



EARLY LEARNING CENTER

2021-2022
Family Handbook

RISE Program
First Class PRE-K Program



EARLY LEARNING CENTER

I am so excited to welcome your family to our school! Whether you are returning to RISE, a new family, or joining our First Class Pre-K program, I am thankful you have entrusted your child to us. I hope that you and your child are ready for an exciting year of learning at the UAH Early Learning Center (ELC)!

The ELC has many additional health and safety measures in place due to the Covid-19 Pandemic. We will continue to take the extra steps of health and safety as we open for the 2021-22 school year. UAH asks that anyone not fully vaccinated (14 days after second dose) continue to wear a face covering on campus. ELC Staff will continue increased hand washing, disinfecting, and sanitizing procedures. I will continue to enforce the added Covid-19 health and safety measures indefinitely. Above all, we want you to be comfortable with sending your child to the RISE School at the ELC.

All classrooms at the ELC are inclusive and offer a high quality early childhood educational environment with licensed lead teachers. Our classrooms have a low student to teacher ratios and exhibit best practice in developmentally appropriate activities. We believe in a *Conscious Discipline* approach to behavior by teaching children about their emotions and learning to regulate emotions, but most importantly modeling those emotions and behaviors for them.

Please remember, "We play dirty here!" We have a hands-on approach to learning and exploring our world around us. Young children are our future, and I am so honored that you have chosen the UAH Early Learning Center for your family. Let me know if there is ever anything I can do to assist you or your family.

Thank you and welcome to the ELC! We are looking forward to a great year!

Deana Aumalis, Director

UAH Early Learning Center

TABLE OF CONTENTS

[Introduction](#)

[Parking Code of Conduct](#)

[Arrival/Dismissal Routines](#)

[First Days/Weeks of School](#)

[UAH ELC Mission Statement](#)

[UAH ELC Philosophy and Goals](#)

[Description of Programs at the UAH ELC](#)

[Tuition and Fees](#)

[Operating Hours and Services](#)

[Program Admission for RISE and First Class Pre-K Programs](#)

[Daily School Readiness](#)

[Grievance Procedures](#)

[Admission for Students with Identified Special Needs](#)

[Program Curriculum](#)

[Inclusion](#)

[NAEYC: 10 Signs of a Great Preschool](#)

[Assessment and Evaluation Plan](#)

[Departure and Exchanging Information](#)

[Children's Health](#)

[Emergency Plans/Procedures](#)

[Daily Schedules and Routines](#)

[Guidance and Discipline](#)

[General Information](#)

[Summary](#)

Introduction

Welcome to the University of Alabama in Huntsville Early Learning Center (UAH ELC)! The UAH ELC is an integral part of the UAH College of Education. Please review this handbook in order to understand the ELC's operations, policies, and procedures. The UAH ELC strives to further UAH's mission to explore, discover, create, and communicate knowledge, while educating individuals in leadership, innovation, critical thinking, and civic responsibility and inspiring a passion for learning.

In this respect, the UAH ELC offers a site for:

- Quality educational programming for young children.
- Training of student teachers in early childhood education/special education.
- Observation and interpretation of human growth and development.
- Research designed and implemented by UAH faculty and students to further the knowledge base in such areas as social interaction, language development, cognitive development, and early childhood curriculum and assessment.
- Community service in the form of high-quality early education and care, parenting programs, and in-service teacher education/training.

Programs Within the UAH ELC

The UAH ELC is home to five different programs. Each one provides high-quality early childhood educational services. These five programs make up the 19 classrooms at the UAH ELC. This handbook will assist you to better understand your child's program within the UAH ELC and help answer basic questions you may have throughout the year.

- RISE Program (*Rural Infant Stimulation Environment*)
- First Class Pre-K Program
- Before School Care and After School Care Programs (RISE, First Class Pre-K students)
- CAPNA Early Head Start
- CAPNA Head Start

CAPNA Early Head Start and Head Start Classrooms

Community Action Partnership of North Alabama (CAPNA) completes intake interviews and placement in programs following federal guidelines. Please contact Tunji Dowdell, UAH CAPNA Site Director, at tunji.dowdell@capna.org or at 256-824-4761 for more information about both the Early Head Start and Head Start Classrooms within the UAH ELC. You may also contact the CAPNA Central Office in Decatur at 256-355-7843.

Hours of Operation by Program

Early Head Start: 8:30 a.m.-2:30 p.m., Monday-Friday (see calendar for days)

Head Start: 8:30 a.m.-2:30 p.m., Monday-Friday (see calendar for days)

First Class Pre-K Program: 8:00 a.m.-2:30 p.m., Monday-Friday (180 days/year)

RISE Program: 8:00 a.m.-2:30 p.m., Monday-Friday (12-month program-see calendar for holidays)

Before School Care Program: 7:00 a.m.-7:45 a.m. (RISE, First Class Pre-K students)

After School Care Program: 2:30 p.m.-5:45 p.m. (RISE, First Class Pre-K students)

Parking

All families at the UAH ELC should read and adhere to the UAH ELC Parking Code of Conduct. You are responsible to understand, acknowledge, and follow the guidelines set in this document. This is for the safety of **all children at the UAH ELC**. Please advise additional family members of the UAH ELC Parking Code of Conduct, as **you are responsible for anyone who may be picking up or dropping off your child**. Should they incur a violation, it will be applied to you and could cause dismissal from the program.

The parking lot on the EAST side of the building is designated for parent parking. Parking in the front of the building is NOT allowed for drop off and pick up. We must allow enough space for emergency vehicles if needed. Parents who park in the front of the building during school hours are subject to UAH parking violations and tickets and are subject to be towed at the expense of the owner.

Parking Code of Conduct

For the safety of all the children at the UAH ELC, we are implementing the following procedures for parking at the facility.

Parking Code of conduct procedures are as follows:

- The parking lot on the EAST side of the building is designated for ALL parent parking. Parking in the front of the building is NOT allowed. We must allow enough space for emergency vehicles if needed.
- There are designated handicapped parking spaces in the East parking lot.
- No parking at the curb.
- No dropping off adults/children at the curb or in the front of the building during school hours.
- Before and After School Care program parents may park **in a designated space** in the front of the building for drop off and pick up.
- No loud music playing from your vehicle.
- No use of profane language.
- You must park in a marked parking space.
- If a car is waiting for a parking space, please do not pull around it but wait patiently while they are pulling into a spot.
- The road in front of the UAH ELC is two-way and pulling around another vehicle on the wrong side of the road could cause an accident.
- No U-turns in front of the UAH ELC.
- Speed limit is 15 MPH in front of the UAH ELC.

Arrival/Dismissal Routines

Morning Routine

Doors will open daily at 7:50. East hall parent doors will remain open until 8:15. If you arrive after 8:15, you will have to enter the building through the front lobby doors. If a family member/parent arrives early for drop off, they are asked to wait outside the doors until they are opened by a UAH ELC staff member.

Please remember to supervise children at all times in the halls, parking areas, and grounds of the UAH ELC. Children **MUST** be accompanied by a parent and are prohibited from entering the building alone at all times. For safety's sake, all children, including siblings and guests, must walk in the halls and be supervised at all times.

You are required to walk your child to their classroom, sign them in daily, and make sure they wash their hands before starting their morning activity. It is suggested to stop at the children's restrooms located near the lobby to have a bathroom break and wash hands before going to your classroom.

In order for children to benefit from the individual program's services, families are **EXPECTED** to bring their children between 7:50-8:15am. The beginning of the day is a valuable instructional time. When children are late to school, it affects the child's educational program and enrollment within the UAH ELC and disrupts teaching time for the entire class.

Afternoon Routine

For afternoon pick up, please park in the east lot and enter through the lobby doors. For the safety of all children and staff at the UAH ELC, please exit at the lobby doors as well.

Head Start Pick Up will begin no earlier than 2:15 p.m.(preferred). **ALL children must be picked up by 2:30.**

Early Head Start Pick Up will begin no earlier than 2:15 p.m. **ALL children must be picked up by 2:30.**

First Class Pre-K Pick Up will begin no earlier than 2:15 p.m. **ALL children must be picked up by 2:30.**

RISE Pick Up will begin no earlier than 2:15 p.m. **ALL children must be picked up by 2:30.**

RISE/First Class Pre-K Programs

If a parent/family member arrives early for pick up, they are asked to wait in the lobby until 2:15. Please arrive no later than 2:25 for afternoon pick up. Please honor the pick-up time by arriving early enough to allow for conversation with the teacher and gathering your child's belongings before our closing time (2:30). Teachers and Teacher Assistants have duties to complete after students leave for the day. Please be mindful and courteous of their time.

A parent/family member is considered late if they arrive for pick up after 2:30. Children will be taken to an After School Care room at 2:35, and an After School Care daily drop-in rate of \$25 will be charged to your account.

Please do not stop to visit other classrooms during pick-up or drop-off times at the ELC. Teachers and staff are busy implementing instructional activities.

Please adhere to the specific times of pick up for your child. Federal and state-funded programs are specific in the amount of instruction time that must be provided on a daily basis.

Due to the increased number of children in After School Care, we can not offer the playground, sensory room/gym, or lobby as a meeting place for socialization of children after the school day.

If you must check your child out before the end of the day, please park in the east parking lot and walk to the lobby door entrance. There is a video doorbell for safety on the right double lobby door. Please use the video doorbell for entrance to the lobby. You will need to notify staff at the front desk of your child's name and teacher/room. The staff person will call down to the room to notify the Teacher, and either the Teacher or Teacher Assistant will bring your child to you in the lobby. This allows for seamless transitions for the child and fewer distractions in the classroom routine and uninterrupted teaching time for the children. For safety purposes, you or the person picking up your child may be asked to provide a photo ID for student check out.

First Days/Weeks of School

The first days of school can be difficult for some children (and parents). Here are some helpful hints for reducing separation anxiety:

- Reassure your child that you will be back to pick him/her up.
- Don't linger. Be brief. Reassure your child, give a snuggle, and then be on your way.
- Let your child bring a comfort item from home (blanket, stuffed toy or other small item), especially if needed to help him/her nap.

RISE Program classrooms will be visitor-free for the first four weeks of school so children can acclimate to the classroom.

UAH ELC Mission Statement

The mission of the UAH ELC is to:

- Provide exemplary services based on recommended practices to young children with diverse abilities and their families.
- Offer instructional opportunities through collaboration with various academic units in higher education.
- Engage in research that positively influences practices in the field of early childhood education and early childhood special education at the local, state, and national levels.
- Interface with the community through outreach activities and partnerships.
- Disseminate information and provide technical assistance to other community-based agencies.
- Affect policy and systems change at the local, state, and national level.

At the UAH ELC, we believe that a quality preschool experience should be a promise, not a privilege, for ALL children.

UAH ELC Philosophy and Goals

The philosophy and goals of the UAH ELC are to:

- Provide family-centered services designed to meet the individualized needs of all children and families.
- Provide a blend of educational and therapy services within the context of a developmentally-appropriate curriculum.
- Prepare children for their next educational environment.

The theoretical frameworks of Erikson, Piaget, and Vygotsky provide a guide around the curriculum which is designed to facilitate each child's social, emotional, physical, language, and cognitive development.

The program's philosophy is based on the following concepts:

- Children construct their understanding of their world through active involvement and interaction with people and materials.
- Play, exploration, and experimentation are the major vehicles for learning.
- Children benefit from making choices in a stimulating and age-appropriate planned environment.
- Children learn best in an environment which promotes acceptance, trust, initiative, and decision-making.

UAH ELC Outcomes

A combination of numerous initiatives and protocols will be implemented to measure the program outcomes and to determine needed procedures for sustaining a high-quality program. Evidence will include policies and procedures, program quality, children's progress and learning, family involvement and satisfaction, and community awareness and satisfaction.

Child and Family Outcomes

The UAH ELC strives to further the UAH mission to explore, discover, create, and communicate knowledge, while educating individuals in leadership, innovation, critical thinking, and civic responsibility and inspiring a passion for learning. In this respect, the UAH ELC offers a site for developing quality education programs for young children, while providing a variety of high-quality early childhood programs to the community. We also provide a site for training future teachers in early childhood education/special education, providing them with opportunities for observing and interpreting human growth and development.

Program staff use a variety of formal and informal strategies to become acquainted with and learn from parents about their family structure, their preferred child-rearing practices, religion, and any additional information families wish to share about their socioeconomic, linguistic, racial, and cultural backgrounds. Therefore, the following initiatives are explored with children and their families:

- Staff understands the characteristics and roles of developmentally-appropriate early childhood education practices by identifying diverse needs, interests, and abilities of young children and their families.
- Staff reflects and identifies strategies that represent developmentally-appropriate practices for the child by learning and applying knowledge in various early childhood settings.
- Staff recognizes and supports the home-school communication and collaboration as a strategy for building mutual trust and respect.
- Staff uses multiple sources of data collection to assess children's development and learning and in effectiveness of the program.
- Staff actively uses information about families to adapt the program environment, curriculum, and teaching methods to better serve the families, UAH students, faculty, and staff.
- Staff participates in community and cultural events, concerts, storytelling activities, performances, and other events designed for children and their families to better understand the cultural backgrounds of children, families, and the community. Staff provide support and information to family members who are legally responsible for the care and well-being of a child within the UAH ELC.
- Staff establishes intentional practices and interactions designed to foster strong reciprocal relationships with families and students from the first contact and maintains those practices.

- Staff engages with families to learn from their knowledge of their child's interest, their approaches to learning, the child's developmental needs, and to learn about their concerns and goals for their children. This information is incorporated into ongoing classroom assessment, development, and planning of curriculum.
- Staff uses a variety of formal and informal methods to communicate with families about the program philosophy and curriculum objectives, including educational goals and effective strategies used by families to promote their children's learning.
- Staff uses a variety of methods such as family orientations, small group meetings, individual conversations, and written questionnaires, to provide staff with input from families about curriculum activities throughout the year.

Program Governance

The UAH ELC is a model center for the education of young children that is affiliated with the College of Education at The University of Alabama in Huntsville, a state-funded institution of higher education. The UAH ELC Programs are led by a Director who reports to the Dean of the College of Education. The UAH ELC Director oversees all aspects of these programs within the ELC:

- **RISE Program** (*Rural Infant Stimulation Environment*)
Modeled after the first RISE Program established at the University of Alabama in 1974; a fully-inclusive program serving children with special needs and their peers, designed with an integrated therapy approach.
- **First Class Pre-K Program**
State-sponsored, grant-funded classrooms for four-year old children.
- **Before School Care and After School Care Programs**
For children enrolled in the RISE or First Class Pre-K programs.

The additional two programs within the ELC, Head Start and Early Head Start, are governed by CAPNA. CAPNA has a Memorandum of Understanding with UAH and leases 10 classrooms.

The RISE Program has a non-profit (501c3) status under the UAH Foundation. Funding is not provided for special education services through the federal or state government. However, the RISE Program strives to use state special education forms to assist with parent education and the transition of students into a public education program as they age out. A special education referral can be made at age 2 ½ to the Local Education Agency (LEA) for determination of any services to be provided through special education by the LEA. The UAH ELC Director is available to assist any family within the Center who would like assistance in obtaining information about the referral process or in seeking additional private therapy services in the Huntsville area. Referrals for children younger than two are made through the state Child Find number or local Early Intervention Service Provider.

UAH is committed to the UAH ELC RISE and First Class Pre-K Programs. For RISE, UAH contributes dollar for dollar what each family contributes to the provision of quality educators, therapy services, and the day-to-day operations of the classrooms.

Supervision of Children

The UAH ELC maintains the highest level of quality services for young children by maintaining appropriate adult/child ratios. The UAH ELC follows the Alabama-mandated child care guidelines and the National Association for the Education of Young Children (NAEYC) Guidelines for adult/child ratios. Daily classroom staff in the RISE Program are assisted by therapists, floater aides, volunteers, and university students who may provide instruction and assistance in the classrooms to ensure that each child receives individual assistance/instruction as needed. Children enrolled in the First Class Pre-K Program will have a lead teacher and auxiliary teacher, as well as university students.

Description of Programs at the UAH ELC

RISE Program

The RISE Program is a nationally-recognized model of best practice in the field of early childhood education and inclusive services. This model is dedicated to excellence in service, research, and teaching. RISE began in 1974 at the University of Alabama. Dr. Loretta Holder-Brown was awarded a federal grant to establish a model for children under the age of five with diagnosed disabilities to learn and flourish alongside their more traditional learning peers. The RISE Model is a unique blend of the best practices in child development, early childhood education, early childhood special education, and integrated therapy. Integrated therapy is provided weekly by licensed speech, physical, occupational and music therapists contracted by the University. Integrated therapy is included in the tuition. There are eight RISE model programs across the United States. The purpose of the program is to optimally prepare children for their next educational environment and to support families within the community.

The UAH ELC's RISE Program adheres to the philosophy and recommended practices of both early childhood education and early childhood special education. The philosophy of the UAH ELC's RISE Program is based on the following premises:

- Services are family-centered with particular emphasis placed on the family as the primary decision-maker for each child.
- The assessment process is dynamic, ongoing, and linked to instruction. It includes multiple sources and settings.
- Children's services are designed around an individualized plan consisting of goals based on the concerns of the family, priorities, and resources, as well as the child's strengths, needs, and expectations of their next environment.
- Services offered vary in intensity and structure based on the individual and group needs of the children as well as the input of their families.
- Children's development is promoted in all areas including gross and fine motor skills, independence, cognitive skills, social and emotional skills, and communication (both receptive and expressive).
- Therapy services (physical, occupational, speech, and music) are provided within the context of the educational environment using an integrated approach. Therapy goals are educationally relevant and are implemented collaboratively by the therapists and teaching staff.
- The foundation of the learning environment and activities is based on general early childhood guidelines, which are blended with recommended practices from early

childhood special education.

- Specially designed instruction, curricular adaptations and modification, as well as language activities are embedded into the classroom's daily activities.
- The curriculum is designed to foster children's cognitive abilities, improve communication skills, and to focus on fostering skills of self-confidence, self-esteem, independence, and curiosity.

First Class Pre-K Four-Year Old Classrooms

Enrollment is completed online through the State Department of Early Childhood Education, and a random selection is completed in the spring each year prior to the start of the school year. Children must be four years old by September 1 of the school year and must not be five or older by September 1 of the school year. Students must reside in Alabama with parent/guardian. Proof of residence and birth certificate are required for enrollment. A wait list is maintained for this program.

A grant renewal process is completed each year to maintain funding for these classrooms. Tuition is based on state recommendations, and a tuition plan for the UAH ELC has been approved through the State Department of Early Childhood Education for continuity of care of current RISE families who wish to enroll in the First Class Program at age four. Tuition does not include before or after school care. Health (including vision and hearing), dental, and speech screenings are provided in the fall for children enrolled in this program. This program usually takes one off-site field trip each year.

Before School Care (BSC)

BSC is available from 7:00-7:45 a.m. for children in the RISE and First Class Pre-K Programs at the UAH ELC. Please notify the Director or other administrative staff if you would like for your child to attend the BSC Program. The enrollment form is in our registration packet and can also be found online. BSC is staffed with Teacher Assistants that work in our RISE Classrooms. There is an additional charge of \$80/month to attend BSC. You will need to park in the front of the UAH ELC and enter through the lobby doors. You will need to sign your child in at the front door, and a staff member will escort them to the classroom.

If you arrive after 7:45, please follow the regular school entry policies/procedures.

After School Care (ASC)

ASC is available from 2:35-5:45 p.m. for children enrolled in the RISE or First Class Pre-K Programs at the UAH ELC. Please notify the Director or other administrative staff if you would like for your child to attend the ASC Program. The enrollment form is in our registration packet and can also be found online. ASC is staffed with a Lead ASC Teacher and classroom childcare workers. ASC rooms have ratios that meet NAEYC standards, as well as personnel prep standards for the classroom lead instructor. There is an additional charge of \$220/month to attend ASC. After 3:00 pm, you may park in the front of the UAH ELC and enter through the lobby doors. Please remember to sign your child out each day.

You are considered **LATE** if you arrive at 5:45. Please arrive by 5:40 to allow five minutes for a conversation with the teacher and to gather your child's belongings before our closing time.

If for any reason school is dismissed early, ASC will be cancelled.

"Drop-ins" for our ASC Program are subject to availability, and the family will be charged \$25/day per child. Please notify the Assistant Director, Trisha Pihringer (trisha.pihringer@uah.edu or 256-824-4752), and your child's classroom teacher to request a drop-in day for your child. Space is not a guarantee as we must stay within ratio and in compliance with state licensing laws at all times.

Late Pick-Up Fees

The program will assess late fees to families/parents that do not pick up their children before the closing time of 5:45 p.m. A fee of \$15.00 will be assessed the first five minutes beginning at 5:50 and \$10 for every five minutes or portion thereof until the child exits the building with the parent/guardian. The lobby clock will be the official time for assessing these fees. The parent/guardian will be notified in writing and the assessed fee will appear on the next statement.

***The Director determines the final selection for all UAH programs at the ELC, including After School Care.**

When considering an appropriate school setting for your child, please consider your child's needs. The most appropriate placement can and *should* be based on the individual needs of each child. The RISE Program may not be the most appropriate placement for your child. For children who are in our RISE Program, the BSC and ASC Programs may not be the most appropriate placement for your child for after hours school care.

The First Class Pre-K Program may not be the most appropriate placement for your 4-year old child. A decision to reduce the number of hours/days of participation in this program is done through collaboration with state program representatives. The final decision will be made by the ELC Director with consultation from the First Class Region 2 ELC Monitor and Coach.

Tuition and Fees

RISE Program Tuition

Families are required to complete an application packet and pay an application fee of \$50. The following policies and procedures are identified and carefully followed:

- Children are selected for enrollment in order of the earliest date of received application and by factors related to the teaching and research mission of the program.
- All information must be updated and complete. Statements such as "same as last year" are not acceptable.
- The program is open to all children regardless of race, color, creed, need, or religious affiliation.

- Children are assigned to groups based on the child's developmental needs, teaching and research requirements of the program, and the available space. Placement is made at the discretion of the Director.
- Children of UAH faculty, staff, and students are given priority.
- Siblings of children enrolled are given priority.
- The Director determines the final selection for all UAH-governed programs and classroom rolls.

Tuition is required from families of all children. The **annual** tuition for children is based on their age at the time of enrollment and classroom placement. The annual tuition is divided into 12 equal installments. Please see the tuition chart for 2021-2022 tuition rates. Tuition is not reduced during school breaks, family vacations, summer months, schedule adjustments, or absences. Tuition does not include fees for Before or After School Care.

Tuition is **DUE** on the first of each month. A late fee of **\$25 will be charged to your account after the 10th day of the month**. If at the end of the month, payment is still not made or you have not made financial payment arrangements with the Director, your child will be dismissed from the program. There is a \$30 fee for all returned checks.

Tuition is an annual amount. It is divided into 12 monthly installments for your payment convenience. You are responsible to pay for the months of June and July to retain your current enrollment status. IF you withdraw for the summer months, you are subject to be placed on the bottom of the waitlist for the following fall.

The obligation to pay tuition is for the year in full and, in the event of withdrawal (voluntary or involuntary), families are obligated to pay all sums which are past due, owing, and unpaid.

First Class Pre-K Program

Tuition is required from all families enrolled in the First Class Pre-K Program. The annual tuition is made in nine equal installments, August - May. Tuition is not reduced during school breaks, family vacations, schedule adjustments or absences. Tuition is based on state recommendations, and the tuition plan for the UAH ELC has been approved through the State Department of Early Childhood Education for continuity of care. Tuition does not include fees for before or after school care. A late fee of **\$25 will be charged to your account after the 10th day of the month**. In the event that tuition is not paid by the last day of the month, termination of enrollment will be enacted unless arrangements have been made with the University. There is a \$30 fee for returned checks.

If you wish to enroll in the RISE classrooms for summer months, please notify the Director no later than March 1, 2022. We will do our best to accommodate summer placements but can not guarantee a placement for the months of June and July. Parents who would like a summer placement will be notified of availability by March 30, 2022.

Before School Care and After School Care Fees

BSC is \$80 per month per student, and ASC is \$220 per month per student. **Please be on time to pick up your child, no later than 5:45 p.m.** Late charges may apply if you are not on time for pick up. Dismissal from the ASC Program may occur if there is chronic late pick up and/or late tuition payments. Discounts do not apply to BSC and ASC fees.

Online Tuition Payments for All Program Tuition

Online payments through the UAH website can be made for our application, BSC, ASC, and tuition. There is a 3% charge on credit card online payments. Please contact our Assistant Director, Trisha Pihringer (trisha.pihringer@uah.edu or 256-824-4752), for information on how to implement a monthly bank draft without incurring any additional fees.

Operating Hours and Services

First Class Pre-K is open August-May, and the calendar is closely aligned with local school systems and other programs within the ELC. The UAH RISE Program's yearlong schedule is best practice for young children. It is closely aligned with the schedule of local school systems and the University. Please refer to the 2021-2022 calendar for days the Center is closed.

All children are expected to attend the program year-round. Tuition is a 12-month commitment for RISE. We will do our best to offer "camps" during some of our week long breaks. Camps MAY be offered for fall break, Memorial week break, June break and/or July break. Letters with registration information will be sent to ASC families before opening enrollment to additional programs within the Center. Tuition for camp is to cover the cost of our childcare staff. Payment is required for registration and will not be refunded.

Attendance for RISE and First Class Pre-K Programs

The projected days of operation for each year are supplied in advance to allow parents to plan alternative childcare options when needed. Attendance is very important for your child. We do understand that some absences are unavoidable (i.e. illness, doctor appointments, etc.). However, unexcused absences (absences without proper notification) should be limited to **10 or fewer per calendar year for the First Class Pre-K Program.**

In order for children to benefit from the program's services, families are EXPECTED to bring their children between 7:50 and 8:15 a.m. Typically, most classrooms start their breakfast by 8:15 and morning group soon after. Children are expected to be present and ready to participate.

The teachers are engaged with the children at morning drop off and are unavailable to conference with parents, except by appointment. The program's instruction may appear to be casual and interruptible from the outside, but classroom teachers and children are involved in complex interactions that require attention and focus.

Teachers gladly assist children's quick transition into the classroom on those days that a late arrival is unavoidable, but parents are asked to respect the integrity of the program and

support it by making sure children arrive by 8:10 a.m. each day. Your child is considered “tardy” if they arrive after 8:15. Three tardies will equal an absence.

Tardies are given for any child that arrives after 8:15 or leaves before 2:15. Three tardies are considered an unexcused absence. Consistent lateness or early check out is not acceptable because your child misses valuable teaching time. **You could be subject to disenrollment if lateness, absences, or early check out become a pattern.**

Please notify your teacher via Brightwheel or contact the front desk at 256-824-4760 if you plan to be late (arrive between 8:30 and 10:00 a.m.) or if you will be picking your child up earlier than 2:15 p.m.

PLEASE NOTE: If you are not able to bring your child to school by 10:00 am, please reconsider bringing them that day. Often it is hard for the child to adapt to the routine mid-day.

The programs are designed for full-time, regular enrollment. Frequent absences or tardiness may result in a recommendation that another program would better fit a family’s schedule.

Program Admission for RISE and First Class Pre-K Programs

All registration and health forms, including an updated immunization card must be completed and on file for your child to be considered for admission to the UAH ELC. A copy of your child’s birth certificate, proof of Alabama residency are required for First Class Pre-K admission. Immunization cards must be kept current. If immunization records expire, your child will be suspended from school until immunizations are updated and a new form is brought to the UAH ELC.

Confidentiality of Records

Children’s educational and medical records and family income forms are confidential and kept in a locked file cabinet in the UAH ELC Office/Director’s Office. Anyone reviewing a file must sign in/out on the *Access to Student Records* form. Records may be released to outside agencies only with written authorization from the parent or legal guardian. Employees will not discuss confidential information about children and/or their families in the presence of other children and/or their families.

Directory Information

Addresses, phone numbers, enrollment, and attendance information cannot be released without written parental consent. This includes releasing contact information to other parents in the classroom.

Family Information and Involvement

Family information and involvement can be found and communicated to families/parents through the Family Handbook, Brightwheel App, PoPPs Group, email, phone conversations, or

direct contact with teaching staff, Staff Assistant, or the Director. Staff members use a variety of mechanisms such as family conferences, surveys, and daily written and verbal communication to promote dialogue with families.

Orientation

New RISE family orientation will be held on Thursday, July 29, at 5:30 p.m., in the Community Room. Current RISE families may attend as well. Please enter through the double doors on the east side of the building where we do morning arrival.

First Class Pre-K students and parents will have a **MANDATORY** orientation. FCPK orientation is on Thursday, July 29, 2021 at 6:30 p.m. in the Community Room.

Open House/Meet the Teachers

RISE families are invited to an Open House/Meet the Teachers event to be scheduled individually with families the first week of August. During the Open House, parents meet the Director, teachers, and staff. Children and families have an opportunity to explore the classroom environment together at the Open House, familiarizing both the children and families with the anticipated routine of the day. Teachers can answer parents' questions about the school day, and parents can inform teachers about their child's routines and experiences. The program values family/parent involvement.

Parents of Present and Past Students (PoPPs)

Our PoPPs group meets on the 3rd Thursday of each month at 5:15 p.m. in the Community Room. This is a parent-driven group and a way to be involved in the Center. The group assists teachers in planning family events (Fall Festival, Teacher Appreciation Week Events, etc.) and local restaurant night fundraisers for the Center.

Families have an opportunity to volunteer in the classroom or participate in special activities. The PoPPs Group has committees that provide numerous services to the program (i.e., develop special projects and help maintain accreditation standards) and assist with curriculum development. The PoPPs Group conducts monthly meetings in which staff and families can meet to identify program planning, events, and ongoing program operations/improvements. Family members are included as active participants in making decisions to improve the program. Such collaboration and shared decision-making opportunities allow the staff and families to build relationships of trust, support, and enthusiasm for program changes.

Commitment to the UAH ELC

Parents and family members are encouraged to participate as volunteers in the operations and activities of the school. Families will be informed of volunteer opportunities as they arise. Fundraisers, including School Spirit Nights at local restaurants, may occur periodically throughout the school year. Families/parents participate in program evaluation and planning.

First Class Pre-K Families are required to have at least 12 volunteer hours per year to maintain enrollment. It is suggested that RISE families strive to have at least one to two hours devoted each semester to volunteer time at the UAH ELC.

You may also become a room parent. Ideally, at least two parents from each classroom help support our teachers by sharing the following responsibilities:

- Planning for Teacher Appreciation Week, Teacher and Teacher Assistant birthday/holiday gifts, classroom holiday parties
- Helping recruit and organize parents for classroom and school events
- Sending classroom reminders about events and parties

Family Expectations

The program asks all parents to follow the example the teachers set in how to interact with the children in the classroom. These include following the child's lead in play, responding to their interests, focusing on the children, following the rules, and handling conflicts that arise between children. Parents are asked to let teachers help children resolve conflicts.

Parents whose behaviors in the classroom are disrupting the class or threatening the children are asked to leave. Such behaviors could include, but are not limited to, allowing children to disregard class routines and rules; interrupting instruction time during group time, center time, or daily routine; and allowing unsafe situations at the UAH ELC. The program staff uses a variety of techniques to negotiate differences and difficulties that arise in their interactions with family members.

Parents are asked to contact the classroom teacher and then the Director if they have concerns or questions about a situation. If an agreeable solution is not achieved, then the situation will be taken to the Dean of the College of Education, Dr. Beth Quick. Staff members will arrange to use techniques in a language the family can understand and comprehend.

The program provides many opportunities for families to meet with one another on a formal and informal basis, to work together on projects to support the program, and to learn from and provide support for each other during the year. Our staff works with families to plan events that are educational, informative, and social.

Occasional parent education activities or other social events, related to classroom topic studies, are planned and provided for family involvement, and family availability is a consideration as part of this planning. The program classrooms and playground environments are intentionally designed to welcome and stimulate adult interaction at the child's level. The environment is set up to be a child's world, and the important adults in their lives are encouraged to come in and participate.

The program avoids creating two worlds - one that is at the adult level, with conversations occurring over the heads of children or directed down at them, and the second at the lower level, reserved for children interacting with each other and directing conversation up to the adults. Once inside the classroom or on the playground, adult-to-adult conversations are pleasant, but brief. The program's focus is on the children. The program staff delights in friendship that forms among families in the classrooms but encourages lengthy and lively adult conversation to take place in the hallways.

Families are made aware of the program's system for formal and informal assessment of children's progress and research opportunities through the Family Handbook. The information provides the purposes of the assessment, procedures used for assessments, procedures for gathering family input and information, timing of assessments, the way assessment results or information will be shared with families, and the way the program will use the information.

The teachers are specialized in early childhood education methods and theories. If a staff member suspects that a child has a developmental delay or other special needs, the staff member will contact the Director, and an observation, documentation, and discussion about the child's growth and development will take place with the Director and a staff member. The teachers are not specialized to diagnose developmental delays or other special needs. Therefore, the Director will communicate to families in a sensitive, supportive, and confidential manner; provide documentation and explanation for the concern; and suggest next steps and information about the program and outside resources available to parents/families.

Daily School Readiness

At the UAH ELC, we ask that families have their child ready for school when they arrive, just as you would in a public school setting. School readiness is wearing appropriate clothes for the weather, having shoes on when the child comes through the door, and having all necessary school materials (for example: backpack, blanket, etc.) with the child when they come into the building in the morning. **Please refrain from cell phone use in the building.** Families are required to make contact with their teacher in the morning to "hand off" their child into the teacher's care. You MUST sign in your child each morning.

Dress Code

Families are encouraged to dress children in comfortable clothing and shoes each day. The children should feel comfortable enough to enjoy themselves without restrictions or worrying about their clothing. We ask that all children wear weather-appropriate clothing. Girls should wear shorts under dresses. Sneakers or rubber-soled shoes are best for sturdy footing. During warm weather, please avoid open-toed shoes or flip flops in order to help prevent accidents and injuries.

We play dirty here! Daily activities include active and messy play. Children wear oversized t-shirts during messy art activities to help protect clothing. We request that two complete changes of clothes be kept at school in the child's cubby.

Health Check

Every day, the teacher or teacher assistant will conduct a health check of each child. This health check will be conducted as soon as possible after the child enters the room and whenever a change in the child's behavior or appearance is noted while that child is in our care.

This health check will address:

- Reported or observed illness or injury affecting the child or family members since the last date of attendance.

- Reported or observed changes in behavior of the child (such as lethargy or irritability) or the appearance (e.g. sad) of the child from the previous day at home or the previous day's attendance at school.
- Skin rashes, impetigo, itching or scratching of the skin, itching or scratching of the scalp, or the presence of one or more live crawling lice.
- A temperature check if the child appears ill (a daily screening temperature check is not recommended).
- Other signs or symptoms of illness and injury (such as drainage from eyes, vomiting, diarrhea, cuts/lacerations, pain, or feeling ill).
- The teacher will gain information necessary to complete the daily health check by direct observation of the child, by querying the parent/guardian, and, where applicable, by conversation with the child.

Please inform your teacher as soon as possible and prior to drop-off of any changes noted in our child's health and wellness, including sleep, diet, medications, and general mood.

What information am I required to give my child's teacher when dropping my child off at school?

When the child arrives at school, it is helpful to provide the following information to the teacher (Health Check):

- If the child has not slept well the night before.
- If the child's mood and/or demeanor is unusual.
- If the child is not eating well.
- If there is any change in routine/activities for the family at home which may have an impact on the child.
- If there have been any signs of the symptoms as stated under illnesses.
- If the child has been exposed to any communicable disease.
- If the child is taking any new medication.

Please try to manage your children's illnesses promptly and with consideration for others in the classroom. We make every attempt to practice good preventive measures such as careful hand washing and cleaning of toys.

Communication

Communication between the staff and families is very vital in providing and meeting children's needs. Daily communication will assist in providing an environment that accommodates children's desires, abilities, and endeavors. It will offer teachers the opportunity to connect with families while understanding and modifying the daily structure to meet the diverse situations within the classroom. Communication can be defined or observed as, but not limited, to the following:

- Brightwheel mobile app
- Daily verbal communication
- Daily written communication logs/journals
- Flyers, newsletters, phone, or email that addresses issues or concerns
- Classroom displays, classroom books, or shared photographs
- Parent-teacher conferences or meetings

Families are encouraged to communicate with teachers regularly and **check backpacks daily.** Families are provided with daily notes through the Brightwheel app and weekly pictures of their child at school. Daily activities such as potty times, nap lengths, and food consumption will be logged into the Brightwheel mobile app for parents to view. Teachers notify parents, in writing, of significant or special events that are happening at the UAH ELC. Parents are encouraged to send notes to school concerning special events at home.

Telephoning is the least effective method for parents to communicate with teachers during the instructional day. Brightwheel is the most effective method of communication. If parents have an emergency, the main number to reach the front desk is **256-824-4760**. This is the most efficient way to get messages to the classrooms. The best time to talk with teachers is after 2:45 p.m. when the children have left for the day.

The Director will also send home monthly newsletters. The UAH ELC has a Facebook page for events and happenings to generate public awareness. The cafeteria menu is updated monthly on the UAH ELC website. We have an open door policy for families, barring COVID or health restrictions, and you are encouraged to visit (after the first six weeks of school) to observe your child in their school setting. Please schedule observations/visits in advance with the Director. We want to avoid scheduling several parents on the same day due to spatial limitations in our classrooms and observations conducted by university students.

Families/parents will be provided with a daily schedule for your child's class. Parents and teachers work together to determine a plan for providing positive behavioral support, toilet training routines, etc. Parent's beliefs and preferences are respected. Transition activities are also completed when children move from room to room each year, including a transition notebook when they move on to "big school."

Grievance Procedures

It is the program's policy and desire to provide developmentally-appropriate requirements and criteria that meet and exceed NAEYC and AL DHR requirements. The program's policy is to collaborate with parents when a difference of opinion, value, and/or belief is identified with professional practices and/or strategies. The optimum goal is for the child to participate successfully at the program in all of their endeavors.

Families/parents are asked to speak with their child's teacher if they have a concern. If the concern cannot be met or is not met by the teacher, the concern should be taken to the Director. The Director will set a conference with the parents to discuss their concerns and will follow up with a conference with the teacher as applicable. The program's goal is to meet the needs of the children and their parents. If the Director cannot or does not address the concern to the satisfaction of the parents, then the concerns will be referred to the Dean of the College of Education.

Services Discontinued/Termination

The Center reserves the right to discontinue services immediately to children under the following circumstances:

- Families/parents fail to adhere to policies and procedures of UAH and/or the UAH ELC, including but not limited to policies outlined in the Family Handbook and the Parking Code of Conduct.
- Families/parents fail to pay tuition and fees within the designated time periods.
- Families/parents fail to reasonably cooperate with the program in the provision of educational services to their child, such as, but not limited to, daily routines, implementation of curriculum, discipline and/or guidance, follow through with completion of records/additional evaluations, and maintaining a positive disposition.
- Child is dangerous to self or others due to delays/disabilities, behaviors, medical situations, or any psychological situation.
- It is decided - after appropriate evaluation by staff, specialists, family/parents, or Director - that another educational setting would be more appropriate to meet the special needs of the child.
- Families/parents do not adhere to the program's policies and procedures, which include, but are not limited to, the following: completion of and updated records, confidentiality, observations, arrival and departure routines, medical situations, special services, conferencing schedules, participation, usage of appropriate communication devices, supporting classroom routines, or maintaining a positive disposition.
- Families/parents engage in behavior that involves acts of intimidation (bullying), harassment or abuse, assault, serious threats, or acts of violence that include, but are not limited to, the following: written or spoken communication creating alarm or concern, fear of immediate bodily harm, retaliation to staff, or stress-related situation that develops/occurs due to actions of families/parents.
- Child arrives after 8:30 a.m. or is checked out early (2:00 or earlier) on a regular basis (defined as more than once a week over a period of at least a month without the consent of a doctor or the Director).

Admission for Students with Identified Special Needs

Families are required to complete an admission packet and pay required application fees. Additional admission forms and releases must be completed during the first two weeks of school for children with identified special needs. These additional forms may include:

- Permission to Evaluate
- PT/OT Permission to Test/Provide Therapy (signed by physician)
- Permission to Provide Services at initial Individualized Intervention Program (IP) meeting

The UAH ELC RISE Program offers a number of services to families of children with special needs that may include special instruction, music therapy, physical therapy, occupational therapy, and speech/language therapy using an integrated/consultative service delivery model. The teachers and teacher assistants, under the supervision of the therapists, deliver many of these services through a trans-disciplinary approach throughout the school day.

Recommendations are also provided to families for carry-over in the home and other natural environments. The UAH ELC welcomes collaboration with area Early Intervention (EI) Programs. Service providers and other EI therapists are welcome to work with the children individually in the classroom. Visits **MUST** be scheduled through the main office at least a day in advance.

Therapists may work with children individually in the classrooms when therapy goals coincide with scheduled classroom activities (such as feeding during lunch time). All outside providers are required to complete an agreement and release of liability prior to offering services at the UAH ELC. Please contact the office to obtain these forms. All EI/private therapists must sign in upon arrival (every visit). Based on individual needs of a child, families may be provided information about supplemental direct therapies available with our contracted therapists and/or therapists in the community.

Program Curriculum

The UAH ELC offers a comprehensive curriculum that supports and enhances all areas of children's development: social-emotional, intellectual, language, and physical. Based on the belief that children learn best through play, the curriculum reflects the guidelines established by NAEYC in its "Developmentally Appropriate Practice Statement." Copies of this statement are available in the Director's office.

Additionally, the program curriculum supports children's acquisition of skills and knowledge as outlined in the Alabama State Department of Early Childhood Education's Standards for Preschool Children. The curriculum is individualized for each child through a partnership between families/parents and teachers. Families/parents and teachers use both formal and informal means of gathering information about the children's interests, needs, and assessing each child's skills and knowledge. With this information, families/parents and teachers set goals for each child.

Modifications are made to the curriculum to support all children's learning opportunities, including those who live with a disability or special needs. The program curriculum integrates content, concepts, and activities in all areas of the children's development. Key areas of content include social and self-help skills, social studies, language arts and literacy, science, numbers and math, creative arts, technology, motor skill development, and health and safety. Early math, reading, and writing activities are introduced as the children gain the developmental readiness necessary to acquire these academic skills.

Every part of the children's day is utilized. Routines such as mealtimes provide many opportunities for children to learn to organize a task - like practicing math skills while setting the table, learning to be a member of a community by taking turns passing dishes of food around the table, contributing to a conversation during lunch, developing a taste for new foods, recalling or telling a story of a morning activity, and more. The classrooms are labeled so that, as children select materials and put them away, they follow directions depicted in symbols/labels on shelves as a precursor to learning to read. These are just a few ways teachers use routines to offer learning experiences.

The classroom environment is carefully planned and evolved according to the teachers' knowledge of each child's growth and development. The classrooms are divided into seven or more interest centers, based on the Creative Curriculum, in which the teachers select materials that children use individually or in collaboration with peers and adults. This helps them to acquire new skills, gain new knowledge, or practice and extend existing knowledge and skills. Teachers provide a balance of teacher-directed, child-initiated, and collaborative-learning

activities throughout the day; however, most of the time, children are free to select the activities in which they want to participate. Teachers participate in children's play in order to support the work children are doing. By listening to children, teachers discover the ways in which children make sense of their world.

It is the teacher's responsibility to monitor children's choices; to extend and enhance their activities; and to support growth, development, and acquisition of skills and knowledge in all areas of the curriculum. The classroom interest centers are the primary instructional tools that teachers use to support children's learning. The seven centers include blocks and construction, dramatic play, science and sensory, math, creative arts, language arts and reading, and fine motor skills and writing. Music and motor development are also a part of the curriculum.

Teachers identify children's prior knowledge of a subject and set up activities that extend their conceptual understanding of the topic. Then, through play and interaction with the materials and activities, the children construct ideas about their world. The materials selected for the interest centers are designed to support children's learning and development.

Dramatic play supports language development and social skills as children negotiate with peers to develop themes with assigned roles and a storyline. In "veterinary clinic," the children bring stories from personal experiences or experiences provided by the teachers that are then translated into a sequence of events to dramatize with their peers. This requires developing the ability to retell events in a sequential and understandable way; selecting or constructing props to support the play theme; working with peers to organize the play and solve problems; and working with the teacher to document the play in pictures, constructions, and written word. A play theme such as this can also be used by the teacher to introduce science concepts about animal care and health and math concepts as animals are weighed and measured.

Teacher facilitation of the children's play and work in the interest centers brings about some of the most significant learning to occur in the classrooms. Learning to read and write and to understand number and math concepts are important goals for all children. The program curriculum reflects the belief that children learn these skills best within the context of meaningful activities (versus isolated drill) and that certain developmental tasks need to be mastered before these academic skills are acquired. Reading to children regularly and conversing with them about books and events help children build the vocabulary and language skills necessary for reading.

As children's fine motor skills develop and their ability to represent their ideas symbolically through drawings and constructions becomes more complex, they are ready to write. Activities are planned within a context that is meaningful to the child (for example - planning a shopping trip to purchase food for a party) and that supports the child's acquisition of the concepts of print, letters, sounds, and concepts such as weighing and measuring, and counting out money. Teachers provide many activities in which children learn the skills and concepts that they are developmentally ready to learn.

UAH ELC classrooms use the Creative Curriculum interest areas in conjunction with language-rich, literacy-enhanced themes to teach concepts across age levels. All UAH ELC classrooms use Teaching Strategies Gold (TSG), a web-based tool, to assist with progress monitoring of skill development. TSG is matched to both the NAEYC Standards and the Preschool Standards for

Alabama. It is suitable for both typically-developing students and students who have special needs.

All classroom teachers use several ways to authentically assess child progress and use the online portfolio format TSG. The portfolio contains work samples, projects, photographs, therapy notes, and daily or weekly notes, etc. Data is taken for students who have delays in developmental areas. Parent conferences are scheduled each semester (fall and spring) for all students. The nationally-recognized High Scope Curriculum is used in the First Class Pre-K 4-year-old rooms. This curriculum is very child-centered and uses the “plan-do-review” schema for children to be allowed choices during their learning experience. The TSG online portfolio system is also used for progress monitoring of developmental skills in the First Class Pre-K Program.

The RISE and First Class Pre-K Programs use the following curriculum programs to guide instruction:

- Conscious Discipline
- Handwriting Without Tears
- Zoo-Phonics
- Teaching Strategies Gold
- Creative Curriculum/High Scope Principles
-

Inclusion

What does it mean to think inclusively?

- Inclusion means asking about access.
- Inclusion means asking about cultures and beliefs.
- Inclusion means valuing multiple forms of communication for everyone.
- Inclusion is about structuring our classrooms so that typical hierarchies of “smartness” are broken down and replaced with an understanding that there are many ways to be smart.

“We are all products of our experiences”(Sapon-Shelvin, Widening the Circle: *The Power of Inclusive Classrooms*). Why not give each child the experience of diversity and learning how to work with others of varied abilities? Why not give each child the opportunity to see beyond the surface and to build lasting friendships with children of different backgrounds, abilities, interests and needs? At the end of the day, we are all human. Each and every individual deserves a chance to reach his/her full potential and to learn how to not only advocate for themselves but for others.

Immediate Benefits for ALL Students

Children with and without disabilities each transition from the pre-k classes with a strong foundation in pre-reading, pre-writing, mathematics, and self-awareness. Our goal is for every child to be a full participant in the general education setting if possible. Visit the UAH ELC, and you will discover that our children do not see a distinction between themselves - they are simply friends, who play together, learn together, and cheer each other on! Every child adds value to each classroom family and, overall, our school family.

NAEYC: 10 Signs of a Great Preschool

1. Children spend most of their day playing and working with materials or other children. They do not wander aimlessly, and they are not expected to sit quietly for long periods of time.
2. Children have access to various activities throughout the day. Look for assorted building blocks and other construction materials; props for pretend play; picture books; paints and other art materials; and table toys such as matching games, peg boards, and puzzles. Children should not all be doing the same thing at the same time.
3. Teachers work with individual children, small groups, and the whole group at different times during the day. They do not spend all of their time with the whole group.
4. The classroom is decorated with children's original artwork, their own writing with invented spelling and stories dictated by the children to teachers.
5. Children learn numbers and the alphabet in the context of their everyday experiences. The natural world of plants and animals and meaningful activities like cooking, taking attendance or serving snack provide the basis for learning activities.
6. Children work on projects and have long periods of time (at least one hour) to play and explore. Worksheets are used little if at all.
7. Children have an opportunity to play outside every day. Outdoor play is never sacrificed for more instructional time.
8. Teachers read books to children individually or in small groups throughout the day, not just at group story time.
9. Curriculum is adapted for those who are ahead as well as those who need additional help. Teachers recognize that children's different background and experiences mean that they do not learn the same things at the same time in the same way.
10. Children and their parents look forward to school. Parents feel secure about sending their child to the program. Children are happy to attend; they do not cry regularly or complain of feeling sick.

Assessment and Evaluation Plan

Assessment and evaluation are integral parts of a strong early childhood program. The program uses multiple sources of data collection to assess children's development and learning and to evaluate the program. All assessments, evaluations, and communication with families about their child's growth and development are sensitive to family values, culture, identity, and home language.

The purpose of assessment and evaluation is to:

- Conduct health and developmental screenings of children and make appropriate referrals for further assessment as indicated.
- Identify children's interests and needs.
- Describe children's level of development and scope of knowledge.
- Discover children's approaches to learning.
- Plan curriculum and choose instructional strategies.
- Plan an environment that best supports learning.
- Improve the program and instructional practices.

- Communicate with parents and the community.
- Use language and familiar settings for the children to obtain meaningful and accurate results.
- Provide for parents progress reports at least on a quarterly basis, written reports at least two times a year, and at any time by parent request.

All children with special needs are determined eligible for services under state guidelines by a team, including the child's parents, center Director, teacher, and speech-language pathologist. Using the arena format, the families provide input to the entire evaluation process as the child is evaluated in a natural environment. Children are evaluated in seven developmental areas: cognition, gross motor, fine motor, social/emotional, adaptive, receptive language, and expressive language. UAH is not a Local Education Agency (LEA); however, specific therapy needs are determined in the RISE Program based on state guidelines.

The children who do not have special needs are administered a criterion-referenced developmental checklist and/or screening instrument after enrollment. For all children ages three and up, the Early Learning Progress Profile (ELPP), which is a progress monitoring tool that aligns with the Alabama State Standards for Pre-School aged children, is completed.

An IIP is developed for those children with identified delays in development/special needs who are attending the RISE Program at the UAH ELC. IIP meetings are held at least annually, but may be called at any time. Children with suspected delays who attend the First Class Pre-K Program are referred for testing to their local school system. UAH does not provide special services to children enrolled in the First Class Pre-K Program.

Assessment Philosophy

Assessment should be embedded in the practices of an early childhood program and should be conducted in partnership with parents and families. An authentic assessment is one that gathers data from natural observations and interactions with the child in familiar settings and with familiar adults. Assessment done at the program strives to be authentic. Assessment should be valid and reliable.

The program selects assessment instruments and methods that best achieve the purposes of its assessment practices, using criteria for analyzing assessment data that are standardized or agreed upon by the field. Assessment data is understood to be only one source of knowledge about the child. Multiple sources are gathered and analyzed along with assessment data to determine a child's level/ability or need. Formal and informal sources of information are used before a referral is made for further evaluation.

Parents are recognized as the expert of their child's growth and development and given respect for their right to make decisions about their child's education and care. Families/parents are given information about the data gathered in assessment practices. The staff works closely with families/parents in achieving the best assessment method(s) that meet each individual child's needs. Assessment is on-going and is used to monitor children's progress and to inform practice. There are clear linkages between assessment and curriculum and program development.

Administration of Assessments and Evaluations

Staff members will obtain written consent from families/parents before sharing information about a child with other relevant providers, agencies, or other programs. The program staff and other personnel administering instruments will obtain and maintain appropriate training for collecting/gathering data on individual children. The Director will be responsible for approving and checking set credentials and/or requirements for in-house and outside agencies that are administering instruments within the program. Results/reports will only be shared with parents and predetermined individuals for research projects.

Assessment Timeline

Additional intervention and/or resources are documented and followed up with the Director and appropriate specialist. Checklists are monitored continually as teachers assess and plan for learning. Summary checklists for children with special needs are given to parents every nine weeks. Parents receive written reports at least two times a year during parent/teacher conferences.

- Portfolios are on-going assessment tools and are regularly used in planning. They are shared twice a year in parent conferences and available to parents and children to review at other times.
- Early Childhood Environment Rating Scale (ECERS) is done annually in January or February. NAEYC accreditation is done every five years. Results are used to establish program improvement plans and teacher professional development goals.
- In April, assessment activities and instruments are evaluated by families/parents, teaching staff, specialists, and the Director.
- Assessment is done on the environment, instructional practices, administration, and leadership.
- Assessment is conducted by the Director, staff, parents, faculty, and ECE students.
- Data is collected by observation, surveys of parents and staff, and review of documents.
- NAEYC accreditation assessment is done every five years and ITERS/ECERS is done annually, except in NAEYC years.
- Results are used to develop program improvement plans and shared with parents and other stakeholders.

Family Education and Rights Privacy Act (FERPA)

The program will ask for written permission from the parent in order to release any information from a child's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR & 99.31):

- School officials with legitimate educational interest.
- Other schools to which a student is transferring.
- Specified officials for audit or evaluation purposes.
- Organizations conducting certain studies for or on behalf of the school.
- Accrediting organizations.
- To comply with a judicial order or lawfully-issued subpoena.
- Appropriate officials in cases of health and safety emergencies.
- State and local authorities, within a juvenile justice system, pursuant to state law.

Families/parents have the right to access their children's educational records. Requests to review the records should be made through the administrative office. Suspected violations of confidentiality should be reported promptly to the Director.

Non-custodial parents and grandparents

The right to information about a child by non-custodial parent(s) and grandparent(s) is determined by court order and/or by the custodial parent(s). A copy of any custody papers issued by the court is to be kept on file in the office.

Departure and Exchanging Information

The time between 2:15 p.m. and 2:30 p.m. is set aside for one of the teachers to be available to greet parents, quickly update parents on events in a child's day, and help children transition out of the classroom. All parents should be out of the classrooms by 2:35 unless a conference is scheduled prior to pick up time. We understand how important it is for parents to learn about their child's day, but classrooms are being used for ASC, and teachers have additional duties to close out the school day. Limited time prevents teachers from conferencing with any one parent for more than a minute or two at the end of the day.

When necessary, or desired, parents can ask the teacher to set an appointment for an extended conversation. If the teacher senses that the conversation needs to be extended at the end of the day, he/she may suggest scheduling another meeting time. Perhaps a scheduled telephone conversation can provide the opportunity to exchange more information about a child than can be accomplished in the brief period for conversations at the door. Communication between teachers and the parents of children enrolled in BCS or ASC can be addressed by sending a sealed note home, or to school, with the child.

During arrival and departure times, teachers do not initiate or encourage extensive discussions with parents about their concerns or observations of behavioral problems. It is inappropriate to have such conversations in a public place, especially in the presence of a child. Families/parents are encouraged to request a similar appointment for discussing or addressing their concerns.

Children are released only to parents/guardians or another adult approved by the parent/guardian. Teachers are notified by parents and/or office staff when another individual, other than the regular designated person, is to pick up a child. Permission to Pick Up forms must be filled out and kept on file in the office. The Pick Up Form should be completed by the child's first day of school. The adult authorized to pick up the child must present a valid photo ID if asked and must be at least 18 years of age. Changes can be made to the *Permission to Pick Up* form during the year. Please speak to the Director or Staff Assistant for more information. Only parents or legal guardians can give individuals permission to pick up their child.

UAH ELC will not be held responsible for failing to release a child to the custodial parent. It is the responsibility of the parent to provide UAH a court-certified copy of the custody section of the legal change of family status occur (divorce, legal separation). The information will be verified when the individual arrives to pick up your child from school.

If emergency changes must be made, parents/guardians are to notify the child's teacher or office staff in writing with the name of the person picking up their child. The emergency pick up person must show their government-issued ID at the front desk before being allowed to check out the child.

Children must be picked up by the designated closing time. Classroom staff has responsibilities which prohibit them from providing adequate supervision of children after program hours. A child's sense of security and trust becomes depleted when arrival times vary. Therefore, parents are asked to please be sure their child is picked up on time each day. For security reasons, during school hours, families must park on the east side of the building in the large parking lot and enter/exit the building through the front lobby doors only. For safety's sake, all children, including siblings and guests, must walk in the halls and be supervised at all times.

Children's Health

Information about children's health helps teaching staff plan activities to support their growth and development. At enrollment, families/parents are asked to submit a doctor's statement and provide information about special health needs that a child might have. A child's health information is kept confidential. Only the information necessary for a child's care is shared with staff and student teachers who need to know.

When families/parents provide the program with information about allergies, diet restrictions, or special health care needs, that information is shared with those individuals who provide care for the child. By regulation, some of it may be posted in the classroom so all adults who care for the child can be informed.

Children who have chronic health conditions or special developmental needs may need additional assistance. Families are asked to provide the program with written medical instructions from their health care provider for handling such conditions as asthma, orthopedic or sensory problems, seizures, and serious known allergies. Physician's or health care provider's directions/instructions will be followed, if the child is accepted to the Center. Conditions that require regular medication or technology support will need to complete the appropriate forms, if accepted to the Center. The program works with families to ensure that a child receives the necessary protection and care. There is NOT a nurse on staff. However, all staff are trained in CPR and Basic First Aid.

Illnesses and Medication

The family will be expected to notify the staff of any illness indicating an absence. Exclusion from school will be based on the needs of the sick child and the other children in the classroom. In case of a communicable disease, and at the discretion of the Director, other parents will be notified of the existence of the circumstances.

In the event that a child is hospitalized for any reason (including emergency room visits), parents must obtain a release from the physician stating the child is healthy enough to return to school. A copy must be provided to the Director before the child may return to school. Please try to manage your children's illnesses promptly and with consideration of the other children in their classroom. We make every attempt to practice good preventive measures, such as careful hand

washing and cleaning of toys and equipment.

Administering Medications

Medication and special medical procedures can be administered to a child in the program only with the written, dated, and signed instructions of a licensed physician, and the parent(s) or guardian(s) of the child. Medication permission forms are available in the office. The program reserves the right to contact the child's physician or pharmacist for clarification of instructions. The program adheres to Alabama School Systems policies in administering medications.

We can give medication at school when necessary and when written permission by a physician is obtained (if prescription medication). All medication must be in the original bottle. Please do not send medications that are not properly labeled. All medications must be labeled with the child's first and last names, date filled, name of physician, expiration date or period of usage, manufacturer's instructions or the original prescription label (with name and strength of medications), along with instructions regarding the administration and storage of the medicine.

Medications are overseen by our Director and staff members that are trained annually in the administration of medications to children. You must get medication dosages from your physician for an over-the-counter medication for a child under two years old. Over the counter medications must be sent in their original container with manufacturer's labels still attached. If your physician gives your child a sample bottle of medication, get a written dosage from the physician at the time if it must be given at school. Please remember not to leave medications in your child's school bag as it can be accidentally opened by a child. The administration of all medication is documented. All medicines are kept in a locked cabinet in the office.

Prescription and Over-the-Counter Medications

Prescription medications must be in their original container bearing the pharmacy label which shows the prescription number, date filled, physician's name, child's first and last name, strength of the medications, directions for administering and storing, and expiration date.

Nonprescription medications, such as over-the-counter cold and allergy remedies or pain and fever-reducing medicine, can only be administered by the staff if these medications are part of a prescribed therapeutic treatment. Written instructions from the child's parent or guardian, which corresponds with the physician's instructions for administering the medication, is required.

ALL medications must be supplied by the parent in the original container with a visible expiration date. Parents must sign a written permission form before any and all medications are administered. Medications must be labeled with the child's full name and the date they were brought to the program. Medication Permission forms must be on file in the office in order for the staff to administer any medications. All medications are kept in a locked container in the office or other designated cool storage area.

Any program staff member who administers medication must have specific training and written performance evaluation updated annually by a health professional or consultant on the right practices of medication administration. Person giving medication signs documentation for items that are administered and is required to demonstrate competency in the procedures and use

written guidelines in how to perform the procedures. Such training includes, but is not limited to, pediatric CPR and First Aid.

Sun Block

The program encourages the use of sunblock with UVA and UVB protection of SPF of 30+ to protect children from the harmful rays of the sun. Families/parents are asked to apply sun block in the morning when dressing their child. Teaching staff applies sun block in the afternoon at the end of the day. A child-friendly SPF 30 sunblock supplied by parents can only be applied with written permission provided by parents on the School Medication Prescriber/Parent Authorization form.

Insect Repellent

Insect repellent must be applied at home before coming to school. We will not apply it at the ELC.

What types of illnesses would prohibit a child from attending the center?

We **cannot admit** a child into care if any the following exist or keep a child in care if any of the following develop:

- The illness prevents the child from participating comfortably in center activities, including outdoor play.
- The illness results in greater need for care than caregivers can provide without compromising the health, safety, and supervision of the other children in care.
- The child has one of the following, unless medical evaluation by a health care professional indicates that you can include the child in the center's activities:
 - Oral temperature of 100.4 degrees and accompanied by behavior changes or other signs or symptoms of illness.
 - Tympanic (ear) temperature of above 100 degrees and accompanied by behavior changes or other signs or symptoms of illness
 - Axillary (armpit) temperature of above 100 degrees and accompanied by behavior changes or other signs or symptoms of illness or
- The child has symptoms and signs of possible severe illness such as lethargy, abnormal breathing, uncontrolled diarrhea, two or more vomiting episodes in 24 hours, rash with fever, mouth sores with drooling, behavior changes, or other signs that the child may be ill.

Children should not be in school if the following illnesses are present, or have been present for twenty-four hours:

- **Severe Colds**
- **Vomiting**
 - Exclusion until no vomiting for 24 hours or until a healthcare provider determines that the cause of the vomiting is not contagious and the child is not in danger of dehydration.
- **Strep Throat**
 - Exclusion until 24 hours after antibiotic initiated and no fever for 24 hours without fever reducing medicine such as Tylenol/Motrin.

- **Diarrhea**
 - Exclusion until stools are formed.
- **Fever**
 - Exclusion until fever-free for 24 hours without meds.
- **Rash with Fever**
 - Exclusion until physician says no communicable disease.
- **Conjunctivitis (Pink Eye)**
 - Exclusion until 24 hours after antibiotic drops initiated.
- **Impetigo (Skin Infection)**
 - Exclusion until 24 hours after antibiotic initiated and active lesions are gone.
- **Measles/Mumps or Chicken Pox**
 - Exclusion until all sores have dried and crusted (usually six or more days).
- **Head Lice**
 - Exclusion from the time the lice are discovered until after the first treatment and no nits/lice are visible.
- Existence of lingering illness, lethargy, or behavior changes which would inhibit a child's participation in classroom activities or outside play.
- Any other infectious or potentially infectious illness identified by the center Director.

Children must feel well enough to participate in daily activities.

Parents will be notified if children become ill at school and must make arrangements to pick up their child within the hour. The UAH ELC enforces the same standards in preventing employees from working while sick.

Injury

If a child becomes injured, or if there is a medical emergency, the program staff is expected to respond quickly and calmly, assessing the situation to provide appropriate care. Staff should seek help from other adults so that someone can specifically tend to an injured child. If the staff member determines that the injury is serious and that professional help may be needed, the staff member will notify the front desk immediately. The front desk will immediately notify the Director. The team will decide the appropriate action to take including calling the parent to take the child to the doctor or calling 911. We immediately call 911 if a child has stopped breathing or has difficulty breathing. Staff wear gloves for any injury involving blood or bodily fluids. A staff member is not permitted to transport an injured child to their home or to a medical facility.

If 911 is called, the caller will give the following information:

- Self-identification
- Identity of the injured person and the nature of injury
- Time of injury
- Location of injured person
- Pre-existing medical conditions and/or allergies
- Current medication taken

If 911 is called following the above consultation, the parent will also be called immediately thereafter. A staff member/Director will be selected to accompany the student in the ambulance

if the student is taken from the school to a hospital for treatment. The parent will be notified of the medical facility destination. The staff member will stay with the student at least until the parent has arrived. The Director will follow-up with the parent regarding the status of the student's condition until the student returns to school.

A container of liquid absorbent pellets is kept in the center and used on spills of bodily fluids such as blood or vomit. An injury report is completed for each accident.

Incident Reports

An Incident Report must be filled out when an injury occurs to a child. If there is any kind of mark (red, teeth marks, bruise, scratch, etc.), blood is visible, or the child continues to complain, an Incident Report must be filled out, no matter how minor the injury. No other child's name should be mentioned on the report.

An Incident Report may be filled out when the family/parent needs to be notified of the behavior of a child such as biting, seriously hurting others, unusual behavior, etc. If a child was hurt or bitten by another child, we do not use that child's name. Instead, we write "another child." A copy with signatures from the teacher, parent, and Director is given to the family, and a copy is placed in the child's file.

Emergency Plans/Procedures

If the Director or Assistant Director is not on-site during an emergency, a named Lead Teacher will be specified. Listed below are the procedures for the UAH ELC in the event of an emergency situation.

Inclement Weather

In case of snow or severe weather, we will follow the schedule of UAH. If UAH closes due to inclement weather, the UAH ELC will also close. If the threat of inclement weather arises, parents should listen to local radio stations for school closings and times and make arrangements to pick up their child promptly. In the event of an early closing, ASC will be canceled for that day. Any other unscheduled closing will be reported to parents as soon as possible through email, text or by telephone communication. Please sign up for Brightwheel for messages from the Director.

Emergency Lighting

Classrooms and evacuation bags have flashlights. Batteries are routinely replaced or recharged. The building is equipped with emergency lighting in the event of a power outage.

Disaster Evacuation Plan

The Director, Assistant Director, Staff Assistant, classroom teachers, and other staff members are familiar with and prepared for all evacuation scenarios. Preparedness fire drills are practiced monthly, and tornado drills are practiced every three months. Other evacuation procedures are practiced on a yearly event with the collaboration of Huntsville Fire and UAH Police Departments. Teachers discuss these emergency procedures with children so they are prepared and less likely to get upset.

Obtaining Emergency Assistance

The Director or classroom teachers ensure that all children are evacuated from the building or are in a safe place. After the children are safe and accounted for, someone is named to contact the UAH Police Department if not already done so (by activation of the alarm system). The classroom teachers are responsible for bringing their attendance sheets and classroom backpack containing children's emergency information. When evacuating to the designated location, all staff with cell phones will carry them to use for contacting parents, if necessary. The Director and office staff are responsible for checking each of the classrooms and bathrooms for any child or adult that was left or unable to hear/see the alarms.

Teacher Supplies for Emergencies

The classroom backpack contains items necessary for emergencies, including copies of children's emergency and contact information. Teachers carry cell phones with them whenever they leave the classroom. The Director is responsible for maintaining the emergency center binder. Classroom teachers are responsible to maintain classroom backpacks and up-to-date emergency binders. All UAH ELC Program staff are responsible to make sure they bring the classroom emergency bag.

Fire Emergency

The fire alarms are linked to the Huntsville Fire Department and UAH Police and Safety Department. If the alarm sounds, Huntsville Fire Department and UAH Police Department are automatically dispatched to the building. Evacuation plans are posted in each classroom. Fire drills are conducted monthly. In the event of a fire-related emergency, teachers gather and count the children, take the daily sign-in book and the classroom backpack, and evacuate the building to a designated safe place. Once in a designated safe location, teachers take attendance and account for all children. Teachers are responsible to verify that all children are accounted for and present. (During fire drills, children practice walking out of the building, taking attendance, and remaining in the safe location during the fire drills.) Generally, in the event of a fire, the classrooms go to the west fenced playground. The Director and office staff check rooms in the process of leaving the building to ensure no one is left behind.

Shoes In an Emergency

When children remove their shoes for naptime or dramatic play, teachers should encourage them to always place **their shoes in a central basket in the classroom**. That way, if an evacuation is necessary, teachers can grab the basket and put shoes back on children after they are out of the building.

Tornado

If the UAH campus civil defense tornado sirens sound, the children are immediately evacuated to a designated safe area in the building. These hallways/rooms are in the center of the building and have no windows. The teachers are responsible for bringing daily attendance, emergency cards, and emergency backpacks to the evacuation area. The Staff Assistant is responsible for bringing the office first aid kit with back-up emergency binder to the evacuation room. The Director is responsible for checking all rooms to make sure no child or staff are left behind.

Teachers check attendance once the children are in the evacuation area. The evacuation area is supplied at all times with a civil defense talking radio and batteries, first aid supplies, bottled water, snacks, flashlights and batteries, quilts, a collection of things to entertain the children, diapers, Kleenex, and wet wipes. Tornado drills are practiced quarterly. Children are kept in the evacuation area during a tornado warning for Madison County. Parents are discouraged from leaving the Center with their children during dangerous weather conditions.

Shelter-In-Place Procedures

Shelter-in-place occurs when a threatening situation is posed and escape from the building is not advisable until instruction has been received from appropriate authorities. In the event of a shelter-in-place situation, before contacting anyone else, teachers or other adults are to immediately contact the police by calling 911. If children are on the playground and teachers become aware of a dangerous situation (strange behavior of an individual outside the fence, entry onto the playground of a strange individual who will not leave or appears dangerous, the sound of gunfire in the area) or staff are notified of a dangerous situation and told to go into shelter-in-place, the children are moved inside immediately. Teachers should close and lock the door and immediately call 911. If children are inside their classroom and the teachers become aware of a dangerous situation either by their own observation or by notification from appropriate authorities, they should immediately lock their hallway and outside doors, move the children away from windows/doors, have them sit down on the floor, turn off the light, and call 911. ALL classroom doors should remain locked during the school day.

Dangerous or Suspicious Persons

Any unknown person who enters the building or loiters on the property outside of the building should be identified. A person with no legitimate business in the building should be asked to leave. The UAH Police are called if such a person refuses to leave. In the event of a hostile or volatile adult entering the building or classroom, teachers should attempt to move the children to another room and contact the front office immediately for assistance. The police will be called if the danger is assessed severe. Avoid behaviors that would increase the likelihood of a violent response from the individual. Keep the children calm until help arrives.

Parent Contact Information

Notice of changes in parents' contact information - cell/work/home phone numbers, addresses, or places of business - should be given to the administrative office. Families/parents need to make certain that they or their designated emergency person can be reached at all times. On the daily sign-in and sign-out App, families/parents are expected to leave a phone number where they can be reached if different than their usual/regular routine.

Reporting Child Abuse and Neglect

It is required by state law that any teacher or staff member that suspects child abuse or neglect notify the local Department of Human Resources. Child abuse in any form is not tolerated. No one, including parents or teachers, is allowed to abuse a child physically or mentally while at the program. Staff members are to never use physical punishment, such as shaking or hitting, or engage in psychological abuse or coercion. Program staff is never to use threats, derogatory remarks, or withhold food as a form of discipline.

All forms of abuse must be reported immediately to the Director. The program is required by Alabama and federal law to report any suspected evidence of physical, mental, or sexual abuse, or child neglect to the Alabama Department of Human Resources (AL DHR). AL DHR will determine if a situation warrants investigation. Teachers and staff are required to report any suspicion of child abuse to the local DHR and Director. Verification is not required.

Alabama and federal law require that suspicions be reported in good faith. Protecting a child from an abusive adult, even if it is another staff member who gets stressed and reacts harshly to the children, is the responsibility of all staff. Physical punishment of children in a child care or early education setting is considered child abuse by Child Care Licensing and must be reported. It is a misdemeanor for any person to fail to report. A person making a report in good faith is immune from civil or criminal liability. The name of the reporter is kept confidential.

A report should be made when there is reasonable cause to believe that a child has been abused, neglected, or is in danger of being abused. A report of suspected abuse is a request for an investigation. Investigation of child abuse reports is the responsibility of Child Welfare workers and, when a crime may have been committed, law enforcement officials.

During annual staff orientation, all staff receive Child Abuse and Neglect training and are provided resources and information that raise awareness, including warning signs that a child may be a victim of abuse or neglect. Teachers working with children ages 3-24 months receive training regarding Sudden Infant Death Syndrome, which is the unexplained death of a sleeping baby, and Shaken Baby Syndrome, which is the result of violent shaking of young children.

Lost or Missing Child Procedure

In the event that a child is determined to be missing, the following procedures will be followed:

- Staff will determine when and where the child was last seen. Staff will remain calm and keep the other children calm.
- Staff will (if possible) consider the state of mind of the child. Were they scared, frustrated, attempting to elope? Did they fall behind?
- Staff will conduct a search of the immediate area with other available staff. Staff will ask nearby children and staff if they have seen the child or know where the child is. Before leaving the rest of the group to find a child, staff will see that the group is supervised by other staff members. Available employees will monitor the front entrance and playground gate while other employees begin looking for the child inside the building. Office staff will pull video camera footage to check for the child.
- Staff will check bathrooms, gym, other classrooms, community room, and playgrounds.
- Staff will contact the Director and/or other administrative personnel about the situation. Staff will identify the missing child, when and where the child was last seen, and provide a description of the child, including clothing worn. The Director will organize an extended search. If the child is not found in 10 minutes, the Director will contact the UAH police department and the child's parents.
- Staff will remain calm and positive, acknowledge the other children's fears, and try to keep the routine as normal as possible.
- Staff will complete an incident report and any other additional reports requested.

Daily Schedules and Routines

The daily schedule is posted outside each classroom. Each schedule is designed to allow children adequate time to explore and have a balance of active and quiet activities, indoors and out. The routine allows children to know and prepare for what is coming next and provides a sense of security. Some flexibility is anticipated in response to individual and group needs, special needs, and special times such as therapy, visitors, and weather conditions.

Children are provided the opportunity to have time for free choice and accessibility to activity learning centers throughout the daily schedule. Teachers provide children the opportunity to acquire certain skills through indirect and direct teaching strategies. They purposefully plan and prepare the environment so children are allowed to have child-initiated and interest-topics to be discussed, explored, and researched.

Each child is supported and provided for through planned lessons, special interest centers, and collaborative inquiry to play individually, in pairs, small groups, and whole group. Teaching strategies will also include opportunities for children to be exposed to curriculum content, routines, learning opportunities, tasks and skills in a holistic approach, and segmented sections, as applicable, that are meaningful and suitable for children. Teachers will also provide children the opportunity to engage and be immersed in emerging skills and activities that support and enhance repetitive learning opportunities.

The teaching staff assist children's learning by interacting and playing within centers or activities. Teaching staff use this opportunity to gather documentation of children's learning, reflect upon and assess children's interactions, and modify plans or teaching strategies to increase children's learning opportunities.

Each child's schedule is individualized so that the day includes, as needed, lunch, snack, and rest (children may or may not sleep). The center will have a common group activities, music, gross motor play outdoors (weather permitting), and therapeutic services (if typical school day). Each child will generally follow a schedule that includes individual activities.

Teaching staff's interactions will be demonstrated or portrayed by:

- Interacting with children without using any form of physical or psychological abuse.
- Recognizing and protecting children from health and safety hazards.
- Interacting, encouraging, and providing children with a variety of learning opportunities and social experiences.
- Adapting and responding to conditions that require changes and demanding responses that support the quality of the program.
- Communicating with families, children (if applicable), and other staff members.

In addition to other planned activities, teachers encourage and help children become independent and competent in toileting, hand-washing, personal hygiene, dressing, and eating. Children are encouraged, guided, and provided the opportunity to clean up equipment and materials within the classroom and on the playground area.

Guidance and Discipline

The philosophy of the program is that discipline is based on the developmental level of the child. All expectations for children's behavior are developmentally-appropriate. Staff members will observe children to determine patterns in a child's behavior to provide planned, reflective, and consistent individualized responses.

Positive Behavioral Support/Discipline Procedures

The teachers and staff members of the UAH ELC provide behavioral support and use discipline measures that demonstrate kindness and compassion, but also firmness and consistency. Every attempt is made to help children gain the confidence and knowledge that is needed to develop their self-control. Children are not allowed to hurt themselves or others or destroy property. Promoting positive behaviors in children is a primary goal in the classroom setting.

Guidelines for promoting these behaviors are as follows:

- Classroom rules are simple and geared toward the child's developmental level.
- Teachers and staff serve as models of appropriate behavior.
- Yelling at children and frequent use of the word "no" are not accepted as appropriate staff interactions with children.
- Children will be praised for following the rules and for modeling positive behaviors.
- Children will be reminded of the rules, and the classroom staff will consistently enforce limits.

Unacceptable behaviors will be dealt with using the following guidelines:

- Consistent responses and consequences to unacceptable behavior.
- Planned ignoring.
- Redirecting.

The program staff uses a number of positive guidance techniques, both direct and indirect, to ensure safety and order in the classrooms. These techniques are implemented for children to learn and understand limits while developing positive self-esteem and a greater sense of self-control. For example, to assist children in understanding and developing a greater sense of self-control, children will be redirected with other options or materials, given a choice between options, or be allowed to gain self-control by thinking about their behavior while sitting in a designated area for a break or cool-down time.

Teachers will utilize a number of resources to determine a child's inability to display positive self-esteem and/or self-control. Teachers and staff will document a child's persistent, serious and/or challenging behavior through daily anecdotal notes, accident/incident reports, running records, and/or daily communication logs as a method to collect and analyze data about a child's recurring behavior. The documentation will assist in determining factors that contribute to the child's challenging behavior with events, activities, and/or interactions with others. This information will be collected and kept in the child's file within the Director's office. Teachers will notify the Director of children who need additional assistance in developing positive self-esteem and self-control. The Director will then contact the parents, and a meeting will be set to discuss alternative strategies, which support the child.

A team will be developed that consists of the parents, teachers, the Director, and other resource specialists (as needed) to focus upon developmentally-appropriate practices/strategy plan that can be developed and implemented for the child on an individualized basis that supports the child's inclusion and success within the program. In addition, a behavioral therapy specialist can be contacted to assist with the team decision in regard to screenings and/or assessments to determine the level of support for individual children.

Conscious Discipline

Conscious Discipline is a comprehensive social and emotional intelligence classroom management program that empowers both teachers and students. Based on current brain research, child development information, and developmentally-appropriate practices, the goal of the program is to foster emotional intelligence of teachers first and children second. Conscious Discipline leads teachers, providers, schools, and programs through a process that promotes permanent behavior changes in both teachers and children. The change is from a traditional compliance model of discipline to a relationship-based, community model. The key is a sense of community. The "school family" is the core of the program.

The school family is held together through communication skills. These skills are taught during conflict moments in the classroom and through active learning lessons. The goal of the school family is to create problem solvers. Love, expressed through safety, cooperation and respect, is the tool used to imbue the system with power. Both teachers and students are empowered to control themselves and to relate to others. Believing we must FIRST change ourselves and model our expectations for others through self-control creates a classroom climate and culture that teaches the following values:

- You are in charge. You can become the person you want to be.
- Power comes from within.
- You are responsible for your feelings and actions. Your choices impact others.
- You must teach others how to treat you. You cannot expect them to magically "know."
- Conflict is a part of life. Mistakes offer opportunities to learn.
- Love is more powerful than fear. Cooperation is more effective than coercion.

Behavior Intervention Plan (BIP)

In the event that a child's behavior requires additional support or supervision during the school day, a confidential collaborative process will begin:

- **Step One:** A meeting will be scheduled with parents to discuss:
 - Concerns.
 - What has been tried (reasonable modifications)?
 - Is it working?
 - Parent input.
 - Behavior Intervention Plan (BIP) is designed and implemented.
- **Step Two:** Reconvene after two weeks at the set date and time.
 - **Plan A:**
 - More time is needed.
 - Research additional resources (UAH Students/interns) and request more assistance from the parent in resolving the behavior.

- **Plan B:** The plan was successful. Success will be determined by metrics.
- **Step Three:** Reconvene after two weeks at the date and time to determine if additional resources are needed.
 - **Plan A:**
 - Address additional resources and additional expenses necessary to meet the needs of the child.
 - Time frame.
 - **Plan B:** Plan was successful. Success will be determined by metrics.
- **Step Four:** If the committee determines that the child's needs would be better served in an alternate environment, the child will be promptly withdrawn from the UAH ELC.

****The UAH ELC reserves the right to remove any student from the center if his/her behavior threatens the safety or well-being of others or themselves.**

Biting Policy

Our programs recognize that biting is unfortunately not unexpected when children are in group care. We are always upset when children are bitten in our program, and we recognize how upsetting biting is for parents. While we feel that biting is never the right thing for toddlers or preschoolers to do, we know that they bite for a variety of reasons. Most of these reasons are not related to behavior problems in children.

Our program does not focus on punishment for biting but on effective techniques that address the specific reason for the biting. When biting occurs, these are our three main responses:

- Care and help for the child who was bitten.
- Help for the child who bit so that he or she learns other behavior.
- Examination of our program to stop the biting.

Our teachers express strong disapproval of biting. They work to keep children safe and to help the child who bit learn different, more appropriate behavior. When there are episodes of ongoing biting, we develop a plan of specific strategies, techniques, and timelines to address it. We do not use any response that harms a child or is known to be ineffective.

We give immediate attention and, if necessary, first aid to children who are bitten. We offer to put ice on the bite if the child is willing. If the skin is broken, we clean the wound with soap and water. If children are bitten on the top of their hands and the skin is broken, we recommend they be seen by their health care provider.

When children bite, their parents are informed personally and privately the same day and given a copy of the incident form. When we experience ongoing biting in a classroom, we share the written plan we have developed with all parents of children in the room.

Biting is always documented on our standard incident report form, which is completed and signed by a teacher and an administrator. It must also be signed by the parent. One copy is given to the parents, and the other copy is kept in the student's file.

We keep the name of the child who did the biting confidential. This is to avoid labeling and to

give our teachers the opportunity to use their time and energy to work on stopping the biting. Once a year, all staff attend a training session on biting. In addition, we have current resources on biting available for staff and parents. We encourage parents to bring their concerns and frustrations directly to the teachers and/or Director.

Hand Washing

Hand washing is the most important means of limiting the spread of diseases. All individuals participating in the program wash their hands before preparing and serving food, after helping a child with the bathroom or changing a diaper, after cleaning a child's face, before and after tending to a child's injuries, after handling pets, and after outside play. Children are encouraged to wash their hands at the same time using soap and rubbing their hands together under running water for several seconds.

Staff and children follow proper hand washing procedures in order to eliminate as many germs in the environment as possible. Children who are developmentally ready to learn personal hygiene are taught hand washing procedures and are periodically monitored for assistance to successfully complete the task. Staff will assist children with hand washing as needed. Hand washing is required for all staff, volunteers, and children when entering the room. This reduces the risk of transmission of infectious diseases to themselves and to others.

Everyone is required to wash their hands at these times:

- When arriving for the day.
- Before and after:
 - Meals and snacks, preparing, handling, or preparing food.
 - Feeding a child.
 - Administering medicine.
 - Playing in water activities that are used by more than one child.
 - Moving from one group to another that involves contact with infants and toddlers/twos.
- After:
 - Diapering.
 - Using the toilet or helping a child use the toilet.
 - Handling bodily fluids (mucus, blood, vomit) from noses, mouths, eyes, or open sores.
 - Handling any raw food that requires cooking (eggs, meat, poultry).
 - After playing in water that is shared by two or more people.
 - Handling pets and other animals.
 - Handling garbage or cleaning up items or areas.
 - Removing gloves when handling blood or body fluids that might contain blood.
- Hand washing how-to:
 - Wash hands thoroughly using warm running water to wet hands and wrists.
 - Use a thumb-nail size of liquid soap, rubbing and working soap vigorously into a lather and washing hands between fingers, back and inside of hands up to wrists, and under fingernails for at least 20 seconds or two verses of "Row, Row, Row, Your Boat," making sure that all jewelry area is cleaned under and around the

- item.
 - Rinsing all areas well.
 - Dry hands thoroughly using a clean paper towel.
 - Avoid touching faucets by using a paper towel to turn off faucets.
 - If in the bathroom, open the bathroom door with a paper towel and throw the paper towel in the trash receptacle.
- ALCOHOL-BASED HAND RUBS ARE NOT USED IN LIEU OF HANDWASHING PRACTICES AND/OR PROCEDURES. Because alcohol-based hand sanitizers are considered an OTC medication per DHR regulations, a medication form must be signed by the parent and on file in the office.

Diapering and Toileting

Diapering and toileting are conducted only by staff members that are trained in diapering/toileting procedures. Staff will change your child's diaper regularly throughout the day and periodically check your child in an attempt to assure they remain dry and clean. For any child requiring diapering, the parent is responsible to provide diapers/pull ups with tabs and wipes. Your child's teacher or other staff member will make every attempt to notify you when the supply of diapers/wipes is getting low. Diapers should be clearly marked with your child's name.

Should your child need any special care or attention when diaper changing, please provide written instructions to the Director upon enrollment. The staff is able to apply lotions or creams to children only to prevent a rash or dry skin with a signed medication form. All diapers will be changed only on a designated diaper-changing table. Children on a changing table are never left unattended, and staff will wear protective gloves and will place the soiled diaper in a plastic bag for disposal. Changing tables are cleaned after each use.

Disposable diapers are required for children who are not toilet trained. Cloth diapers are prohibited. Families/parents that change their child's diapers at the program are asked to follow the required sanitation procedures posted in the diaper changing area.

Independence in toileting is a huge developmental milestone for your child. As with many skills your child is learning, consistency and commitment from the adults will play a large part in how quickly your child will acquire this skill. Before beginning to toilet train a child, teachers ask families/parents to meet and plan together for a successful new step in a child's development. Teaching staff want to work with families/parents and help make this a successful new step in their child's development.

Toilet training must begin at home. Families are asked to keep the teacher/staff updated on the routine used at home and provide metrics regarding success.

When the teacher and parent decide to begin toilet training at school, the classroom teacher will develop a schedule for when the child will be taken to the toilet. A daily record with the length of time the child is able to stay dry while at school will be implemented. **We ask that families send pull-ups with Velcro sides.** When a child can consistently stay dry for one hour (including nap time), the teacher will develop a plan for moving the child out of pull-ups and into underwear at school. **This will include wearing underwear to and from school.**

Children like to imitate other things, and toileting is another area they will explore. Toilet training comes when a child is ready to take responsibility for eliminating in the toilet and handling their own clothing. This is generally around two-and-a-half to three years of age but differs among children.

The following are requirements when implementing toileting practices:

- Commercial disposable diapers or pull-ups are used unless the child has a documented medical reason signed by a health provider.
- Diapers and clothing items that are soiled by urine or feces are immediately placed in a plastic bag without rinsing or avoidable handling and sent home that day for laundering.
- Children are checked every hour when awake and when they awaken from rest/nap times.
- At all times, caregivers have a hand on the child when the child is being changed on an elevated surface.
- Changing procedures must be posted and followed.

Meals and Snacks

The University contracts with a food service company which provides employees who prepare nutritional meals and snacks. All snacks and meals follow the USDA/CACFP required Food and Nutrition and Food Service and Sanitation guidelines. Outside food is NOT allowed. The food service is checked on a regular basis by the State Department of Health. Both agencies use the USDA Guideline for the program's evaluation. In addition, a local dietician works with the program by analyzing the nutritional value of items on the menu by calculating fats, sugar, carbohydrates, vitamins, and minerals, as well as proteins, fruits, vegetables, grains, and dairy food groups. Then a meeting is held to review the analysis and suggested changes to meet the national dietary requirements.

Children attending the program are provided with breakfast, lunchtime meal, and an afternoon snack. The menu is posted monthly on the family/parent bulletin board in the main hall, each classroom, on the website, and emailed to all families/parents. The menu is planned to include a variety of foods and to meet a child's daily nutritional requirements. Children are encouraged to try each food and develop a liking for a variety of foods.

When children require a specific diet, either for medical, religious, or cultural reasons, parents should discuss the dietary needs/restrictions with the Director and the classroom teachers. A plan to ensure that a child's nutritional needs are being met can be discussed. A doctor or cleric signature is required for food substitutions. Food substitution forms can be obtained from the Director at enrollment or during the year. If the program is unable to provide an adequate substitution for prescribed diets, families/parents are asked to provide additional foods their child can eat.

Meals are served in a family-style atmosphere. Several children and at least one adult share meals and snacks together at a table and engage in conversation. As they are ready, children serve themselves and pour their own drinks. Developmentally-appropriate table manners are taught and encouraged.

Families/parents are invited to eat lunch with their child for a fee of \$4.00 per adult (to be paid at the time of the meal). Families/parents need to give one day notice to the teachers if they wish to join their child for lunch. No outside food is allowed to be brought into the UAH ELC.

Parents are encouraged to be on time in the mornings. Children are served breakfast soon after arrival. A hot, nutritious lunch is also provided daily at a scheduled time. Children in some classrooms will eat lunch in the cafeteria, and younger children will eat in their rooms. Parents of children in the Ladybug room should speak to the teacher concerning introduction of solid foods. An afternoon snack will also be provided. Parents of children with medical needs are encouraged to meet with the Director to discuss the child's needs.

Food, Drinks, and Candy from Home

The program **does not allow** food or drinks to be brought from home. Children should complete snacks or meals before entering the building. The program provides nutritious snacks in the afternoon and a nutritional breakfast and lunch. The USDA menu provides the children with the energy they need to get through the school day.

Any food items brought to be shared for a special activity during the program's daily hours or that are requested by the program must be store-bought or prepared in a licensed commercial kitchen.

Breastfeeding

The UAH ELC provides a space in the breastfeeding room for any nursing mothers to breastfeed their child when on campus. Families have the right to breastfeed or provide breast milk for their child while in care at the UAH ELC.

Health and Safety Procedures

The following health and safety procedures are followed at the UAH ELC:

- Fire drills are conducted monthly, and severe weather drills are conducted four times a year. Lockdown procedures are practiced four times a year. Evacuation routes are posted in each classroom. All drills are documented, and records of drills-including the date, time, and length for the procedure to take place-are located in the licensing binder in the Director's office.
- All classrooms maintain a first aid kit and emergency backpack.
- Children and staff wash their hands as often as necessary (as outlined by Minimum Standards).
- Frequently mouthed and handled objects/toys are washed and sanitized between uses by the children.
- Diaper changing and toileting are performed in a separate area of the classroom. Gloves are always worn by staff when diapering or assisting children with toileting. Soiled diapers and clothing are kept in separate, closed containers. Changing tables are sterilized after each use. Latex-free gloves are used if your child is allergic to latex.
- All classroom materials such as towels, washcloths, bibs, and sheets are washed after single uses by the children or staff.
- All electrical outlets are covered.

- Instructional staff and the Director are certified in pediatric CPR and First Aid. There is a pediatric AED in the main office.
- All staff are required to receive a physical exam every two years. A tuberculin test must be completed within two weeks of employment. Staff must provide written evidence of a negative tuberculin test, or positive with no health risk.
- Staff are not permitted to transport students to or from school unless they are on the child's Authorized Pick Up List. At the time of transport, the employee is not acting on behalf of the UAH ELC or the University.

Infant Care

In addition to the aforementioned practices, some states require caregivers to follow additional rules and regulations when caring for children under 18 months of age. This includes but is not limited to:

- Following the policy guidelines outlined in Minimum Standards regarding Infant Safe Sleep.
- All infants must be placed in supine (on their back) when positioned for sleep.
- Labeling cribs of children that can independently roll over in the crib.
- Limiting the use of blankets to children 18 months or older.
- Ensuring all non-walking children who are 12 months or younger sleep in a crib provided by the Center.
- Obtaining the proper forms when a child requires alternative sleeping arrangements and positions.
- Posting and updating feeding schedules for any bottle-fed child every 30 calendar days.
- Posting and updating nap schedules for any child napping beyond the designated nap and rest hours in the daily schedule every 30 calendar days.

Please note: If your child is 6-17 months, please provide in writing by the first day of school:

- An individualized nap schedule if your child is taking naps more than once a day.
- An individualized feeding schedule if your child primarily feeds from a bottle.

Naptime

All children enrolled in the program are expected to rest for a minimum of 60 minutes on their assigned cot. Children may bring a small pillow, blanket, and soft sleep toy such as a doll or stuffed animal to sleep/rest with them on their cot/mat. Children who do not sleep are able to complete quiet tasks designated by the classroom teachers after a required 30-minute rest period. Children are taught to play quietly and to not disturb their sleeping classmates. Teaching staff will assist the children with nap time transitions with music, patting backs, and reading stories. The teaching staff will not require, force, or punish children for not sleeping during naptime. On Fridays (or other designated days due to holidays or breaks), families/parents are requested to retrieve all sleeping items brought from home to wash/sanitize and bring back the returning day.

Outdoor Play

Children are expected to participate in outdoor play with their class each day, as the weather permits. Outdoor play takes place each morning and afternoon, unless the weather is determined to be detrimental to the children's health and safety (i.e., electrical storms,

temperature above 100 degrees F, or wind chill below 0 degrees F).

Children should come to school dressed appropriately for changing weather conditions. Special attention to clothing and footwear protects children from injuries on the playground. Rubber-soled shoes and shoes that fit securely on a child's foot help prevent falls on slippery surfaces when children run and climb. Necklaces, scarves, and strings on hoods of jackets should be avoided as these items can choke if a child falls and the item is entangled in playground equipment.

Teaching staff constantly survey the playground and other equipment to discover and correct potential hazards, but parents' attention to these matters adds to each child's safety. Flip-flops are a potential hazard and are prohibited as footwear. Children need to have layered clothing items during the colder temperatures so drastic weather changes can be tolerated by the children during outdoor play.

Water Play

The classrooms plan water-play experiences at specially-designed tables that are closely supervised, and precautions are taken to prevent infectious disease. Children are prohibited from drinking and/or immersing their bodies in the water and/or other substances. Children with sores on their hands are not permitted to participate in communal water play.

Water table materials are changed on a daily basis or as needed to prevent the spread of communal disease/germs. Fresh water is used and is changed before a new group of children participates in the water play, and the water is drained with each group of children when they complete their play. When cleaning the water-play table, fresh water flows freely through the water table and out through a drain in the table. Children are encouraged and reminded to wash their hands before and after playing at the water-play activities.

Special attention with supervision is implemented with toddlers/twos during water-play activities. Only designated water-play equipment will be utilized for water activities. Toddlers/twos will not have access to large buckets that contain liquids of any type.

Water-day activities may include the following:

- Sprinkler
- Mud Day (muddy water)
- Small pools with no more than two inches of water

All families will be notified prior to any water day activities at the Center.

Supplies/Personal Items

"We play dirty here!" Neat, sturdy, washable play clothes are recommended. Please allow your child to wear comfortable sturdy shoes such as tennis shoes. If your child wears AFOs, please make sure they are on each day.

Children's Clothing

Families/parents must maintain a minimum of TWO complete changes of clean clothing (including underwear, socks, pants, and shirt) and an extra pair of shoes (suggested) in their

child's locker at all times. Please check appropriate seasonal clothing for a complete set of clothes. It is important for children to have a complete change of clean clothes in the event of an accident (toileting, food-related, or curriculum-related). Children may be upset about soiled clothing, and, in such cases, it is more comfortable for children to change into their own clothing.

All clothing must be marked with the child's name or initials. Clothing should be exchanged to accommodate children's growth and seasonal weather changes. During the course of each day, children are involved in active exploration and play. Many kinds of materials and equipment are available. Children are expected to wear clothing appropriate for active play. Although teaching staff do their best to protect a child's clothing, the program does not guarantee the condition of a child's clothing and accessories after a day of play.

The following guidelines help determine suitable clothing for children:

- Clothing the child can get messy or dirty.
- Clothing easy for the child to put on and take off when using the toilet.
- Clothing loose enough to allow free movement without being so loose that it becomes entangled in equipment.

Parents are responsible for sending the following:

- Toothbrush, toothbrush cover, and toothpaste.
- Two Changes of clothing.
- Brush/comb.
- Nap mat, sheet and/or pillow and blanket, snuggle item.
- Backpack or bookbag marked with his/her name.
- Backpack large enough for a child's communication folder, if the teacher uses one.

Share Day Items

Your child may bring an object from home on designated Share Days. This activity helps develop poise, self-concept, and language skills. It is a good idea to print names on all Share Day items. Do NOT let your child bring candy, gum, guns, or knives to school.

Field Trips/Transportation

The classroom staff may plan field trips to supplement and extend the curriculum. Teaching staff to child ratio will be maintained at all times during field trips and transportation of children from one location to another. For field trip transportation, the children may use UAH Transportation vehicles (vans) for off-campus trips. Announcements of any field trips are made several weeks in advance and posted by the classroom sign-in sheets, giving parents trip details (date, time, destination, and purpose). Parents are invited to accompany the group. Field Trip consent forms must be signed by parents for the child to attend.

UAH Transportation vehicles (vans) are held to local and state regulations as a public source of transportation. Maintenance is performed according to recommended manufacturer, state, and UAH regulations. Documentation of maintenance can be obtained from the UAH Transportation Department showing dates of regular and quarterly inspections and preventative maintenance - such as daily logs, air pressure inspections, and routine checks.

Since the program uses the UAH vehicles as its major form of transportation, the staff will

implement and use safety-restraint devices that are approved and/or in accordance with the transportation vehicle (vans) manufacturer's guidelines. One staff member with current documentation of training in UAH-approved child passenger safety course training will be present during the transportation for children younger than six years of age. Proper staff-child ratios are maintained, without counting the driver, when children younger than four years of age are transported.

Child Passenger Safety Requirements:

- A schedule showing accurate route and itinerary is planned and kept at the Center to show approximately where the vehicle is at all times. When the vehicle is equipped with a mobile communication system, route information is not required.
- Safe conduct to and from all vehicles and safe off-street loading space is provided to protect children from backing vehicles, being between vehicles, and all traffic hazards.
- Children are not permitted to ride more than 60 minutes one way on regular outings. Exceptions for a special field trip may be allowed, with exceptions being infrequent, and allowance is made for rest and stretch stops during the trip.
- Children remain seated while the vehicle is in motion, and no part of a child's body extends from windows.
- Vehicles containing children are never left unattended at any time.
- Booster seats for children more than 40 pounds must be positioned and properly secured with a lap belt on the child's lap and hip bones rather than the abdomen.
- High-back boosters are recommended for positions in vehicles that do not have headrest, and backless boosters are sufficient for positions that do have headrest. Both seats achieve the same goal to boost the child high enough so the seat belt fits properly.
- A booster seat, car seat, or infant seat is used according to the manufacturer's instructions and is federally approved.
- Parent must verify that the car seat is appropriate for the specific height, weight, and physical condition of the child being transported.
- Parent will verify seat belt fits snugly across the child's hips or securely anchors the car seat.
- All adult passengers, except those in/on a bus, and the driver are properly secured by individual seat belts unless the driver or passenger has written verification from a doctor licensed in Alabama and that person is unable to use a seat belt for medical reasons.
- The vehicle's maximum seating capacity is not exceeded. Maximum seating capacity is based on the manufacturer's designated seating capacity.
- When transporting children, vehicles, with the exception of public transportation, are visibly marked with the name and number of the facility or sponsoring organization.
- Each vehicle operated for transportation of children has door locks.
- The transporting vehicle is covered by medical and liability insurance required by Alabama laws.
- A first aid kit is available in the vehicle at all times.
- Written documentation is kept of regular maintenance of all vehicles, to include quarterly inspections of tire wear and pressure, brakes, lights, and functioning seat belts.

Each classroom has a bag of first-aid kits/supplies (tissues, wet wipes, first aid) to carry on field trips or during events that require transportation. Classroom teachers are responsible to make certain these supplies are always well stocked.

Toys from Home

The program requests that no toys from home be brought to school. Bringing toys from home can be an overwhelming problem for both children and teachers in the classroom. Toys from home are usually not as durable as the program toys and may be easily broken. The program is not responsible for toys brought from home.

Security items are very important to a child, and teaching staff support their use, especially during transition times. Security items often include blankets, stuffed animals, or dolls. These transitional items or self-comforting items are respected by teachers. Families/parents should clearly label their child's items. As children adjust to the program and their need for a security item lessens, teachers put these items in a child's cubby where it is accessible as needed.

Teachers do not force a child to separate from a security item but help a child find new ways to be comforted and feel safe. The best items to bring from home are found "treasures." The teachers are always eager for a child to share these with the class. Children often like to share things from their house. The interest to bring a toy from home can be redirected from toys to treasures.

Celebrations and Holidays

Children's cultural heritage and celebrations are important parts of their personal social development. Fostering respect for cultural diversity is an important goal at the program. Emphasis is always placed on respecting individual differences and beliefs. Families/parents are encouraged to share their cultural heritage with others in the program.

Activities related to traditional U.S. holidays such as Halloween, Thanksgiving, Christmas, Valentine's Day, and July 4th are low-key, age-appropriate, and avoid specific religious beliefs. Plans are discussed with families/parents to ensure celebrations are sensitive to cultural diversity. Any family/parent wishing to share their cultural celebrations is asked to contact their child's teacher or the administrative office. Equally, families/parents may ask that their child not participate in these activities.

Any foods brought in for parties must be purchased from a facility with a commercial kitchen. Home-made snacks are prohibited. If a family wishes to share a cultural cooking activity with the classroom children, they must arrange with the director to prepare the items at the program following regulated guidelines.

Birthdays

Families/parents who wish to celebrate their child's birthday at school are welcome, but not required, to provide a special snack for the children in their classroom, remembering that all snacks brought into the program must be purchased from a facility with a commercial kitchen, and home-made snacks are prohibited. Families/parents are asked to notify the classroom teacher at least one week in advance if they plan to provide a birthday snack.

Birthdays are important to children, and every effort is made to make the day special but not overwhelming to children. Teachers assist in simple observances such as singing "Happy

Birthday” and passing out special snacks to friends. Muffins or other lower sugar items are recommended. Balloons are not permitted, as they may be dangerous. If a child’s family does not observe birthdays, please let the teacher know so an alternate activity can be planned for that child. Party invitations may not be distributed at school unless all children in the child’s classroom are invited. Selected invitations should be delivered outside of school hours.

Animals

Animals offer exciting additions to the curriculum. The classrooms may have small caged animals, which are kept clean and healthy. Animals should only be brought to the center after permission has been granted from the Director. Certain regulations must be followed when animals are brought to the program:

- Documentation is required from a veterinarian or an animal shelter to show full immunization of the animal.
- Animals must appear to be in good health.
- Animals must be free of fleas, ticks, and worms before entering the classroom.

Staff members and teachers will closely supervise all interactions between children and animal visitation and will instruct children on safe behavior when in close proximity to animals. Staff members will also make sure children within the classroom have no allergic reaction/symptoms to animals. Insects may be brought into the classroom if they are contained in an insect cage, plastic insect keeper, or plastic jar with a lid. If plastic jars are used, there should be small air holes in the jar’s lid. Insects or other small creatures in glass containers are prohibited.

General Information

AHERA Notice

All schools have been inspected by an EPA-approved asbestos inspector, and a management plan is maintained in the Center as required by the Asbestos Hazard Emergency Response Act (AHERA). The file is available for staff and parents inspection.

Most asbestos-containing materials in school facilities are in the form of floor tiles, are non-friable, and are well maintained. As far as is known, all friable asbestos in the school facility has been removed. Existing floor tiles are well maintained and, when necessary, are being abated as required by law. **(This notice is being reported to you as required by AHERA.)**

The UAH ELC facilities, physical infrastructure, are maintained by UAH and kept in compliance with all local, state, and federal guidelines related to fire safety, air and water quality, electrical, plumbing, and meet ADA (Americans with Disabilities Act) accessibility requirements. Accessibility includes access to building, sinks, drinking fountains, outdoor play space, and all classroom and therapy areas.

Breathe Free Campus

The UAH campus is a BREATHE FREE facility. No tobacco or tobacco products are allowed in or around these facilities, and smoking is entirely prohibited. No smoking is permitted at any time.

Volunteers

All volunteers and interns are required to add value to the program and maintain a consistent schedule. Approved volunteers may be utilized in your child's class to assist in the preparation and implementation of various daily activities. All volunteers/interns are required to have a background check. An orientation session is completed to introduce them to the fundamental aspects of program operation before they begin working with children.

The orientation includes:

- Health, safety, and emergency policies and procedures.
- Accepted guidance and classroom management techniques.
- Child abuse and neglect reporting procedures.
- Outline of NAEYC Code of Ethical Conduct and confidentiality of staff and students.

Volunteers and interns are under the direct supervision of qualified teaching staff at all times and are not counted in ratio for supervision of children.

Parent Input, Suggestions, and Concerns

Parent input and feedback is always welcome. Every effort is made to accommodate parent requests. An anonymous parent survey will be sent to all parents annually, asking them to evaluate the program and make suggestions. Parents with suggestions or concerns are encouraged to discuss those concerns with their child's teacher first. If the teacher and parent are unable to reach a resolution, parents are encouraged to consult the Director.

Termination

A child may be terminated from the UAH ELC if a pattern of disregard for the established policies and procedures is demonstrated. A written notice will be provided to parents concerning the possibility of termination, and, if the issue(s) is not resolved, a written notice of termination would follow. Examples of reasons for termination include, but are not limited to the following:

- Extended absences (an unacceptable percentage of days attended).
- Disregard of the school's operating hours, including participation in the year-round schedule.
- Failure to complete required forms.
- Consistent disregard of the illness policy.
- Tuition delinquency.
- One-on-one intensive treatment needs of the child.
- Lack of commitment to programs at the UAH ELC.

Reminders

- Our school day is 8:00-2:30. Please park in the large **EAST** parking lot and enter through the east hall door.
- Morning drop off for RISE students is 7:50-8:05, and morning drop off for First Class Pre-K students is 8:00-8:15. East hall entry doors will close and lock at 8:15.
- Afternoon pick up is 2:15-2:30. Please enter through the front lobby doors.
- If your child is going to be absent, remember to send your child's teacher a message via Brightwheel or call the main office and leave a message. For security reasons, all doors will be locked after 8:15 a.m. During this time, families must enter and exit the building through the lobby entrance only.
- If families have a change in address, telephone number, employment, emergency number(s), or family situation, that information should be provided promptly to the child's teacher and Director.

Summary

The staff members of the UAH ELC hope that families find the information contained in this handbook to be helpful. Everyone is encouraged to ask questions and seek additional information as needed. The Center is designed to meet the needs of each individual child enrolled, as well as the needs of their family. Thank you for being a part of the UAH Early Learning Center!

*Reaching out to families through
Inclusion
Support and
Early Intervention*

APPENDICES

2021-2022 UAH ELC Calendar

RISE Program

August 2021

SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

September 2021

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

October 2021

SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

November 2021

SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

December 2021

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

January 2022

SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Aug 2

Aug. 3

Sept. 6

Oct. 4-8

Nov. 11

Nov. 24-26

Dec. 17

Dec. 20-Jan. 3

Jan. 4

Jan. 5

Jan. 17

Mar. 14-18

April 15

May 6

May 27

May 30

May 31-June 3

June 20

July 4

July 5-8

July 21

July 22, 25

July 26-29

Scheduled Orientations

First Day of Classes

Labor Day Holiday

No School - Fall Break

Parent-Teacher Conferences

Thanksgiving Break

Student Half Day/Teacher Full Day

Winter Break

Teacher Professional Development

Classes Resume

MLK Holiday

*Spring Break

*Subject to change depending on local K-12 school system

Student Half Day/Teacher Full Day

Parent-Teacher Conferences

Student Half Day/Teacher Full Day

Memorial Day Holiday

Memorial Week Break

Juneteenth Holiday*

*Subject to change depending on UAH Calendar)

Independence Day Holiday

Independence Break

Last Day of Classes

July Break

Teacher Professional Development

February 2022

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

March 2022

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

April 2022

SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May 2022

SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JUNE 2022

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

JULY 2022

SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						



RISE
PROGRAM

THE UNIVERSITY OF ALABAMA IN HUNTSVILLE™

2021-2022 UAH ELC Calendar

FCPK Program

August 2021

SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

September 2021

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

October 2021

SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

November 2021

SUN	MON	TUE	WED	THU	FRI	SAT
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

December 2021

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

January 2022

SUN	MON	TUE	WED	THU	FRI	SAT
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

July 29

Aug. 4-5

Aug. 6

Sept. 6

Oct. 4-8

Oct. 21-22

Nov. 11

Nov. 24-26

Dec. 17

Dec. 20-Jan. 3

Jan. 4

Jan. 5

Jan. 17

Feb. 21

Mar. 14-18

April 15

May 6

May 26

May 27

May 30- July 27

July 28-29

Teacher Professional Development

Stagger Start Dates

First Day for ALL Students

Labor Day Holiday

No School - Fall Break

Teacher FCPK Conference

Parent Teacher Conference

Thanksgiving Break

Student Half Day/Teacher Full Day

Winter Break

Teacher PD/Work Day

Classes Resume

MLK Holiday

President's Day Holiday

Spring Break

Student Half Day/Teacher Full Day

Parent Teacher Conference

Last Day of Classes

Teacher Work Day

Summer Break

*Teacher PD/Work Days

* Subject to change

February 2022

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

March 2022

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

April 2022

SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May 2022

SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JUNE 2022

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

JULY 2022

SUN	MON	TUE	WED	THU	FRI	SAT
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

First Day/Classes Resume
Breaks (No Classes)
Holiday (No Classes)
Student Half Day - Dismiss at 11AM
Professional Development (No Classes)
Parent/Teacher Conferences (No Classes)
Students & Teachers Last Day



THE UNIVERSITY OF
ALABAMA IN HUNTSVILLE®

FIRST CLASS PRE-K



EARLY LEARNING CENTER

THE UNIVERSITY OF ALABAMA IN HUNTSVILLE

UAH Early Learning Center

Tuition 2021-2022 School Year

Tuition Per School Year	Infant & Waddler Class	Toddler Class	Preschool A & B Class
Annual Tuition *	\$9,540	\$9,180	\$9,000
Tuition/Month	\$795	\$765	\$750
Tuition + Before School Care	\$875	\$845	\$830
Tuition + After School Care	\$1,015	\$985	\$970
Tuition + BSC + ASC	\$1,095	\$1,065	\$1,050
UAH Faculty, Staff, & Student Discount Rate	Infant & Waddler Class	Toddler Class	Preschool A & B Class
Annual Tuition *	\$8,580	\$8,280	\$8,040
Tuition/Month	\$715	\$690	\$670
Tuition + Before School Care	\$795	\$770	\$750
Tuition + After School Care	\$935	\$910	\$890
Tuition + BSC + ASC	\$1,015	\$990	\$970

* Tuition includes supply/curriculum fee

UAH Early Learning Center
FINANCIAL AGREEMENT
SCHOOL YEAR 2021/2022

**TO BE COMPLETED BY ALL PERSONS FINANCIALLY RESPONSIBLE FOR FEES AND TUITION.
BOTH PARENTS/GUARDIANS MUST SIGN THIS AGREEMENT AND RETURN.**

UAH Early Learning Center reserves the right, upon 60 days written notice to the persons responsible for this account, to increase the monthly tuition during the term of the Financial Agreement in the event it becomes necessary to do so, in the sole option of the Program, due to extraordinary increases beyond the control of the Program in costs of wages or other essential operating costs.

In consideration of the enrollment of the above-named child at the UAH Early Learning Center For the indicated school year, I acknowledge and agree to the following:

1. TUITION AND FEES:

A. Tuition

Tuition and fees shall be paid in advance at the rates and amounts as they currently exist or as they may be revised in the future. Tuition shall be paid from the time of enrollment until the date of aging out from the program or withdrawal, provided, however, that a disenrollment form has been completed and has been given to the front office at least 10 days prior to withdrawal. If such notice is not given, tuition will be payable for an additional 10 business days after withdrawal. Tuition will not be pro-rated for extended absences or during times that the University of Alabama in Huntsville Early Learning Center is not in session. (See UAH Early Learning Center Handbook/Calendar).

B. Late Charges

A late fee of \$25.00 will be charged to your child's account if the UAH Early Learning Center receives payment after the 10th of the chargeable month.

2. PAYMENTS AND BILLING:

A. Due Date

Tuition must be paid monthly at the UAH Early Learning Center Office (cash/check) or Online by the 10th of each month or a late fee of \$25.00 will be added. Payments for Before School/After School Care should be made separate from tuition.

MAILED PAYMENTS SHOULD BE RECEIVED BY THE UAH Early Learning Center Office ON OR BEFORE THE 10TH OF THE MONTH OR A \$25.00 LATE FEE WILL BE ADDED.

Payments can be mailed to: UAH Early Learning Center
301 Sparkman Drive, ELC 115
Huntsville, AL 35899

COVID-19 Strategic Plan UAH Early Learning Center

Pandemic/COVID-19 Policy
UAH Early Learning Center
Deana Aumalis, Director

Contents

Introduction

Physical Distancing Strategies

Steps to Take If a Child, Parent or Staff Member Develops COVID-19 Symptoms

- Positive Case of Covid-19 Within a Classroom or ELC

- Cleaning Facility After Exposure

- Children/Staff Who Have Had Close Contact With a Person With Symptoms or Diagnosed with COVID-19

- Criteria to Discontinue Home Isolation

Facility Safety Measures

- Key Hygiene Practices

- Arrival of Children

- Departure of children

- Cleaning and Sanitizing

- Diapering, Feeding, or Holding a Child

- Group Size

- Hand Washing

- Hand Sanitizers

Communication Plan

Scheduling Plan

Introduction

The COVID-19 virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet) for at least 15 minutes.
- Through respiratory droplets produced when an infected person coughs, sneezes, or talks.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- ***Studies have suggested that COVID-19 may be spread by people who are not showing symptoms.***

Knowing these facts, the ELC has implemented additional safety measures for families, children, teachers, therapists, and staff to follow so that we do our part in reducing the spread of this illness and keeping everyone as healthy as possible. These safety measures have been in effect since July 2020. The ELC follows the UA System, UAH, and Alabama Childcare Licensing Guidelines.

Physical Distancing Strategies

Based on recommendations from the CDC, AL Department of Public Health, the World Health Organization, and AL DHR Licensing, the UAH ELC will follow physical distancing strategies to include:

Changed 06/01/2021

- Classrooms will include the same group of children each day, and the same teachers will remain with the same group of children each day, *as much as possible*. Groups may combine or move between classrooms during the school day, but this will remain minimal. Groups will combine in Before School Care and After School Care.
- There is to be a minimum of 20 minutes between each group on the playground to allow the equipment be 'sanitized' by the sunlight. Teachers/staff members will also clean high-traffic areas on the playground and all materials in the gym/group play area.
- Arrival and pick up times will be staggered to avoid groups of people gathering in the ELC. Siblings will be allowed to arrive and be picked up at the same time.
- Parents and visitors will be allowed into the center. If COVID-19 numbers rise in our community, we may return to previous policy of no visitors and/or health/temp checks.
- Family style dining is suspended during the health crisis.
 - Children's plates will be made by teachers, and children will be seated as far apart as possible while still allowing for appropriate meal service and conversation.
 - Only disposable service items (plates, cups, forks, spoons, etc.) and utensils should be used.
- All sensory play is suspended (unless in an individual bin) until further notice. Playdoh will not be shared.
- Cots/mats/cribs will be placed 3-6 feet apart when possible. If not possible, children will be placed to sleep head to toe.
- Children will not share art materials. Each child will be provided their own supply box/bag that contains markers, pencils, crayons, glue, scissors, etc.
- All beginning of the year events will be held in a "virtual" format. Family conferences and Special Education Meetings will be held in a "virtual" format (Zoom platform).
- We will schedule individual "Meet the Teacher" times for the fall.

Steps to Take If a Child, Parent or Staff Member Develops COVID-19 Symptoms

- Staff, guardians, or children with a fever (100.4 F or higher), cough, or shortness of breath or at least two of the following symptoms will not be allowed to return to the ELC until a negative COVID-19 test result and/or a doctor's note have been received:
 - Cough
 - Shortness of breath or difficulty breathing
 - Fever or chills
 - Congestion or runny nose
 - Nausea or vomiting
 - Repeated shaking with chills
 - Fatigue
 - Muscle pain or body aches
 - Headache
 - Sore throat
 - Diarrhea
 - New loss of taste or smell
- Children or staff who are awaiting test results or have members of their household who are awaiting test results MUST stay home until notification of a negative test result.
- Children or staff with household members who are known to have tested positive for COVID-19 or who have come into contact with a positive case will also be excluded from the ELC for a minimum of 14 days. This period will be prolonged if the child or staff member develops symptoms or tests positive during the 14 day period.
- If a child or staff member develops symptoms while at the ELC, they are to be immediately separated from others. Parents have 45-60 minutes to pick up a sick child.
- Children and staff who have been sent home due to symptoms must have a doctor's note to return. If tested for COVID-19, they must stay home and notify the ELC of results asap.
- Staff and family members will not have a quarantine period if exposed to a positive case if they are fully vaccinated.

Positive Case of Covid-19 within the ELC

- Employees and parents are required to notify the ELC immediately if there is a positive COVID-19 test result within their household or workplace.
- If we are notified of a positive COVID-19 test result for ANY parent, child, employee, or anyone they live with, we will immediately contact the UAH COVID-19 task force. Information will be sent out on Brightwheel to inform parents of any quarantine period.
- **Classrooms with a confirmed case of COVID-19 will be closed. In some cases the ELC may close.**
 - The ELC should immediately air out the classroom for 24 hours and then follow the 'Cleaning Classroom/Facility after Exposure' guidance.
 - The duration of the closure will be at the discretion of UAH.
- All parents will be notified immediately and asked to come pick up their children if any are onsite.
- Most likely the classroom will be closed for a period of 1-2 days for cleaning. UAH Office of Health and Environmental Safety will provide guidance on closures due to COVID-19.
- All staff and families who have been in the facility within the last 1-3 days will be notified.
 - The identity of the individual who tested positive WILL REMAIN CONFIDENTIAL TO ABSOLUTELY EVERYONE unless **that individual** SPECIFICALLY REQUESTS that we inform those potentially infected.

Cleaning Facility After Exposure

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, or EPA-registered disinfectants are to be used.
- Employees are to wear disposable gloves and jackets for all tasks in the cleaning process, including handling trash.
- Gloves and jackets should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to wash hands after removing gloves.
- Gloves should be removed after cleaning a room or area occupied by ill persons.

Children/Staff Who Have Had Close Contact with a Person with Symptoms or Diagnosed with COVID-19

- Children who have symptoms should stay home. Parents should notify Director immediately.
- Employees who have symptoms (i.e., fever, cough, or shortness of breath) should notify their supervisor and stay home.
- Sick employees should follow CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments.
- Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow CDC recommended precautions.
- If an employee is confirmed to have COVID-19 infection, fellow employees will be notified of their possible exposure to COVID-19 in the workplace. Confidentiality will be maintained as required by the Americans with Disabilities Act. Fellow employees should then self-monitor for symptoms (i.e., fever, cough, or shortness of breath).
- Employees should not return to work until the criteria to end home isolation is met as instructed in consultation with healthcare providers and state and local health departments.

Criteria to Discontinue Home Isolation

Children and staff can return to the ELC after ALL these things have happened:

- At least 10 days have passed since symptoms first appeared.
- No fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers)
- Other symptoms have improved (for example, when cough or shortness of breath have improved)
- You have a doctor's note stating you may return or you have been cleared by the UAH clinic or ELC Director
- This criteria may change as more information is known about the virus

Facility Safety Measures

Key Hygiene Practices

- Wash your hands often with soap and water for at least 20 seconds.
- Use hand sanitizer that contains at least 60 percent alcohol (or EPA approved). If children use hand sanitizer, a medication form needs to be signed by guardian. Medication forms should be on file.
- Avoid touching your eyes, nose, and mouth.
- Wear cloth face coverings or clear face shields.
- Cover your cough or sneeze with a tissue, throw the tissue in the trash, and wash hands thoroughly. If tissues are not available, cough or sneeze into your elbow.

Arrival of Children

- Stagger arrival and pick up times.
- If possible, older people such as grandparents or those with serious underlying medical conditions should not pick up children because they are more at risk for [severe illness from COVID-19](#).
- Parents should arrive in their designated window of time, wearing a face covering, if not 14 days past 2nd vaccine injection. Enter in the East hall near the gym/library.
- Children will not be allowed to stay if ***either the parent or child*** exhibits any of the following:
 - Fever over 100.1 (37.83C)
 - New cough of any kind
 - Shortness of breath
- A Health Questionnaire is completed each upon arrival on the Brightwheel app. **Please answer these questions truthfully each day.** If found that questions have been falsified, you risk the dismissal of your family from the UAH Early Learning Center.
- Parent/Guardian will sign in their child via Brightwheel and exit at the gym door.
- If a child is going to arrive after 8:15, they should notify the ELC via Brightwheel.
- Parents MUST wear face covering (if not 14 days past second vaccine injection) during arrival/dismissal while in the hall at the ELC. Children may wear face coverings (if over the age of 3) at parent's discretion and can be worn throughout the day.
- Children will be escorted to their classroom by a staff member after or using hand sanitizer. Upon arrival to their classroom, they will be greeted by classroom staff and wash hands.

Departure of children

- Children will be dismissed at staggered times.
- Parent will sign out child using the Brightwheel app.
- For dismissal, please use lobby door to enter. The back hall entrance will be used on inclement weather days only. Face coverings are required if not 14 days past second vaccine injection.
 - Teachers are to have children wash their hands or use hand sanitizer before leaving the classroom.
 - Teachers are to ensure that each child's belongings are sent home each day.
 - Face coverings that the child has worn must be sent home with the child daily.
- Parent is allowed to pick up child from the classroom.
- Parent and child will exit at the lobby doors. Back hallway doors will be open on inclement weather days only.

Cleaning and Sanitizing

- High touch surfaces are to be cleaned and sanitized no less than three times per day. This can be done more often if needed. High touch surfaces are doorknobs, light switches, countertops, faucet handles, tables, etc.
- Toys that cannot be cleaned and sanitized can be returned to all classrooms. These include things such as stuffed animals, pillows, cloth dolls, dress up clothes, etc. We have a Zono machine to clean all classroom items.
- Toys that children have placed in their mouths or that are otherwise contaminated should be set aside in a "yuck bucket" until they are cleaned by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered disinfectant, rinse again, and air-dry. You may also clean in a mechanical dishwasher.

Cleaning and Sanitizing (Con't)

- All children's face coverings, blankets, and extra clothes are to stay at the ELC to reduce the transmission of COVID-19 from home to school. All blankets/nap mats should be kept separated in a child's cubby.
- Set aside toys that need to be cleaned. Place in a separate container marked for "soiled toys." These are to be cleaned and sanitized before being placed back in use. Rotate toys through cleanings.
- Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils. Have extra sets of these to use while cleaning.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- Using gloves all day everyday could instill a false sense of security. Therefore, gloved hands will be reserved for the following times:
 - Universal precautions
 - Diaper changing
 - Nose blowing
 - Handling soiled items
 - Garbage removal
 - Food service gloves are to be used for food service as usual
 - Cleaning/Disinfecting/Sanitizing Protocol

Diapering, Feeding, or Holding a Child

It is important to comfort crying, sad, and/or anxious infants and toddlers, and they often need to be held. To the extent possible when diapering, feeding, or holding very young children:

- *Infant/Waddler Rooms Only:* Wear an over-sized button-down, shirt, or jacket. Wear long hair up off the collar in a ponytail or other updo.
- Wash your hands, neck, and anywhere else touched by a child's secretions.
- Change the child's clothes if secretions are on the child's clothes. Change your button-down shirt if there are secretions on it and wash your hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine.
- Infants, toddlers, and staff should have multiple changes of clothes on hand in the ELC.
- Teachers should wash their hands before and after handling infant bottles prepared at home or prepared in the ELC. Bottles, bottle caps, nipples, and other equipment used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water.

Group Size

The current Alabama State Department of Human Resources Daycare Licensing requirement does not limit the group size due to COVID-19. Class sizes are small at the ELC. Please refer to your family handbook for classroom staff to student ratios.

- At nap time, ensure that children's cots (or cribs) are spaced out as much as possible, ideally 3-6 feet apart. If the full six feet is not possible, ensure that children are placed head to toe at nap time. This will reduce the potential for viral spread.

Hand Washing

Handwashing posters should be posted at every hand washing sink within the ELC. All children and staff should engage in hand hygiene at the following times:

- Arrival at the ELC or classroom
- Before and after preparing food or drinks
- Before and after eating, handling food, or feeding children
- Before and after administering medication or medical ointment
- Before and after diapering
- After using the toilet or helping a child use the bathroom
- After coming in contact with bodily fluid
- After handling animals
- After playing outdoors or in sand
- After handling garbage
- After blowing one's nose, coughing, or sneezing
- After using the restroom
- Before coming in contact with any child
- After touching or cleaning surfaces that may be contaminated
- After using shared equipment like toys, scissors, iPad, etc.
- All staff and children must adhere to regular hand washing with soap and water for at least 20 seconds
 - Turn water on and wet hands, remove from water
 - Add soap to hands and create friction to make bubbles
 - Scrub for 20 seconds, sing Happy Birthday or ABC's
 - Rinse hands under running water
 - Dry hands with single use paper towels
 - Turn off faucet with paper towels

Hand Sanitizers

Use of an alcohol-based hand sanitizer should only be practiced when soap and water method is not available.

Children must be supervised when they use hand sanitizer to prevent ingestion. A medication form must be signed by the child's guardian in order for Hand Sanitizer to be used. Hand sanitizer is only used with children aged 12 month and up.

Communication Plan

- Regular communication will continue through Brightwheel App, email, website updates, and our Facebook Page.
- Ensure that all contact information for families and employees is accurate and current.
- ELC Director is available to address any concerns on an individual basis (deana.aumalis@uah.edu)

Scheduling Plan

It is important to adhere to schedules as strictly as possible during a pandemic.

- Center director/administrators will prepare a weekly schedule ***in advance*** for each week of operations during the health crisis. This schedule should clearly define the following:
 - names and ages of each group of children for the week
 - teacher(s) assigned to each group
 - classroom assigned to each group
 - teacher's work schedule
 - children's schedules
- Center administrators will monitor and respond to absenteeism.
 - If a child is scheduled for the day, but not present, parents must be contacted and the reason for the absence must be documented on the current schedule.
 - Scheduled children and staff will be compared to actual attendance by upper management to assist in monitoring absenteeism.

IMPORTANT THINGS TO REMEMBER:

If ANYONE at the ELC comes down with COVID-19

- ELC will notify families and staff of exposure.
- ELC will report the confirmed case to the UAH Office of Health and Environmental Safety, Dean of the College of Education, Provost, and Department of Public Health and follow specific guidelines as mandated.
- Attempt to determine the date of symptom of onset for the child/employee.
- Determine if the child/employee attended or worked at the ELC while symptomatic or during the two days before symptoms began.
- Identify what days the child/employee was present at the ELC during that time.
- Determine who had close contact with the child/employee at the ELC during those days. Use the Child/Staff Movements Form (6 feet for at least 15 minutes).
- Close off areas used by the individual diagnosed with COVID-19.
- Exclude the children and staff who are determined to have had close contact with the affected child/employee for 14 days after the last day they had contact with the affected individual.
- Follow Cleaning/Disinfecting/Sanitizing Protocol
- Close ELC classrooms to students/staff as needed.
 - This initial short-term dismissal/closing allows time for the health officials to gain a better understanding of the COVID-19 situation impacting the center.
 - This allows the local health officials and UAH to help the ELC determine appropriate next steps, including whether an extended dismissal/closure is needed to stop or slow further spread of COVID-19.

IMPORTANT INFORMATION FOR STAFF:

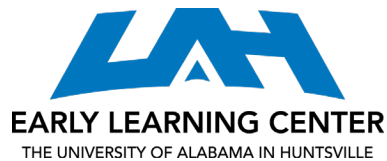
- Bring into the ELC as little as you possibly will need for the day.
- Staff must wear a mask or clear face covering (if it is not 14 days past second vaccine injection) all day excluding meal times and/or break time.
- Use hand sanitizer before leaving lobby.
- Clock in and use hand sanitizer again.
- Place your personal items in a locker and hand sanitize or continue to classroom.
- Remember to do your best to "social distance" with other adults within the ELC—See 12 minute Memo.
- If needed, enter and have temperature checked, logged, and health questionnaire answered.

ADDITIONAL INFORMATION:

If for some reason there is not adequate PPE, cleaning supplies, or paper supplies for the ELC, the Director will close the ELC with UAH approval until proper materials have arrived.

- Currently, the best defense to COVID-19 is hand washing. Therefore, using gloves all day/everyday could become a false security. Wearing gloves will be reserved for the following times: when dealing with bodily fluids/using universal precautions, diaper changing, nose blowing, cleaning, handling food, and garbage removal.
- The Director or her designee will communicate often with other departments that enter the building about the importance of sick employees staying home. All who enter the building must wear a mask if it is not 14 days past second vaccine injection, use hand sanitizer upon entry and exhibit (3 ft) social/physical distancing.

We greatly appreciate your understanding and flexibility during this difficult time. We will continue to navigate through this together!



MEMORANDUM

As UAH continues to transition to normal operations, we would like to announce the latest updates regarding our COVID-19 health and safety requirements.

Face coverings: Consistent with CDC guidance and the [UA System Health and Safety Plan](#), UAH has modified on-campus face covering guidelines for non-clinical settings.

Effective immediately at UAH and all UA System campuses:

- **Fully vaccinated individuals** (14 days or more following the final dose) are no longer required to wear face coverings indoors or outside.
- **Individuals who are not fully vaccinated** are required to wear face coverings at all times indoors except when face coverings are not required by existing guidance.

Vaccines: It is vital that we strive for full vaccination throughout our campus community to continue to ensure the safety and health of everyone here at our University. You can find a vaccine site near you at www.vaccinefinder.org. Although strongly encouraged, COVID vaccination is not a requirement at UAH for enrollment or employment at this time.

Social Distancing: The University will continue to require a 3-foot distance between individuals for all faculty, staff and students wherever possible until further notice.

Thank you for your continued help and vigilance in meeting these requirements and guidelines.

Any questions or concerns regarding the new face covering policy for UAH and the Early Learning Center can be addressed through an email to Deana Aumalis, ELC Director at deana.aumalis@uah.edu or Dr. Beth Quick, Dean of the College of Education at beth.quick@uah.edu.

Children can bring a backpack starting June 7, 2021. We will continue cleaning, hand washing & sanitizing policies as set forth previously. The only changes at this time are face covering and backpacks. We continue to encourage children to leave toys at home.

Please don't forget your nap mat & water bottle on Monday.

GUIDELINES FOR CHILD DAY CARE FACILITIES

In addition to the Safer at Home Order's mandates and Guidelines for Safeguarding All Businesses, the following practices are strongly recommended for all child day care facilities.

These recommendations have been developed in conjunction with the recommendations from the Occupational Safety and Health Administration's Guidance on *Preparing Workplaces for COVID-19*, and guidance from the Centers for Disease Control and Prevention (CDC): *Guidelines for Disinfecting Your Facility and Child Care Programs During the COVID-19 Pandemic*. Child care facilities and providers should refer to these guidelines prior to reopening as well as any guidance or regulations provided by their respective state licensing boards, including Alabama Department of Human Resources: Alabama Administrative Code, Chapters 660-5-25 through -27.

These recommendations do not change the Minimum Standards promulgated by the Alabama Department of Human Resources (DHR).

In addition to the sanitation requirements established by the state licensing board and the Alabama Department of Public Health, which should be strictly followed, it is recommended that these minimum standards be incorporated:

Promote healthy hygiene practices:

- Teach and reinforce washing hands and covering coughs and sneezes among children and staff.
 - Face coverings are most essential at times when social distancing is not possible. Staff should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to all staff on proper use, removal, and washing of cloth face coverings.
- Have adequate supplies to support healthy hygiene behaviors, including soap, hand sanitizer with at least 60 percent alcohol, paper towels, and tissues.
 - In order to use hand sanitizer on children, a facility must use DHR's Authorization for Administering Medication/ Medical Procedures form (DHR-CDC-1949). This form must be completed and signed by the parent/guardian. All medications, in addition to hand sanitizers, and other sanitizing products, shall be kept under lock and key or combination lock, in a separate location away from toxic chemicals and other harmful items.

Health and safety actions:

- Intensify cleaning, sanitation, disinfection, and ventilation.
 - Clean, sanitize, and disinfect frequently touched surfaces (for example, playground equipment, door handles, sink handles, drinking fountains) multiple times per day and shared objects between use.
 - Avoid use of items (for example, soft or plush toys) that are not easily cleaned, sanitized, or disinfected.
 - Social distancing. Use increased spacing, small groups, and limited mixing between groups.
 - Ensure that classes include the same group of children each day and that the same child care providers remain with the same group each day, if possible.

- Space out seating and bedding (head-to-toe positioning) to six feet apart if possible.
- Stagger arrival and drop-off times or put in place other practices to limit direct contact with parents as much as possible. Parents should drop off and pick up children at the door whenever possible.
- Restrict nonessential visitors, volunteers, and activities involving several groups at the same time.
- Cancel all field trips, inter-group events, and extracurricular activities involving more than one classroom at a time.
- Avoid immediate contact (such as shaking or holding hands, hugging, or kissing).
- Limit the number of children playing together in outdoor spaces.
- Designate seating and table space for each child.
- Limit sharing.
 - Keep each child's belongings separated and in individually labeled storage containers, cubbies, or areas and have them taken home each day and cleaned, if possible.
 - Adjust activities and procedures to limit sharing of items such as toys, belongings, supplies, and equipment and clean and disinfect between use.
 - If food is offered at any event, have pre-packaged boxes or bags for each child. Avoid sharing foods and utensils.

Protection of employees and children:

- Train all employees on health and safety guidelines.
- Take steps to limit risk of exposure to children and employees at higher risk for severe illness, such as people with diabetes, heart disease, and other chronic conditions, and people 65 or older.
- Screen children and employees each day upon arrival for history of exposure and symptoms, including temperature checks. Facilities must use DHR's Authorization for Administering Medication/Medical Procedures form (DHR-CDC-1949). The form must be completed and signed by the parent/guardian before a child's temperature is checked.
 - Any child or employee with a temperature of 100.4 degrees or above should not be permitted to attend and should immediately be sent home. Children or employees who are sent home with a fever should receive medical clearance from a physician before returning.

Ongoing monitoring:

- Children who are sick should be separated and cared for by a staff member until a parent can arrive. Parents should be notified immediately of any illness and should pick the child up within 60 minutes of the notification. Rooms and materials used to care for sick children should be thoroughly disinfected after use. CDC recommends waiting 24 hours before cleaning and disinfecting, if possible.
- Encourage anyone who is sick to stay home.
- Monitor child and employee absences, and have a pool of trained substitutes and flexible leave policies and practices for employees who may become ill.
- Regularly communicate and monitor developments with local authorities, employees, and families regarding cases, exposures, and updates to policies and procedures.

Cleaning, DISINFECTING and SANITIZING

Cleaning Surfaces:

- Wipe the surface clean of any loose material.
- Clean the surface using fresh, warm water and either soap, detergent or cleanser and a cleaning cloth.
- Wipe the surface with fresh water to remove soap and other residue.

DISINFECTING Surfaces:

A DISINFECTANT is a chemical substance APPROVED by the EPA authority for use in the DISINFECTION of non-food or non-mouth contact EQUIPMENT and surfaces. (Examples of non-food and non-mouth contact surfaces include: diapering surfaces, potty chairs, restrooms, and surfaces contaminated with bodily fluids.)

Prior to using a DISINFECTANT, wipe the surface clean of any loose material. **Follow manufacturer's label** for DISINFECTING process. Surfaces SHALL be DISINFECTED by using one of the following methods along with **required strength and appropriate contact time**:

- Surface application of an EPA APPROVED DISINFECTANT solution from a properly labeled and APPROVED spray container.
- The use of EPA APPROVED DISINFECTING disposable wipes.
- ❖ **The use of reusable cloths is prohibited in removal of bodily fluids and DISINFECTING diapering surfaces.**

A means of testing solution strength SHALL be provided and used to determine the proper strength if manually mixing a solution. (Examples: chlorine test strips if using a bleach solution, quaternary test strips if using a quaternary ammonia solution, etc.) Note: If manually mixing, DISINFECTING solution SHALL be made daily and more often as needed.

Examples of EPA APPROVED DISINFECTANTS include: Lysol Brand DISINFECTING Wipes, Clorox Brand DISINFECTING Wipes, bleach/water solution, using common, unscented house-hold bleach.

SANITIZING Surfaces

A SANITIZER is a chemical substance APPROVED by the EPA for use in the sanitization of food EQUIPMENT and utensils; and mouth contact surfaces. (Examples of food and mouth contact surfaces include: high-chair table surfaces, dining areas, and toys having reasonable expectations to be placed in the mouth.)

Prior to using a SANITIZING solution, wipe any loose material from the surface. **Follow manufacturer's label** for SANITIZING process. Surfaces SHALL be SANITIZED by using one of the following methods along with **required strength and appropriate contact time**:

- Wiping the surface with a cloth or disposable towel soaked in an EPA APPROVED SANITIZER solution.
- Surface application of an EPA APPROVED SANITIZER solution from a properly labeled and APPROVED spray container.
- Submersing the articles in an EPA APPROVED SANITIZER solution.

A means of testing solution strength SHALL be provided and used to determine the proper strength if manually mixing a solution. (Examples: chlorine test strips if using a bleach solution, quaternary test strips if using a quaternary ammonia solution, etc.) Note: If manually mixing, SANITIZING solution SHALL be made daily and more often as needed.

Common EPA APPROVED SANITIZER: bleach/water solution of 50-200 ppm chlorine bleach, using common, unscented house-hold bleach may be used.

IMPORTANT INFORMATION: *The concentration of bleach solutions sold in stores has changed in many areas of the country. The new bleach solution available in many stores is now >5.25% sodium hypochlorite solution (higher than the formerly available bleach solution that generic bleach recipes were based on). It is no longer possible to provide a generic bleach recipe for SANITIZING and DISINFECTING in child care programs. **When using an EPA-registered product, follow label instructions for use.***

B. Payment By Check

Checks should include the parent's/guardian's name, address, and phone number.

Default

If the UAH Early Learning Center Office does not receive tuition, the following sanctions may be imposed:

Disenrollment - The child may be withdrawn from the Program. Reinstatement to the Program will be at the discretion of the UAH Early Learning Center Director and a representative from the University of Alabama in Huntsville.

Costs of Collection - The undersigned parent/guardian will be responsible for all costs incurred by The University of Alabama in Huntsville in order to collect tuition and/or fees overdue under this Agreement including, but not limited to, fees to Collection Agencies, Court costs, and attorney's fees.

3. WITHDRAWAL POLICY:

Parents/Guardians may remove a child from enrollment of the Program upon 10 business days written notice delivered to the UAH Early Learning Center. A disenrollment form is provided for written notice and can be obtained in the office from the clerical assistant.

4. DISENROLLMENT:

The Program reserves the right to permanently remove a child from the Program at any time for non- payment of fees.

I hereby certify that I have read and understand all terms and conditions set forth in the Financial Agreement and I hereby comply with all such terms and conditions. In the event of a default of any provision of the Financial Agreement, I agree to pay all reasonable costs of collection (including court costs and attorney's fees) incurred by the Program.

I understand that my obligation to pay the fees described in this Financial Agreement is unconditional and that no portion of any such fees so paid or outstanding for a particular month will be refunded or canceled, regardless of the subsequent absences, withdrawal, or dismissal of the child from the Program during such month or any portion thereof. The RISE Program within the Early Learning Center is a 12 month program, with tuition due each month from August 2021 through July 2022. The First Class Pre-K Program within the Early Learning Center is a 9 month program with tuition due each month from August 2021-May 2022.

I understand that any cancellation of the Financial Agreement by me must be in writing and meet all conditions stated in the Withdrawal Policy as stated above, and must be acknowledged by the Early Learning Center Director.

**UAH Early Learning Center
FINANCIAL AGREEMENT
SCHOOL YEAR 2021/2022**

Parents/Legal Guardian of: _____
Print Child's Full Name

ACKNOWLEDGED AND AGREED TO:

Parent/Guardian 1 Responsible Party's Signature

Parent/Guardian 2 Responsible Party's Signature

Print Name

Print Name

Address: _____

Address: _____

Driver's License# & Expiration (Required)

Driver's License# & Expiration (Required)

Please indicate the name & SSN of the person responsible for billing.

Name

Social Security Number (Required)

Please check appropriate status:

____ Current UAH Student ____ UAH Faculty ____ UAH Staff ____ Community

Student/Faculty/Staff Name (For discount rate) _____

Student/Faculty/Staff A# _____

***** For discount rate, individual must be child's parent or legal guardian. *****

Current Enrolled Program: Rise School or FCPK Class (Please circle)

Monthly Tuition Amount: \$ _____ /Per Child

_____ Initial

Before School Care \$80 / After School Care (\$220) (Please circle)

_____ Initial

ELC Assistant Director

ELC Director



Student's Name: _____

Parent Contacted: ☐ Yes ☐ No

Teacher's Name: _____

Name of Parent Contacted: _____

Classroom: _____

Time of Parent Call: _____ AM/PM

Pick up requested: ☐ Yes ☐ No Time: _____ AM/PM

Time of pick up: _____ AM/PM

STUDENT INCIDENT/ACCIDENT INFORMATION

DETAILS OF INCIDENT

Location of Accident: ☐ Classroom ☐ Hallway ☐ Big Gym ☐ Cafeteria ☐ Pre-K Playground

☐ Toddler Playground ☐ Sensory Gym ☐ Sensory Room ☐ Other: _____

Date: _____ M Tu W Th F

Time of Incident: _____ AM/PM

Summary: _____

☐ Lots of TLC ☐ Ice ☐ Bandage ☐ Washed with Soap & Water

STUDENT ILLNESS INFORMATION

DETAILS OF ILLNESS

Date: _____ M Tu W Th F

Time of Illness: _____ AM/PM

Symptoms: ☐ Fever ☐ Vomiting ☐ Diarrhea ☐ Rash ☐ Other _____

Temp Check & Time: _____ Initial

Temp Check & Time: _____ Initial

Student may return to school: ☐ Fever free for 24 hours without fever reducer ☐ Diarrhea free for 24 hours

☐ Vomit free for 24 hours ☐ Doctor's excuse stating your child is NOT contagious and free of infection

TEACHER _____ DATE _____

DIRECTOR _____ DATE _____

PARENT _____ DATE _____

AUTHORIZATION FOR ADMINISTERING
DAILY TEMPERATURE CHECKS AND HAND SANITIZER

Dear Parent/Guardian,

Your written permission is required to administer temperature checks and apply hand sanitizer to your child's hands. Please complete the following information:

Child's Name: _____

- Temperature checked with infrared no contact thermometer throughout the day as needed.
- Hand sanitizer used in conjunction with hand soap throughout the day to clean hands.

Signature of Parent/Guardian and Date

Diana Aumale's

Signature of Administration and Date

ALABAMA STATE DEPARTMENT OF EDUCATION

SCHOOL MEDICATION PRESCRIBER/PARENT AUTHORIZATION

School Year: _____ - _____

STUDENT INFORMATION

Student's Name: _____

School: _____

Date of Birth: ____/____/____ Age: _____

Grade: _____ Teacher: _____

☐ No known drug allergies---if drug allergies list: _____

Weight: _____ pounds

PRESCRIBER AUTHORIZATION (To be completed by licensed healthcare provider)

Medication Name: _____

Dosage: _____ Route: _____

Frequency/Time(s) to be given: _____

Start Date: ____/____/____ Stop Date: ____/____/____

Reason for taking medication: _____

Potential side effects/contraindications/adverse reactions: _____

Treatment order in the event of an adverse reaction: _____

SPECIAL INSTRUCTIONS:

Is the medication a controlled substance?

Yes ☐ No ☐

Is self- medication permitted and recommended?

Yes ☐ No ☐

If "yes" I hereby affirm this student has been instructed
On proper self-administration of the prescribe medication.

Do you recommend this medication be kept "on person" by student?

Yes ☐ No ☐

Printed Name of Licensed Healthcare Provider: _____ Phone: () _____ - _____ Fax: _____ - _____

Signature of Licensed Healthcare Provider: _____ Date: _____

PARENT AUTHORIZATION

I authorize the School Nurse, the registered nurse (RN) or licensed practical nurse (LPN) to administer or to delegate to unlicensed school personnel the task of assisting my child in taking the above medication in accordance with the administrative code practice rules. I understand that additional parent/prescriber signed statements will be necessary if the dosage of medication is changed. I also authorize the School Nurse to talk with the prescriber or pharmacist should a question come up with the medication.

Prescription Medication must be registered with School Nurse or trained Medication Assistants. Prescription medication must be properly labeled with student's name, prescriber's name, name of medication, dosage, time intervals, route of administration and the date of drug's expiration when appropriate.

Over the Counter Medication must be registered with the School Nurse or Trained Medication Assistant, OTC's in the original, unopened and sealed container. Local Education Agency Policy for OTC medication to be followed:

Parent's/Guardian's Signature: _____ Date: ____/____/____ Phone: () _____ - _____

SELF-ADMINISTRATION AUTHORIZATION

(To be completed ONLY if student is authorized to complete self-care by licensed healthcare provider.)

I authorize and recommend self-medication by my child for the above medication. I also affirm that he/she has been instructed in the proper self-administration of the prescribed medication by his/her attending physician. I shall indemnify and hold harmless the school, the agents of the school, and the local board of education against any claims that may arise relating to my child's self-administration of prescribed medication(s).

Signature of Parent: _____ Date: ____/____/____ Phone: () _____ - _____



Help Your Child Succeed in Preschool: Build the Habit of Good Attendance

Early School Success goes hand in hand with good attendance!

DID YOU KNOW?

Showing up on time every day is important to your child's success and learning from preschool forward.

Missing 10 percent of preschool (one or two days every few weeks) can

- Make it harder to develop early reading skills.
- Make it harder to get ready for kindergarten and first grade.
- Develop a poor attendance pattern that's hard to break.

High quality preschool programs have many benefits for your child. The routines your child develops in preschool will continue throughout school. You can make the most of preschool by encouraging your child to attend every day!

WHAT YOU CAN DO

Work with your child and his/her teacher to help your child develop strong attendance. Your enthusiasm is a big boost to success.

Talk about it – sing about it – make it an adventure!

- Set a regular bed time and morning routine
- Lay out clothes and pack backpacks the night before
- Share ideas with other parents for getting out the door on time

Before the school year starts:

- Find out what day preschool starts and start the exciting count down!
- Make sure your child has the required shots.
- Attend orientation with your child to meet the teachers and classmates.

Ready – Set GO!

- Develop back-up plans for getting to preschool if something comes up
- Ask family members, neighbors or other parents to lend a hand if you need help dropping off or picking up your child
- Schedule medical appointments and extended trips when preschool is not in session
- If your child seems anxious about going to preschool, talk to the program director, teacher, your doctor or other parents for advice. If the problem persists, make sure the program is a good fit for your child.



Things to Remember About Car Seats:

- Harness straps should always be smooth, flat and fit snugly against the child's body.
- Harness straps should be positioned at, or slightly below, the shoulders when rear facing, and at, or slightly above, the shoulders when forward facing.
- The chest clip is a vital part of the harness system and should be secured at armpit level.
- Avoid bulky clothing such as heavy winter coats under car seat harness straps. Bulky layers allow too much slack and movement in a crash. Infants can also become overheated. Use thinner layers and add blankets over the child once they are snugly buckled in.
- Read car seat labels carefully to ensure it fits your child's height and weight.
- Children with special needs should use a car seat recommended by a trained physical/occupational therapist.
- Not all car seats fit in all vehicles, so be sure to read the section on car seat installation in your owner's manual before purchasing a car seat.
- Be sure to read the car seat manufacturer's instructions and keep them with the car seat.
- Complete and return the registration/warranty card for your car seat in case of future recalls.
- Use a Department of Transportation approved car seat that is functioning correctly and has not been altered in any way.
- Don't use a car seat if you don't know its history, if parts are missing or it has been in an accident.
- Have a professional check the installation of your car seat before your child's first ride. Many fire departments offer this service. Visit www.chkd.org/carseat for other local inspection stations.

*For more detailed information on car seats, contact the
Department of National Highway and Traffic Safety Administration
at 1-888-327-4236 or www.NHTSA.gov.*

*Your child's pediatrician should be your primary source of advice
about your child's health.*

Children's Hospital of The King's Daughters complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1 (757) 668-8246
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.
1 (757) 668-8246

Car Seats Save Lives



In Virginia and North Carolina, child passenger safety laws are designed to protect your most precious cargo. Until age 8, all children must use a properly installed car seat or booster seat that meets federal safety standards. The best safety practice is to continue to use booster seats until children are able to fit in an adult seat belt (at about 4'9" and 80 pounds). This may be between the ages of 8-12. Car seats must be used whenever a child rides in any vehicle, including a grandparent or babysitter's car.

The law also states that drivers are responsible for making sure that children who have outgrown booster seats are properly restrained using the vehicle lap and shoulder belts. If children in a car are not properly secured, a driver can be stopped and given a ticket, even if no other safety violation occurs. Remember, the safest place for all children is in the back seat until they are old enough to drive.

Here's a general guide to selecting the appropriate car seat/safety restraint for your child.

Infant

Infants must always ride in a rear-facing car seat until they are 2 years old.

Choose an infant-only car seat/carrier or a rear-facing convertible seat that fits your baby by weight and height. The seat must fit in the back seat of the vehicle; it should never be placed in the front seat of a vehicle with passenger-side air bags.

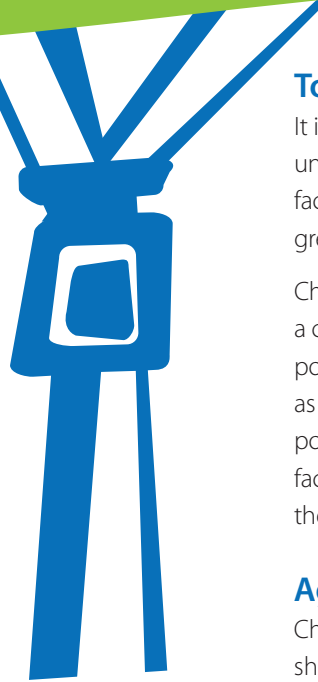
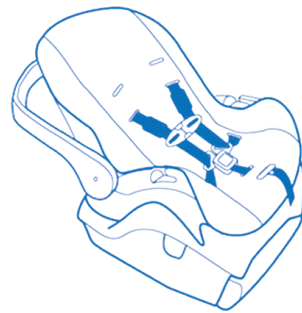
Secure harness straps at or below shoulder level in one of the lowest slots, snugly against the body. The chest clip should be secured at armpit level.

There must be adequate space in the vehicle for the seat to be reclined at the proper angle according to the car seat manual. Newborns should be reclined at a 45 degree angle.

Your baby has outgrown the seat when he exceeds the weight limit or his head is within one inch of the top of the seat.

The back seat is the safest place for children.

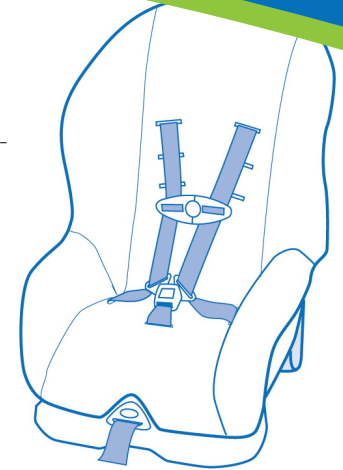
Do not allow children under age 13 to ride in the front seat of a vehicle that has a passenger-side airbag. If the driver or passenger is of short stature, the front seat should be moved back as far as possible.



Toddler (up to age 4)

It is recommended that toddlers remain rear-facing until age 2. Use a convertible car seat that has a rear-facing limit of 35-50 pounds. Rear facing provides greater crash protection.

Children ages 2 to 4 may ride forward facing in a convertible or forward-facing seat in an upright position. Use a car seat with a harness system for as long as possible (many models allow up to 65-90 pounds). Secure the harness straps in a forward facing seat at a height level with or slightly above the child's shoulders.

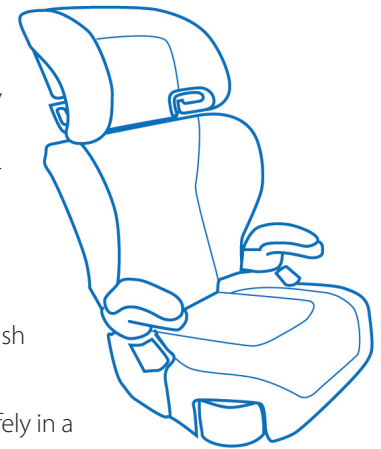


Age 4-8

Children who are over 4 years old and 40 pounds should remain in a five-point harness car seat until they reach the upper weight limit for the harness system, and then move into a belt-positioning booster seat. For the best protection, booster seats should be used until the child is 4 feet, 9 inches tall, which is usually at ages 8-12.

High-back boosters may provide better upper body crash protection than the no-back type.

For heavier or taller children who are not ready to sit safely in a booster seat, look for a car seat with a harness crash tested to hold 65-90 pounds, or consult the CHKD special needs car seat program for assistance.



Age 8-10+

To ride without a booster seat, children should be tall enough to sit all the way back with knees bent at the edge of the seat and feet on the floor -- with the ability to maintain this position at all times. The belt should cross over the child's upper thighs, shoulder and collar bone. Never allow the child to move the shoulder belt under his arm or behind his back. If a child is 8 years old, weighs more than 80 pounds and is at least 4 feet 9 inches tall, he should be ready for the vehicle lap and shoulder belts.

HEALTHY EATING

Tips for Families from the National Center on Early Childhood Health and Wellness



NATIONAL CENTER ON
Early Childhood Health and Wellness

Healthy Habits Start Early



Good eating habits begin early in your child's life. As early as infancy, you can help your child grow lifelong healthy eating habits. You are your child's best role model so while you help her to eat healthy, try to do the same too!

Healthy Feeding and Eating

For Your Infant

- It is important to breastfeed for at least 6 months. She will be more likely to have a healthy weight as she gets older.
- Put breast milk or formula, not cereal, in your baby's bottle. Cereal adds extra calories that she doesn't need.
- Try to wait until your baby is around 6 months to start healthy solid foods like pureed vegetables, jarred baby foods, and infant cereals. Starting solid foods too early can lead to problems with overweight and obesity later.
- Around 8 or 9 months try offering your baby small amounts of healthy finger foods like grilled chicken, cooked carrots, and cut up strawberries. This will help your baby learn to eat healthy.
- Breast milk, formula, and water are the best drink choices for your baby. Soda pop, 100% fruit juice, and sport drinks add extra calories to her diet and can harm her new teeth.



NATIONAL CENTER ON
Early Childhood Health and Wellness

For Your Toddler

- Offer your toddler healthy snacks like small cubes of cheese, sliced banana, or whole grain crackers two to three times per day. This will help him stay full in between meals and reduce hunger-related temper tantrums.
- Try to be patient with picky eaters. He may need to try a food 10 to 15 times over several months before he will eat it.
- Try giving your toddler a choice between two healthy options. He will be more likely to eat healthy food if he picks it out.
- Milk and water are the healthiest drink choices for your toddler. Soda pop, 100% fruit juice, and sport drinks add extra calories to his diet and can harm his teeth.

For Your Preschooler

- Let your child help you in making healthy meals and snacks. She will be more likely to try healthy foods if she helps out.
- Try to keep your kitchen stocked with simple, healthy snacks like carrots, sliced apples and peanut butter, or string cheese. This will help you and your preschooler eat healthy, even on busy days.
- Milk and water are the healthiest drink choices for your preschooler. Soda pop, 100% fruit juice, and sport drinks add extra calories to her diet and can harm her teeth.

For Yourself and Family

- Your child is learning healthy habits by watching you. Try to eat healthy too.
- Set playtime, mealtime, and bedtime routines to make day-to-day life less stressful.
- Talk with your child's doctor, Head Start staff, and other parents to get healthy eating tips.



MENTAL HEALTH

Tips for Families from the National Center on Early Childhood Health and Wellness



NATIONAL CENTER ON
Early Childhood Health and Wellness

What is mental health?

Mental health means that young children are growing in their ability to:

- understand and share feelings
- have close and positive relationships
- explore and learn

Why Is It Important?

Having Positive Mental Health Makes It Easier for Children to:

- Have close relationships with family and friends
- Do well in school
- Learn new things
- Solve tough problems

- Develop patience (or not give up)
- Focus on a task
- Ask for help

When Young Children Are Worried, Sad, or Angry, It Can Be Hard To:

- Make friends
- Follow directions
- Express feelings or wishes
- Follow simple directions
- Pay attention in class
- Solve problems in positive ways
- Do well in school



Things You Can Do and Say to Help Your Child

• For Your Infant

- Hold your baby during feedings.
"I love cuddling when I feed you."
- Look at your baby and smile, smile, smile!
"Hey, when I smile, you smile back."
- Talk about what you are doing.
"I'm going to change your diaper now."
- Try to relax and have fun.
"When I am happy, you are less fussy."
- Read and sing to your baby every day.
"It is bedtime. Time for a story and favorite song."
- Take care of yourself.
"When I am rested, I take better care of you."

• For Your Toddler/Preschooler

- Make sure they always feel safe.
"I know loud noises can be scary, but it's OK."
- Offer choices.
"Do you want the blue shirt or the red shirt?"
- Practice patience.
"Let's wait until the song is over and then we'll go outside."

- Show understanding.
"You REALLY want another cookie! It is hard when you can only have one."
- Leave extra time.
"I see you don't want to leave the playground. One more time on the slide, then we need to leave."
- Play together at least 15 minutes a day.
"There is so much to do but it is important for us to play together."
- Follow her interest.
"I see you want to play with the blocks. What are you going to build?"
- Praise your child when she keeps trying.
"I love the way you keep trying to find the right piece for the puzzle."
- Practice following directions.
"First pick up the blocks, then take out the cars."



NATIONAL CENTER ON
Early Childhood Health and Wellness

ORAL HEALTH

Tips for Families from the National Center on Early Childhood Health and Wellness

You Can Promote Good Oral Health By:

- Knowing how to make sure you and your family have healthy mouths and teeth
- Helping your children learn good mouth and teeth habits

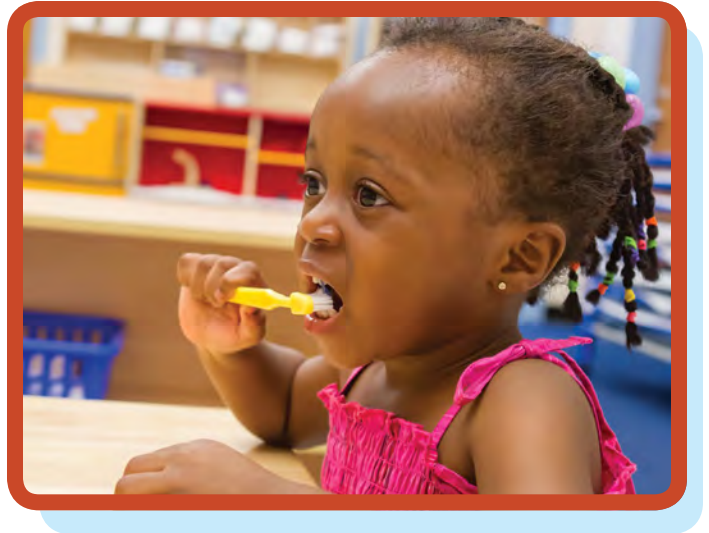
Why Is It Important?

When Children Have a Healthy Mouth, They:

- Can speak clearly
- Can eat healthy foods
- Feel good about themselves

Having a Healthy Mouth Also Means:

- Healthy growth and development
- Being able to focus and learn
- A pain-free mouth
- Lower dental care costs for your family



Things You Can Do to Help Your Child

- Brush your child's teeth with fluoride toothpaste twice a day.
- If your child is younger than 3 years, brush with a smear of fluoride toothpaste.
- If your child is age 3 to 6 years, brush with a pea-size amount of fluoride toothpaste.
- Young children will want to brush their own teeth, but they need help until their hand skills are better. Brush children's teeth or help children brush their teeth until they are about 7 or 8 years old.
- Be a role model for oral health! Brush your teeth with fluoride toothpaste twice a day (in the morning and at bedtime) and floss once a day.
- Serve healthy meals and snacks like fruits, vegetables, low-fat milk and milk products, whole-grain products, meat, fish, chicken, eggs, and beans.
- Limit the number of snacks your child has in a day.
- Do not give your child food for rewards.
- Take your child to the dentist for a check up by her first birthday and keep taking her.
- If your child has not gone to the dentist take him.
- Ask your dentist what you can do to keep your mouth and your child's mouth healthy.
- Make sure to go to the dentist as often as your dentist would like you to go.
- Let your child care, Early Head Start, or Head Start program know if you need help or have questions about oral health.



ADMINISTRATION FOR
CHILDREN & FAMILIES



NATIONAL CENTER ON
Early Childhood
National Centers
Early Childhood Health and Wellness

SAFETY AND INJURY PREVENTION

Tips for Families from the National Center on Early Childhood Health and Wellness

Safety and Injury Prevention for Young Children Is:

- Making sure children have safe places to grow and learn
- Protecting children from danger
- Teaching children what to do to be safe

Why Is It Important?

Children Like to Explore But Need:

- Safe places to play
- Adults who watch and listen so they can prevent an injury before it happens
- Opportunities to practice new skills safely

When Children Are Safe, They Are More Likely To:

- Be injury-free
- Focus on learning
- Explore new situations with confidence



Things You Can Do to Help Your Child

- **At Home:**
 - Keep all medicine, cleaning and harmful products away from children.
 - Use cabinet locks and electrical socket covers.
 - Use safety gates on stairs.
 - Use cribs with fixed sides rather than drop sides.
 - Keep cribs away from windows and blind cords.
 - It is best to use cordless window coverings, if possible. If not, keep cords tied high out of children's reach.
 - Put babies to sleep on their backs in a crib with no soft blankets, pillows or bumpers.
 - Keep children away from hot foods and liquids.
 - Turn pot handles to the back of the stove.
 - Set your water-heater thermostat to 120 degrees or less.
 - Keep children away from heaters or fires.
 - Have a smoke alarm on every floor. Replace batteries in the spring and fall.
 - Get a carbon monoxide detector, if you do not have one.
 - Check with your local fire station to see if they can help you find a smoke alarm or carbon monoxide detector.
 - Ask your pediatrician about foods and small objects that can cause choking.
 - Make and practice an escape plan.

WHAT IS SAFETY AND INJURY PREVENTION?

Things You Can Do to Help Your Child

Continued from previous page

● Outside:

- Use sunscreen.
- Teach your child to stay out of the street.
- Look for playgrounds with soft surfaces instead of dirt or grass.
- Watch your child closely on the playground.
- Remove drawstrings from clothing.
- Keep shoelaces short and tied.

● Water Safety

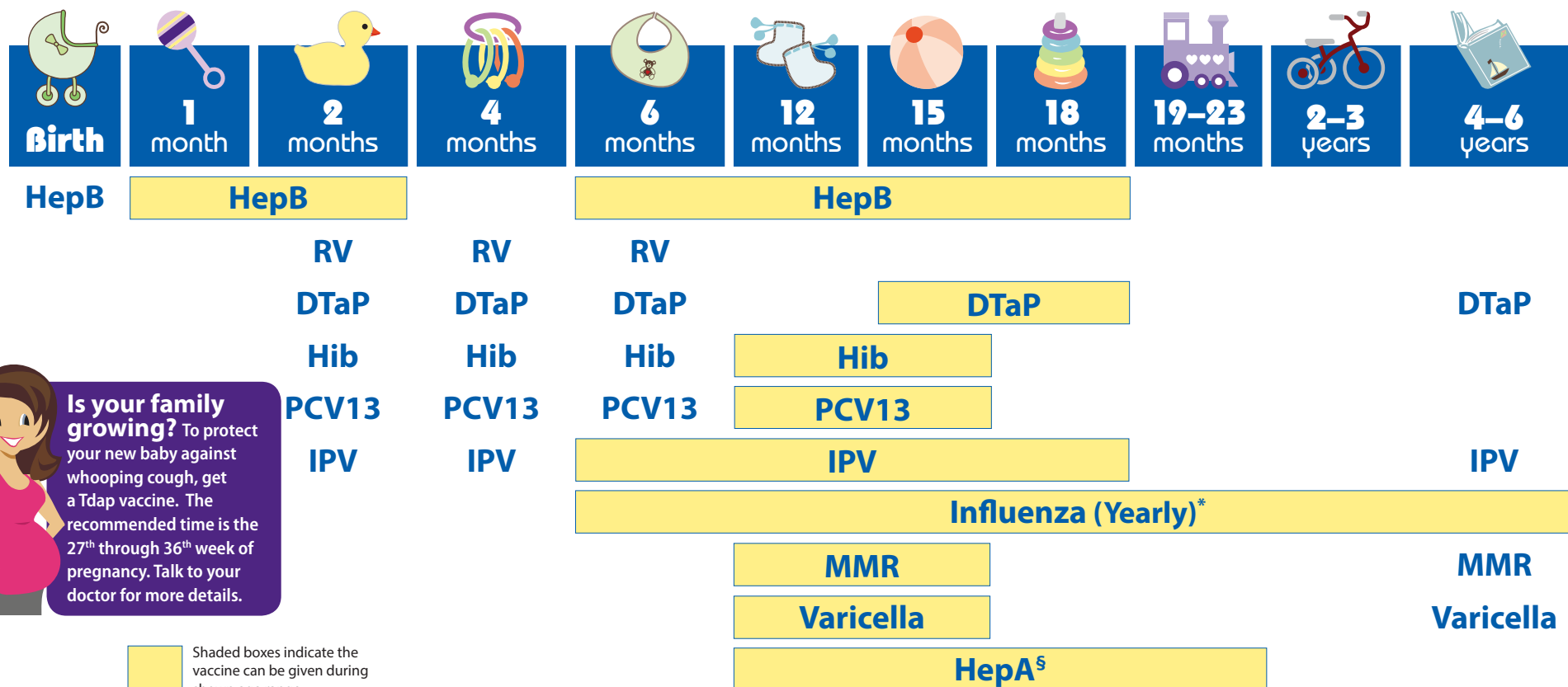
- Know that a child can drown in any amount of water that covers his mouth and nose.
- Always stay within arm's reach of your child if he is in or near water.
- Learn to swim, and take your child to professionally supervised swim lessons.
- Use four-sided fences with self-latching gates around pools.
- Learn cardiopulmonary resuscitation (CPR).

● Car and Truck Safety

- Choose a car seat that is right for your child's age, height and weight.
- Choose a seat that fits in your car or truck and use it all the time.
- Ask your Head Start staff where you can go in your community to learn how to install your child's car seat safely.
- Be sure that children younger than 13 only sit in the back seat.
- Never leave your child in a car without an adult.
- Teach children that vehicles are never safe places to play. Even if the windows are open, young children can become dangerously overheated within the first 10 minutes.



2019 Recommended Immunizations for Children from Birth Through 6 Years Old



NOTE:

If your child misses a shot, you don't need to start over. Just go back to your child's doctor for the next shot. Talk with your child's doctor if you have questions about vaccines.

FOOTNOTES:

- * Two doses given at least four weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.
- ^s Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 months after the last dose. HepA vaccination may be given to any child 12 months and older to protect against hepatitis A. Children and adolescents who did not receive the HepA vaccine and are at high risk should be vaccinated against hepatitis A.

If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he or she may need.

See back page for more information on vaccine-preventable diseases and the vaccines that prevent them.

For more information, call toll-free
1-800-CDC-INFO (1-800-232-4636)
or visit
www.cdc.gov/vaccines/parents



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention



**American Academy
of Pediatrics**

DEDICATED TO THE HEALTH OF ALL CHILDREN™



Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against <i>Haemophilus influenzae</i> type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic and blood disorders
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Influenza (Flu)	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pink eye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR** vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV13 vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Sometimes rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

* DTaP combines protection against diphtheria, tetanus, and pertussis.

** MMR combines protection against measles, mumps, and rubella.

Last updated January 2019 • CS300526-A

The Gift of Language

For Families

Language is one of the most important gifts you give your child. But how do you give it?

The answer is simple.

Speak your language with your child at home every day!

■ Why is home language important?

The language you speak with your children is the first language they will learn. It is their first connection to you, to the rest of their family, and to their culture and community. It is the language they first use to learn about the world around them. It is the language that helps them get “set for life”—and you are a central part of that process! This is one of the many ways parents are their children’s first teachers.

■ What are the benefits of using your home language?

Using your home language connects your children to your family. It also provides a connection to your important cultural traditions, and to friends and neighbors who speak the same language. Using your home language allows you to teach your children, and to learn new things together. You can talk about new experiences and words; you can practice letters and numbers. All of these things are an important part of your children’s early learning—and it will be easier and more fun for you if you do it in your most comfortable language.

■ But what about English?

Children living in the United States need English to succeed in school and in life. Fortunately, young children can easily become bilingual. A person who speaks more than one language well has more opportunities to study, travel, and work—both in the United States and around the world. Being bilingual also helps children build stronger thinking skills.

■ If I speak some English, should I use it at home?

You should speak the language you are most comfortable using. If your home language is stronger than your English, then you should use your home language with your children to build strong language skills.

Planned Language Approach (PLA)





Will my children get confused using two languages?

Young children can learn two or more languages at the same time. They learn quickly when they have lots of experiences with adults who speak with and listen to them.

Sometimes children will combine words or phrases from both languages. That's OK! It may sound as though they are confused, but they are actually learning the rules and vocabulary from both languages and sorting them out in their brains. It is a sign of good learning and thinking.

My children prefer to speak English. What should I do?

First, don't worry. Maybe your children prefer English because that is what all of their friends are speaking. Talk with your children about language. Explain that learning both languages is important. Talk about the special people in their lives who speak your language, including favorite relatives and friends. Explain that people who are bilingual have twice as many chances to make friends and learn about new cultures.

Make your home language fun by reading books, singing songs, and playing games in it; and use it when you're involved in any kind of activity. Your language is a gift, and speaking it keeps your family connected!

Remember that your relationship with your children depends on language. As they get older, communication will become increasingly more important. You will have conversations about a wide variety of topics. This will be easier and more fun for both of you if you are speaking the same language.

What can I do at home?

- Tell stories and read to your children in your home language.
- Share rhymes, chants, songs, and poems you learned as a child.
- Look for fun activities happening in your language, such as story time at your local library, festivals, and cultural events.
- Look for bilingual books, wordless books, or books in your home language at the library.



Some Stories About Bilingual Families

- *¡Gaby está aquí! Un día loco de palabras mezcladas/A Crazy Mixed-Up Spanglish Day* by Marisa Montes
- *The Park Our Town Built/El parque que nuestro pueblo construyó* by Diana Gonzales Bertrand
- *Grandfather Counts* by Andrea Cheng
- *Dear Juno* by Soyung Pak
- *Yoko Writes Her Name* by Rosemary Wells

Resources

Call: 9-1-1 for Emergency Help

Call: 2-1-1 for Agency Contact Information and Referrals Statewide

ACES: Association for Children Enforcement of Support	1-800-537-7072
AIDS Hotline	1-800-228-0469
Cancer/Appearance	1-800-395-look
Child Find	1-800-543-3098
Child Support Referral Service	1-800-392-5660
Father Engagement during pregnancy and early childhood www.zerotothree.org/resources/series/the-daddy-factor	
Food Assistance (SNAP) www.mydhr.alabama.gov	
Health Insurance Coverage	1-877-543-7669
Infant Care www.medlineplus.gov	
Medical Home www.healthgrades.com/family-practice-directory/albama	
National Domestic Violence	1-800-799-SAFE (7233)
Nurturing and Responsive Caregiving www.zerotothree.org	
Nutritional Counseling www.aces.edu/family-health/health-nutrition/efnep/todaysmom/index.php	
Oral Health Care www.insurekidsnow.gov	
Parenting Assistance Line (PAL)	1-866-962-3030
Poison Control Center	1-800-772-1213
Postpartum Recovery www.americanpregnancy.org	
Prenatal Medical Care www.healthgrades.com/find-a-doctor	
Risks of Alcohol www.marchofdimes.org	
Risks of Drugs www.americanpregnancy.org	
Risks of Smoking www.smokefree.gov	
Safe Sleep Practices www.keepingbabiesafe.org	
Substance Abuse/Mental Health	1-800-662-HELP (4357)