center Safe Sleep Policy before enrollment.
9. To promote healthy development, awake infants will be given supervised "tummy time" for exercise and for play.

All infant staff will participate in *Responding to an Unresponsive Infant* practice drills twice each year.

Toddlers / Twos / Threes / Preschool

Young children are offered nap time where they are assigned their own cot. Parents are responsible for providing a small blanket for their child's cot. Sheets and blankets will be laundered weekly. All children have different body

rhythms and the length of rest needed varies greatly. As children get older their need for mid-day naps decreases. We are required by child care licensing to offer at least a 30 minute rest period to all children. If after thirty minutes children no longer need rest they are allowed to engage in quiet activities on their cots or in areas of the room where they will not disturb the needs of sleeping children.

The CDC does not prevent tired children from napping. If a child is falling asleep, we will prepare their sleeping space and allow them to rest or sleep. We do not wake up children who are sleeping.

Daily Schedules

Teachers

The App State CDC typically operates ten hours a day. Teachers work a “flexible” schedule that allows for several Lead Teachers to be available during opening and closing during the regular academic year. Several Lead Teachers will work 7:15 a.m. until 4:15 p.m. while the other leads will work 8:30 a.m. until 5:30 p.m. Student workers will attend the children throughout the day in alternating shifts to ensure ratios are always met during hours of operation. Children and families that arrive before opening hours or leave the building after closing time are impeding on teacher time.

Teachers need time to start their day and prepare their classrooms for the morning. Teachers deserve to end their work day in a timely fashion. Parents may not enter the building before 7:30 am during academic schedule opening times and 8:00 am on academic breaks. Repeated early arrivals or late departures from families may result in contract for care termination.

Sample Classroom Schedule

Every day will be unique depending on the age and needs of the children.

* Actual classroom schedules are posted in each classroom.

Infants are on an individual schedule for all needs.

Diapers are checked every 2 hours and changed as needed.

DAILY SCHEDULE OF ACTIVITIES*

7:30 – 10:30	Free Choice Centers
9:15 – 9:45	Morning Snack
10:30-11:00	Small or Large Group Time Circle Time/Story Time/Songs & Finger play Games/Role Plays/Etc.
11:00 – 12:00	Outdoor/Gross Motor Activities Prepare for Lunch Prepare Cots for Rest

12:00 – 12:45	Story Time/Wash Hands/Bathroom Lunch Clean Up/Bathroom Story/Tape or CD
12:45 – 2:45	Rest Time
2:45– 3:00	Self-Help Skills (fold sheet/put on socks/shoes, etc.) Bathroom/Wash Hands
3:00-3:30	Afternoon Snack
3:30 – 4:30	Outdoor Play
4:30-5:30	Free Choice Center Art/Manipulatives/Share Time
5:10 – 5:30	Clean Up Classroom; Free Choice; Prepare to Leave

Items Your Child Needs to Bring

(Be sure that all items are clearly labeled with your child's first and last name.)

Infants

Please bring: lunch box with pre-made bottles, baby foods, infant-sized eating utensils, diapers, wipes, gloves, pacifiers if your child uses one, sunscreen (for children 6 months and older) and a complete change of clothes. We DO NOT offer storage areas for car seats or diaper bags.

Toddlers / Twos

Please bring: a complete change of clothes, blanket for cot, pacifiers if your child uses one, diapers, wipes, gloves, sunscreen, lunch box, and drink container.

Preschool

Please bring: a complete change of clothes, blanket for cot, diapers (if needed), wipes, gloves, sunscreen, lunch box, and drink container.

Outdoor Play

Fresh air and exercise are important for children's healthy development. Exploring nature and gross-motor exercise are a part of our daily curriculum. Children who are healthy enough to come to school are healthy enough to participate in outdoor play.

Appropriate Dress

Children go outside for at least two hours every day and mountain weather changes rapidly. Please be sure that your child has adequate clothing to enjoy outdoor play in the cold, heat, and even light rain. Dressing in layers is the best. We go outside twice a day except in severe weather (wind chill factor of 15 degrees Fahrenheit or below; heat index of 90 degrees Fahrenheit or above). Your child's name should be inside every article of clothing and footwear so we can easily identify the proper owners. It is stressful for children to think that someone else is wearing their things (because they have the same items at home).

Sun Protection

It is important to protect the skin of young children from the harmful effects of the sun. Please feel free to send in sun shirts, sun hats, sunglasses and sunscreen. Sunscreen may be brought in to be applied at school. We advise parents to apply sunscreen to their children before coming to the Center. Sunscreen will be applied at school only after naptime. Sunscreen will be applied in accordance with the label instructions and with a *Permission to Administer Sunscreen* form signed and dated by the parent. Be sure your child's first and last name is on the container. Sunscreen sticks are the most convenient way to apply sunscreen. Aerosol lotion/spray on sunscreen is not allowed in accordance with childcare licensing.

Wellness / Illness

Immunizations

Per NCDCDEE licensing requirements, the CDC must have a copy of each child's immunizations on file. Families are responsible for providing the Center with a copy of immunization records each time they are updated.

Topical Lotions

The only lotions the Center will apply to children are sunscreen and diaper creams. These must be accompanied by a center-provided permission slip signed by the parent that includes specific times to administer lotions. Please do not write anything over or cover the written directions on the containers. All lotions will be applied as directed on the label or as prescribed in writing by a physician. Teething gels cannot be given by staff, but families are welcome to administer them during the day as needed. Body lotions, oils and chapsticks are not permitted at the CDC.

Medications

The Center will only administer rescue medications (epi-pens, inhalers, etc.) to children with a written permission slip from the parent on center-provided medication forms. Medications must be in their original container with a clear pharmacy label. The medicine must be given to the teacher in charge for proper storage with a lock--never to be placed in a child's cubby or left in a diaper bag. A record of the amount and time of each dose administered will be completed.

If your child requires other medications (pain relievers, antibiotics, etc.) please make arrangements to come by the Center and administer necessary medications to your own child.

Medications, vitamins, and/or supplements cannot be mixed in food or drink that a child is consuming at the Center.

Allergies

Allergies must be documented by a medical professional. This document as well as a Medical Action Plan must be provided to the Center and kept in the child's file and emergency backpacks.

Exclusions from Childcare

Children ages 24 months and younger may not return to school until 12 hours after receiving an immunization. Reactions to immunization are rare but do happen. We serve children in a group setting and the safest place for a young child after immunizations is in one on one care for careful observation.

When a child's needs are not able to be met within the group care setting of a childcare program, the child will be taken to the Director's Office and the child's family will be called to come and pick the child up. A parent receiving this type of call needs to arrange to have their child picked up within the hour.

Children who have a fever or symptoms of contagious disease (such as diarrhea, vomiting, eye redness, eye discharge, scabies, pinworms, lice, etc.), or children who have been exposed to a contagious disease among family members, should not be at the Center. Depending on the nature of the illness, a doctor's statement may be necessary before a child is allowed to return to school. Parents should notify the Center when a child will be absent due to illness.

A child must be fever free for a minimum of 24 hours, without the use of fever reducing medications, before returning to the Center and must wait a minimum of 24 hours after the last episode of diarrhea or vomiting before returning to the Center.

A physician's note *does not* override NC DCDEE health

guidelines listed below.

Below are the guidelines from the North Carolina Division of Child Development and Early Education regarding health conditions requiring that children be excluded from care:

- Fahrenheit temperature over 100 degrees Fahrenheit underarm or 101 degrees orally or temporally
- Sudden onset of diarrhea characterized by increased number of bowel movements compared to child's normal pattern and with increased stool water
- Have a red eye with white or yellow eye discharge
- Have scabies or lice. We enforce a nit-free policy before a child may return to the Center.
- Have known chicken pox or a rash suggestive of chicken pox
- Have tuberculosis until a health professional states that child is not infectious
- Have strep throat
- Have pertussis, until 5 days after appropriate antibiotic treatment has been in place
- Have hepatitis A virus infection, until 1 week after onset of illness or jaundice
- Have impetigo

Families of children with chronic symptoms (such as nasal discharge, nose or throat irritation, coughing, sneezing, enlarged tonsils, or any rash) should bring a physician's statement that the condition is not contagious on the same day that the child returns to the Center.

When the Center receives a report that a child in the program has contracted a communicable disease, the staff will notify the families and provide information about the incubation period, symptoms to watch for, etc.

Guidance

The App State CDC values the journey children take as they learn appropriate social skills and behavioral expectations. These skills need to be intentionally taught and practiced before children are able to successfully implement them. The teachers at our Center are here to provide guidance to children as they navigate this journey. The strategies used to guide children vary with their developmental level, language and temperament. Respect is expected among all individuals at the Center; including children, parents, teachers, aides and volunteers.

When children receive positive, non-violent and understanding interactions from adults and others, they develop good self-concepts, problem-solving

skills and self-discipline. Corporal punishment is not administered or allowed at the Center by staff or families. *We will not deny food or rest as a form of punishment or discipline. We do not relate discipline to eating, resting or sleeping.*

The guidance practices of the App State Child Development Center are:

- Modify Classroom Environments
 - The goal is to prevent behavior issues *before* they occur.
 - Provide ample materials and duplicates of favorite toys.
 - Provide quiet and active play areas within every room.
 - Minimize the amount of time children have to sit together in large group activities or wait to do something.
- Using Positive Statements
 - Let children know our expectations and what we want them to do.
 - “Use your walking feet” when a child runs inside (instead of “no running”).
- Avoid Using “no”, “don’t” or “stop” as the First Words of Guidance
 - These words are rarely used and only to protect the safety of children or get the child’s attention (you see a child getting ready to bite but cannot move fast enough to stop it).
- Redirection (especially with infants and toddlers)
 - The child is given the opportunity to change their behavior by engaging in a more appropriate activity, such as (“You may throw balls into the basket” when they are throwing balls around the room).
- Modeling Appropriate Behavior
 - Teachers use intentional words to describe positive behaviors and model good manners: “Please pass me the pitcher of water” or “Thank you for helping pick up the cars” or “I’m sorry I bumped into you.” Children learn by hearing and seeing our expectations demonstrated for them.
 - Use quiet voices when talking with children.
- Acknowledge Positive Behavior
 - We catch children being good! “You worked hard on that drawing and shared markers with your friends!” or “When you put the cars away we know where to find them the next time we want them.”
- Ignore Minor Misbehaviors
 - We remember that children are practicing social skills and won’t be perfect all of the time.
- Offer Choices
 - This helps children follow through on expected behavior by letting children choose how (not whether) they will respond to a limit.
 - “It is time to clean up. Do you want to pick up the large blocks or the small ones?”

- Using Time-In
 - Time-In involves removing a child from the group to be under the direct visual and verbal guidance of a teacher. “You are having a hard time remembering the rules on the slide. I need you to come take a break with me while we watch what the other children are doing. See Matthew going down the slide feet first? He is having fun and being safe. See Jenni sitting on her bottom on the slide? She is having fun and being safe. Do you think you are ready to try that?” After a short break from the inappropriate behavior, while given positive reminders, the child is able to rejoin the activity to practice the appropriate behavior.
- Use Natural and Logical Consequences
 - This helps young children experience the reality of their behavior and see the connection between their actions and the results.
 - Natural = “When you forget to put a smock on, you get paint on your shirt.”
 - Logical = “Oops, you spilled your water, get a towel to clean it up.”
- Encouraging Problem-Solving and Negotiation Skills (for preschool-aged children 3-5 years old) by assisting children in bringing them together to discuss an issue by using the following steps:
 - Acknowledge the emotion. “I see you are crying. What happened? Tell (other child’s name) how that made you feel.”
 - Calmly ask the children “what” happened. We avoid asking “why” because young children often can’t often express this answer and it evokes shame.
 - Reflect what the children have shared in plain language. “You both wanted the truck.”
 - Ask the offending child how else they could have gotten the item (truck) instead of using the inappropriate action (hitting). “If you wanted the truck, what else could you have done to get it? Hitting hurts.”
 - Acknowledge their potential solutions or give them the solution if they don’t have one. “Yes, you could wait your turn” or “You could ask them for a turn with the truck when they are done.”
 - Ask the offending child to ask the other child what would make them feel better. “What would make you feel better?” Then help them follow through with the other child’s request whether it is giving a hug, drawing a picture, getting them ice or a glass of water or finding somewhere else to play.
 - We don’t encourage saying “I’m sorry” because children are usually not sorry. The inappropriate action was just an attempt to get a need met beyond their communication level. Teachers do, however, model saying “I’m sorry” to children when appropriate. This is an intrinsic emotion that is learned by example. “I am sorry

you were hit when he wanted that truck. He's going to ask for a turn with words next time."

- Offer Renewal Time
 - When a child is upset (for whatever reason- stress from change at home, fatigue, personality conflicts or frustration with developmental abilities) and needs a chance to withdraw from a situation to calm down and/or prepare to re-enter the routine or activity, they will be offered a comfortable place within the classroom to regain composure and engage in a quiet activity. This approach helps children learn to control their feelings and behaviors. It also allows them to come back with a different frame of mind or renewed energies, which is teaching them self-control.
- Gain Assistance from the Director
 - The Director may be called to enter the classroom to model guidance techniques.
 - Each child's behavior issues need to be considered and the "best practice" taken. This might include taking the child for a walk, bouncing on a mini-trampoline or being provided a quiet space in the office to unwind with an activity.

How does this look in practice? We have explored typical situations which arise in childcare settings and how we might respond, taking into account individual children's temperaments and abilities, along with our own awareness of child development, our own implicit bias, and utilizing self-reflection on our words and actions with children. The goal is guidance- how to help support children in understanding routines and expectations in a loving, supportive way in which children build on their own skill set and develop mastery of their own actions and self-regulation.

Child's Behavior	Teacher Self-Check	Validate Child's Feelings / Goal / Desire and Explain the Rule	Partner for Joint Problem-Solving (with children over 2 ½)
Refuses to stop doing something you've asked her to stop, such as throwing a ball in the classroom.	Acknowledge your child's desire to throw, and remember that she isn't doing it on purpose to drive you crazy.	"I know you love throwing the ball because it's so much fun. But there is no throwing a ball in the classroom. It can be dangerous. The ball could hit someone or break something."	Brainstorm other ways your child can play with the ball. If it's valid, use the child's idea. If not, offer your ideas. For example, she can go outside to play with the ball, or she can stay inside if she throws the ball in a basket but not at people.

Won't cooperate with a transition, such as to stop playing to clean up or move to another activity.	Recognize that transitions are hard for young children. They need time to adjust and empathy and support to cope.	"I know it's hard to stop playing, but the timer has gone off. That means it's time to clean up."	Offer choices, such as taking a book or a small toy to ease the transition. Be creative: "How about you pick up the big blocks and I can pick up the little blocks." Engage your child's imagination and empower them as the helper: "Which friend would you like to ask to help us clean up?"
Talks back to you or says something that pushes your buttons: "You are a bad, mean teacher!"	Remind yourself that it's not "personal" or "immoral"—it's immaturity. Young children are driven by their emotions and act on their feelings. It takes a lot of time and practice to develop self control.	"I know you are mad that your toys were taken by another child, but hitting is not OK. I know you don't mean to be hurtful. You lose control when you're mad."	When your child is calm again, ask for his ideas about how he can calm himself and express his feelings in ways that are acceptable. Offer some ideas yourself, like taking deep breaths to calm down, stomping his feet to get the anger out, or using his words to express just how mad he is.

The Center is a safe place for children to practice self-control and emerging social skills. Young children will make mistakes as they are young and have little experience on this planet. We want children to know they can trust teachers to support them as they work to develop these new concepts and skills. For this reason, we will not report every negative interaction a child has to parents at the end of the day. Instead, we will focus on teaching replacement skills when and where needed. If the behavior happens in the Center, we will work with it at that moment. Young children often cannot connect meaning between a behavior that happened early in the day and a reprimand from a parent at pick-up time or at home. Pick-up time should be a time of warmth and welcome as parents and children are reunited after a long day of separation.

Inhibitive Behavior

A challenging behavior is any repeated pattern of behavior, or perception of behavior, that interferes with or is at risk of interfering with optimal learning or engagement in pro-social interactions with peers and adults that interferes with children's learning, development, and success at play, is harmful to the child, other children, or adults, that put a child at risk for later social problems or school failure. Challenging behavior is thus defined on the basis of its effects. While some children's challenging behaviors are developmentally or culturally normative and effectively addressed by adult vigilance and the use of appropriate guidance procedures, other children need more targeted evidence-based practices to prevent and/or address challenging behaviors that are persistent or unresponsive to universal evidence-based approaches.

When Challenging Behaviors Persist

Continued inappropriate behavior in the classroom may be a safety issue and negatively affect other children. The purpose of intervention is to protect everyone and provide appropriate consequences.

- Teachers will begin to document behaviors to discover if there are any patterns or potential triggers, and examine possible motives by the child.
- Parents will be notified of repeated behavior issues while out of the presence of children or other adults (emails, phone calls, texts, communication notebooks or conferences).
- Designated observer conducts assessment of current classroom practices in preventing challenging behaviors and promoting social-emotional development; identify new strategies to implement.
- Parents will be called for a conference to assist with creating appropriate responses (providing positive supports like reminding children of classroom rules and expectations or teaching self-regulation skills).
- Document collaboration with specialists due to child's challenging behaviors (e.g. Children's Council Early Care & Education Staff, Children's Developmental Services Agency, local school system's Preschool Exceptional Children's Program).
- Document teacher's professional development to support classroom practices (eg. completed NCFELD training, PECE Program, Social-Emotional training, visiting other classrooms, mentoring by others, etc.).
- All attempts will be made to maintain a child's participation in the program including up to, but not limited to, an implemented Behavior Improvement Plan, referral to CDSA/Watauga County's EC Pre-K Services, transferred to another appropriate setting, etc.).

Suspension / Expulsion

Children may be excluded from the program, temporarily or indefinitely, if the Director determines the design of our program doesn't meet the individual needs of the child and the safety and wellbeing of the classroom as a whole.

Suspension or expulsion may result if:

- ❖ If a child is harmful to other children/teachers/aides and interventions are not working with consistent implementation and documentation.
- ❖ A family will not agree to have their child observed, evaluated, and/or receive supplemental support. .
- ❖ Inhibitive behaviors result in another person necessitating medical care from a professional.
- ❖ Other unforeseen or outrageous behavior as exhibited by a child or family.

A Family may be asked to leave the Center and childcare services will be discontinued if the classroom setting becomes habitually unsafe for other children and staff. Families may be given a two-week notice to secure other

childcare or immediately dismissed based on the severity and frequency of harmful behaviors.

Prevention of Shaken Baby Syndrome and Abusive Head Trauma

Belief Statement

We, The Appalachian State Child Development Center, believe that preventing, recognizing, responding to, and reporting shaken baby syndrome and abusive head trauma (SBS/AHT) is an important function of keeping children safe, protecting their healthy development, providing quality child care, and educating families.

Background

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

Procedure / Practice

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

- If SBS/ABT is suspected, staff will
 - Call 911 immediately upon suspecting SBS/AHT and inform the Director.
 - Call the family.
 - If the child has stopped breathing, trained staff will begin pediatric CPR.
- Instances of suspected child maltreatment in childcare are reported to Division of Child Development and Early Education (DCDEE) by calling 1-800-859-0829 or by emailing webmasterdcd@dhhs.nc.gov.
- Instances of suspected child maltreatment in the home are reported to the county Department of Social Services. Phone number: (828)-265-8100

Prevention Strategies to Assist Staff in Coping with a Crying, Fussing, or Distraught Child

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

- Rock the child, hold the child close, or walk with the child.
- Stand up, hold the child close, and repeatedly bend knees.
- Sing or talk to the child in a soothing voice.
- Gently rub or stroke the child's back, chest, or tummy.
- Offer a pacifier or try to distract the child with a rattle or toy.
- Take the child for a ride in a stroller.
- Turn on music or white noise.

In addition, the facility:

- Allows for staff who feel they may lose control to have a short, but relatively immediate break away from the children.
- Provides support when families are trying to calm a crying child and encourages parents to take a calming break if needed.

Prohibited Behaviors

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

- Shaking or jerking a child.
- Tossing a child into the air or into a crib, chair, or car seat.
- Pushing a child into walls, doors, or furniture.
- Excessive bouncing of a child in a bouncy seat (head should not come off the back of the bouncer).

Strategies to Assist Staff Members Understand How to Care for Infants

Staff reviews and discusses:

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

Strategies to Ensure Staff Members Understand the Brain Development of Children Up to Five Years of Age

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

- Staff review and discuss:
 - Brain Development from Birth video, the National Center for Infants, Toddlers and Families, www.zerotothree.org/resources/156-brain-wonders-nurturing-healthy-brain-development-from-birth

Application

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

Staff

- All current staff members and newly hired staff will be trained in SBS/AHT before providing care for children up to five years of age.
- Staff will sign an acknowledgment form that includes the individual's name, the date the Center's policy was given and explained to the individual, the individual's signature, and the date the individual signed the acknowledgment.
- The childcare facility shall keep the SBS/AHT staff acknowledgment form in the staff member's file.

Families

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

Resources

- Parent Web Resources
 - The Period of Purple Crying: <http://purplecrying.info/>
- Web Resources
 - Caring for Our Children, Standard 3.4.4.3 Preventing and Identifying Shaken Baby Syndrome/Abusive Head Trauma, [http://cfoc.nrckids.org/StandardView.cfm?StdNum=3.4.4.3&=+](http://cfoc.nrckids.org/StandardView.cfm?StdNum=3.4.4.3&=)

References

- The National Center on Shaken Baby Syndrome, www.dontshake.org
- NC DCDEE, ncchildcare.dhhs.state.nc.us/general/mb_ccrulespublic.asp

- Pediatric First Aid/CPR/AED, American Red Cross, www.redcross.org/images/MEDIA_CustomProductCatalog/m4240175_Pediatric_ready_reference.pdf
- Caring for Our Children, Standard 1.7.0.5: Stress <http://cfoc.nrckids.org/StandardView/1.7.0.5>

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

Effective Date: 6/26/17

Family Involvement and Communication

Open Door Policy

Families are welcome to visit their child at any time during the day and for special events. Our policy allows and encourages families to take the opportunity to visit the Center at any time during the hours of operation. Families must follow the Center's rules about supervision of children at all times by keeping children in sight and sound of the parent/s. You must work with the classroom teachers to plan for a smooth transition when you leave the class. Your consideration of the class activities is important and your sensitivity to your child's ability to separate from you is appreciated.

Celebrations

Families are welcome to attend a variety of gathering opportunities during the year. We encourage family involvement! If there is a special tradition or event that is important to your family, please schedule a time to talk with your teacher and the Director to plan for the event together.

Newsletters

Center newsletters are distributed via email to all enrolled families. Inside you may find a calendar of events, classroom happenings, parent reminders, community events and other information on Center happenings. It is important that you read these emails. Other information will be distributed via email, ProCare Connects, and postings on the Parent Information Board in classrooms .

Conferences

Parent-teacher conferences are available as requested throughout the year. Center-planned conferences occur in the fall and the spring to help establish goals and expectations and to review the developmental progress of children using collected observations, children's work (art, pictures of them building....), and assessment data from Teaching Strategies.

Family Involvement Group

The FIG is a group of currently enrolled families with representatives from each classroom. This group meets quarterly to discuss information about the Center, inform the Director of requests, plan for Center activities, and to be the voice of communication for all families. All families and teachers are invited to attend FIG meetings.

Expectations of Parents

- Model kindness and respect for all community members while attending App State Child Development Center events.
- Read and become familiar with Center policies.
- Collaborate with your child's teachers: read parent newsletters, ask questions, talk with your child's teachers about his/her interests.
- When in the classroom, direct focus should be on the children and the events/activities happening in the classroom.
- Schedule a time to meet with your child's teacher whenever you have a question that requires more than a one or two minute answer or whenever you have a concern and want to discuss it in more detail.
- Participate in Center events.
- Attend the mandatory annual parent meeting each late summer/fall.
- Submit updated student and parent information to the office within seven calendar days of any changes.
- Follow the Health and Safety policies of the school and keep children home until medication and fever free for at least 24 hours.
- Commit to 10 hours of service per year, per family for a total of 10 service hours per family. Currently, this is done on an honor system.
- Ensure that children arrive by 9:00 on regularly scheduled school days. In the event that your child will be late, please notify the classroom in advance or as soon as possible.
- Refrain from accosting or criticizing the CDC's policies and/or staff verbally, physically, or in writing; including social media.
- Address concerns or questions about your child to the Lead Teachers (not to students), and bring up any other concerns or questions about Center practices or policies with the Director.

Gossip

Gossip is an activity that can drain, distract and downshift employee job satisfaction. We all have participated in this, yet most of us say we don't like it. In order to create a more professional and inspiring early care center, we are making a commitment to change our atmosphere to be gossip-free.

gos-sip n. Rumor or talk of a personal, sensational, or intimate nature.
A person who habitually spreads intimate or private rumors or facts.
Trivial, chatty talk or writing.

You will notice that gossip is a noun - which means it is something you DO. That also means that is something you choose to do – and can choose NOT to do. You enter into gossip by choice – you can opt out of the activity. In order to end gossip means to end a particular type of communication and that can be talk or email or text or note communication.

Gossip always involves a person who is not present. Unwelcome and negative gossip involves criticizing another person or policy. Gossip undermines the integrity of individuals and of an organization as a whole.

All members of the App State CDC (staff and families) are expected to refrain from gossip about CDC staff, children, families, and/or policies. Families are encouraged to share their concerns directly with the Director first.

Procedure for Families to Inquire / Address Concerns

Communication between staff and families is always encouraged. Please make an effort to express your classroom concerns directly to the Lead Teacher and not to student workers or other families. If you feel uncomfortable doing this, please inform the Director and a parent meeting will be scheduled. Families are encouraged to contact the Center Director concerning any matter which pertains to the operation and policies of the Center. If at any time the Director is not available, please contact an administrator.

- Director- Moriah Stegall
- Assistant Director Student Learning/ Woodland Master Teacher - Jennifer Klutz
- Wings Master Teacher - Tana Brophy
- Woodlands Master Teacher - Christian Cook
- Administrative Assistant - Meg Newark

If you wish to discuss matters concerning your child, appointments can be set up individually. If you have matters of concern regarding policies and procedures, please contact the Director or the Office of Student Affairs for further inquiries or complaints.

Office of Student Affairs: Matt Dull, Assistant Vice-Chancellor of Finance and Operations at (828) 262-2060 or email dullmc@appstate.edu.

The North Carolina Division of Child Development and Early Learning may also be contacted if you have a complaint about a policy or operational concern of the App State CDC.

North Carolina Division of Child Development: Lee Marshall, State Consultant at

(828) 434-0236 mobile, (919) 715-1013 fax or email
lee.marshall@dhhs.nc.gov.

Valuing Community

Professional Statement from NAEYC

All children have the right to equitable learning opportunities that help them achieve their full potential as engaged learners and valued members of society. Early childhood educators have a professional and moral obligation to advance equity and diversity. They can do this best in early learning settings that reflect fundamental principles of fairness and justice and that implement the goals of anti-bias education.

Guiding Principles from NAEYC

- Early childhood is a uniquely valuable and vulnerable part of the human life cycle. Early childhood lays the foundation for all later learning and development. For example, it is a critical period for encouraging multilingualism, which carries many cognitive, social, and linguistic advantages.
- Families are the primary context for children's development and learning. Early childhood educators must work to support consistently warm and caring relationships between families and their children. This includes respecting the families' languages and cultures. It also means incorporating families' funds of knowledge into the curriculum, teaching practices, and learning environment.
- Each individual—child, family member, and early educator—is unique. Each individual has dignity and value. Each individual is equally worthy of respect.
- Each individual belongs to multiple social groups. This creates richly varied and complex social identities.
- Children begin constructing knowledge of their social identities early in life. Early childhood educators and early childhood programs in centers, homes, and schools play a critical role in fostering children's development of positive social identities.
- Children's learning is facilitated most effectively when teaching practices, curricula, and learning environments are strengths based rather than deficit focused and are developmentally, culturally, and linguistically appropriate for each child.
- Reflection, self-awareness, humility, and a willingness to learn and change are key to becoming a teacher who supports children from all cultural backgrounds.

Material Selection

Part of our voluntary star-rated license included Environmental Rating Scales. These standards ensure that diversity is represented in the materials in each classroom. Thought is put into the selection of all of our materials. We want children to embrace diversity and inclusion in society.

Curriculum

We discuss observations that children make, allowing them to explore how we are alike and different. We emulate that everyone is treated with respect. We are in a continual process of exploring what and how we as the CDC define diversity and welcome input from families.

Changes in Policy

The conditions of a child development facility at an educational institution are unique and may require adjustment from time to time for the mutual benefit of the University, the children and their families. The Center may make changes in official administrative policies as deemed necessary in the interest of health, safety, care of children or University employees or for educational purposes. In addition, from time to time, accrediting and certifying bodies may make changes to the childcare standards the Center will be required to follow. Notifications of changes to these policies will be updated in the Parent Handbook and communicated to parents via postings in the Center, electronic mail and/or other electronic media as available.

Tab 2

